



5th Conference of the International Society for Child Indicators

From Welfare to Well-being
Child indicators in research, policy and practice

2-4 September 2015

ABSTRACTS BOOK

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Abstracts for the 5th Conference of the International Society for Child Indicators

Edited by Aislinn Delany and Katharine Hall
Children's Institute, University of Cape Town

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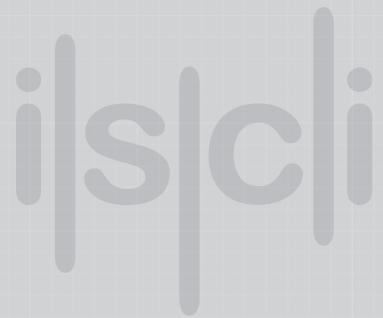
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PANELS

Meeting the challenge of cultural, linguistic and socio-economic diversity in the measurement of developmental domains during early childhood

Convened by Andrew Dawes

Department of Psychology, University of Cape Town, SOUTH AFRICA

The focus of this symposium is on the measurement of children's psychosocial development in the preschool years in the culturally variant low and middle income settings of the Global South. Researchers working outside Western settings face many challenges when selecting measures of, for example, cognitive, language and mathematical abilities. Local norms for instruments developed in the West commonly do not exist. The content of imported tools and their modes of administration often do not align well with local cultural practice. They may not be feasible at all or require significant adjustment at considerable cost. How comparable then are the results of studies conducted on the same construct but with different or adapted instruments? Some innovative solutions to these challenges are now available, and significant effort in several parts of the Global South is going into the development of culturally appropriate instruments. The symposium will bring together researchers who have been working in the Global South to discuss both challenges in and solutions to the measurement of psychosocial development in early childhood in diverse cultural settings.

The charge to speakers is to share their insights their measures and their lessons from work in the field. The discussion seeks to draw attention to the need for a well thought out approach that will enable the collection of comparable data across diverse cultural and socio-economic settings and whether internationally appropriate measures of children's core competencies – essential developmental skills that may manifest in particular culturally embedded ways – is feasible or realistic.

adkinloch1@gmail.com

How do you like your chips? Addressing the value of diversity in the evaluation of Human Capital Formation

Penny Holding

Institute for Human Development, Aga Khan University Nairobi, KENYA

As policy makers and practitioners increasingly acknowledge the importance of the early years in building a firm foundation for the future, the pressure is on child development specialists to provide the means to measure the impact of early interventions. The opportunity enables us to broaden our horizons and exploit statistical and technological advances that support innovation as well as address variation in defining what we should be measuring, and how we should be measuring it.

The Zambia Child Assessment Test (ZamCAT): Development and validation in three African countries

Beatrice Matafwali, Zanele Sibanda Wright, and Sadaf Shallwani

Department of Educational Psychology, Sociology and Special Education (EPSSE), University of Zambia, ZAMBIA

Early Childhood Education has attracted widespread interest among education practitioners and policy makers in Africa. Although substantial progress has been made in enhancing access to ECE, determining the extent to which children exposed to ECE achieve superior developmental outcomes demands attention to their competencies in various domains over a course of time. Currently, there is lack of culturally appropriate assessment tools to systematically document developmental outcomes for young children in Southern Africa. Mostly, researchers in the region rely on assessment tools that are of Western origin thereby running the risk of misrepresenting the level of functioning of African children as most of these tools lack sensitivity to the local culture and context. In response to this, the Zambia Child Assessment Test (ZamCAT) was developed in 2010 with the aim of providing comprehensive pre-school developmental assessment for children age 6. The development of the ZamCAT took a systematic process involving identifying domain areas, adapting existing or developing new measures, translation and back-translation, piloting and refining to ensure that the tool was contextually relevant. The ZamCAT assesses a wide range of domain areas including; fine motor skills, receptive and expressive language, attention, and non-verbal reasoning (pattern recognition). Physical growth is measured using height, weight and Mid Upper Arm Circumference (MUAC) whereas Socio-emotional development is examined through a parent-report measure. The ZamCAT further examines demographic and household characteristics. Validation was done over a period of three years between 2010-2012 with the cohort of over 1500 children drawn from six provinces of Zambia (Zuilkowski, Fink, & Matafwali, 2011). Results generated from the validation study revealed associations among different constructs as well as associations with different demographic and household characteristics. Since 2013, the ZamCAT has been subjected to further

adaptation and validation by Firelight Foundation in three countries; Zambia, Malawi and Tanzania on a sample of 500 children with the aim of refining the tool and determining its applicability in different African contexts.

The presentation will highlight the development process and constructs of the ZamCAT as well as its validation in Zambia, Malawi and Tanzania.

Beatrice.matafwali@unza.zm

The local development and nation-wide implementation of the Tongan Early Human Capability Index

Sally Brinkman, Binh Thanh Vu, and Siosi Tapueluelu.

Telethon Kids Institute, Fraser Mustard Centre, South Australian Department of Education and Child Development, AUSTRALIA

The Kingdom of Tonga is a proud country having never lost indigenous power or sovereignty to a foreign power. The archipelago is located within the Polynesian region of the Pacific Ocean including 176 islands, of which 36 are inhabited. The Kingdom stretches over 718 square kilometres, with some of the inhabited outer islands being very remote and isolated. The remoteness, isolation and small populations across the multiple islands, presents particular challenges to the design, financing, implementation, monitoring and evaluation of policies and programs. The enthusiasm to measure child rights, development and well-being has been facilitated by the United Nations Convention on the Rights of the Child. Until recently, the focus was on the rights of children to be healthy, whereas now we see a move towards a more holistic appreciation of childhood and for children to have opportunities to develop to their full capacity. Within this spirit, the aim for Tonga was to not only develop a locally and culturally relevant measure of early human capability (holistic and strength based), but uniquely, to build the local capacity and systems to monitor early child development over time. The data resulting from the instrument was to support community mobilisation around early childhood, to inform interventions and programs, and to be used for evaluation. The instrument needed to be suitable to detect change in child development and capabilities at an individual level as well as at a community level. This presentation will exemplify the process of local consultation to develop the instrument and the processes undertaken and leveraged to coordinate the nationwide data collection in a unique partnership between local community health nurses, local early education teachers, and local town officers. In total, data for 6604 children from 34 islands ranging from 3 through to 5 years of age were collected, which we believe represents 81% of the 3-5 year old child population. The data was analysed with technical support, but the data was geographically mapped across the islands using local GIS capacity and facilities that had been built through donor financing for the preparation of tsunami evacuation plans. The data was launched by the Princess and local community members were trained to disseminate the results back to every community and to support increased awareness of the importance of early childhood and attendance

at ECE services. The initiative is funding through the Global Practice for Education and specifically the PEARL (Pacific Early Age Readiness and Learning) Program executed by the World Bank. PEARL aims to support Pacific island countries and their development partners to build capacity to design, implement and monitor evidence-based, integrated policies and programs that prepare children and their families for primary school. The presentation will explain the processes of engagement, consultation and community capacity building from the development to implementation.

sally.brinkman@telethonkids.org.au

Growing the Evidence for Children: Measuring Development and Early Learning Globally to Improve Practice and Policy

Celia Hsiao and Mari van der Merwe

Save the Children, Durban, SOUTH AFRICA

There is consensus that a reliable, international measurement of early learning and development is needed to inform program quality, help governments monitor their progress towards ECCD goals and put pressure on donors and policy makers to invest in ECCD. Yet, there are few tools available that can capture the multidimensional aspects of development and early learning in feasible, child-sensitive and reliable ways across settings. Over the last several years Save the Children, with support from implementing, research and government partners, has developed and validated the International Development and Early Learning Assessment (IDEA). Testing and modifying the tool in multiple sites across 15 different countries has resulted in a 22-item assessment that balances three key dimensions: psychometric rigor, accessibility and feasibility, and international applicability. IDEA is an easy-to-use, rigorous, adaptable global assessment prototype that measures children's early learning and development and can offer ministries and ECCD programs with clear evidence on the status of children from 3.5 to 6.5 years. IDEA provides a holistic picture of children's development and learning, covering five developmental domains: motor development, early language and literacy, early numeracy/problem solving, socio-emotional skills, and approaches to learning. It also documents aspects of executive function. Tasks are designed as playful experiences for children and take on average thirty minutes to administer. This presentation will share the process of developing and validating IDEA with conference participants and will seek to demonstrate how the tool can be used to answer pressing questions about how ECCD programs and systems are working and why, evidence that is critical for informing policy and advocacy. A measurement prototype such as IDEA can help promote efficient and rigorous data collection on children's development and learning at the start of primary school or during the preschool years and offer much needed evidence at the national, regional and global level.

chsiao@savethechildren.org.za

How high should the bar be? The Early Learning Outcomes Measure: A South African developmental standards approach to measuring children's preparedness for the Reception year

Linda Biersteker¹, Andrew Dawes² and Elizabeth Girdwood¹

¹ Innovation Edge, SOUTH AFRICA

² Dept of Psychology, University of Cape Town, SOUTH AFRICA

We describe a process being undertaken to develop the Early Learning Outcomes Measure (ELOM) to assess the performance of early learning programmes (of any type) in preparing children for Grade R, against a set of standards that children should achieve prior to entry to that grade (54-66 months). Using an Early Learning Development Standards (ELDS) approach, the tool is intended for population level descriptions of the status of children. ELDS are defined as: what children of particular ages and stages should know and be able to do. The tool draws on a range of culturally appropriate measures of children's development covering key domains: Physical Development and Self Care; Social and Emotional Development; Approaches to Learning (including Self Regulation); Language and Literacy, and Cognition and emergent maths. The ELOM is designed to be administered by trained and experienced early childhood development practitioners in 30 minutes. A key advantage of an ELDS approach that it is able to address the significant cultural and class variations in a country that presents particular challenges in the development of norm-referenced developmental tests. It also permits the tool to be aligned with expectations for children's knowledge and capabilities that are expressed in South African policy.

Linda.biersteker2@gmail.com

Measurement of cognitive abilities during early childhood: Lessons from the Young Lives study

Gabriela Guerrero, Juan Leon and Santiago Cueto.

Young Lives, Department for International Development University of Oxford, and GRADE, CHILE

Young Lives (YL) is an international study of childhood poverty involving 12,000 children in 4 countries (Peru, India, Ethiopia and Vietnam) over 15 years. YL has been following two groups of children in each country: 2000 children who were born in 2000/01 and 1000 children who were born in 1994/95. Getting estimates of the cognitive abilities over time of children participating in the YL study is important as these variables may be considered both outcomes (proxy for the individual's skills) and predictors of later outcomes. Nevertheless, accurately measuring the cognitive development of the children in each cohort and country and getting meaningful scores may prove to be a complex endeavor. This presentation will describe the YL experience assessing the cognitive development of children from the younger cohort who were between 4.5

and 5.5 years of age during the second round of data collection. Two instruments were administered: Peabody Picture Vocabulary Test (PPVT) and Cognitive Development Assessment (CDA). The main concern in using these tests was that they were not developed for the specific contexts in which they were used in YL. The presentation will cover the criteria used to select these instruments, the considerations taken for the adaptation (including translation to local languages maintaining cognitive equivalence) and administration of these instruments (following standardized procedures in order to have comparable measures across countries), as well as additional information on the reliability and validity (including information on the correlation between test scores over time and with several socio-demographic variables).

gguerrero@grade.org.pe

From global to local and back

Jane Kvalsvig

School of Public Health, University of KwaZulu-Natal, SOUTH AFRICA

We in South Africa are signatories to international bills of Children Rights; we have our millennium goals, our national policies and practices, and our indicators and standards. Where we come to grief is in measuring child development at local level using our local and imported measures and adapted technologies, and then relating all this effectively to global issues for children. As researchers in Africa gain confidence and experience in working across languages and cultures we need to identify the methodological barriers to greater common understanding of different childhoods. The proposed rejuvenation of the HSRC's interactive website on child development measures and techniques is an important milestone, but one which needs operational guidelines for the researchers participating in this collaborative attempt. In order to start the discussion this paper will present views on priorities from a number of researchers.

kvalsvig@gmail.com

Reflections on the proceedings

Robert Serpell

Department of Psychology, University of Zambia, Lusaka, ZAMBIA.

PANEL

The relationship between child well-being and family well-being

Convened by Sabine Andresen

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University Frankfurt, GERMANY

This panel focuses on the relation between two concepts and two perspectives: child and family well-being. It raises the question whether there is a strong link between the well-being of the children and that of the family and single family members. It is also interested in the conceptual differences as well as of the similarities. Last but not least it seems to be important to discuss the relations between theoretical aspects of childhood and family. There is an interesting debate on the concept of "doing family" and we have empirical findings on family related aspects of the well-being of children.

The aim of the panel is to discuss the relations of family and child well-being on an empirical level, and on a systematic conceptual level. We will explore the impact of social differences like SES, gender, ethnicity and we will present studies with quantitative and qualitative data.

S.Andresen@em.uni-frankfurt.de

Family and child wellbeing: a puzzle in policies and practice

Dagmar Kutsar

Institute of Social Studies, University of Tartu, ESTONIA

The presentation looks at families and children as different launching points of wellbeing in policies and practice. It starts from value-normative perspective by Shils of social periphery and centre, and positioning of the families and children on this field. It discusses social political thoughts of Esping-Andersen about investment into good childhood and tries to relate it with child wellbeing. The examples are drawn from international and Estonian national statistics.

dagmar.kutsar@ut.ee

The conception of the relation between child and parental well-being within the context of poverty

Sophie Künstler

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University Frankfurt, GERMANY

Poverty can be seen as a key aspect within the concept of children's vulnerability, as well as child poverty a crucial point of scientific and pedagogical discussion. Thereby speaking about child poverty is often linked to conceptions of parental acting and ideas of good parenting.

The presentation aims to examine how child well-being and children's vulnerability is spoken about within the context of poverty and in particular take a closer look on how child and parental well-being is thereby related.

kuenstler@em.uni-frankfurt.de

Parental perspectives on poverty and well-being

Nora Iranee

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University Frankfurt, GERMANY

The presentation focuses on the everyday lives of families in socially diverse contexts that are shaped by poverty. Referring to empirical findings of our qualitative study "Poverty as a risk factor –Vulnerability in childhood" we aim to reconstruct parental perspectives on the growing- up of children and day-to-day family life. Taking into account the social framing conditions and structures in which family members shape and organize their everyday life, the impacts on child wellbeing and parental well-being can be identified. Focusing on qualitative interviews with parents, a further analyses of opportunities available to families, challenges that shape family and childhood as well as parental action strategies, perceptions and conceptions of poverty, vulnerability and well-being can be obtained.

iranee@em.uni-frankfurt.de

Childrearing within families out of children's view. A qualitative study about intergenerational relationships of power

Katharina Gerarts

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University Frankfurt, GERMANY

The presentation focuses on the everyday lives of families in socially diverse contexts that are shaped by poverty. Referring to empirical findings of our qualitative study "Poverty as a risk factor –Vulnerability in childhood" we aim to reconstruct parental perspectives on the growing- up of children and day-to-day family life. Taking into account the social framing conditions and structures in which family members shape and organize their everyday life, the impacts on child wellbeing and parental well-being can be identified. Focusing on qualitative interviews with parents, a further analyses of opportunities available to families, challenges that shape family and childhood as well as parental action strategies, perceptions and conceptions of poverty, vulnerability and well-being can be obtained.

PANEL

Vulnerability and child well-being: Conceptual and empirical findings

Convened by Julia König and Sabine Andresen

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University Frankfurt, GERMANY

S.Andresen@em.uni-frankfurt.de

This panel sets out to show how the concept of vulnerability may serve as an analytical category in childhood studies, and that it fits to the concept of child well-being. We take a perspective based on the theory of childhood that focuses on defining what makes childhood particularly vulnerable and places children at risk. We will examine how this concept of vulnerability relates to the concept of child well-being by drawing on some relevant findings from research on child well-being and vulnerability.

Because vulnerability can be conceived on different levels, it has to be viewed in relation to the structure, the system, and the individual. Structural conditions such as poverty are particularly relevant here, because structural risks can be used to extend the theory of childhood and conceive children as strong subjects who are, nonetheless, simultaneously vulnerable during the childhood life phase. This once more delivers systematic ties to the concept of child well-being. From this perspective, one important starting point is the social- constructivist assumption that childhood is shaped by social institutions, by legal regulations of the relation between the generations, by educational and other practices, by cultural ideas on what constitutes a good childhood and good parent-child relations, and by society's ideas regarding what kind of education should be acquired during childhood. Viewed historically, the idea of actively defining childhood as a distinct life phase is based on a welfare-state notion of child well-being and the minimization of risk. Over the last 20 years, this has been reinforced by the UN Convention on the Rights of the Child. However, it is still necessary to ask whether the ways in which childhood is shaped can themselves have negative effects and, for example, contribute to or even heighten social inequality in this life phase. This suggests the need to examine whether and how far vulnerability in childhood can also be explained by inequality-related categories such as class or social origins, gender, and ethnic background.

Theoretical introduction

Julia König

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University Frankfurt, GERMANY

j.koenig@em.uni-frankfurt.de

How does material disadvantage impact on young people's capabilities? Evidence from child-centred Australian studies

Gerry Redmond¹ & Jennifer Skattebol²

¹ School of Social and Policy Studies, Flinders University, AUSTRALIA

² Social Policy Research Centre, University of New South Wales, AUSTRALIA

The purpose of this paper is to use Australian children's perspectives to shine a light on outcomes associated with material disadvantage. Two (related) theoretical starting points are useful in this context: the rights-based approach and the capability approach. The rights-based approach speaks to children's right to an adequate standard of living for their development (specifically adequacy in food, clothing and shelter). Amartya Sen's capability approach draws attention to the impact of poverty on capabilities, not least for children. While Sen largely considers children's capabilities in terms of their development towards adulthood, in this analysis we argue that the approach is also relevant to children's lives in the present (their beings and doings: leading a life they have reason to value, and being able to choose between desirable alternatives). We cannot easily observe the alternatives that are open to children, but we can to some extent observe the social and material resources that they see as available to them, and how they convert these resources into valuable achieved functionings (a sense of good health; positive relationships with family and friends; engagement at school; freedom from victimization), which are likely to impact on both present and future wellbeing.

We use in-depth interview data and large scale survey data to examine how children and young people themselves describe disadvantage.

gerry.redmond@flinders.edu.au

Happiness in a traumatized country - The Children's World study in Rwanda

Miriam Zeleke

Dept of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe-University Frankfurt, GERMANY

Rwanda can look back on a rapid and astonishing development since the genocide in 1994, especially in the area of education. Despite the enormous decline of infant mortality and the overall improvement of the children's situations, in international comparison, the children's fear of the future is still relatively large. More than half of the children grow up in poverty.

zeleke@em.uni-frankfurt.de

Child poverty and child well-being. Perspectives and empirical findings on vulnerability in childhood

Stephanie Meiland

Dept of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe-University Frankfurt, GERMANY

This presentation focuses on a concept of vulnerability in childhood that is shaped by poverty. Referring to empirical findings from the qualitative study "Poverty as a risk factor – Vulnerability in childhood", different perspectives of different social actors (e.g. children, parents, professionals) should be discussed. Based on participant observation and qualitative interviews within four different social pedagogical contexts, a deep description and analysis of data can be obtained. This analysis also provides insights on the growing-up and daily life of children, considering the vulnerable child and vulnerability in childhood on the one hand as well as child well-being on the other hand.

meiland@em.uni-frankfurt.de

"Sexual abuse in pedagogical institutions." Experiences with sexual violence of young people living in foster care and boarding schools today

Andrea Pohling

Dept of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe-University Frankfurt, GERMANY

Since 2010 the media has revealed that the institutions that German society gives children and adolescents to are places where child sexual abuse happened and potentially still happens. These institutions have the mandate to watch over the well-being of children and adolescents given to them and should guarantee for their care, protection, education and advancement of development. As a consequence of the episodes of child sexual abuse within pedagogical institutions in Germany in the past that had been revealed since 2010 there has also been claims to have a look at the situation of children and adolescents living in pedagogical institutions such as boarding schools and foster care institutions in the present. The study "Survey of the experiences with sexual violence of adolescents in residential care institutions and boarding schools and deduction of recommendations for action for practice" questioned young people between the ages of 15 up to 18 years about their experience with sexual violence. In the presentation Andrea Pohling will present the first empirical findings from the analysis of the group discussions. She will focus mainly on questions of collective orientation and knowledge about sexual violence

in young people's perspective that can be found in the qualitative inquiries. The trigonometrical survey used quantitative as well as qualitative methodology. It asked young people living in boarding schools and foster care institutions in Germany in the context of 9 group discussions, 13 narrative interviews and about 300 standardized questionnaires.

pohling@em.uni-frankfurt.de

PANEL

Findings from the Children's Worlds (ISCWeB) survey

Convenors: **Sabine Andresen¹, Asher Ben-Arieh², Jonathan Bradshaw³, Ferran Casas⁴, Tamar Dinisman², Gwyther Rees³**

¹Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University, GERMANY

²The Haruv Institute, Hebrew University of Jerusalem, ISRAEL

³Social Policy Research Unit, University of York, UNITED KINGDOM

⁴Research Institute on Quality of Life, University of Girona, SPAIN

tdinisman@gmail.com

Children's Worlds, the International Survey of Children's Well-Being (ISCWeB), is a worldwide research survey on children's subjective well-being. The study aims to collect solid and representative data on the lives of children in mid-childhood, their daily activities, time use and in particular on their own perceptions and evaluations of their well-being. The ISCWeB project is based on the idea that one of the most important factors in assessing whether a particular environment is conducive to children attaining their best potential is their own subjective sense of well-being. This is best investigated by asking children directly and by allowing them to give an assessment of their own well-being. Thus, the survey is based solely on children's own evaluations and perceptions.

The project is an international, inter-cultural and multi-linguistic survey in which a variety of countries and cultures take part. Consequently, it provides both local and comparative insight into the lives of children in a diverse range of cultural contexts, and substantial new information about how children live their lives. These national and international perspectives make it possible to better our understanding of the nature of childhood in different contexts, and draw implications for local, national and international policy. Additionally, the use of newly developed quantitative assessment instruments for children, which comprise various life domains, offers important insight into methodological issues in comparative research with children. The latest wave of data collection, which took place in 2013-2014, include 45,000 from 15 countries (with five additional countries that will be joining during 2015) with a representative sample of children aged 8, 10 and 12.

The panel will be spread over three sessions in which 12 papers from the project will be presented. This is a wide and rich collection of papers that offer both comparison exploration of several countries and enquiry of specific issue in one country.

Child well-being in the macro context

Jonathan Bradshaw

Social Policy Research Unit, University of York, UNITED KINGDOM

jonathan.bradshaw@york.ac.uk

Children's material and subjective well-being across 15 countries

Gill Main¹, Carme Montserrat² and and Jonathan Bradshaw³

¹ School of Education, University of Leeds, UNITED KINGDOM

² Research Institute on Quality of Life, University of Girona, SPAIN

³ Social Policy Research Unit, University of York, UNITED KINGDOM

g.main@leeds.ac.uk

Well-Being of Children in Rural and Urban Areas of Nepal: An Eco-Regional Perspective

Arbinda Bhomi

Central Department of Education, Tribhuvan University, NEPAL

arbinda_bhomi@hotmail.com

Using psychometric scales as children's SWB indicators in cross-cultural analysis

Ferran Casas

Research Institute on Quality of Life, University of Girona, SPAIN

ferran.casas@udg.edu

Family life and its influence on children's subjective well-being: The case of Poland

Tomasz and Dorota Strózik

The Poznan University of Economics, POLAND

dorota.strozik@ue.poznan.pl

Decomposition of Children's Subjective Wellbeing

Bong Joo Lee and Min Sang Yoo

Dept of Social Welfare, Seoul National University, South Korea

bongjlee@snu.ac.kr

Testing two measures of subjective well-being: Multi-group analysis among a sample of children from two socio-economic status groups in the Western Cape, South Africa

Shazly Savahl¹, Ferran Casas², Sabirah Adams¹ and Rose September³

¹ Dept of Psychology, University of the Western Cape, SOUTH AFRICA

² Research Institute on Quality of Life, University of Girona, SPAIN

³ National Department of Social Development, SOUTH AFRICA

ssavahl@uwc.ac.za

Exploring children's sense of safety at home and in school: What do they tell us and what should be done to address it?

Yehualashet Mekonen

African Child Policy Forum, ETHIOPIA

mekonen@africanchildforum.org

Pilot study of child well-being in West Java Indonesia

Ihsana Borualogo¹ and Petra Hoelscher²

¹ Faculty of Psychology, Bandung Islamic University, INDONESIA

² Chief of Social Policy, UNICEF, INDONESIA

Ihsana.sabriani@yahoo.com

Does school organisation matter for children's subjective well-being?

Ferran Casas and Mònica González

² Research Institute on Quality of Life, University of Girona, SPAIN

ferran.casas@udg.edu

Investigating the relationship between hope and life satisfaction among children in low and medium socio-economic status communities in Cape Town

Claudia Raats, Sabirah Adams, Shazly Savahl and Serena Isaacs

Department of Psychology, University of the Western Cape, SOUTH AFRICA

c.raats.cj@gmail.com c.raats.cj@gmail.com

The world of 8 year-olds: A comparative view on well-being of young children

Johanna Wilmes and Sabine Andresen

Department of Educational Science, Institute for Social Pedagogy and Adult Education, Goethe University, GERMANY

wilmes@em.uni-frankfurt.de

PANEL

International multi-dimensional child poverty measurement in Developing Countries

Convened by Martin Evans

UNICEF HQ Programme Division, New York, USA

mcevans@unicef.org

This panel will bring together the most recent evidence on the prevalence and nature of multi-dimensional child poverty in Developing Countries in three international comparative papers. The authors are all recognised as leaders in the field of multi-dimensional poverty measurement and child poverty.

The Extent and Nature of Child Poverty in Developing Countries

David Gordon, Vilaimi Fifita, Yedith Guillén Fernández, Roukaya Ibrahim, Shaileen Nandy and Natasha Price.

Townsend Centre for International Poverty Research, University of Bristol, UNITED KINGDOM

Gordon et al (2003) developed age specific and gender sensitive indicators of deprivation for UNICEF which conform to the UN definition of child poverty and which can be used to examine the extent and nature of child poverty in low and middle income countries. This research 'transformed the way UNICEF and many of its partners both understood and measured the poverty suffered by children' and facilitated the subsequent launch of UNICEF's first ever Global Study on Child Poverty and Disparities. Importantly for UNICEF child poverty needs be measured within the framework of human rights treaties and agreements, including the UNCRC. In particular, any operational measure of poverty needs to be compatible with the human rights Minimum Core Obligation as defined by the United Nations Economic and Social Council (ECOSOC): '*a minimum core obligation to ensure the satisfaction of, at the very least, minimum essential levels of each of the rights is incumbent upon every State party. Thus, for example, a State party in which any significant number of individuals is deprived of essential foodstuffs, of essential primary health care, of basic shelter and housing, or of the most basic forms of education is, prima facie, failing to discharge its obligations under the Covenant.*' This paper will compare the global estimates of the extent and nature of child poverty at the beginning of the millennium with the latest global estimates for 2010. It will discuss the strengths and weaknesses of the so-called 'Bristol Method' for measuring child poverty and the criteria

which can be used to evaluate the reliability and validity of such poverty measures. The paper will also examine how poverty measurement could be improved in DHS, MICS and similar surveys by the inclusion of a short consensual deprivation module, which is currently being tested in a number of Pacific countries and territories.

Dave.Gordon@bristol.ac.uk

How many children live in poverty? An Estimation of Global Child Multidimensional Poverty

Ana Vaz and Sabina Alkire

Oxford Poverty and Human Development Initiative (OPHI), University of Oxford,
UNITED KINGDOM

The main purpose of this paper is to provide a characterization of child multidimensional poverty in developing countries. In this paper a child is defined as poor if she lives in a multidimensionally poor household according to OPHI's Global MPI (Multidimensional Poverty Index). Based on the most recent Global MPI figures and using as reference 2010 population estimates, we estimate the incidence of child poverty in developing countries and by regions. We also present these estimates for the different children age sub-groups (0-4, 5-9, 10-14 and 15-17) and compare them with the incidence of poverty among adults (18-59) and older people (over 60). Finally, the paper compares the global shares of multidimensionally poor between children, adults and older people.

ana.vaz@qeh.ox.ac.uk

Analysing Child poverty and deprivation in sub-Saharan Africa: CC-MODA – Cross Country Multiple Overlapping Deprivation Analysis

Marlous de Milliano and Ilze Plavgo

UNICEF Office of Research, Florence, ITALY

This paper analyses multidimensional child deprivation across thirty countries in sub-Saharan Africa, applying the Multiple Overlapping Deprivation Analysis (MODA) methodology that measures various aspects of child poverty. The methodology has been adapted to the particular needs of this cross-country comparative study, standardising the indicators and thresholds to allow comparability across countries. Child poverty is defined as non-fulfilment of children's rights to survival, development, protection and participation, anchored in the Convention on the Rights of the Child. DHS and MICS household survey data is used, taking the child as unit of analysis and applying a life-cycle approach when selecting dimensions and indicators to capture the different deprivations children experience at different stages of their life. The main objective of the paper is to present a direct method of child poverty measurement analysing deprivations experienced

by the child. The paper goes beyond mere deprivation rates and identifies the depth of child poverty by analysing the extent to which the different deprivations are experienced simultaneously.

The analysis is done across thirty countries in sub-Saharan Africa that together represent 78% of the region's total population. The findings show that 67% of all the children in the thirty countries suffer from two to five deprivations crucial to their survival and development, corresponding to 247 million out of a total of 368 million children below the age of 18 living in these thirty countries. For the other 15 countries of sub-Saharan Africa where the CC-MODA analysis could not be carried out, predictions of child deprivation rates have been made using GDP per capita, urban population share, and population size. Based on the actual as well as the predicted multidimensional deprivation rates, just under 300 million children in sub-Saharan Africa are multidimensionally poor, being deprived in two to five dimensions crucial for their survival and development.

The findings are also compared with other existing poverty measures, showing that for the countries included in the analysis, monetary poverty measures (both the international \$1.25 a day and national poverty measures) are weak predictors of multidimensional child poverty. The study finds stronger correlation between multidimensional child deprivation and GDP per capita. The paper underlines that monetary poverty and multidimensional deprivation are conceptually different, complementary poverty measures and that there are advantages in measuring both simultaneously, especially when measuring child poverty.

Ilzeplavgo@gmail.com

Discussants:

Alejandro Grunspun

Chief of Social Policy, UNICEF South Africa

agrinspun@unicef.org

Murray Leibbrandt

Southern African Labour and Development Research UNIT (SALDRU), University of Cape Town, SOUTH AFRICA

murray.leibbrandt@uct.ac.za

Methodological issues in undertaking multinational qualitative research on children's understanding of well-being

Convened by Susann Fegter¹, Christine Hunner-Kreisel² and Tobia Fattore³

¹ Institute of Education, Technische Universität Berlin, GERMANY

² Institute of Social Work, Educational and Sports Sciences, Vechta University, GERMANY

³ Department of Sociology, Macquarie University, AUSTRALIA

Fegter@tu-berlin.de

Research on child well-being is an expanding international scientific field of research. Recent developments in the field have raised new questions regarding epistemological and methodological perspectives and approaches. In particular, the normativity of the concept of well-being, how children's subjective understandings and experiences of well-being can be integrated into research on children's well-being and the value of multi-national perspectives, are significant questions within the field. The proposed symposium seeks to explore some of these issues, with a specific focus on the challenges in undertaking qualitative research on children's well-being from a comparative multi-national perspective.

Research on children's well-being implies the normative question of what is defined as well-being. Theoretically and methodologically this question is dealt with differently in both quantitative and qualitative research on children's well-being. While in some instances definitions of well-being are made explicit, often well-being is defined implicitly by the indicators used to evaluate the well-being of children or how well-being is constructed as a concept within research. Nonetheless, over the past two decades the methodological perspective of children as experts has informed the majority of scientific studies on well-being. Despite most studies emphasizing a 'child-centered' approach children are often conceptualised as subjects of research, rather than subjects in research. Evidence of this is that studies that ask children themselves about their understanding of well-being remain few. Additionally, another methodological question usually not discussed in studies of children's well-being is the category of nation itself, which is often used as a 'natural' frame of research in general and as a leading dimension along which data is analysed and compared. This has been problematized with the so-called transnational turn in research, where the hegemonic position of the category of nation has been questioned, and the concept of 'methodological nationalism' developed to provide a methodologically grounded legitimization as the basis of comparisons. These issues can be summarized in the following questions:

- How can we understand and define child well-being? As a normative construct, as a subjective assessment, or as an open concept to be delineated through empirical research?
- How can we integrate children's perspectives into research on child well-being and what does that mean in terms of ethical, theoretical and methodological approaches?
- What contribution do local, translocal, national and transnational factors play in constituting shared or different meanings and experiences of well-being?

In our planned Symposium we want to deal with these questions in a theoretical and methodological manner. The planned Symposium explores the relationship between concepts of well-being and the analytical concepts used to understand well-being within the context of multi-national qualitative research on children's well-being.

The starting point of our discussion is a qualitative study we initiated with the goal of investigating how children conceptualize and experience well-being in local contexts in several countries worldwide. We hypothesize that when understandings of well-being are researched according to their local contexts, the primary dimensions for comparison may be closely connected to nation as a context, in the sense of constituting the economic conditions of well-being through a model like the welfare state. However the 'nation' as an organizing context cannot stand alone and has to be analysed with other categories, like class, ethnicity, gender and religion. The symposium will explore these arguments and how concepts of well-being and the comparative dimensions along which well-being can be understood, belong analytically together.

In addition to the symposium organizers (Dr Fattore, Prof Fegter and Prof Hunner-Kreisel) presenting a shared paper framing these considerations, Professor Doris Buehler-Niederberger (Germany), Professor Shazly Savahl (South Africa) and Professor Daniel Stoecklin (Switzerland) will present their ongoing empirical research on children's well-being and their theoretical considerations on how to undertake multinational qualitative research on child well-being in the context of the multinational study "Children's Understanding of Well-being – Global perspectives".

Undertaking multinational qualitative research on child well-being: Considerations on some conceptual and methodological challenges

Tobia Fattore, Susann Fegter and Christine Hunner-Kreisel

tobia.fattore@mq.edu.au

What is "childhood"? Taking the variety of young lives into account

Doris Bühler-Niederberger

Dept of Sociology, University of Wuppertal, GERMANY

buehler@uni-wuppertal.de

Subjective well-being: Children's discourses in diverse socio-economic contexts

Shazly Savahl

Dept of Psychology, University of the Western Cape, SOUTH AFRICA

ssavahl@uwc.ac.za

Challenges in Conceptualizing Children's Experiences in their own Terms

Daniel Stoecklin

Centre for Children's Rights Studies, University of Geneva, SWITZERLAND

daniel.stoecklin@unige.ch

PANEL

From Institutions to Families: Early Research Evidence from Ghana

Convened by Jini Roby

Brigham Young University, USA

Recent government estimates suggest that 90% of the children living in residential care facilities (RCF) in Ghana have at least one living parent (Frimpong-Manso, 2014). Children living in institutions suffer more attachment issues and developmental delays compared to those in family-based care (Nelson, et. al., 2009). Ghana has developed a national policy to close down RCFs and reunify children with their families but little is known of the children or the reintegration process.

This panel will present early data on a larger project that aims to understand the comparative wellbeing of children living in institutions and those that have been reunified, as well as the process of reunification.

Early data show that the reunified children are clearly experiencing disadvantage in accessing basic needs, but they have a higher level of hope for the future. The reunification process clearly needs to be stepped up. Linking families to services and following up on reunified children are critical missing pieces.

Reintegration from institutional care: Lessons learned in the planning, assessment and follow-up processes

Jini Roby

School of Social Work, Brigham Young University, USA

Under Ghana's Care Reform Initiative, children in residential care facilities (RCFs) are to be reintegrated into family based care, with their families of origin, with kin, or with other families. Recent government estimates suggest 90% of the children living in residential care facilities (RCF) in Ghana have at least one living parent (Frimpong-Manso, 2014). Children living in institutions suffer attachment issues and developmental delays compared to those in family-based care (Nelson, et. al., 2009). This paper will discuss the lessons learned about the process of reunification as a part of a panel discussion presenting various comparative findings.

Care givers and reunified children were administered in-depth structured interviews, exploring the response of extended family, neighbors and other neighborhood children regarding reintegration; care at the institution; and the child's current needs. Other topics included: who initiated the reintegration, assessment and follow-up services.

The data from 100 interviews are available, and the findings from these data will be presented. So far, it appears that there is not a master plan for reintegration at the national or district levels with many of the 'reintegrated' children simply aging out of the institutions, and there is not a set of criteria by which children are chosen for reintegration, and decisions are left largely up to the RCF directors. Only a handful of families have been invited to discuss reunification plans ahead of receiving the child back, and even fewer have received any type of support services or follow-up visits or calls. As a result, on many indicia of child well-being, reunified children are lagging behind on education and food sufficiency. However, they demonstrate a higher level of hope for the future.

The reunification process clearly needs to be stepped up. Linking families to services and following up on reunified children are critical missing pieces.

jini_robby@byu.edu

Institutionalized care in Ghana: The influence of wellbeing and social connection on children's pro-social behavior

Lindsay Powell

School of Social Work, Brigham Young University, USA

This study is the first part in a larger project that aims to understand the process of reunification by comparing the well-being of children living in institutions to children who have returned to their families after living in RCF's in Ghana. Specifically, this paper focuses on the developmental outcome of pro-social behavior of children still living in RCF's. There is a gap in the literature as no one has studied the variability in pro-social behavior among children living in RCF's. In this paper, we explore how a child's wellbeing, moderated by social connection, influences their pro-social behavior.

Data came from a 2014 sample of 114 children (8-19) living in residential care facilities in Ghana. The outcome variable, pro-social behavior ($\alpha=0.75$), was a standardized measure of the pro-social subscale and one item from the conduct problems subscale of the Strengths and Difficulties Questionnaire (SDQ). The independent variable, wellbeing ($\alpha=0.66$), was a standardized measure consisting of key items from the Child Status Index (CSI) assessing basic needs such as shelter, care, and safety needs for healthy development. The moderating variable, social connection ($\alpha=0.92$), was a standardized measure of 14 questions assessing specific people the child identifies in situations such as being scared, sad, or lonely. Exploratory Factor Analyses were run on each variable. Controls include gender, age, and number of siblings living in the residential care facilities with the child. We used an interactive OLS regression with robust standard errors.

Our results found that wellbeing has a very significant effect on pro-social behavior ($b=1.20$; $p<.000$). These findings are congruent with a framework which argues that meeting the child's lower level needs influences their ability to develop higher order pro-

social behavior (Maslow, 1943). We also found a significant interaction between social connection and wellbeing on pro-social behavior ($b=-.80$; $p<.004$). The effect of social connection on pro-social behavior increases as wellbeing decreases.

The results suggest that when a child's basic shelter, care, and safety needs are met they reach out to others more in positive interactions. The findings also show that for children at the low levels of wellbeing, social connection is critical to improving their pro-social behavior. This relationship shows the critical need for helping children in RCF's to create social ties while living in less than ideal environmental circumstances as a way to improve their pro-social behavior. Understanding the relationships between significant relationships promoting children's pro-social behavior will aid in improving RCF's now and facilitating the use of these children's pro-social skills to better integrate into society in the future.

lindsayjeanp@gmail.com

Hope levels in institutionalized children

Bryan Teuscher

School of Social Work, Brigham Young University, USA

The impact of institution-based (as opposed to family-based) care on perceived hope has received little attention in research with children living in institutions. Increased hope is related to decreased feelings of depression and anxiety, increased academic achievement, adaptive coping styles, and even improved athletic performance. Higher levels of hope are also associated with lower levels of loneliness and higher perception of personal strengths. This study examines how a child's hope for the future may be impacted by perceived social attachments growing up in a care institution.

The sample consisted of 148 children and youth (84 males and 64 females) aged 8-18 who were residing in 13 care institutions in Ghana. This paper used a set of social attachment questions and the Children's Hope Scale (CHS). The social attachment questions included fourteen hypothetical situations asking which specific person the child would seek out depending on the situation. This technique was similar to one used by Perry, Sigal, Boucher, and Paré (2006). The total number of attachment figures was added up to produce a number of social relationships ranging from 0-14. This was used as the independent variable. The Children's Hope Scale (Snyder et al., 1997) uses six items on a six point Likert scale to assess the belief in one's ability to pursue desired goals (agency) and use strategies to achieve them (pathway). This scale has been used in several countries, including once in sub-Saharan Africa. The scores from the CHS were added together for each respondent creating a range of 6-36, and this was used as the dependent variable.

The mean score on the Children's Hope Scale was 16.52 with a standard deviation of 6.6. A significant relationship was found ($b=.271$; $p<.05$) between number of social attachments and level of hope using OLS regression. Gender, age, and number of siblings living in the care institution served as control variables, and none showed significant

relationships. Not enough data was gathered to reliably calculate age at point of entry to the institution or the length of stay, but these are important factors to consider in institutional research.

When compared with the mean scores (27.03) of hope in reference samples in the United States, the children in our study showed a 10.51 lower mean score on hope. Additionally, there is evidence to support the claim that the number of social attachment figures a child perceives in his or her life is positively related with his or her hope for the future. Limitations of this study included lack of cross-cultural application and no comparison group. Since institutional care is so drastically related to poor attachment relationships, it is likely that staying in care institutions also has a significant impact on a child's level of hope for the future. Much of this impact can be avoided since it is estimated that 80-90% of children in care institutions have one or both parents alive, making family-based care a potential alternative.

bryanteuscher@gmail.com

Differences in child well-being between institutionalized and reunified children in Ghana: A propensity-score approach?

Spencer James

School of Family Life, Brigham Young University, USA

Orphans often end up in institutionalized care (i.e., orphanages) and are a particularly vulnerable group. Recent efforts to reunify orphans with family members have attempted to combat institutionalization, which has been shown to be detrimental to children's well-being. For example, in Ghana the government has made strides to reunite institutionalized children, nearly 90% of whom have some living family, with loved ones.

In this paper, we assess how reunified children fare relative to their counterparts in orphanages on social and psychosocial outcomes. Reunification may lead to better outcomes since family-based care is usually best for child development. Alternatively, reunification also means leaving friends/attachment figures behind to begin again, frequently under the watch of caretakers who lack the personal or economic resources to care for additional children. When combined with prevailing anti-orphan stigma, reunification may result in worse outcomes for previously orphaned children.

We use a propensity-score approach to assess reunification outcomes for reunified versus institutionalized children on two measures: the Child Safety Index and the Strength and Difficulties Questionnaire. These scales together paint a picture of how reunified children are floundering or flourishing in their new living arrangements as well as inform debates about orphan reunification and deinstitutionalization programs occurring in various parts of the world.

Data come from a sample of approximately 300 children currently living in and around

the Greater Accra, Ashanti, and Brong-Ahafo regions of Ghana. In 2014-2015, data on approximately 200 children (institutionalized group=IG) were collected in 13 orphanages and these same orphanages were asked to identify children who had been recently reunified (reunified group=RG) with their family for a period of between 6 and 12 months. While we are still collecting our reunified sample, we have approximately 90 interviews with reunified children complete, although the data have not yet been entered into a database feasible for statistical analysis. In all, we have data in analyzable format for 152 institutionalized and 31 reunified children. Data collection is expected to finish in May.

The Strengths and Difficulties Questionnaire (SDQ) is a 25-item scale ranging from 0 (more appropriate)-40 (less appropriate) on developmentally appropriate behavior on five dimensions: conduct problems, emotional symptoms, hyperactivity, and peer problems. The Child Status Index (CSI), used in 16 countries, identifies twelve aspects of a child's needs on a scale of one (more need) to four (less need). Each item is scored individually.

We are yet unable to estimate propensity scores, so we use two-sample t-tests to examine mean differences. Significant differences were found for the total SDQ score (IG=16.9, RG=21.7; p=.001) and three items on the CSI: access to protection services (IG=3.52, RG=3.13; p=.01), school attendance (IG=3.23, RG=2.71; p=.001), and access to sufficient food (IG=3.81, RG=3.35; p=.001).

While these results are preliminary, they suggest that institutionalized and reunified children report different experiences in child safety and psychosocial wellbeing. The institutionalized group reported greater levels of developmentally appropriate behaviors than the reunified group. Additionally, the institutionalized group showed a greater sense of access to food, school, and protection services than the reunified group. Propensity-score analyses will shed further light on differences in child wellbeing for institutionalized and reunified Ghanaian children.

Spencer_james @byu.edu

Innovations in measurement across the life course: contributions from longitudinal research

Convened by **Prerna Banati**

UNICEF Office of Research Innocenti, Florence, ITALY

pbanati@unicef.org

Longitudinal data has some comparative advantages over cross-sectional measures by tracking children as they grow over time. Such data are well suited to understanding the main features of children's physical, cognitive, psychosocial developmental trajectories; and how these domains interact in shaping outcomes and well-being. It can help 'explore the ways that children's developmental trajectories might diverge from early in life, through to early adulthood, and improve our understanding of the factors shaping these trajectories, and lend to our understanding of the role of the timing of events, influences and institutions on outcomes for children'. This panel convenes a group of longitudinal researchers exploring how cohort and longitudinal research can support the SDG agenda, reflecting on the added value of this data model to cross-sectional measures.

Dr. Paul Dornan from Young Lives will present his paper 'How inequalities develop through childhood' which contributes longitudinal research evidence on inequalities, notably: the impact of structural inequalities on children's development within households and communities; the ways access to health, education and other key services may reduce or amplify inequalities; and evidence on the ways that children's development can diverge from early in life, through to early adulthood. The paper is based primarily on findings from Young Lives, an ongoing four country, two cohort, fifteen-year longitudinal study of 12,000 children growing up in poverty, in diverse sites in Ethiopia, India, Peru and Vietnam.

Paul.dornan@qeh.ox.ac.uk

Dr. Sudhanshu Handa from the Transfer Project will present findings from a multi-country learning initiative on the impact of cash transfer programs in sub-Saharan Africa. One innovative component of this initiative has been to measure the impact of cash transfer programs on adolescents and their transition to adulthood, through specific one-to-one interviews with adolescents that are incorporated into larger evaluation studies.

This paper presents some of the indicators used in these studies, which include mental and self-reported general health, Hope, aspirations, HIV related risk behavior, peer perceptions, risk and time preference, fertility, social support, and violence. The paper describes the implementation of such a rich set of indicators among a very, poor rural population, and discuss issues of measurement and interpretation. Study countries are Kenya, Malawi, Zimbabwe and Zambia.

shanda@unicef.org

Dr. Aryeh Stein from Emory University will present a paper written with collaborators which describes a longitudinal design to evaluate the impact of a mother and child nutrition intervention in Bangladesh. At each stage of child development, interventions to enhance the primary caregiver's agency, attitudes, knowledge and intentions have the potential to improve child outcomes, but the content of those interventions needs to be stage-specific in order to be actionable. From an evaluation perspective, attitudes, intentions, and knowledge that are obtained after the child has passed through that stage have the potential to be biased as they will be affected by the actual experience. The paper proposes a model using a longitudinal design applied in Bangladesh which measures attitudes, intentions and knowledge on child nutrition obtained prospectively and allows for the evaluation of the impact of the project by recruiting repeated waves of pregnant women and re-surveying them at key stages of child development.

Aryeh.stein@emory.edu

Dr. Prerna Banati from UNICEF will present a paper exploring how longitudinal research can be better leveraged to inform the Sustainable Development Goals (SDGs.) The SDG framework proposed is limited in the ability to understand connections across development domains, which can limit its ability to inform a strategic response plan with a coherent overview and informed prioritization of SDGs. Cross-sectional indicators also restrict our ability to see the evolution of a child over his or her life course, and what the impact of interventions today could have on the future well-being of children as they transition and enter adulthood. This paper, jointly prepared with an expert group of longitudinal research specialists, presents concrete recommendations to the international community of researchers and policy makers on how longitudinal measures can strengthen the SDGs and our understanding of child well-being.

pbanati@unicef.org

From MDGs to SDGs: Unpacking the 2030 Development Agenda and its implications for child indicator research and practice

Convened by Alejandro Grinspan

UNICEF, SOUTH AFRICA

agrinspan@unicef.org

The year 2015 marks the deadline for achieving the Millennium Development Goals (MDGs), a discrete set of human development goals and targets developed in 2001 to track progress in implementing the commitments that Heads of State and high-level representatives from 191 countries agreed on at the UN Millennium Summit, held in New York in 2000. Based on a number of existing global commitments and an extrapolation of trends informed by past performance during the 1990s, the architects of the MDGs set a number of targets for the reduction of extreme poverty and hunger, and for improvements in health, education, gender equality, access to basic services and infrastructure, and other critical dimensions of human development to be reached by 2015, from a baseline set in 1990.

Almost from the time they were developed, the MDGs met as much criticism as praise. Many have lauded the MDGs for galvanizing action at global, regional and country level and influencing policy decisions and resource allocations towards the pursuit of human development outcomes. Critics, on the other hand, have pointed to a number of faults in the way the MDGs were conceived or the indicators that were chosen to measure success. Some have questioned the choice of certain yardsticks (for example, the use of the international poverty line of PPP \$1 a day for tracking progress in reducing poverty) or the use of aggregate measures based on averages (such as with the health MDGs), which served to hide the fact that overall improvements in a particular outcome could be achieved through gains concentrated among already advantaged groups in a society, thereby widening the gaps with the less-well off. The selection of relative as opposed to absolute benchmarks (such as, for instance, in the call for halving poverty rates or reducing under-five and maternal mortality by two-thirds and three-fourths, respectively) has been criticized for putting the bar too high for countries and regions with low initial levels of human development. This, the critics contend, has contributed to dismissing as 'failures', when gauged against the global benchmarks, the otherwise significant progress that poor countries in Africa and other regions have achieved on various fronts in recent

decades (girls' education, malaria prevention, HIV and AIDS treatment, drinking water coverage). It has also been claimed that the apparent success in meeting some MDGs (for example, halving global poverty) presents too rosy a picture, as progress was driven almost entirely by the performance of a handful of countries (China, India) while most, including the poorest, have remained off-track and missed the target by a wide margin.

By contrast, some observers have criticized that benchmarks set at the global level to measure collective progress were then extrapolated, almost mechanically, into yardsticks for gauging performance at country level. This process took place without regard to the vastly different contexts and past trends across countries and regions, which is said to have led to a growing sense of "Afro-pessimism" in development circles. By focusing attention on only a limited number of goals and targets, the MDGs have also been faulted with distorting national and global priorities, diverting attention away from broader development challenges as articulated in the Millennium Declaration – such as in the health sector, where it is claimed that the allocation of funding and the proliferation of vertical programmes have undermined efforts to strengthen national health systems in many poor countries.

As the MDGs draw to a close, a new development agenda has been formulated through a process of extensive consultations spanning more than two years. Its outcome document, "Transforming Our World: The 2030 Agenda for Sustainable Development", will be formally adopted by the United Nations General Assembly when it meets in New York from 25-27 September 2015. The 2030 Agenda contains a new set of 17 Sustainable Development Goals (SDGs), with 169 associated targets, which will come into effect on January 1st, 2016.

The SDG Declaration commits world leaders to "end poverty and hunger everywhere; to combat inequalities within and between countries; ... to create conditions for sustainable, inclusive and sustained economic growth, shared prosperity and decent work for all". It further commits them to "a world with equitable and universal access to quality education at all levels" – including early childhood, primary and secondary –, to "health care and social protection, safe drinking water and sanitation, improved hygiene [and] where food is sufficient, safe, affordable and nutritious ... A world which invests in its children and in which every child grows up free from violence and exploitation." It is an ambitious agenda and a powerful vision, to be achieved between now and 2030, for a "just, equitable, tolerant, open and socially inclusive world in which the needs of the most vulnerable are met".

The imminent adoption of the 2030 Agenda presents a great opportunity for putting children and youth at the forefront of development policy and practice over the next one and a half decades. It also poses an immense challenge, as indicators are still being developed to track progress in implementing its multiple goals and targets, and data collection and processing tools, capacities and systems will need to be strengthened to produce accurate and reliable disaggregated data and information, on a timely basis, for reporting purposes.

To discuss these issues, a panel is being convened that will take stock of the progress and challenges faced in tracking the situation of children during the MDG period and appraise the audience of the scope and ambition of the new SDGs, and the implications for child indicator work going forward. The panel will consist of:

- Tom Slaymaker, Division of Data, Research and Policy, UNICEF
- David Gordon, Townsend Centre for International Poverty Research, University of Bristol
- Sanjay Reddy, Department of Economics, The New School for Social Research
- Andy Dawes, Department of Psychology, University of Cape Town

A chief aim of the panel discussion will be to identify some of the key lessons learned during the MDG period, as a platform for allowing the new Sustainable Development Goals to “address their unfinished business”, as pledged in the Declaration of the 2030 Agenda.



PAPERS & POSTERS

Dos and Don'ts: Insights from children's participation in child poverty indicator research in South Africa

Bolutife Adefehinti and Julian May

Institute for Social Development, University of the Western Cape, SOUTH AFRICA

Over time, the importance of child well-being indicators has gained deserved recognition in research. A related and budding aspect is employing participatory methods with children to establish indicators of children's subjective well-being. This paper introduces one such study that employed child-friendly research methods (drawing, colouring, storytelling, role-play, debates, song and story writing, formal and informal discussions and interviews) to obtain children's voices and views about suitable indicators of child poverty.

Besides this primary objective, auxiliary findings that constituted vital learning points for establishing and successfully executing participatory indicator projects with children were made. A dominant theme was the need for flexibility in administering research methods and adaptability to children's preferred forms of expression; essentially, the need for responsiveness not reaction to situations that warrant either slight or extensive adjustments to the research plan and process. In addition, it was learnt that the success of the project is largely dependent on the framing of the research subject and objectives, including how research methods and questions operationalize them. For example, wording was a salient influence such that using 'talk' instead of 'discuss' and 'story' instead of 'essay' impacted on children's responsiveness and responses. It also emerged that adherence to the letter of ethical principles carried general benefits including that the formal seeking of their assent (in addition to parental consent) encouraged better participation by children and helped gain their trust as they felt co-opted as research stakeholders. Also, the possibility of any benefits or privileges that the children could obtain should be defined from the outset, as children could have interesting and at times, unanticipated expectations.

Noteworthy is that research methods should be context cognisant and suited to socio-cultural norms, partly for social conformity and to improve the quality of research findings and outcomes. It was also important to stimulate free interaction among the children but still be in control of the research space – a difficult balance to achieve and maintain especially as the researcher has to transit between roles alongside mediating veiled power struggles between the children and neutralizing clique effects. In all, it was gathered that potential difficulties in participatory indicator research with children can be moderated or managed by methodical adaptation of research methods and a general acculturation of the researcher to the research environment and the tempo of the children. More so, the success of the project depends largely on the researcher's approach to navigating the research landscape effectively and the strength of buy-in by the children – both crucial factors that define the thin line between research ease and toil.

Bolutife Adefehinti

bofa27@gmail.com

Multidimensional poverty and the nutritional status of children in rural Nigeria

Abimbola O. Adepoju and Comfort O. Emmanuel

Agricultural Economics, University of Ibadan, NIGERIA

The high rate of child morbidity and mortality resulting from nutritional deficiencies in Nigeria is alarming and constitutes a serious health problem, bringing about a vicious cycle of intergenerational poverty. This is owing to the inability of malnourished children, when they become adults, to secure nutritional well-being for their own children. This study examined the link between multidimensional poverty and the nutritional status of children in rural Nigeria, employing the fuzzy set approach to multidimensional poverty analysis and the Z-Score Index to capture anthropometric indicators (stunting, wasting and underweight).

The profile of the decomposition of the three anthropometric indices of nutritional status of children by demographic and socioeconomic groups revealed that a little over two-fifths were stunted, about three-tenths were wasted while more than one-tenths were underweight. The result also revealed that the anthropometric failures among sampled children are mutually inclusive events; thus there were categories of children who were stunted and wasted, stunted and underweight, wasted and underweight as well as stunted, wasted and underweight. These constituted 22.6 percent, 4.5 percent, 9.7 percent and 10.5 percent of the children respectively. These findings clearly reveal the extent of frequent illnesses, starvation or severe disease reflecting the prevalence of current, acute and chronic malnutrition of children in rural Nigeria.

The results of the estimation of the membership functions, depicting the levels of deprivation for the various categories of deprivation indicators showed a composite deprivation degree of 0.4188, implying that 41.8 percent of rural households in Nigeria, on average were deprived in the various poverty indicators. The multivariate analysis showed that multidimensional poverty had a positive association with the nutritional status of children in rural Nigeria. Specifically, poverty status, marital status of women, sex of child and child's age were the important risk factors for stunting while poverty status, child received infant formula, child had diarrhea in the last 2 weeks, marital status of women and sex of household head were the important risk factors for wasting. In addition, the important risk factors for being underweight were poverty status, residing in the North East zone and mothers' weight. These results indicate that poverty is a major factor responsible for the high incidence of malnutrition in Nigeria, although there were other factors which were unrelated to current deprivations. Thus, the study recommends the design and implementation of programs that are aimed at improving the living standards of children at the lowest end of the distribution through improving the level of education of their parents and improved access to health care, for there to be any appreciable improvement in children's nutritional status in Nigeria.

Abimbola O. Adepoju

abimbola.adepoju@yahoo.com

Labor migration of household heads and its effect on child well-being: Evidence from Central Asia

Mashura Akilova¹ and Umutai Egemberdieva²

¹School of Social Work, Columbia University, USA

²Independent, KYRGYZSTAN

During the twenty years of independence from Russia, the countries of Central Asia have suffered different levels of economic hardship and civil unrest, and range of factors have contributed to the widening poverty of the people in this region. Unable to find employment in their home country, millions of people have chosen labor migration as a means to support their families. According to the World Bank in 2013, Tajikistan and Kyrgyzstan were recorded as having the highest ratio of remittances sent by migrants to GDP among all other countries of the world.

In many rural areas, labor migration, mostly a male phenomenon, leaves households without the breadwinner for long periods of time, and may result in abandonment of their families once they build a new life in the recipient countries. This in turn creates many other issues that left-behind wives and children experience, including but not limited to short-term issues such as economic hardships, abandonment of or distraction from the process of children's education, involvement of children in labor, prostitution (as means of survival); and long-term issues, such as poor mental and physical well-being triggered by stress and pressure (that wives may experience from the in-laws) which can lead to suicide, and the creation of masses of poor and/or homeless population of the left-behind families.

This study investigates how migration affects the mental, physical and behavioral well-being of the children and wives left behind; migrants' motivations to cut ties with their families, and assesses the need for services for this vulnerable population group. This qualitative study was conducted with 20 families in Tajikistan and Kyrgyzstan. The outcomes of the needs-assessment study, including areas in which services are needed such as mental and physical health services; needs for shelter and economic well-being; skill training; legal services to migrants in Russia and their home-countries; and legal services to their families in their home countries will be discussed. The findings of this study will help to design appropriate services tailored to the need of this growing population, while the bigger study to follow will test the effectiveness of the services on outcomes.

Mashura Akilova
akilova@gmail.com

The Adolescent Girls' Vulnerability Index

Sajeda Amin¹, Karen Austrian¹, Michelle Chau¹, Kimberly Glazer¹, Eric Green², David Stewart³ and Marie Stoner⁴

¹Population Council New York, USA

²Population Council New York (currently Duke Global Health Institute), USA

³UNICEF, UGANDA

⁴Population Council New York (currently University of North Carolina-Chapel Hill), USA

The Adolescent Girls Vulnerability Index (AGI) represents the first global effort to capture the vulnerability of girls at the individual, household and community levels. UNICEF Uganda in partnership with the government and Population Council developed the index in recognition of the need to understand and address the needs of girls at this crucial stage. It aims to draw attention to adolescent girls and inform policies, programmes and resource allocation that respond to the risks and vulnerabilities they face.

Individual vulnerabilities include being two years behind grade for age or having no education at all. Girls not living with their parents are also considered vulnerable at the individual level. Several factors determine vulnerability at the household level. These include having no access to improved water sources, no access to improved sanitation and having a household head with no education. The AGI innovates by capturing community level vulnerabilities. It looks at indicators for women which indicate the type of environments girls grow up in. These includes high (i.e. above average) rates of early marriage, high illiteracy rates, high prevalence of HIV and high rates of having no comprehensive knowledge of HIV. A girl is considered extremely vulnerable if they face vulnerabilities in all three levels.

A fifth of adolescent girls in Uganda are extremely vulnerable based on the index results. There are disparities in vulnerabilities across the regions and girls in Karamoja (north of the country) suffer the most and those in the Western region the least. More than half of the girls in Karamoja, which is recovering from years of conflict, face extreme vulnerability. Girls from this part of the country are almost twice as likely to be vulnerable at the individual level compared to their peers in Kampala. Unsurprisingly, girls in poorer regions tend to be more vulnerable than those from richer parts of the country.

Lack of education is a key driving force behind individual vulnerability. In Karamoja, 90 percent of girls 10-14 years are two years behind their education and have never been to school. Girls in the central region and in the capital fare better with half on track their schooling, but that still means that the other half are left behind. Adolescent girls generally face less vulnerability at the household level than at the individual and community levels, however lack of sanitation is a key driver of vulnerability at home.

The community strongly influences vulnerability among girls. Those in the North and Eastern parts of Uganda face a higher risk of early marriage. Girls in Karamoja and the Eastern region live in areas with higher than national average illiteracy rates, while those in the Western, South-western and central parts of the country are in communities with high HIV prevalence and limited knowledge on the matter.

There are limited programmes in Uganda targeted to adolescents and often boys make up the majority of the participants in these programmes. The conclusions of the AGI indicate that adolescent girls do not feature as a distinct priority in Ugandan policy.

Maricar Garde
mgarde@unicef.org.

5

Multidimensional child poverty measurement

Ricardo Aparacio¹, Erika Strand², Enrique Minor¹ and Ana Maria Guemez²

¹Poverty Analysis Department, CONEVAL, MEXICO

²Social Policy, UNICEF, MEXICO

Mexico is the first country to adopt a multidimensional poverty measurement methodology based in social rights as its official poverty measurement. By law, this measurement is the responsibility of an autonomous institution with technical prestige called CONEVAL (The National Council for Social Policy Evaluation). Given that poverty affects children disproportionately in Mexico, and indigenous children with even greater intensity, it is an urgent policy priority to measure child poverty with as much detail and disaggregation as possible in order to improve the response of social policies. If the underlying causes of poverty are not addressed in a timely manner, child poverty can result in irreversible consequences for those affected, which will likely be passed on to future generations.

UNICEF and CONEVAL will present a paper on their joint work to measure child poverty using Mexico's multidimensional measurement for the three years since this methodology was adopted: 2008, 2010 and 2012. In addition, the paper presents the results of a survey to measure child poverty in 2009 – a year when a national survey to update poverty figures was NOT conducted – employing the same methodology and design that CONEVAL uses for official measurement to measure the impact of the global economic crisis on children in Mexico. Findings confirmed that the impact of the crisis was felt on children, particularly in economic terms. Of the other six social dimensions of poverty measurement in Mexico, the only negative impact was on food security but not, for example, on school attendance. According to this research, nutrition is the most vulnerable right in the face of crisis.

In addition to the work on crisis impact, CONEVAL and UNICEF will present the changing composition of child poverty over time, comparing the dimensions of child poverty with those of the adult population and, when possible, breaking down the dimensions of child poverty into different age groups to show how a multidimensional methodology can better inform policy responses and pinpoint thematic and populational gaps in social policy. For example, from 2008 to 2010, child poverty remained constant overall, but the increased coverage of a universal health insurance scheme was able to in some ways offset decreased income of households with children. Similarly, child poverty remained relatively constant from 2010 to 2012, however extreme child poverty decreased. Finally, the paper will show how this mapping of child poverty has improved analysis of social program coverage and exposed important coverage gaps.

Erika Strand
estrand@unicef.org

Developing system wide classifications to serve the needs of practitioners and management

Tal Arqazi¹, Yekoutiel Sabah², Meital Weissman¹ and Noa Sher¹

¹Engelberg Center for Research on Children and Youth, Myers-JDC-Brookdale Institute, ISRAEL

² Division for Research, Planning and Training, Ministry of Social Affairs and Services, ISRAEL

An essential condition for an adequate data system for any area of social services is an agreed and comprehensive list of social problems that define the boundaries of a specific field. At the initiative of the Ministry of Social Affairs and Social Services (MSASS), and together with the Myers-JDC-Brookdale Institute, a collaborative process was implemented to develop a new classification for the various social service populations, including families and children at risk.

Very few efforts to create professional classifications of the needs of social services clients have gained widespread acceptance and are in use. In Israel, MSASS has for many years used a classification system that purports to relate to the full range of social needs. Social workers in the national network of local social service departments use this system to enter the needs of their clients into a national database. However, there has been concern about the validity of the information and it is also widely felt that the database does not provide an adequate picture of client's needs. As a result, the data on child maltreatment in Israel is also deficient.

Against this background the ministry decided to initiate a process to develop a new classification system that will provide relevant, uniform and comprehensive information on clients' needs. It is intended to serve practitioners as well as managers and policy makers and to promote outcomes-oriented planning, implementation and measurement of interventions' outcomes.

The process was led by the Division of Research, Planning and Training at the MSASS. A committee was formed with the participation of ministry staff, representatives from the local social services, and academia. Drafts of the classification were shared in a long and iterative process, mostly through the virtual communities of practice wherein a majority of the Israeli social workers are enrolled. Hundreds of comments were received and taken into account in the final version.

The new classification was based on several considerations, among them:

- The distinction between the needs to be addressed and the characteristics of clients.
- The distinction between the needs of the family and those of its individual members.
- Awareness to changing social norms and to professional trends and values.
- The need to build a user-friendly but inclusive classification.
- Consistency with the policy and strategic goals of MSASS.

A permanent committee has been established to address these issues and accompany the piloting and dissemination of the new system. The effort has raised professional, ethical and organizational issues that are relevant to the development of such classifications everywhere.

The paper we will present discusses the conceptual framework and issues that emerged; the process of creating a broad system wide consensus; the role of the researcher in this complex professional and organizational process and the balance between addressing the needs of the field and national and regional management.

*Tal Azari
Tala@jdc.org*

Reducing Child Poverty in Georgia

Tinatin Baum, Anastasia Mshvidobadze and Hideyuki Tsuruoka

Social Policy and Economic Analysis, UNICEF, GEORGIA

This paper analyses various aspects of child poverty, with a particular focus on consumption poverty. It uses data from the Welfare Monitoring Survey (WMS). WMS is a biennial and nationally-representative panel household survey conducted in 2009, 2011 and 2013 (the sample size is about 4,000). Based on analysis of these data, the paper presents policy options for the social protection system, in order to address existing child poverty.

Since 2011, despite developments in the social protection system aiming to help the population deal with vulnerabilities, significant levels of poverty still remain. In particular, children have benefited to a limited extent from increased social spending. Child poverty rates remain high, both in terms of general poverty and extreme poverty. To make the matters worse, the relative child poverty rate worsened from 2011 to 2013. Children now represent over a quarter of those living in extreme poverty, the highest rate recorded by the WMS since 2009. When the poverty is disaggregated by age group, those aged 5-14 years and 30-34 years are particularly prone to poverty.

The Targeted Social Assistance (TSA) scheme, a cash assistance programme with proxy means testing, may be cost-effective in reducing extreme poverty, but it always generates exclusion errors and potential disincentives to work. In addition, the TSA scheme is unable to respond to the dynamic nature of poverty. We find that a significant number of households move from one consumption quintile to another in the course of a few years. This creates vulnerable ground and makes it difficult for households to invest in human capital, such as health and education. A more universal scheme, similar to the approach of the old age pension, would address these issues more effectively.

Policy options are presented within the existing framework in order to reduce the child poverty. The impacts on poverty and coverages are simulated for each policy option. The simulations demonstrate that, unless special emphasis is placed on children, they always end up poorer than the rest of the population. In order to at least equalize poverty rates among children and the rest of the population, it is necessary to provide additional cash payments for children in a household.

*Tinatin Baum
tbaum@unicef.org*

Material resources and children's well-being in eight countries

Livia Bedin¹, Jorge Sarriera¹, Ferran Casas², Daniel Abs¹, Miriam Raquel Strelhow¹, Daphna Gross-Manos³ and Jarod Giger⁴

¹ Dept of Psychology, Universidade Federal do Rio Grande do Sul, BRAZIL

² Universitat de Girona, SPAIN

³ Child Indicator Research Journal, ISRAEL

⁴ University of South Dakota, USA

Recent research with children found relationships between material resources and subjective well-being. However, research examining relationships between economic factors and subjective well-being is still inconclusive. The objective of this research is to examine the relationship between children's perception of their available material resources and their subjective well-being.

Participants (n=13,953) resided in eight countries and were largely female (57%), between the ages of 10-14 (M=12.05; SD=0.59). Each child completed a culturally appropriate country-survey that included demographic information and validated measures from the International Survey of Children's Well-Being project (ISCIWeB), which included the Student's Life Satisfaction Scale (SLSS) and material resources items. We tested a relational model for predicting subjective well-being and applied structural equation modelling (SEM) to the data.

Results indicated that children in Uganda had limited access to material resources and the lowest average of well-being. Together with Algeria and South Africa, Uganda also had the strongest associations between access to material resources and the SLSS. Even with access to all material resources evaluated, well-being scores are also lower in the case of South Korea, probably due to the so-called "Asian bias". Children from Israel, Brazil, Spain, and England were similar in their levels of satisfaction and well-being. Our model fitted the data well and revealed significant relationships between material resources and child subjective well-being in each country. Preliminary results underscore the importance of assessing material well-being in children and highlight the role material resources have in influencing children's subjective well-being, especially in cases of children experiencing severe resource deprivation. The current study supports our predictive model, which demonstrates that children's assessments of their material resources are associated with subjective well-being. These findings call for improvements to the conditions of children's material resources especially in developing countries, as this might have a strong effect on their well-being. However, not only children in developing countries suffer from deprivation of material resources; each country has a percentage (even if luckily very low) of children living in more deprived life circumstances. This study calls for special attention to be paid to them.

*Livia Bedin
liviabedin@gmail.com*

Subjective well-being and interpersonal relationships in childhood: comparison of Brazilian and Spanish children

Livia Bedin¹, Jorge Sarriera¹, Ferran Casas², Bibiana Santos¹ and Monica Gonzalez²

¹Dept of Psychology, Universidade Federal do Rio Grande do Sul, BRAZIL

²Universitat de Girona, SPAIN

Interpersonal relationships are important in social and emotional development, meeting the human need for intimate connection with others and influencing subjective well-being since childhood. The main interpersonal relationships of children form in family, friendship and school contexts. This study aims to identify the association between subjective well-being and interpersonal relationships, and compare the results between samples of Spanish and Brazilian children.

Participants are 6,747 children aged 11 to 14 years ($M=12.07$, $DP=0.731$), 1,020 being Brazilian and the others Spanish. From the total sample, 50.7% were girls. Each child completed a culturally appropriate country-survey that included demographic information and validated measures from the International Survey of Children's Well-Being Project, which included the Student's Life Satisfaction Scale and interpersonal relationships items.

Results indicated that the items of interpersonal relationships are grouped into three components related to family, school and friends. Spanish children had higher means than Brazilians in the items of interpersonal relationships and in the subjective well-being scale, and there is a significant association between interpersonal relationships and subjective well-being which can be considered a predictor of child well-being, with approximately 40% of explained variance for both countries. While in Brazil the children live in environments of marked social inequality with high levels of violence and deprivation, Spanish inequalities are smaller and there is more security, allowing more freedom for children who can live and relate to people in their community. In this study, family relationships showed a higher contribution to the prediction of child well-being of both Brazilian and Spanish children. In the family the first relations of affection are developed, being an environment where children learn to respect and establish positive relationships of love and respect towards others, providing security and tranquility.

*Livia Bedin
liviabedin@gmail.com*

Contextual changes and Brazilian children's well-being

Livia Bedin, Jorge Sarriera, Tiago Calza, Francielli Galli and Fabiane Schutz

Dept of Psychology, Universidade Federal do Rio Grande do Sul, BRAZIL

The transitions experienced by children and adolescents are the focus of recent studies related to subjective well-being indicators. Stability has been identified as having an essential role in children's development and well-being. Moreover, critical changes suffered in important contexts such as family structure, place of residence and school, for example, could have an impact on children's well-being. Considering the relevance of this subject, the aim of this investigation is to verify if there are significant differences between the subjective well-being of children who have experienced and have not experienced changes in their life contexts in the past year.

Participants were 1,765 Brazilian children (55.6% girls), aged between 10 to 13 years old ($M = 10.99$; $SD = 0.99$) who responded to a questionnaire containing three well-being scales (PWI, SLSS and BMSLSS). Four items referred to possible changes that occurred in the last year (moved house, changed local area, changed school and changed parents or caregivers they live with). First, a cluster analysis was conducted to group participants according to the changes they have experienced. Two clusters were obtained (few changes and many changes in life). After that, using multivariate analysis of variance (MANOVA), considering the three well-being scales as dependent variables and the cluster as independent variable, significant differences in well-being were found.

Children who have experienced more changes exhibited lower means of well-being considering two subjective well-being scales (PWI and BMSLSS), while there was no difference regarding the SLSS. The findings support previous studies that indicate a negative impact of transitions on children's well-being. In part, this outcome could be explained by the separation between children and some of their main relationships, as well as the adaptation to a different routine. Our results confirm the importance of offering a stable environment for improving children's development.

*Livia Bedin
liviabedin@gmail.com*

Monitoring transition to adulthood among adolescents in out-of-home care

Rami Benbenishty¹, Anat Zeira², Tehila Refaeli¹, Yafit Sulimany-Aidan³ and Tamar Dinisman²

¹ Louis and Gabi Weisfeld School of Social Work, Bar Ilan University, ISRAEL

² School of Social Work and Social Welfare, Hebrew University of Jerusalem, ISRAEL

³ School of Social Work and Social Administration, University of Chicago, USA

Transition to adulthood has become an important developmental stage ("Emerging Adulthood") that may have important consequences for well-being in adult life. This period is of special importance to vulnerable groups, among them adolescents who have been in care in childhood and are 'aging out' of state care (care leavers). These young people deal with many challenges in the years after leaving care. Studies around the world report that they experience difficulties in various life domains including high rates of instability in accommodation, unemployment, severe economic distress, and a low level of education.

The aim of this presentation is to report on a longitudinal study of adolescents who were in care and moved out of residential facilities in Israel. The study examines the situation in the last months of their stay (n = 276), a year later (n = 234), and four years after leaving care (n = 220). The study describes changes in their situation and well-being over time, and examines personal and social resources that may help understand the outcomes of their transition.

The findings indicate that in most areas the situation of care leavers in this study is better than care leavers in other countries. Nevertheless, compared to the general population these young people are not doing well, especially in their economic situation and level of education. More than a fifth of the young people reported alcohol abuse in the month preceding the interview. Most of the young people expressed high life satisfaction and low emotional distress. Young people who had high personal resources (optimism, self-esteem, self-efficacy for tasks of independent living and future orientation) had lower economic distress and higher job security. However, only positive future orientation correlates with more activities performed to achieve higher education. In addition, personal resources were not correlated with alcohol and drug abuse. Personal resources were correlated positively with life satisfaction and negatively with emotional distress.

Structural equation modelling indicates that support from mother and friends, mainly at the current point in time, correlated with low economic distress. Job security correlated with friends support and not with parental support. Support from parents and friends correlated positively with life satisfaction and negatively with emotional distress. The findings are discussed in light of other studies across the world. Furthermore, the presentation emphasizes the importance of developing systems to monitor the situation of vulnerable youth in their transition to adulthood.

Rami Benbenishty
 ramibenben@gmail.com

Measuring child protection: Quality performance indicators for measuring the impact of child labour urban interventions in India

Harpreet Bhullar

Programmes, Save the Children India, INDIA

The paper elucidates performance indicators for measuring the impact of urban models designed to protect the rights of child labourers in India. References are drawn from Save the Children India's urban intervention on child labour, specifically child domestic workers and child labour in the garment industry in the capital state of Delhi, India. These two categories of child labour have common characteristics of home-based labour and thus, hidden labour. Where child domestic work thrives in the homes of the employers and begins from the home of the child domestic worker, child labour in the garment industry also begins and thrives in the homes of these labourers. Some of the most significant violations of child rights for these children include the loss of childhood, lack of opportunities to explore their full potential, entrapment in the intergenerational cycle of poverty and exploitation and abuse experienced through labour. Gradual withdrawal from harmful labour and a shift towards decent work form the mainstay of the intervention.

To adequately measure the impact of the intervention, five key indicators are used to measure its outcome: (1) former child labourers who restart their education and are retained in formal schools, (2) adolescent child labourers who have been trained and are pursuing alternative vocational trades, (3) safer families and communities that are source or destination areas of child labour, (4) increased access of vulnerable families to social protection services and (5) stronger child protection legislation and policy changes in the best interest of the most vulnerable children. These indicators are expected to measure the overall impact as well as answer the following questions.

- a. Whether or not the said solutions for children in urban vulnerability have a strong impact in helping them reach their well-being to the fullest.
- b. Whether or not these solutions can be replicated in different geographies or governments.
- c. Whether or not the said solutions are sustainable beyond the intervention by development players.

Harpreet Bhullar

h.bhullar@savethechildren.in

Indicators relating to children's work

Michael Bourdillon¹, Richard Carothers², Dena Aufseeser³ and Olivia Lecouflé⁴

¹ Child Sensitive Social Policies Programme, Women's University in Africa, ZIMBABWE

² Partners in Technology Exchange Ltd, CANADA

³ Geography and Environmental Systems, University of Maryland Baltimore County, USA

⁴ Save the Children, CANADA

This paper points to the need, too often neglected, to consider indications that children's work frequently and in various ways contributes to their well-being and development. Research using indicators relating to children's work is currently heavily biased towards negative outcomes, reflecting a widespread assumption in high-income societies that children should be engaged in school to the exclusion of work for remuneration. In contrast, a widespread perception in the majority world is that work – including economic work – is a component in good child-rearing and important for transition to adulthood; in 'child labour' discourse, this perspective is assumed, rather than shown, to be wrong.

The engagement of children in economic activities is frequently assumed to be an indicator against children's well-being, and discussions of 'decent work' usually exclude decent work for children. Work is held to be incompatible with schooling and so to inhibit children's life chances. This assumption is particularly evident in the assessment of interventions, when removal of children from work is taken to indicate successful intervention, without consideration of whether the children end up better or worse off.

Some recent research challenges the assumption that children's work is a negative indicator. Several studies have shown correlations between work and improved health and nutrition. Research on poverty relief through microfinance and agricultural development has shown that as family enterprises improve, children have more work to do: in such cases, children's work is an indicator that poverty is being successfully relieved. Indicators are now needed for whether in specific instances work benefits or harms the children.

Research has shown that substantial part-time work of children can facilitate later entrance into career work. In some cases, work of children is a stronger predictor of higher incomes later in life than time in formal training institutions. So removal of children from work is not necessarily an indicator of their well-being. Moreover, such research results suggest that significant learning takes place in work, including social and entrepreneurial skills, a suggestion supported by much case-study research. While such learning is more difficult to measure than literacy and numeracy acquired in the classroom, it is no less important for the development of many children. Finally, children's participation in paid work often facilitates their attendance in formal schooling.

Qualitative case-study research shows that children's work, including paid work, is embedded in family relations; children can develop social responsibility and resilience

through work; and work can help to provide purpose and hope in the face of shocks. In certain situations, work allows children to develop alternative social support networks, especially important when children face tension or abuse at home or school.

While some incidents of child work are negative experiences, the assumption that all work is problematic has hindered the development of indicators needed to distinguish situations in which children's work contributes to well-being, and to improve the likelihood of such outcomes. This paper indicates areas in which this neglect might be redressed.

Michael Bourdillon

michaelbourdillon@gmail.com

A 13 year journey with the Australian Early Development Instrument – from pilots through to triennial national census and sustainability

Sally Brinkman

Fraser Mustard Centre, Telethon Kids Institute, AUSTRALIA

Every 3 years, the Australian Government conducts a developmental census across the entire population of children in their first year of full-time schooling. The first developmental census was conducted in 2009, including 261 147 children, and in 2012 data were collected on 289 973 children – representing 97.5% and 96.5% of the estimated eligible population, respectively. The Australian Early Development Instrument is an adaption of the Canadian Early Development Instrument, which is completed by teachers on the basis of at least 1 month's knowledge of the child, including aspects of physical, social, emotional, language and cognitive development, as well as data on special needs. Teachers are also asked to include details of the child's care arrangements and attendance in early education programmes in the years preceding school. Demographic and geographical data are recorded at the individual and area levels. Aggregate data are publicly available through geographical mapping platforms and downloadable community reports on the internet and microdata (including data for linkage studies) can be applied for (www.aedc.gov.au).

The overall Australian prevalence of developmental vulnerability was 23.6% in 2009; in 2012 this had reduced to 22.0%. For Australian Aboriginal and Torres Strait Islander children, the prevalence of developmental vulnerability was 47.4% in 2009 which reduced to 43.2% in 2012. The 2015 results will be available in early 2016, allowing the first interpretation of change over time, with every community across Australia having at least three data points to monitor child development. Although the first development census was conducted in 2009, the instrument was introduced to Australia in 2002. This presentation will walk through the journey from an initial pilot of 200 children in 2002, to further piloting and community work in 60 communities and 80,000 children between 2003 and 2008, through to the first national census in 2009. The presentation will exemplify the numerous reliability and validity studies, the vigour and political clout that a developmental census can provide versus a sample leading to research translation, community advocacy, community mobilisation and political appetite. The presentation will pragmatically highlight the key "ducks that lined up" to trigger the government's commitment to a census and the current plans to legislate the triennial developmental census in the ultimate act to ensure sustainability.

*Sally Brinkman
sallyb@ichr.uwa.edu.au*

Building a better world for children

Isabelle Carboni and Jacquie Bunnell Hesse

Evidence and Learning, World Vision International, SOUTH AFRICA

Measuring dimensions of child well-being across multiple countries, with different types of projects on different timelines, is an ambitious aim for any international organisation. This year, World Vision International released its first summary report on child well-being based on 64 country office reports covering over 1600 programmes, using a selection of indicators that were standardised in 2010. Each of these country offices designs and implements a unique combination of programmatic approaches in development, advocacy and disaster management. Understanding and reporting the results of these efforts to improve child well-being is central to World Vision's accountability and legitimacy. However, the methodological challenges to creating a global report from such a variety of data are immense.

Reporting on child well-being requires an approach that organises seemingly "messy" data by theme to identify usable data on progress and change, as well as to highlight important learning and generate actionable recommendations. This resulted in key findings on which dimensions are seeing changes in well-being and which ones are not, some promising approaches to tackling critically low outcomes and some broadly applicable learning on monitoring and evaluation for other organisations interested in global reporting of this kind.

Examples of results:

- Most child health indicators have consistently improved in comparison to baseline measurements using international definitions of thresholds for critical, needing action or acceptable levels. Of programmes reporting, 15 percent have upgraded from lower levels to acceptable levels in vaccination coverage and 27 percent have moved into acceptable levels of diarrhoea management.
- WV Albania and Kosovo reported positive change in young people's 'constructive use of time' using the Development Assets Profile tool (a copyrighted tool developed and owned by the Search Institute) for measuring self-assessed well-being. This signifies that they now have more opportunities to learn new skills and nurture positive peer and adult relationships outside of the classroom.

However, while many indicators have seen positive changes over time, others remain critical or require action:

- Stunting levels are still critical for children under five. Data from 31 offices reveal that just 11 per cent of programmes reporting have acceptable levels of stunting. Although reduction in stunting is complex, integrated approaches are starting to see progress. WV Sri Lanka is implementing a modified version of the Graduation Model, which integrates nutrition, health, agriculture and economic development. An evaluation of three graduation model programmes in 2014 showed statistically significant reductions in stunting, with an average decrease of nearly 8 percentage points.

- Literacy remains a critical issue with only three of 33 countries reporting acceptable levels. However, one education model showing promising results is Literacy Boost (a copyrighted tool developed and owned by Save the Children). In Burundi, 48.7 percent of girls in the programme learned to read compared to 32.2 percent in a comparable school that did not use this model. This result is still significantly lower than acceptable, showing the challenge of starting with extremely low baselines and more work is needed.

In conclusion, after five years of rolling-out standard child well-being indicators in programmes and four years of child well-being reporting by country offices, it has been possible to make evaluative statements that can be used to improve programming choices for child well-being. However, major challenges remain for global reporting, especially in the quality and consistency of measurement at programme level.

*Isabelle Carboni
Isabelle_Carboni@wvi.org*

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Child participation and citizenship: A practical Afrocentric approach from the Child Rights Network for Southern Africa

Musavengana Chibwana

Child Rights Network for Southern Africa, Botswana

In the global child rights landscape, there are generic ideas of how children can participate. These ideas have been encapsulated in documents like the United Nations Convention on the Rights of the Child (UNCRC) and its General Comment on child participation. The UNCRC has attempted to unpack child participation using universalistic approaches. Universalism, however, generalises the intricacies that are found in the diversity of African cultures where children play a significant role in the society.

This debate is coming in when child participation has been deemed to be 'the new tyranny' of child rights programming. From a theoretical perspective, the current child rights corpus places a premium on the 'views' of a child. Both the UNCRC and the African Charter on the Rights and Welfare of the Child (ACRWC) speak to the respect of children's views. This narrative seem to overrate the power of what is spoken without interrogating other variables like how it is spoken and where it is spoken. This view short-changes children as they can provide more than a voice. Children in the African context have responsibilities as expressed in Article 31 of the ACRWC. These still need to be unpacked in the context of child participation and citizenship at a practical level.

Anecdotal evidence has shown that the concept of child participation, in the way it has been used in general, seem to conflict with or undermine culturally-valued attitudes and practices, which in turn may provoke defensiveness and/or antagonism between universalists and the cultural relativists. This scenario has then caused a development stalemate on how children should be engaged. Universalists are sticking to the models that were suggested by scholars like Roger Hart. These models were not made with a consciousness of the African context – the reason for this paper.

Child Rights Network for Southern Africa (CRNSA) members have been tailor-making child participation models that are awake to the realities and cultural values of Africa. It is these models of child participation which need to be debated and interrogated in academia so that they find their place in representing the general African worldview of child participation. The paper will therefore seek to break the development stalemate by gleaning experiences from CRNSA members' initiatives of how the concept of child participation and citizenship is playing out at a practical level using Afrocentric lenses.

*Musavengana Chibwana
musa.chibwana@gmail.com*

Policy debates, child indicators and child grants in South Africa, Namibia, Botswana and Zimbabwe

Isaac Chinyoka

Centre of Social Science Research, University of Cape Town, SOUTH AFRICA

Cash transfers for children and families living in poverty have increasingly become a common form of social assistance in developing countries, and Southern Africa has witnessed a proliferation of the same since the early 1990s. However, there is substantial variation in social provision of these transfers among four focus cases of this study which include three middle income countries (South Africa, Namibia, Botswana) and one low-income country (Zimbabwe). Grants for children in South Africa are in the form of means-tested Child Support (CSG), Foster Care (FCG) and Care Dependency (CDG). Social Protection for children in Namibia has almost similar programmes namely Child Maintenance (CMG), Foster Care (FCG) and Special Maintenance (SMG). Botswana has a completely different 'food basket' under the Orphan Care Programme (OCP), but children living in chronically poor families receive support under the Needy Children programme while those impacted by the extremely harsh environment on income opportunities in some parts of Botswana are catered for by the Remote Area Dweller programme. In contrast, Zimbabwe, which does not have a specific child grant, has a geographically targeted Harmonised Cash Transfer (HSCT) programme for poor and labour constrained households to include orphaned and vulnerable children. There have been either reforms or debates about reforms of all these programmes.

This paper comparatively interrogates the kinds of evidence used, how it was used and with what consequences it was used in child welfare grants policy reform processes in the selected countries. It looks at the use of child indicators on needs of children as well as programme success or failure as evidence to identify need and to assess programme relevance. Analysis presented in this paper indicates that data from household surveys, experiments such as Randomized Control Trials and qualitative researches were put forward in different ways and combinations in support of a familialist policy in Botswana, a poverty-targeted one in South Africa, and a mix in Namibia.

Isaac Chinyoka
isacchiny@gmail.com

How does academic achievement affect South Korean children's subjective well-being? The role of adults' fair attitude

Changyong Choi, Juyeon Lee, Eunhye Ko and Min Sang Yoo

Social Welfare, Seoul National University, REPUBLIC OF KOREA

South Korean children have taken higher Ranks in PISA (Programme for International Student Assessment). But despite this remarkable academic achievement, Korean children rank lower than most other countries in the UNICEF Happiness Report, and rank top in child suicide rates among OECD countries.

Academic achievement is a desirable developmental outcome and has been found to be positively related with subjective well-being (SWB). But the stress in academic life can be a risk factor for child well-being. Many Korean parents and teachers regard getting high grades as the most important task of students. In this context, students with low grades could experience a great deal of stress. Children should be treated fairly regardless of their academic achievement, and the fair attitude of parents and teachers might buffer the influence of academic stress on SWB.

This study aims to identify how academic achievement impacts children's SWB, and to find the resources in this process. Based on a stress-process model, this study examines the effect of low academic achievement (the primary stressor) and academic stress (the secondary stressor) on Korean children's SWB. Also, the mediation effect of parents' and teachers' fair attitude (social resources) is examined.

This study analyzes a subsample (age 10 and 12, n=5,014) of the 2013 South Korean data of the International Survey of Children's Well-Being (ISCWeB). The data was collected from a nationally representative sample of 7,467 children aged 8, 10 and 12, with approval from the IRB of Seoul National University.

Academic achievement is measured by children's self-rated 5-point achievement of three subjects (Korean, Mathematics, and English). Academic stress is measured by three 4-point indicators (I am stressed out by my low grades/ by homework and exams/ and by the boredom of study). The adults' fair attitude is measured by two 5-point indicators (My parents/ my teachers treat me fairly). SWB indicators are measured by 11-point life satisfaction (SLSS7) and positive affect (satisfied, happy, relaxed, active, calm, and full of energy). Children's age and gender are controlled.

Figure 1 shows the research model. This model is analyzed using Structural Equation Modelling (FIML estimation) with Amos v.20.

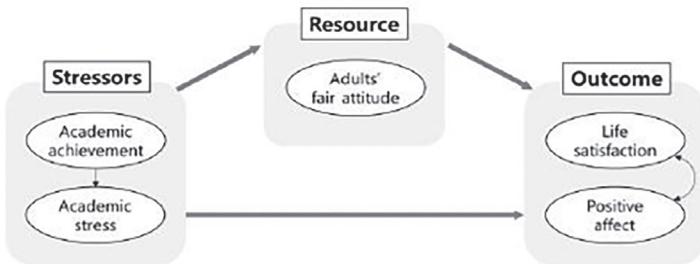


Figure 1 Research model

The research model showed a good model fit. The results of estimation indicated that academic achievement had no significant direct effects on life satisfaction ($\beta=.033$, $p>.05$) nor positive affect ($\beta=-.026$, $p>.05$), but academic stress and adults' fair attitude fully mediated the effects of academic achievement on SWB. The adults' fair attitude also partially mediated the effect of academic stress on children's SWB.

These results suggest that low academic achievement does not directly influence children's happiness, but has an indirect effect through academic stress and adults' fair attitude. Childhood is not only a period of well-becoming, but should be a period when children live happily at the present time. Given the significant mediation effect of adults' fair attitudes, it is necessary for adults to treat children fairly regardless of their academic achievement. The fair attitude of parents and teachers can be a good resource for academically struggling Korean children.

*Changyong Choi
 choi.snuwelfare@gmail.com*

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Understanding children's participation in international child protection: Implications for monitoring and evaluation

Tara Collins¹, Lucy Jamieson², Mónica Ruiz-Casares³ and Kay Tisdall⁴

¹ Child and Youth Care, Ryerson University, CANADA

² Children's Institute, University of Cape Town, SOUTH AFRICA

³ Social and Transcultural Psychiatry, McGill University, CANADA

⁴ Centre for Research on Families and Relationships, University of Edinburgh, UNITED KINGDOM

How is child participation understood, implemented and assessed in international child protection work? Child protection is an essential international policy and programming priority and efforts involve (UNICEF, 2006): 'preventing and responding to violence, exploitation and abuse against children – including commercial sexual exploitation, trafficking, child labour and harmful traditional practices, such as female genital mutilation/cutting and child marriage'. While various actors attempt to redress child protection issues, it is unclear how they appreciate and respect child participation in their work. This complex concept and right of child participation is provided in article 12 of the United Nations Convention on the Rights of the Child (1989). Due to numerous benefits, many publications (e.g., Langhout & Thomas, 2010; Mayall, 2000; Polack, 2010; UNICEF 2009) and various actors and organizations support the role and value of child participation. Nevertheless, child participation poses a significant challenge in practice for various reasons including age discrimination, denial of opportunities, as well as tokenistic and irrelevant participatory efforts. Accordingly, this presentation reviews the literature in order to obtain a thorough understanding of how participation and protection are defined and practiced in international child protection efforts in order to generate some considerations for assessment of these initiatives.

As part of a larger international research partnership involving scholars and practitioners in non-governmental organizations and eventually children themselves, the project is building and mobilizing knowledge and understanding about the nature and requirements of effective child participation in international child protection. Consequently, this presentation aims to advance knowledge and understanding about the nature and requirements of effective child participation. Accordingly, results should contribute to ongoing research and dialogue among academics and practitioners about where data about child participation could be found and support determinations about data relevancy in order to influence policy, programming and monitoring and evaluation of international humanitarian and development work.

*Tara Collins
 tara.collins@ryerson.ca*

What can we learn from a panel study of neighborhoods and child maltreatment?

Claudia Coulton¹, Francisca Richter¹, James Spilsbury², David Crampton¹, Jill Korbin³ and Tirth Bhata⁴

¹ Mandel School of Applied Social Sciences, Case Western Reserve University, USA

² School of Medicine, Case Western Reserve University, USA

³ Anthropology, Case Western Reserve University, USA

⁴ Sociology, Case Western Reserve University, USA

Child maltreatment affects 1 in 5 children in USA, often with adverse effects on well-being throughout the life course. Preventive measures are critically needed. Residential neighborhoods might serve as potential intervention targets. Cross-sectional studies have demonstrated associations between maltreatment rates and neighborhood social conditions such as economic disadvantage, residential instability, crime, drug and alcohol distribution and other markers of distress, even after accounting for effects of family and individual factors. However, there are also a number of contradictions in these findings, with quite a few of these neighborhood social conditions found to be significant in some studies but not in others. To date, research examining linkages between neighborhood factors and maltreatment has been largely cross-sectional designs. Thus, we know little about whether these neighborhood-level associations vary over time, possibly due changing conditions in the larger regional or national context. Moreover, associations observed in cross-sectional models may be confounded with pre-existing but unmeasured differences across neighborhoods that cannot be ruled out. If prevention strategies at the neighborhood level are to be successful, it would be important to address these two limitations of the existing research on neighborhoods and child maltreatment.

Longitudinal panel studies have the advantage of being able to partially address the two limitations listed above. In this paper we draw on data that were gathered as part of a longitudinal, mixed-methods study investigating neighborhood effects on child maltreatment in a large city (Cleveland, Ohio, USA). As part of that study we used geo-coded administrative data to construct a 20-year panel of all neighborhoods (i.e. census tracts), including data on their child maltreatment rates as measured by investigations by the local authorities and a number of indicators of adverse neighborhood social conditions. Using these data, we estimate and compare several spatial regression models: A series of cross-sectional OLS models, and two panel models for all years, one with neighborhood fixed effects and one with both neighborhood and year fixed effects.

Overall, descriptive spatial analysis showed that there was less neighborhood clustering of child maltreatment over this time period. An index of spatial autocorrelation fell: Moran's $I = 0.61$ in 1990; 0.49 in 2000; 0.35 in 2010. The series of OLS models showed notable year-to-year variation in the size and significance of the regression

coefficients for maltreatment rates and the set of neighborhood conditions variables. The neighborhood and year fixed effects models, however, confirmed that several factors were consistently associated with maltreatment rates including economic disadvantage, female headed families, violent crime, and housing instability. These panel models in essence capture the effects of changes in neighborhood conditions on maltreatment rates while holding constant non-time varying differences across neighborhoods and changes over time in the regional or national context. We conclude that panel studies may be more useful than cross-sectional analyses for planning place-based prevention programs for child maltreatment.

Claudia Coulton
claudia.coulton@case.edu

When do parents and child health professionals agree on child's psychosocial problems? Cross sectional study in parents-child health professional dyads

Mathilde R. Crone¹, Elke Zeijl² and Sijmen Reijneveld³

¹Public Health & Primary Care, Leiden University Medical Center, NETHERLANDS

²Department of Youth Care, Province of Gelderland, NETHERLANDS

³University Medical Center Groningen, University of Groningen, NETHERLANDS

About one third of all parents have concerns about their child's psychosocial development. These concerns have been shown to be significantly associated with elevated problem scores on behavioral screening tools. Therefore, if these concerns are disclosed, the likelihood of child health professionals (CHPs) identifying problems in these children is much higher. However, even if disclosed, CHPs do not confirm all parental concerns and vice versa parents do not agree on all CHP-identified problems. This discrepancy between CHP and parents hampers appropriate and effective care. Few studies have simultaneously investigated professionals' and parents' viewpoints to explore potential reasons for this discrepancy. Studies examining agreement are mostly focused on the agreement on assessment instruments completed by parents, adolescents and teachers and not on the agreement in the actual recognition of problems by CHP and parents. The present study used data of parents-CHP dyads to explore the agreement between the identified psychosocial problems in children and factors influencing this agreement. In line with assessment frameworks of child development, stressors related to child, parents, and family and environmental context were studied for their association with this (dis)agreement.

During routine child health assessments, data were collected from a sample of children aged 14 months to 12 years (n=3,870). CHPs registered psychosocial problems as identified and parents reported their concerns regarding the emotional and behavioral development of their child for which they felt they needed professional assistance. Child psychosocial stressors were measured with the ITSEA/CBCL and child's history of psychosocial problems. Environmental stressors referred to stressful family and contextual situations in the past year and parenting stressors to perceived parenting efficacy.

CHP and parents disagreed on 36.4% of the children. CHP identification of psychosocial problems was most likely in the case of past problems (OR=5.85, 95% CI=4.74-7.22). Parental concerns were most likely in the case of an increased ITSEA/CBCL-score (OR=7.31, CI=5.13-10.39). CHP-parent agreement was more likely in the case of a combination of child psychosocial, parenting and environmental stressors (OR=35.58, CI=24.11-52.48). Parental concerns were frequently not confirmed by the

CHP in younger children from industrialized countries and higher educated families. In children aged 8-12 years, CHPs more often perceived problems whereas parents had no concerns.

For the majority of children, parents and CHPs agree on whether or not the child has psychosocial problems. Agreement between CHPs and parents is associated with a co-occurrence of child, parenting and environmental stressors. Nevertheless, there is disagreement on one third of all children, mostly due to parental concerns not confirmed by the CHP. Research should be directed at exploring the parents-CHPs interaction in order to understand the decision-making process regarding the identification of psychosocial problems in children. Next, the longer-term impact on uptake of treatment and psychosocial problems should be assessed to determine the efficacy of CHP-identification.

*Mathilde Crone
m.r.crone@lumc.nl*

Children's rights: From international law to local social pedagogy – developing a child rights outcomes framework to transform the delivery of key children's services in the UK

Naomi Danquah

Child Rights Partners, UNICEF, UNITED KINGDOM

UNICEF UK is developing and testing a child rights outcomes framework (CROF). The CROF is an instrument to enable local policy-makers and practitioners to devise, develop, deliver and monitor public services which are demonstrably child rights-based. The CROF offers guidance by illustrating, through descriptive indicators, the quality of care and provision that each child should experience when using services that are grounded in children's rights. This paper provides a conceptual and methodological overview of the CROF and presents early examples of how it is being used to develop and shape public services with and for children and young people.

The paper begins by briefly establishing the context for developing the CROF in the UK. Article 42 of the UN Convention on the Rights of the Child (CRC) states Governments should ensure that child rights are known and understood by children and adults. Yet, despite being ratified by the UK government over 20 years ago, there is limited public knowledge and understanding of the CRC in the UK, even among professionals working with children and young people. The paper addresses the gap between ratification and practice and argues that children's rights cannot advance in real terms until they are known, understood and practiced by professionals working both in policy and at the front-line of public services. New tools are needed to extend the CRC out of the arena of legislation and into the arena of public service practice.

The paper addresses the conceptual relationship between social science and human rights research and locates the CROF within the body of research concerned with the measurement of child well-being. The conceptual tension between rights and well-being is briefly examined through a literature review and the paper argues that the CRC provides an enduring and objective normative framework in which to ground the shifting and varied concepts of well-being.

The CROF, comprising 7 critical principles and 21 key indicators, is presented. The paper describes how it was developed through workshops with policy makers, children and young people and front-line practitioners from a range of disciplines, including social work. The workshops sought, through an inductive approach, to localise, define and contextualise key international human rights principles. Models of 'ideal' rights-based practice were generated and used in a comparative analysis of existing service provision. Further work was done with the stakeholder groups to identify qualitative indicators (or descriptions) in support of the models. These were then used as the basis of an audit

(mixture of large scale survey and structured interviews) to establish gaps in rights-based practice in 6 municipalities with high levels of deprivation.

The paper then illustrates how the framework is being used to develop and monitor local services by using a substance misuse service in London and a care leaving service in Glasgow as case studies.

The paper concludes by highlighting some of the challenges encountered in developing the framework such as the difficulties in making human rights language accessible to a range of stakeholders and the media hostility to human rights in the UK, and outlines next steps in further developing and testing the CROF.

Naomi Danquah

naomid@unicef.org.uk

Measuring child well-being through an OVC response: The Isibindi model

Nicia de Nobrega

Monitoring and Evaluation, National Association of Child Care Workers, SOUTH AFRICA

The lessons learned from an orphans and vulnerable children (OVC) response for measuring holistic services to children highlight the importance of child indicators that measure change in child well-being. The monitoring and evaluation of indicators that are able to measure whether child well-being has changed from an undesirable to a desirable state are key for the management of social interventions. This has been illustrated through the monitoring of the child well-being indicators for services delivered through the Isibindi model.

The National Association of Child Care Workers (NACCW) has implemented the Isibindi Model answering holistically to children's needs. Community members receive accredited training as child and youth care workers (CYCWs) in their communities enabling poorly-resourced communities to develop local care and prevention services through a multi-sectoral approach. The Isibindi Model requires CYCWs to enrol the children with whom they work, and information at enrolment is completed during the first home visit with the child/family. Subsequently, CYCWs record the 'services' and key information on each child they visit and/or service every month. As a result, five child well-being indicators have been recorded at baseline and monthly to indicate the situation of the child at a given period, and change in well-being is indicated by comparing the well-being at the start and the end of an annual period. The five well-being indicators are as follows:

- Educational status is recorded monthly to show whether the child attended school and progression is converted into a desirable state if the child's current grade is higher than the previous year;
- Health records whether a child is HIV positive and is converted into desirable if (a) the child is HIV-positive but does not need ARVs or (b) the child is on ARVs;
- Nutrition refers to whether the child eats regularly and is converted into desirable if the child is recorded as eating regularly, i.e. three meals a day;
- Social assistance records whether a child received a social grant during the month and converts into desirable if a child support grant, foster care grant or care dependency grant was received;
- Abuse records whether a child protection incident (rape, other sexual abuse, other abuse) has been reported for the child, and is converted into undesirable if any abuse was reported.

In monitoring the five child well-being indicators, sites which implement the Isibindi Model are provided with data on the indicators for further informing service delivery, and annually the well-being indicators are compared to show improvement and areas for development. Specialized services are targeted to areas where change is not apparent. The Isibindi model serves to address the needs of children through an OVC response and its effectiveness is strengthened by ensuring change in child well-being is recorded to suitably inform service delivery.

Nicia de Nobrega
nicia@naccw.org.za

Developing indicators of policy efforts: The monitor on child abuse and neglect

Erik de Wilde and Daphne Kann-Weedage

Monitoring Department, Netherlands Youth Institute, NETHERLANDS

From 2015 on, the 393 municipalities in the Netherlands are responsible for all youth care services and the prevention of child abuse and neglect (CAN) and domestic violence. This large decentralization operation in Dutch youth policy was accompanied by the introduction of a tool to benchmark and benchmark with the relevant indicators of CAN and policy efforts by these municipalities. This tool was developed in co-creation with 21 municipalities and CAN policy experts in the Netherlands.

Since the launch of the monitor in May 2014, at the time of submission of this paper, 190 municipalities had joined the community of users of the monitoring system. They use the tool to gain insight into specific local characteristics of CAN, such as prevalence, reporting of CAN, and specific types of CAN. Furthermore, they rate the status of their own policy as defined by 10 specific predefined goals of CAN prevention of child abuse. These ratings are based on a confidential questionnaire on their policy efforts. Each policy goal was rated in terms of policy durability and assurance, effectiveness of interventions promoted by the policy, and reach (percentage of target group that interventions were targeted on).

Creating a scoring range from 0 (no efforts on this policy target) to 100 (representing a high level of durability and assurance of the policy, using effective methods with a reach of 80% or the target population or higher), the mean score of the 190 Dutch monitoring municipalities is 34 when averaging all 10 policy efforts. The policy with the highest score is training of professionals (score 55), the lowest score delivering education programs to young people (score 18).

The use of this policy score derived from the three sub-indicators provides much more insight into the specific direction for improvement than a mere indicator of "to act upon a specific goal". Furthermore, the interaction between the municipalities appears to increase after communications about general scores and local initiatives on CAN.

Erik de Wilde
e.dewilde@nji.nl

Orphanhood and child well-being in South Africa

Aislinn Delany

Children's Institute, University of Cape Town, SOUTH AFRICA

Orphaning has received significant attention in recent years, particularly in the context of the HIV/AIDS pandemic. In South Africa, orphan numbers have increased over the last decade, with approximately 3.5 million children (or 19% of all children in the country) in 2012 having lost one or both biological parents. This has raised concerns about the impacts that the death of a parent (and, in the context of AIDS, the illness preceding it) may have on the well-being of these children. A key area of policy concern is how to respond to the needs of orphans through state support interventions, such as the foster child grant or social work services. Strategies that target orphans are based on the assumption that orphans are more vulnerable than non-orphans, but it is not clear whether this assumption is supported by empirical evidence. Orphans and non-orphans are often regarded as two distinct groups, but for a large number of children, there are similarities in their care arrangements and living conditions. Many non-orphaned children live with and are cared for by relatives, often in the absence of their biological mothers. Many orphans also live with relatives in "mixed" households, together with non-orphaned children. What then are the specific needs and vulnerabilities of orphaned children relative to other children?

As a first step towards developing an evidence base, this paper reviews the existing literature on the impact of orphaning on children and their well-being, with a particular focus on South Africa. Numerous studies in the region more broadly have examined the impact of orphaning on child outcomes, although much of this work has focused on educational outcomes. The paper aims to draw on existing empirical evidence to obtain a more nuanced understanding of the vulnerabilities of orphans, and to better inform the development of appropriate support interventions.

Aislinn Delany
aislinn.delany@uct.ac.za

The voice of the voiceless: The plight of early childhood children living with hearing impairment in Masvingo

Vesta Dzviti

Early Childhood Development, Reformed Church University, ZIMBABWE

Education for all is a fundamental human right as enshrined in the Universal Declaration of Human rights, and the Convention on the Rights of the Child (1989). As such, inclusivity becomes a channel through which equal educational opportunities are afforded to all children including those with hearing impairment, in Early Childhood Programmes. The purpose of this study was to interrogate the extent to which early childhood development (ECD) children with hearing impairments access education in inclusive care settings, particularly those in public primary schools. In line with global trends regarding people with disabilities, Zimbabwe is also mandated to ensure the inclusion of previously marginalized children in society. Regulatory frameworks such as the statutory instrument 104 of 2004, which called for all primary schools to attach a class of ECD (A) and (B) classes within their schools, were availed in order to bring equity to all early childhood children.

The availability and accessibility of inclusive education facilities for early childhood development children with hearing impairment, was studied in order to establish how administrations of various schools responded to children with hearing impairment. Although many studies on inclusion were carried out in Zimbabwe, most of these target primary school children, and those that have been done on early childhood development may be carried out in other countries whose contexts differ significantly from Zimbabwe's own, thus leaving a fissure which this research explores. By studying accessibility of educational services to ECD children, the paper will infer the present status of inclusive education, particularly in public early childhood programmes. A phenomenological research design was employed in the study. This was employed because it allowed me to interact directly with the respondents and delve into their lived experiences. I used the triangulation data collection method in which indepth interviews and focus group interviews primarily became the major approaches. A purposive sampling approach was used and the sample consisted of 10 schools, 30 parents, 20 children with hearing impairment and 2 officials from the Ministry of Education. Though the study was qualitative, there were pockets of statistical analysis that complemented the qualitative nature of the data. I share the same views with researchers who believe that no study can be purely qualitative or quantitative.

The revelations from the study show that there is a lack of "political will" to implement government directives on inclusive programmes for young children. As a result, about 83% of children with hearing impairment were found to stay at home. This is a clear indication of the insensitivity of society, institutions and individuals

towards children living with hearing impairment. Given the outcome of this study, I therefore recommended that government formulate enforceable regulations that stipulate what schools should implement. There is a need to develop a co-teaching model of collaboration where different stakeholders bring in their expertise in a form of a pool in order to make sure that no child is prejudiced in terms of his or her right to education.

Vesta Dzviti

dzvitiv@rcu.ac.zw

The effects of relatedness, age and orphan status on child discipline

Annie Edwards and Jini Roby

School of Social Work, Brigham Young University, USA

The objective of this research is to study the effect that a child's relationship to the head of the household, age and/or orphan status has on the severity of discipline received by the child in the home. We also looked at the effects of parental education level, parental beliefs in the necessity of physical punishment and parental attitudes regarding domestic violence on these outcomes.

The study draws on the Multiple Indicator Cluster Survey (MISC4), UNICEF, 2010, for Ghana (n=54,453), Iraq (n=239,218), Vietnam (n=45,091), Costa Rica (n=22,558) and Ukraine (n=34,889).

Three latent variables were created to determine discipline severity: mild, medium, and severe. Discipline was considered mild if the adult a) took privileges or a well-liked object from the child, b) explained why the child's behavior was wrong, or c) distracted the child by giving her something else to do. Discipline was considered medium if the adult a) shook the child, b) shouted at the child, or c) spanked the child on the bottom. Finally, discipline was considered severe if the child was a) struck with an object, b) called a degrading name, c) hit or slapped on the face, head or ears, d) hit or slapped on the limbs, or e) beat up or hit repeatedly as hard as possible. Discipline was scored as 0=no discipline, 1=mild discipline, 2=moderate discipline, and 3=severe discipline.

Relatedness was measured by whether the child was the offspring of the head of the household, a relative of the head of household (such as a grandchild, or niece/nephew), or a non-relative. Orphan status was measured as being either a non-orphan or an orphan. UNICEF defines an orphan as a child who has one or both parents deceased. Children in the study ranged in age from 2-14 years old. The authors controlled for caregivers' attitudes towards corporal punishment for children, domestic violence towards women and the education level of both men and women.

In Ukraine ($p<.01$) and Vietnam ($p<.05$), grandchildren were punished more harshly than children of the head of the household. We also found that in Iraq and Vietnam ($p<.05$), orphans are punished more harshly than non-orphans.

Our study found that the most significant predictors of child discipline are: parent's beliefs that children require physical punishment to be brought up correctly ($p<.001$), the child's age ($p<.01$ and $<.001$) and women's attitudes regarding domestic violence ($p<.01$ and $<.001$). Mother's level of education was also a significant predictor of child discipline in Vietnam ($p<.001$), whereas father's education level was significant in Costa Rica ($p<.05$), Vietnam ($p<.05$) and Iraq ($<.001$).

Children in kin-care living arrangements, and some orphans can be at higher risk for severe discipline. This is important information for those involved in child social welfare worldwide. Maltreatment of older children is under-reported and most research in this area is more than 20 years old. Child welfare is significantly improved when parents are educated. This also includes education about corporal punishment for children and domestic violence towards women.

*Annie Edwards
annie.edwards@byu.edu*

Data visualization as a tool for engagement with research

Daniel Ellis and Tim Hobbs

¹ Analytics, Dartington Social Research Unit, UNITED KINGDOM

Data visualization is not a new phenomenon, but it is not widely used in the world of child research and service provision. There is a huge amount of data available to us from across a wide range of disciplines. How we access, use and interact with the data made available is often an afterthought to the publication of it. Taking research data from static reports through to an interactive visualization can broaden your audience as well as helping your existing audience engage with, and understand it, better. Communicating data and research findings well should be as important as conducting good quality analysis and research.

The Dartington Social Research Unit has recently designed and disseminated several data visualizations with the aim of better engaging commissioners and policy makers in the wealth of complex child well-being data collected through our epidemiological work. We took the vast datasets from their raw form through to a set of visually engaging charts, each of which was chosen and designed to better enable the user to answer a specific question of the data through interaction. Previous to our new approach, data had always been presented in a more traditional, static format.

The process for taking a set of data through to an interesting and engaging data visualization is not one that researchers should necessarily shy away from. Different datasets require different types of design to best communicate the key messages trapped within them and there is no catchall template that always works. There is however a relatively simple process that can be used to guide the development of a successful data visualization. This always starts with the data and works up through key messages the data may hold, how best to represent this in graphical form, and finally how to display and present this to the audience who would be using the data in question. There is also a set of basic design and perception principles that should always be considered throughout the visualization process. We would like to share our experience of taking a largely static way of reporting through its recreation as an interactive portal of data visualizations, concluding with the benefits and pitfalls of doing so.

Daniel Ellis
dellis@dartington.org.uk

Early childhood development and family services: Baseline evidence from Rwanda

Solrun Engilbertsdottir¹, Oliver Petrovic² and Gladys Mutavu³

¹ Social Policy and Research, UNICEF, RWANDA

² Office of the Deputy Representative, UNICEF, RWANDA

³ Imbuto Foundation, RWANDA

In the past decade Rwanda has made phenomenal progress in reaching many of the Millennium Development Goals, including reducing under five mortality, maternal mortality and the provision of free primary education. However, in many areas of human development, much remains to be done, and Early Childhood Development (ECD) is one of those areas. For these reasons, the Government of Rwanda and Development Partners have recently placed increased and concerted efforts into ECD programming and policies in Rwanda. However, ECD programming has been restricted by lack of data on the early years of children.

This paper presents the key and pertinent findings of a 2014 Early Childhood Development and Family services (ECD&F) Baseline Evaluation, which provides a critical step towards bridging the ECD data gap and presents for the first time reliable ECD data for Rwanda. Using mixed methods approaches (quantitative and qualitative) and survey tools adapted to the Rwandan context, the survey established current conditions (pre-intervention) of children aged 0-11 months as well as children aged 24-35 months in 10 sites, with half the sample selected to serve as comparison sites within the same districts. Between July and October 2014, a total of 879 households were visited, and 82 qualitative interviews were conducted.

The study results will immediately inform innovative ECD&F policies and programming, as the baseline evaluation presents critical information on a wide range of holistic and integrated ECD indicators (over 100 indicators). The ECD&F baseline study design allows for rigorous follow-up to evaluate the impact of various ECD&F interventions, and in this paper we explore how to establish key benchmark indicators which will inform monitoring and evaluation plans for future ECD&F impact evaluations in Rwanda, to serve as national benchmark indicators for progress, or lack of progress, in the area of ECD. There are key areas of ECD integration which we will focus on in this paper, in particular exploring the link between high rates of stunting in early childhood, hygiene, water and sanitation, as well as household poverty.

Solrun Engilbertsdottir
sengilbertsdottir@unicef.org

Better understand to better serve: A province-wide knowledge mobilization initiative in child protection

Tonino Esposito¹ and Nico Trocmé²

¹ School of Social Work - FAS, Université de Montréal & McGill University, CANADA

² School of Social Work, McGill University, CANADA

Child protection is one of the fastest growing service sectors in Canada, yet we know surprisingly little about the effectiveness of these services. This presentation will discuss a provincial university-agency knowledge partnership aimed to better understand the dynamics of child protection services in Quebec. The presentation will focus on seven longitudinal indicators that track key aspects of child safety, child well-being, permanence, and family and community support for more than 155,000 children served by children protection in the last decade. The indicators are: 1) recurrence of child maltreatment; 2) academic achievement; 3) admission to out-of-home care; 4) moves in out-of-home care; 5) time in out-of-home care; 6) court experiences; and, 7) youth criminal justice services. The presentation will also focus on the first Canadian series of province-wide longitudinal studies identifying age-specific factors associated to when and for whom placement, placement changes, and family reunification are most likely to occur, with special attention given to the socioeconomic vulnerabilities of the population served.

Tonino Esposito

Tonino.esposito@umontreal.ca

A child standpoint on well-being: Part 2. The significance of relationships and adult-child relations to children's experience of agency

Tobia Fattore¹ and Jan Mason²

¹ Department of Sociology, Macquarie University, AUSTRALIA

² School of Social Sciences and Psychology, University of Western Sydney, AUSTRALIA

In this paper we extend the discussion of a child standpoint on well-being by outlining what children told us about emotions and relationships as mediums for and instrumental in their experiences of agency. To provide a context for this discussion, we describe how the use of a child standpoint methodology enabled us to identify the significance of the structural aspects of adult-child relations for children's experiences of well-being. Further, it provides a basis for exploring the ways in which asymmetry functions in adult-child relations that limit the extent to which children have well-being or flourish.

In identifying and developing a child standpoint of agency as important to well-being, we discuss how children's experience of agency is multifaceted. One critical dimension of their experience involves agency as autonomy and freedom to be able to make choices, or agency as self-determination. An extension of agency as self-determination is agency as children's ability to influence, organize, coordinate and control aspects of their everyday life. While agency as self-determination is often prioritized by policy-makers and reflected in the 'Participation Principle', another important dimension of agency is making a difference within relational contexts, where children seek out opportunities to participate in and influence situations that affect their well-being. In these instances we see that agency is an expression of the moral self. Hence, while exercising choice is important for some dimensions of agency, other dimensions of agency are only realized as part of social arrangements.

In discussing these different dimensions of agency, we show that a tension exists between 'in-principle equality' and guidance. This tension can be seen in how children's practice of agency and autonomy in their everyday lives is framed by the macro-level structuring of child-adult relations. We discuss how this macro-level structuring is experienced as vertical asymmetries in adult-child relations, evident in adult control of resources and differentially constructed normative behaviour for adults and children. Finally, we will extend our discussion in the first paper on the significance of employing a child standpoint on well-being, by discussing indicators of children's agency developed from a child standpoint.

Tobia Fattore

tobia.fattore@mq.edu.au

Social workers' views on pre-trial therapy in cases of child sexual abuse in South Africa

Ansie Fouché¹ and Liana le Roux²

¹ Social Work, North-West University, SOUTH AFRICA

² Social Work and Criminology, University of Pretoria, SOUTH AFRICA

Due to the statutory obligation laid on all citizens in South Africa to report child sexual abuse (CSA) to the authorities, children are increasingly called to testify in criminal proceedings. Legal processes can be lengthy and it may take up to two years before a child's testifies in court, while the investigative and trial processes can cause significant emotional distress for the child victim.

This study forms part of a bigger study that sought to explore anecdotal reports that South African parents, social workers and other helping professionals are often advised to postpone therapy with victims of CSA until after the child's testimony, based on concerns of legal professionals that therapeutic interventions could influence the child's testimony. In a preliminary qualitative study with a small sample of 15 legal professionals, the authors found that rendering pre-trial therapy to child victims of CSA is indeed a contentious issue, as these professionals were concerned that the therapeutic process might influence a child's memory and lead to inconsistencies in his or her statement or to fabrications, whether deliberate or inadvertent. A concern was raised that this may ultimately cause a conflict between the best interests of the child and the accused's right to a fair trial.

This conflict, and consequential decisions in terms of the provision of pre-trial therapy to victims of child sexual abuse, have direct implications for social work practice and other helping professional and could influence professionals' decisions on whether and/or how to provide pre-trial therapy to victims of CSA.

The focus of this study is thus not on whether or not children should testify in court, but rather how best to assist the child victim of sexual abuse during the investigative and legal processes. Therefore we investigated the phenomenon of pre-trial therapy to victims of CSA from the viewpoint of social workers.

Applying purposive sampling and a collective case study research design, individual and focus group interviews were conducted with social workers who provide counselling services to victims of CSA in Gauteng province. The participants were employed in government and non-government organisations as well in private practice. Interviews were audio-recorded, transcribed and analysed by both researchers. Emerging themes that depict the views of the social workers on the role of pre-trial therapy, current practices in this regard, as well as their recommendations in terms of pre-trial therapy for victims of CSA, will be presented. Limitations and future research will be discussed.

Ansie Fouché

Ansie.Fouche@nwu.ac.za

An overview of child sexual abuse prevention and risks in South Africa: A child's point of view

Ansie Fouché, Elmien Truter and Yolinda Steyn

Social Work, North-West University, SOUTH AFRICA

This study sought to explore the views of children in high-risk circumstances regarding risks and prevention factors associated with child sexual abuse (CSA) in South Africa. Understanding their views of CSA risks and prevention factors might inform the development of effective CSA prevention programmes and social work practice.

Social workers are mandated by the Children's Act (38/2005) to develop the capacity of members in high-risk populations, and to involve them in seeking solutions to their social problems. One such problem is CSA. The presence of unemployment, poverty, and substance abuse in families and communities place some children at high risk for exposure to CSA. Members of these high-risk families are often unskilled at preventing CSA. Literature on evidence-based prevention programmes in South Africa and on programmes informed by the views of high-risk populations, on possible solutions to this problem, is scarce.

Despite impressive legislation, policy frameworks, and prevention initiatives, CSA is escalating in South Africa. An erroneously perception that children are the primary changing agents, i.e. children must protect themselves, exist amongst most South Africans. As such, most formal CSA prevention programmes are school-based. Little has been documented in literature on what the "primary changing agents" (children) know about CSA prevention and risks or those specifically residing in high-risk circumstances. Evidently, exploring the knowledge and views of all children, and specifically those living in high-risk circumstances, about CSA prevention and risks, is long overdue.

Due to the nature and scope of their work, social workers, and student social workers (SSWs) are in regular contact with high-risk families and are thus ideally suited to explore the views of these children in respect of CSA risk and prevention factors. Twenty-one fourth year North-West University SSWs, placed at various welfare organisations in the Vaal Triangle region, to do professional block practicum (PBP), were trained by the authors, as field workers to conduct semi-structured interviews with children. The field questions were developed by the authors, and pilot tested by SSWs. Purposive sampling was applied and inclusion criteria included: participants had to be aged between 13 and 18 years; willing to assent to participate; be registered as clients with welfare organisation; have parents or care givers willing to consent to their participation.

A total of 105 interviews were conducted with participants from different cultures and age groups and experiencing diverse social problems. All SSWs asked participants the same questions.

Interviews were audiotaped and transcribed by the SSWs. The transcripts were checked for accuracy after which thematic content analysis was employed. The data was independently coded by the authors, and after consensus discussions themes and sub-themes emerged pertaining to the participants' understanding and views of: what CSA is; identity of potential perpetrators; potential risky situations; where they learned about CSA prevention; proposed prevention strategies to children, parents, the community, and the South African government. Limitations and future research will be discussed.

*Ansie Fouché
Ansie.Fouche@nwu.ac.za*

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Developing indicators for youth well-being at the local level

Emily Frame, Ariane De Lannoy and Murray Leibbrandt

Poverty and Inequality Initiative/SALDRU, University of Cape Town, SOUTH AFRICA

Young people living in the Western Cape face multiple challenges and many live in particularly dire situations. Currently, however, very little is understood about these challenges and situations, the ways in which they change over time and the ways in which they vary from one local area to another. This paper outlines the process used to develop a set of local-level indicators of youth well-being, designed to contribute new knowledge and insight about how young people in the Western Cape are experiencing life and to offer a tool for assessing their progress over time.

The paper is part of a broader Project currently being carried out by UCT's Poverty and Inequality Initiative, in partnership with the Western Cape Provincial Government and the City of Cape Town. The Project was conceived around three guiding principles. Firstly, given the spatial patterns of advantage and disadvantage in South Africa, as well as the tendency of poor outcomes in youth to be partly a function of the environments they live in and are exposed to, it was important that the indicators were reported at the small area level, rather than providing municipality or provincial averages. This would allow for the identification of local geographical areas where the well-being of young people was either being compromised or promoted. Second, the aim was to use the indicators to track progress and determine whether the well-being of young people was improving or deteriorating over time. Thus, the indicators were selected based on the criterion that they could be populated with data that was collected either annually or biennially. Third, the intention was, as far as possible, to provide a balanced assessment of youth well-being, highlighting young people's strengths and opportunities as well as their deficits and related risk factors. Given these specifications, and the limitations associated with publicly available survey data, it was necessary to make use of administrative data from relevant government departments.

This paper documents the considerations outlined above as well as the approach followed in developing these indicators of youth well-being. More specifically it describes the process of a) reviewing existing literature on youth well-being and existing sets of indicators, b) compiling a preliminary list of indicators in line with key policy documents⁴, c) consulting with experts and key stakeholders, d) scoping existing data sets and e) refining the indicator list based on feedback and data availability. A discussion of the lessons learnt and conceptual framework adopted is also included.

*Emily Frame
Emily.Frame@uct.ac.za*

Tracking the educational gender revolution: The interplay of class, peers and historical period

Ivar Frønes

Sociology and human geography, University of Oslo, NORWAY

Within about two decades – from the middle seventies to the middle nineties – the educational level of young women passed the level of young men in Norway and a lot of other countries. The perspective of the paper is to identify the driving forces and mechanisms of this process. Data is based on Norwegian population registers, covering all people born 1946 to 2009. The paper seeks to identify both the patterns of educational expansion, and the possible mechanisms behind the gendered educational revolution.

The general patterns of educational changes are identified through the educational levels of various birth cohorts. The analyses include twins of various cohorts; both of same and mixed gender, making it possible to study the effect of same versus mixed gender and to compare male and female twins. The effect of changing social environments is analysed through a sample of cohorts of children within families. Such a sample is achieved through identifying mothers with children with at least ten years between the oldest and youngest child.

The paper concludes that the usual suspects in sociology, parental level of cultural and economic capital, cannot explain the rapid changes in educational gender patterns. Girls born in the seventies and sixties are more involved in the educational expansion than girls born in the fifties; among the cohorts born from 1975-1980, the youngest daughters have a higher percentage achieving a high educational level than their first born sisters, illustrating the strength of the period effect. Girls of highly educated families seems to be in the forefront of the gender educational revolution, and girls with a girl twin are more likely to achieve the highest level of education than girls growing up with a twin boy.

Ivar Frønes

ivar.frones@sosgeo.uio.no

Developing indicators of child well-being for policy influencing

Maricar Garde¹ and Sarah Meyer²

¹ Social Policy, UNICEF, UGANDA

² AfriChild Centre, UGANDA

These two papers aim to 1) outline the process of developing indicators of child well-being from both a research and policy perspective including developing national ownership, and 2) demonstrate how these indicators can be used for influencing policy and programming in Uganda. They will focus on recent experience of UNICEF Uganda and an on-going study by the AfriChild Centre.

UNICEF Uganda will present the process of developing the "Child Poverty and Deprivation" report (CPR) and how the findings influenced high level policy making. This report was conceptualised by the Ministry of Gender, Labour and Social Development and UNICEF, and implemented by the Poverty and Economic Policy Network, the Economic Policy Research Centre in Uganda and the Overseas Development Institute in the UK. The process included rigorous research work and building ownership at the national level. The presentation will then outline how the CPR has influenced national development policy in Uganda. The CPR has ignited discussions on poverty and deprivation and has become the "go to" report on children not just within government and civil society, but within the donor community and private sector as well. It has formed the backbone of UNICEF Uganda's policy advocacy around the drafting of the second National Development Plan (NDP II). Building on its findings, UNICEF Uganda together with partners submitted a paper identifying key issues affecting children to the National Planning Authority. This has influenced the content of the NDP II with regards to health, education and social protection. Furthermore, due to the advocacy around the CPR, human capital was identified as one of the pillars of the NDP II and UNICEF was identified to lead this work on behalf of the UN in Uganda. The presentation will look at what has worked well in this case, and some valuable lessons for researchers aiming to influence policy making.

The AfriChild Centre will present on the process of developing multi-faceted child indicators for the purposes of a planned longitudinal study. The planned study tracks risk and resilience factors across two number of cohorts of children (infants and young children; young adolescents) in Uganda, and further explores cost effectiveness and sustainability of interventions to support children in pathways out of adversity. The planning phase of measure development for the study has included review of indicators of nutrition, health status, cognitive development, parent-child relationship, psychosocial well-being, and exposure to adverse childhood events, with consideration of adaptation of measures for the cultural context. The study will focus on selection, adaptation and piloting procedures for measures designed to capture multiple dimensions of child well-being at different ages. The presentation will then outline ways on how the findings from these longitudinal study can be used for influencing policy and programming.

Maricar Garde

mgarde@unicef.org

Exploring the strengths and difficulties questionnaire as a tool to assess mental distress in Namibia: A mixed method approach

Shelene Gentz¹ and Mónica Ruiz-Casares²

¹ Dept of Personality, Evaluation and Clinical Psychology, Complutense University of Madrid, SPAIN

² Dept of Psychiatry/Division of Social and Transcultural Psychiatry, McGill University/ CIUSSS du Centre-Ouest de l'île de Montréal, CANADA

Despite the fact that various risk factors for mental distress have been reported, data on mental health in children and adolescents in Namibia is limited. Risk factors include the consequences of HIV and AIDS, violence and poverty. Context-appropriate tools to assess mental health and well-being are important, for both clinical reasons, such as identifying at risk youth, and research reasons, such as evaluating the effectiveness of interventions. The way mental health symptoms are experienced and talked about are influenced by socio-cultural contexts and, as such, tools developed in one context should not be applied without considering their relevance to the local context. However, developing instruments from scratch for each specific context is expensive and time consuming and limits comparisons with studies from other settings. The current study describes a mixed-method procedure for determining the appropriateness of a well-established mental health instrument, the Strengths and Difficulties Questionnaire (SDQ), to assess symptoms of distress in adolescents in Namibia.

Local perceptions of mental distress were examined in focus groups with 34 adolescents and interviews with key informants. This resulted in qualitative data on frequently occurring symptoms which could then be compared to established instruments. The SDQ was selected as a well-established and cost-effective tool for a resource poor setting. As the psychometric properties of the SDQ had never been explored in Namibia, it was administered to 236 participants between the ages of 12 and 18 in a quantitative phase. In addition, cognitive interviewing with youth identified problematic and ambiguous items. Based on the quantitative findings, group discussions with adolescents helped identify semantic or cultural limitations in test items. Through this process a list of qualifiers were developed to clarify problematic items. The instrument was subsequently administered in a study with 258 participants and the psychometric properties were re-evaluated.

Symptoms generated by free listing exercises confirmed the recognition of both internalising and externalising symptom categories, although a few additional symptoms were also mentioned. In the pilot administration, the reliability of the total problems scale was adequate ($\alpha = 0.7$), although the subscales require further development. The introduction of standardised explanations and visual aids improved the ease of the administration format. Hence, the second administration

showed improvements in the psychometric properties of the self-report version of the SDQ. The SDQ is a promising tool to assess mental health problems in Namibian adolescents. However, particular limitations to its administration are discussed and suggestions for improvements. These include a larger validation study and the exploration of translation into local languages. A combination of quantitative and qualitative methods is recommended for the adaptation of mental health measures to different populations and cultural contexts.

Shelene Gentz

shelenegentz@yahoo.co.uk

Unpacking quality in child protection and education: Innovative frameworks to inform policy and practice

Meri Ghorkhmazyan¹ and Nitika Tolani-Brown²

¹ Child Protection Initiative, Save the Children, ARMENIA

² Education Global Initiative, Save the Children, CAMBODIA

Whether it is possible to measure and promote evidence-based approaches to improve programme quality is an on-going debate in various sectors, especially where measuring change has traditionally been challenging. This includes measuring the extent to which educational learning environments are "of quality" and directly or indirectly result in better learning outcomes, as well as measuring the extent to which child protection services are of quality and contribute towards improved child protection outcomes. While measuring the learning outcomes with which children emerge from early learning or primary learning opportunities is critical, understanding how and why children are (or are not) learning is also important. Similarly, measuring the quality of child protection services can help identify the contributors, as well as the risks, which might prevent the full achievement of child protection outcomes: this is important, particularly for designing our prevention deliverables.

Since 2011, Save the Children has rolled out two approaches to measuring, monitoring and improving quality in child protection and education programmes - the Quality of Learning Environment (QLE) and Quality of Child Protection Services (QoS). Both QLE and QoS are composed of a set of principles/standards; achievement of each of these principles/standards is measured through 5-15 items. The scoring of the items within each standard/principle is informed by quantitative and qualitative evidence collected through a thorough assessment of the child protection service provider or the school/ECCD center, as well as a review of existing procedures, policies and assessing the technical strength of the practice. In-depth and structured qualitative consultations with key stakeholders such as learners, parents, school or child protection service provider staff, are also conducted. These data are triangulated to provide a holistic picture of the learning site and final scores on each item.

Due to the comprehensive scope of QLE and QoS, these frameworks have quickly evolved into approaches and mechanisms for monitoring and improving programme quality in both education and child protection. These approaches have proven to be useful for our country offices, implementing partners, national Ministries, and donors who are eager to find solutions to the challenges of defining and ensuring quality for their own programmes.

To date, technical systems underpinning QLE and QoS have focused on the development context, although successful pilots (e.g. South Sudan, Iraq, Syria) to apply these systems in humanitarian contexts are underway.

In 2013, CPI presented the QoS approach at the International Society for Child Indicators conference in Korea focusing on child well-being indicators, and was received as an innovative solution and a good bridge between the interests of academia and practitioners. The purpose of this 2015 presentation will be to consolidate learning from 3 years of testing and refining innovative frameworks to measure the quality of Save the Children's child protection and education programs, reflecting on techniques to enhance reliability and validity of data collection methods and to ensure rigor in data analyses. Country case studies reflecting successes and challenges in the use of these data to inform both policy and practice will also be provided.

Nitika Tolani-Brown

Nitika.Tolani-Brown@savethechildren.org

Building an international database of child policy

Robert Goerge¹ and Dominic Richardson²

¹ Chapin Hall at the University of Chicago, USA

² UNICEF Office of Research-Innocenti, ITALY

A major challenge for international monitoring of child well-being is compiling data on the policies and practices of countries and sub-country units in domains of child well-being. Typically, this is a very labor-intensive activity, which requires officials from countries completing surveys or researchers searching for documents or websites which contain the policies.

We will discuss the possibility of using text-mining and natural language processing to enhance the collection of policies and practices in education. Text-mining involves accessing unstructured text from online or other sources and using computer programming to access data about specific policy data. This requires identifying word, patterns of words, a dictionary of terms and synonyms. Also, obviously, it requires ultimately doing this work in languages other than English, although much of this information across the world is available online in English. Once the program is written for a particular country, it can be modified and re-run in minutes to obtain updated data.

This type of data would be used to complement analyses of child investment studies, to understand how structural policy information and government, either independently or through interactions with spending amounts, contributed to child well-being outcomes across countries. For example, if one desired to collect information on policies concerning when children should be enrolled in school, one would search for terms synonymous with enrolment and search for terms that specified ages of enrolment and the actual law and practice for child participation in school.

This session will describe the basic ideas of text-mining and how one would approach this task. It will also provide some preliminary examples of how this is done and how structured data on child policies can be more easily collected from existing sources.

Robert Goerge
rgoerge@chapinhall.org

Mothering, children's well-being and education: A qualitative study of Russian, Palestinian, and Jewish middle-class mothers in Israel

Deborah Golden¹, Lauren Erdreich² and Sveta Roberman³

¹ Faculty of Education, University of Haifa, ISRAEL

² Levinsky College of Education, ISRAEL

³ Gordon College of Education, ISRAEL

An anthropologically informed approach to children's well-being suggests that children's well-being is defined, understood and experienced in culturally-embedded ways. In this approach, culturally-embedded notions of well-being are made meaningful for children within community and family settings. Parents' notions of children's well-being are vital – not only in ongoing, everyday endeavours to ensure their children's well-being as envisaged by parents, but also in conveying to children what well-being is and should feel like. Anchored in these assumptions, this paper, based on a qualitative study of middle class mothers from three Israeli social-cultural groups – Russian immigrants, Palestinian Israelis and native-born Jews – looks at the interplay of class and culture in shaping mothers' perceptions of their children's well-being, particularly as this relates to education. The focus on education reflects the increasingly crucial role of education in defining social location and potential social mobility. This far-reaching importance means that women's engagement in their children's education may be particularly instructive in revealing socially and culturally shaped notions of children's well-being. The three groups in our study participate today in the Israeli middle class, albeit with different relationships to social institutions and differential access to educational goods and services. We present an account of the ways in which three mothers – one from each group – sought to provide their children with what they considered to be a proper education. The paper shows that the three women shared certain ideas about children's well-being and the role of education in ensuring this; yet these were also differentially shaped by their structural positioning in Israeli society, their endeavors to secure participation in the middle class, and distinct cultural models pertaining to mothering, children's well-being and education. Our findings also show how the women's modes of engagement in their children's education so as to ensure their well-being in the future were distinctively juxtaposed with ideas of what consists of children's well-being in the present.

Deborah Golden
deborahg@edu.haifa.ac.il

The development and epidemiology of a positive mental health indicator for Australian children

Sharon Goldfeld^{1,2,3}, Amanda Kvalsvig^{1,4}, Meredith O'Connor^{1,2,3}, Gerry Redmond⁵, Emily Incledon² and Fiona Mensah^{1,2,3}

¹ Murdoch Children's Research Institute, AUSTRALIA

² Royal Children's Hospital, Melbourne, AUSTRALIA

³ University of Melbourne, AUSTRALIA

⁴ University of Otago, NEW ZEALAND

⁵ Flinders University, AUSTRALIA

Child mental health promotion has predominantly been described in terms of preventing or reducing problems; yet we know that positive mental health is not simply the absence of disorder. Failing to understand and report healthy psychosocial functioning significantly limits opportunities for mental health promotion and intervention. Positive mental health as an indicator of childhood well-being is not well understood. We aimed to address this evidence gap by developing and reporting the epidemiology of a population-based indicator of positive child mental health.

Concepts of positive mental health are largely absent from public health thinking; thus, the first requirement of this investigation was to develop a suitable conceptual model of positive child mental health, drawing on individual expertise and the public health, psychology and social science literature. We examined constructs such as competence and concepts of 'the good life' and 'the good society' to develop robust criteria for population-level measurement of positive child mental health. A novel indicator, mental health competence, was derived from positive constructs in the Australian Early Development Index (AEDI), a three-yearly national census of child development at school entry. Using linked data from the AEDI and the Longitudinal Study of Australian Children (LSAC), the measure was validated against the Strength and Difficulties Questionnaire. We then investigated the predictors and epidemiology of this outcome, and compared the findings with previously published competence research. Individual- and family-level correlates were consistent with the psychology literature. In logistic regression models, maternal education and mental health emerged as strong predictors of child mental health competence and may also protect against the adverse effect of family hardship.

We then used logistic regression models to compare children with mental health competence scores in the top quintile to the standard population across individual and community characteristics. Average age at AEDI assessment was five years seven months (n=249,663). Lower odds of mental health competence were observed for boys (Adjusted odds ratio aOR 0.49; 99% confidence interval 0.47-0.50) and Indigenous children with poor oral communication skills (aOR 0.02; 0.01-0.05). Higher odds of mental health competence were observed for children from more advantaged areas (aOR 1.57; 1.51-1.63), children who had attended preschool (aOR 1.38; 1.30-1.46),

and children demonstrating more effective oral communication skills in the classroom (aOR 15.77; 13.36-18.62).

This is the first set of studies to measure and report child mental health competence across a full national cohort. We now have an indicator of positive child mental health that can be applied at the population level to report on early childhood inequalities or to monitor child health promotion efforts. Mental health competence is unequally distributed across the Australian child population and is strongly predicted by measures and correlates of disadvantage. Effective oral communication and attendance at preschool are potentially modifiable factors that may support mental health competence in new school entrants.

Sharon Goldfeld
sharon.goldfeld@rch.org.au

Is subjective well-being related to blood pressure in children? A preliminary analysis

Sharon Goldfeld^{1, 2, 3}, Vanessa Maurici⁴ and Gerry Redmond⁴

¹ Murdoch Children's Research Institute, AUSTRALIA

² Royal Children's Hospital, AUSTRALIA

³ University of Melbourne, AUSTRALIA

⁴ Flinders University, AUSTRALIA

Blood pressure is linked with a number of cardiovascular and neurological morbidities in adults, and recent studies indicate it is also associated with mental health. For example, high blood pressure shows associations with anxiety, while low blood pressure shows associations with depression. It seems that in many cases, anxiety or depression precedes a change in blood pressure, suggesting that some mental illnesses may have physiological effects. The purpose of this study is to extend knowledge of the impact of subjective well-being and mental health on physical health in two directions; first, by exploring whether measures of subjective well-being and mental health have independent associations with measures of blood pressure, and second, by extending the question to children. With this study, we therefore raise the question of whether poor subjective well-being in children, which is not always recognised as an issue deserving of policy attention, may be associated with negative physiological outcomes – an issue that is very much on the policy agenda. In this study we carry out an exploratory examination of the potential relationship between blood pressure, mental health and subjective well-being. Research that directly links measures of subjective well-being to physical health has the potential to raise the profile of subjective well-being as an issue that policymakers need to take seriously. To examine this question we will present data from Wave 5 of the nationally representative Longitudinal Study of Australian Children (LSAC, also known as Growing Up in Australia; N=4,000) that have been followed from age 4 years (K cohort); including data on blood pressure measurements for 12 year olds.

Our study is exploratory in two senses: first in the sense that this type of study has not, to our knowledge, been done before, in any context; and second, as a precursor to a more detailed study that will soon be possible in Australia through the initiation of the CheckPoint Study. The Child Health CheckPoint is a one-off addition to the LSAC. Followed since infancy, the 4,000 LSAC 11-12 year olds have additional survey, developmental and biometric assessments to complement their existing rich data. Initial data collection has commenced. Relevant to this discussion is the inclusion of 2 questions of subjective well-being from the International Survey of Children's Well-Being and a series of biometric measures including blood pressure.

Our analyses will show how blood pressure correlates with a number of measures of mental health and well-being. Through analysis of LSAC data we highlight the importance of linking measures of subjective well-being to biometric measures of physical health as a new focus for child-centred research.

Sharon Goldfeld

sharon.goldfeld@rch.org.au

Measuring the well-being of Australian students during the middle years

Tess Gregory and Sally Brinkman

Telethon Kids Institute, AUSTRALIA

Within the school system in Australia there has been a significant focus on the formal aspects of literacy and numeracy. National standardised tests of literacy and numeracy (NAPLAN) are completed by all children in Grade 3, 5, 7 and 9, and results are publicly reported online. In recent years, the focus has started to broaden to acknowledge the role that schools play in promoting the social and emotional well-being of their students. For example, the Melbourne Declaration of Educational Goals for Young Australians states that all young Australians should become confident and creative individuals, and focuses on psychological constructs such as self-worth, self-awareness, optimism, resilience, empathy, respect for others and healthy relationships. While NAPLAN provides a national measure of the literacy and numeracy skills of Australian students, there is currently no systematic data collection measuring the social and emotional well-being of Australian students with which these goals could be evaluated against.

In this paper, we describe an on-going project to collect well-being data from Australian school children. The project was conducted through collaboration between academic researchers and policy makers within state governments. In late 2013, the Middle Years Development Instrument (MDI) – a self-report questionnaire – was completed by over 5,000 students in Year 6 across 170 South Australian schools. Summary information was provided back to the schools in the form of school reports, and back to senior executives in the Department for Education and Child Development in the form of various state based reports. In October to November 2014, the MDI data collection was expanded to explore well-being for children across a wider age range. In 2014, 17,620 students took part in the collection with 4,000 to 5,000 in each of Years 6, 7, 8 and 9 across 189 South Australian schools.

We describe the key challenges and achievements over the past three years in establishing an indicator of the well-being of Australian children, and focus on the lessons that have been learned that might be helpful to researchers and policy makers undertaking similar projects.

Tess Gregory

tess.gregory@telethonkids.org.au

Inequality in child development between Australia's Aboriginal and Torres Strait Islander children and non-indigenous children: Using the Australian Early Development Census to monitor progress toward the Close the Gap campaign

Tess Gregory, Sally Brinkman and Angela Kinnell

Telethon Kids Institute, AUSTRALIA

In Australia, a national census of child development is undertaken by the federal government once every three years at a cost of about \$20 million. The census – referred to as the Australian Early Development Census (AEDC) – provides communities, states and federal governments with a snapshot of the child development status of their children during the first year of full time schooling. During the census years, teachers complete the Australian adaptation of the Early Development Instrument (EDI) for all children within their class. The EDI contains about 100 items that measure child development across five developmental domains – Physical Health and Well-being, Social Competence, Emotional Maturity, Language and Cognitive Skills, and Communication and General Knowledge. During the first census in 2009, data were collected on 261,147 children and in the second census in 2012 data were collected on 289,973 children. The third census will be conducted in 2015.

Given that the census provides data for all children across Australia, it provides an extremely valuable data source for policy makers to monitor progress towards early childhood targets and goals. In this paper, we use the AEDC to help monitor progress on a key Indigenous health campaign within Australia. The 'Close the Gap' campaign called on federal, state and territory governments within Australia to commit to halve the gap in literacy, numeracy and employment outcomes between Indigenous and non-Indigenous children within a decade. Many of these outcomes have the roots in early childhood, and as such, we explore the 'gap' in child development outcomes between Indigenous and non-Indigenous children using the AEDC data as an early indicator of progress towards the closing the gap targets.

In 2009, there was a 24.9 percentage point difference between the proportion of Indigenous (47.3%) and non-Indigenous (22.4%) children who were developmentally vulnerable on one or more domains of the AEDC. Between 2009 and 2012, there was a reduction in developmental vulnerability for both Indigenous (47.3% to 43.2%) and non-Indigenous children (22.4% to 20.9%), and the 'gap' reduced from 24.9 percentage point to 22.3 percentage points over the three year period. The greatest reduction in developmental vulnerability was for Indigenous children in the most disadvantaged areas of Australia. These findings are encouraging, showing that the gap between Indigenous and non-Indigenous children is closing, particularly for the most disadvantaged children, and these improvements are likely to have flow on effects to literacy, numeracy and employment outcomes. Nonetheless, significant work remains before the goals of the Closing the Gap campaign can be realised.

Tess Gregory

tess.gregory@telethonkids.org.au

Maternal iron and vitamin A supplementation and nutritional status of children: Evidence from the Zimbabwe Demographic and Health Survey

Stanley Gwavuya¹, Conrad Murendo², Naomi Wekwete³, Felicia Takavarasha¹ and Nyasha Madzingira⁴

¹Social Policy, UNICEF, MALAWI

²Global Food Research Training Group, Georg-August University of Göttingen, GERMANY

³Centre for Population Studies, University of Zimbabwe, ZIMBABWE

⁴Enhanced Development Initiatives, ZIMBABWE

Child stunting is a public health problem in developing countries. The World Health Organization advises that pregnant women in developing countries should take iron supplements, and lactating mothers should take Vitamin A supplements to improve children's growth. Despite the implementation of these interventions, there is little empirical evidence on how antenatal and postnatal maternal micronutrient supplements influence child growth in developing countries.

To close this research gap this study explores the role of maternal Vitamin A and iron supplements on the nutritional status and growth of 2,007 children under the age of 3 years in Zimbabwe using data from the Zimbabwe Demographic and Health Survey 2010-11. The survey used a stratified, two-stage cluster design. Logistic regression analysis was used to identify determinants of child nutritional status, defined as height-for-age (stunting). Forty percent of the mothers received postpartum Vitamin A supplements, while 53% received iron supplements during pregnancy.

Results from logistic regression show that maternal iron supplements reduced child stunting ($aOR = 0.73$; 95% CI = (0.58, 0.91); $p = 0.006$). However, Vitamin A supplementation did not have an effect on child stunting ($aOR = 1.09$; 95% CI = (0.86, 1.37); $p = 0.474$). Evidence from this study can inform nutrition intervention programmes targeted at reducing early childhood malnutrition. In particular, strategies to improve children's nutritional status and growth should include interventions to improve nutrition of pregnant and lactating women.

Stanley Gwavuya

sgwavuya@gmail.com

Paper and pencil versus web – does the format affect the psychometric properties of a questionnaire measuring adolescent health?

Curt Hagquist¹ and Michael Hansen²

¹ Centre for Research on Child and Adolescent Mental Health, Karlstad University, SWEDEN

² Department of Education and Special Education, University of Gothenburg, SWEDEN

Web-based questionnaires are increasingly being used to collect survey data also among adolescents. If, and to what extent, the choice of format for the data collection affects the responses from the participants is still not definitively answered. The purpose of the present study is to psychometrically examine the concordance between responses from a web-based questionnaire and a paper and pencil questionnaire.

Data were collected during the first half of 2014 by Statistics Sweden among students in grade 9 (15-16 years old). A questionnaire about school and living conditions was sent by regular post to a nationwide sample of individuals participating in a longitudinal cohort study run by the University of Gothenburg. The participants could choose whether to complete the questionnaire with a paper and pen version or a web version. 3904 students (86 %) preferred the former version and 615 students (14 %) the latter one.

For the purpose of this study eight items from The PsychoSomatic Problems (PSP)-scale were subjected to a psychometric analysis: "had difficulty in concentrating", "had difficulty in sleeping", "suffered from headaches", "suffered from stomach aches", "felt tense", "had little appetite", "felt sad" and "felt giddy". The response categories for all of these items, which are in the form of questions, are "never", "seldom", "sometimes", "often" and "always". The recall period concerned the last six months.

The main focus of the analysis was on Differential Item Functioning (DIF), i.e. if the PSP-items worked in the same way for students completing a web-questionnaire and a paper and pencil questionnaire respectively. The unidimensional Rasch model was used to analyse the entire data set as well as for separate analyses of the responses from the web questionnaire and the paper and pencil questionnaire.

There is no DIF with respect to choice of format. Given the same location on the latent variable the expected value for each item is the same for students completing a web-questionnaire as for students completing a paper and pencil questionnaire. The reliability measured by a person separation is good (> 0.85) for the entire sample as well as for each of the format sub groups. Also, in these analyses there are no reversed latent thresholds, indicating that the categorization of the items works as intended. In the analyses of the entire data set and in both subsets the item "felt sad"

shows gender DIF implying that given the same location on the latent trait girls score higher frequency of complaints than boys.

The psychometric properties of the PSP-scale don't seem to be affected by the choice of format for completing the questionnaire. Regardless of format attention needs to be paid to the item "felt sad". Resolving this DIF-item by splitting it into two gender-specific items is an option to consider in further analyses.

Curt Hagquist
curt.hagquist@kau.se

Maternal and child migration in post-apartheid South Africa: An exploration of spatial mobility and changing household form

Katharine Hall

Children's Institute, University of Cape Town, SOUTH AFRICA

Children are affected by adult migration, whether or not they themselves move. Yet, other than work focused specifically on orphaning in the context of HIV, relatively little attention has been paid to patterns of child mobility and changing household contexts, and the ways in which these relate to patterns of adult migration.

Much of the internal migration in South Africa is underpinned by historic and enforced fragmentation of families during apartheid, where dual housing arrangements allowed for circular movement between urban and rural homes. The term "oscillating migration" was used to describe mobility between urban and rural areas. Rather than being viewed as physically bounded and static units, households were viewed as straddling these nodes, both of which may include resident and non-resident members. Contrary to expectations, there was no large increase in permanent urban migration when the apartheid-era controls on population movement were removed. Instead, internal labour migration has remained an important livelihood strategy for many households, and extended and dual household forms have persisted.

The realities of family form and parenting in South Africa are that parents, and fathers in particular, are frequently absent from children's lives. Similarly, a large number of mothers have children who are not co-resident with them. A key reason for this is female labour migration, where children are left at (or sent to) the home of origin. The mother-child relationship is of specific interest because, while primary care-givers of children in South Africa are predominantly women, internal labour migration rates amongst prime-age women have increased in recent years.

Drawing on the author's analysis of the National Income Dynamics panel study, this paper will present an analysis of internal migration patterns and care arrangements that arise from these choices, and describe the relationships between patterns of maternal and child mobility. From a policy perspective, there is a need for an expanded and rigorous evidence base on patterns, predictors and outcomes of child mobility. The research aims to contribute to the literature on household form and the family, at a time when a new green paper on human settlements is being drafted in response to the National Development Plan, and a national family policy is being developed. The analysis yields new evidence on patterns of child mobility and living conditions in relation to adult labour migration.

Katharine Hall

Kath.Hall@uct.ac.za

Having faith in girls: The educational gender gap among Christians, Hindus, and Muslims in 71 low and middle-income countries and Indian states

Björn Halleröd¹, Hans Ekbrand¹ and Shailesh Nandy²

¹ Dept of Sociology and Work Science, University of Gothenburg, SWEDEN

² School for Policy Studies, University of Bristol, UNITED KINGDOM

We investigate whether familial religious affiliation is systematically related to the educational chances of boys and girls. We focus on three of the world's great religions: Christianity, Hinduism and Islam, and use two main outcome measures: i) the relative risk of girls and boys being deprived of any form of formal education and, ii) when and if children actually start school, do girls and boys stay in school for equal durations?

We use household survey microdata harmonized within the Townsend Global Micro Database (TGMD), covering 71 countries and Indian states. Our results show large similarities between Christian and Muslim households. Comparing education deprivation between Christian girls and boys in 38 countries, we find that girls are discriminated against in 19 countries, and in the remaining 19 countries, it is boys who are discriminated against. The picture is much the same in the 34 countries with sizable Muslim populations, and although Muslim girls were discriminated against in a majority of countries, Muslim boys suffered from a higher deprivation risk in 15 of the 34 countries. In countries with both Muslim and Christian populations, small intra-country differences were found. In a majority of both Christian and Muslim populations it was boys, not girls, who spent fewer years in school. As such, our findings do not provide evidence of any systematic differences between Christian and Muslims population or the notion that either of the two religions is particularly discriminatory against girls.

The situation is very different among Hindu households. In a majority of Hindu populations, it is girls who are discriminated against, both with regards education deprivation and when it comes to years of education lost. Also when comparing Hindus with Muslims or Christians within the same country or state, Hindus generally, but not always, appear to discriminate more against girls. Our main conclusion is that differences between countries and the cultural setting in which religions are practiced are more important than religion per se.

Björn Halleröd

bjorn.hallerod@gu.se

The mismatch between needs and services

Tim Hobbs¹, Daniel Ellis¹, Kate Tobin¹ and Nick Axford²

¹ Analytics, Dartington Social Research Unit, UNITED KINGDOM

² What works, Dartington Social Research Unit, UNITED KINGDOM

It is generally hoped that targeted services for children and young people are provided to those that need them. However, it has long been hypothesised that this may not necessarily be the case. The Dartington Social Research Unit has explored this issue over many decades and is now able to report on robust empirical data on children's well-being, service use and the degree to which services meet needs.

We have contributed to the development of a suite of survey instruments designed to measure the well-being of children and young people at a local population-level. Survey instruments are comprised of standardised and valid instruments that produce reliable indicators of children's physical and mental health, behavioural and social development, as well as a wide range of associated risk factors: contexts or experiences in the home, school, peer or community environment that increase the likelihood of poor outcomes.

These survey instruments were administered to all children aged 9 to 15 in all state schools across three local authorities in Scotland (n = 26,100; with an 86% response rate). These survey data were then confidentially matched to existing administrative data on service use (child welfare, youth justice, special educational support or mental health services).

We drew thresholds to identify the proportion of children from across the local population – not just those in contact with services – that had high levels of need (i.e. multiple likely impairments to their health and development). Across the three local authorities the proportion of children in this 'high need' group was approximately 23%. The proportion receiving targeted services was approximately 12%. The proportion of those in the 'high need' group that were receiving targeted services was approximately 26%.

These data have profound implications for policy and practice. They indicate that the level of high need within a population is likely to be far greater than public systems have the capacity to meet. Strategies to mitigate this situation include: (a) greater investment in prevention and early intervention to reduce the proportion of children within a population with high need; (b) a better alignment of existing targeted services to meet the needs of the population, either by expanding reach of services (which is unlikely in the current economic climate) or by more effective processes to ensure that the limited resources of services are targeted to those most in need.

Tim Hobbs

thobbs@dartington.org.uk

Measuring child poverty: Measuring what, how, why?

Maksim Huebenthal

Faculty of Philosophy III - Educational Science, University of Halle, GERMANY

Measurement of child poverty is usually conducted either in the form of statistics on relative income poverty of the family household or – in case of a modern welfare state – with regard to social assistance dependence. A third option lies in multidimensional approaches. Using the latter form of measurement, a deprivation index covering different areas of a child's life can be used – or the living conditions of children from income-poor households can be compared to those from non-income poor families.

Within this range of different measurement modes ideological trenches can be observed that in some places are so deep and wide that they cannot be interpreted as only different ways of measuring the same phenomenon, but also as expressions of different interpretations of what the phenomenon known as child poverty is understood to be. For example, one group of (child) poverty researchers rejects a lack of consumer goods above a minimum provision level – such as, for example, 'brand-named items' – as a valid child poverty indicator (cf. for Germany: Krämer 2000), whereas others focus on deprivations measured against the "normal standard of living" (UNICEF 2012), which puts them in direct opposition to the first approach.

Against the background of this observation of ideological differences, I have assumed that not everybody who measures child poverty – or, on a more general level, takes part in the public discourse on child poverty – has a similar understanding of what child poverty means. Following this assumption, I conducted a Grounded Theory analysis of the recent political field in Germany to reconstruct the variance in child poverty interpretations in one of the most powerful areas of German society. My study suggests that child poverty occurs in four different forms: as virtue, educational, monetary and rights poverty.

The aim of my presentation is, firstly, to introduce these four child poverty constructions as part of the political fields of modern welfare states and, in doing so, to illustrate that child poverty does not simply equal child poverty. Moving on from there, as a second step I focus on the question of what the observation of this variance in child poverty constructions can mean for measuring child poverty and, therefore, for identifying valid child poverty indicators. For this purpose, I compare and contrast the four child poverty constructions in relation to aspects such as: problem focus, surrounding ideology, inherent poverty line, specific perspectives and challenges brought into child poverty measurement, etc.

Maksim Huebenthal

maksim.huebenthal@paedagogik.uni-halle.de

From subsistence to well-being: Calibrating welfare state investments in early childhood

Phyllis Jeroslow

School of Social Welfare, University of California, Berkeley, USA

The intent of the presentation is to provide a child-centered perspective to assist in understanding how family policies of welfare states may equalize developmental opportunities for children and meet post-industrial social and economic challenges regarding poverty, inequality, and social mobility. In recent decades, the proliferation of out-of-home child care and early childhood education in place of care by stay-at-home mothers constitutes a large-scale, natural social experiment in the developmental health of young children, and in the ability of welfare states to adapt to the demise of the male breadwinner model in favor of women's participation in the workforce. Finding the proper balance of welfare state support for working families engaged in childrearing is central to ensuring that future generations will be able to flourish and grow national economies that sustain welfare states.

In view of the widely acknowledged importance of the early years in later life trajectories, the developmental phase of early childhood is likely the most critical period for welfare state investment in human development. Economists argue that human capital investments made during early childhood, such as supports and services for quality care and education, reduce inequality and raise the overall productivity of society. The presentation will describe a set of four indices constructed to measure public investments in early childhood made by ten member countries of the Organisation for Economic Co-operation and Development (OECD) between 2001 and 2011. The selected countries comprise five pairs of welfare state models: social democratic (Norway and Sweden); conservative, Central European (France and Germany); Southern European (Italy and Spain); Asian (Japan and Korea); and the liberal welfare state regime (United Kingdom and United States). Based on OECD data and reports, the indices are designed to reflect longitudinal and cross-sectional patterns of government investments in early childhood, and to assess if policies are similar within each type of welfare state regime.

The four indices depict public investments in early childhood through government expenditures for family policies and institutions for pre-primary education in conjunction with design components that indicate how benefits of such policies and programs are distributed in the population. The family policies that comprise the focus of analysis include cash allowances for children; maternity, paternity, and parental leave benefits and birth grants; and family benefits for childcare and pre-primary education. Data for pre-primary education institutions concern student enrolments and expenditures by governments and families. For the sake of brevity, the indices are entitled: "Child allowances," "Parental Leave," "Early Childhood Education and Care (ECEC)," and "ECEC Institutions." The indices are analyzed separately to allow for a

close examination of monetary investment, investment of parental time, and access to educational and social stimulation, which have all received wide consensus in the literature as foundational supports for the developmental needs of young children.

Phyllis Jeroslow

phyllisjeroslow@comcast.net

Cash for care? Researching the links between social protection and children's care in Sub-Saharan Africa

Camilla Jones¹, Keetie Roelen², Helen Karki Chettri² & Emily Delap¹

¹ Technical Support, Family for Every Child, UNITED KINGDOM

² Centre for Social Protection, Institute of Development Studies, UNITED KINGDOM

Presented by Suzanne Clulow, Children in Distress (CINDI) Network, SOUTH AFRICA

Despite rising investments and increasing acknowledgement that social protection can be used as a key mechanism for reducing poverty and deprivation, there is a limited evidence base regarding the positive impacts and potential adverse consequences of social protection on wider aspects of child well-being and children's care. This paper presents findings from a joint initiative by Family for Every Child and the Institute of Development Studies and considers the impact of social protection on the loss of parental care, the incentivising of foster or kinship care and on improving the quality of care. It is the first substantial research project that examines large-scale government-implemented national cash transfer and public works schemes in Sub-Saharan Africa in relation to broad aspects of well-being and care of children. The social protection schemes in focus are Rwanda's Vision Umurenge Programme (VUP), Ghana's Livelihood Empowerment against Poverty Programme (LEAP) programme and South Africa's Foster Child Grant (FCG) and Child Support Grant (CSG). The qualitative research includes key informant interviews, group discussions and participatory exercises with over 100 adults and 80 children in each country.

Preliminary findings suggest that social protection schemes have the potential to improve material and non-material aspects of child well-being. They can also support the prevention of loss of parental care and support family reunification through improving material well-being and reducing stress in the household. However, implementation challenges may undermine the positive role that programmes can play. The provision of cash for incentivising alternative care, when needed, may result in the commodification of care, where caregivers provide care solely for financial reasons. The research points towards the need for and explores linkages between social protection and child protection systems, both formal and informal, in order to prevent separation or inadequate care and to support children's care and reintegration efforts.

Camilla Jones

camilla.jones@familyforeverychild.org

Emotional support for young people leaving residential care in transition to adulthood: Findings from an evaluation study in Israel

Paula Kahan-Strawczynski

Engelberg Center for Children and Youth, Myers-JDC-Brookdale Institute, ISRAEL

When embarking upon independent life, young care leavers need intensive support so they can function successfully in the community. Since 2010, the Ministry of Social Affairs and Services (MOSAS) in Israel has funded a national program to support them – From Dependence to Independence. Personal advisors provide support for 12–18 months, starting four months before the youth leave the facility. An individual program is tailored; it includes counseling, skills for independent living, assistance integrating into a normative occupation (work, military/national service, studies), and referral to services. The emphasis is on developing responsibility and self-sufficiency. Participation in the program is voluntary. From 2011–2013, Myers-JDC-Brookdale Institute conducted an evaluation to examine the quality of the participants' integration into the community and the program's contribution to them; and to learn about the implementation in order to introduce improvements. The information was collected through questionnaires to the advisors about every participant; in-depth interviews with participants; and interviews with representatives of MOSAS, the program staff, and services in the community.

The findings showed that after participants had been in the program for an average of 14.5 months, 82% were integrated into normative occupations; however, most of those working had to face difficulties retaining their jobs and felt a lack of job satisfaction. The findings indicate other difficulties as well: 47% were involved in risk behaviors such as drug abuse or violence; over half (53%) complained of loneliness; about a quarter had a diagnosed mental problem. The vast majority (81%) needed financial assistance. All were in contact with services in the community, such as social services, the employment service, programs to complete schooling, mental health clinics, and residential projects.

Care leavers need emotional support to develop self-confidence and self-efficacy as resilience promoting factors for optimal social integration. All the study findings highlight the importance of support programs of this kind. The study showed that most have little support from their natural surroundings (parent/family member, spouse/ permanent partner or close friend). The personal advisor is, therefore, an important source of emotional support. However, the advisors' enormous workload leaves them little time to provide such support to the care leavers. A particularly vulnerable group was identified – those without any source of emotional support in their natural surroundings (39%).

Given the multiplicity of difficulties facing the young care leavers in the transition to adulthood and the poor amount of support they receive, there is a need to broaden their social networks. The following are some of the directions proposed in the study: Recruiting volunteers to the program to act as mentors; where possible strengthening the bond between the young people and their parents before they leave the care setting; formalizing attachments with the residential carers; finding a member of the extended family to serve as a role model; creating opportunities for social meetings with peer groups to reduce the sense of loneliness.

*Paula Kahan-Strawczynski
paula@jdc.org.il*

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A comparative study on the relation of children's rights and subjective well-being: A focus on OECD countries

Sunsuk Kim

Social Welfare, Korea National University of Transportation, REPUBLIC OF KOREA

This paper concerns whether subjective well-being (SWB) is related in a proportional direction with children's rights. This study uses the child SWB index which covers 8 domains: health, subjective happiness, relationship, material deprivation, education, safety and risk, housing, and flourishing (Bradshaw & Richardson, 2009; Lee et al, 2013).

SWB is related in a proportional direction with child rights. Countries with a higher child rights tend to have a higher SWB. However, there are some exceptions such as Mexico and USA. These countries show high scores in SWB but low scores in child rights (CR). It is not within the scope of this study to analyse this causal relationship, and so this should be the focus of research in the future.

Countries in the top CR and top SWB group include Scandinavian countries, as is expected. Countries in the low CR and low SWB group include Japan, Greece, Slovak Republic, Czech, and Korea. These countries of low-low group have a very similar pattern with a variation in economic inequality and amount of social expenditure. Those two elements may be strongly related to CR as well as SWB.

This study found that the higher level of CR tends to equate to a higher level of SWB generally. But there is a contradiction in some countries. Some countries which have a high level of CR show a low level of SWB or vice versa. However, here we will not offer any arguments as to why this contradiction might exist between CR and SWB in some OECD countries.

*Sunsuk Kim
ksunsuk@ut.ac.kr*

Cyber bullying among youth: An application of Actor Network Theory

Yeun Hee J. Kim and Sung Jin Kang

Dept of Social Welfare, Daegu University, REPUBLIC OF KOREA

The purpose of this study is to investigate the roles of advanced communication technology in school violence among youth as the use of mobile phone and social networking sites has moved school violence beyond the schoolyard into cyberspaces. The School Violence Survey conducted in 2013 in South Korea indicated that bullying between students is a serious social problem and cyberbullying and defamation has increased most rapidly among all different forms of school violence among children and youth. Interactions in physical context in the traditional bullying have been permuted by more insidious psychological and social harassment and torment in virtual world with advancement and availability of electronic communication devices such as cellular phone and personal computers. Anonymity, perpetual victimization unbound by time and space, difficulty in problem identification, and ease of coordination of a bullying attack on a victim by many with electronic devices may make cyberbullying as damaging as physical bullying, if not more. Smart phones serve as the most effective medium for cyberbullying as adolescents are almost inseparable from their phones. The Actor Network Theory (ANT) lends a good conceptual and philosophical framework to understand transactional context of cyberbullying by looking at human actors as well as non-human actors such as internet technology, smart phone and various forms of SNS in a moving assemblage and by analyzing how these human and non-human produce fears, resistances, agency, alliance and power.

The data was collected through in-depth interviews and focus group interviews with junior high students who have been in the roles of victims, aggressors and spectators. The implications for practice and policy for school violence were discussed.

*Sung Jin Kang
rkdtjdwl10@naver.com*

Participatory assessment of child risks in urban Kenya

Felistus Kinyanjui¹, Charles Kamau¹, Joanne Bosworth², Irene Waithaka¹ and Aloys Odeck¹

¹ Research and Development, Acacia Consultants, KENYA

² UNICEF, KENYA

In today's urban communities, particularly in informal settlements, children are vulnerable to a range of political, environmental and economic risks. This study employed quantitative and qualitative methods to identify the principal risks and shocks for children, drivers of risks, seasonality of risks, and community and household coping strategies, including child care arrangements.

Around one third of children in Kenya live in urban areas, where there is a large segment of urban poor. Children in urban Nairobi have higher rates of stunting, and new-born deaths are higher, than among the rural population in Kenya. An urban participatory mapping study of child rights was carried out across informal settlements in Nairobi, Mombasa, Kisumu and Garissa. The study employed a household questionnaire for the survey, focus group discussions within communities including with children and adolescents, an observation checklist and key informant interviews granted by state and non-state officials across the four study sites. Risk incidence was also geo-referenced for mapping. Empirical data was collected between December 2014 and February 2015.

The combination of quantitative and qualitative methods facilitated understanding of the major risks to children in different age groups, as well as understanding of the seasonal patterns and contextual drivers of risk for children. Quantitative measures facilitate greater understanding of the priority risks for children, while qualitative research enabled enhanced understanding of slum dwellers' strategies for coping with urban risks, both negative strategies and more positive community capacities.

In these situations of precarious livelihoods and seasonal fluctuations in employment, prices, and demands, care arrangements for children contribute to a range of risks. Makeshift daycare centres lacking in provision of water and sanitation are the norm. These centres in themselves are a hazard as childcare is inadequate, transmission of infectious diseases, and possible abuse and neglect of children was reported. Alternatively, it was reported that children were left alone in the houses as mothers and caretakers go out to eke out a living mainly in casual employment such as laundry and gardening and in the neighbouring industrial areas. Fire outbreaks, a common occurrence in the informal settlements was reported to have claimed many children. Communities singled out rape and defilement by close relatives and neighbours as a major risk, alongside other socio-cultural barriers to child indicators. The study found out that children in large families, those from lone parents particularly, single females, those in casual and contract employment, those considered marginal by creed and ethnicity were at a higher risk of

having gross violation of rights. Particular months of the calendar year posed different risks and vulnerabilities to children of different ages and gender. Each of the four counties presented unique attributes that call for focused intervention measures and strategies at policy and implementation stages.

In conclusion we observed that amidst this grim picture the various actors in child rights ought to be better coordinated. Also, the study recommends the need for synergy between the newly formed county governance structures and the non-state actors to build resilience for communities and their posterity.

*Joanne Bosworth
jbosworth@unicef.org*

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International variation in child subjective well-being within OECD countries

Andreas Klocke¹, Amy Clair² and Jonathan Bradshaw³

¹ Research Center Demographic Change, Frankfurt University of Applied Sciences, GERMANY

² Department of Sociology, University Oxford, UNITED KINGDOM

³ Department of Social Policy and Social Work, University of York, UNITED KINGDOM

The objective of this study was to answer the questions: To what extent does child subjective well-being vary between rich countries? What explains these variations? Are there groups of countries performing better than others and does wealth determine child subjective well-being?

Individual level data from the "Health Behaviour in School Aged Children – A WHO Cross National Survey" (www.hbsc.org) 2010 is used. The HBSC Survey is undertaken every 4 years with a sample of 11, 13 and 15 year olds in 43 countries across Europe and North America, using self-completed questionnaires administered in schools. The analysis here is restricted to 28 OECD countries (N=154 000).

An index of "subjective well-being" consisting of life satisfaction, quality of parent- and friend relationships, school climate and subjective health is constructed and multilevel modelling is used in the analysis.

The index on the micro data (HBSC) replicates macro data findings. It also shows a good overlap with the OECD "Better Life" Index (Adults). The regression analyses find that the country in which a child lives significantly contributes to the level of subjective well-being that they report. Multilevel analysis confirms variation in the effects of individual characteristics on subjective well-being at the country level. No such effect was found for the country level variables included such as GDP and youth unemployment. It indicates that it is not the economy (GDP) or spending on family policies which can foster child-well-being. Rather it is the country and school climate that influences the way that individual characteristics influence child subjective well-being. So referring to the Bronfenbrenner conception, child well-being looks to be more a result of the micro (family) and meso (school) level rather than the macro (society) level.

The findings fit well into the discussion on quality of life, happiness and well-being and highlight the importance and possibility to access the subjective well-being of children. Some of the variance identified in the model is more likely to be policy salient than others. For example, it is plausible that the variation in the effects of bullying on children's subjective well-being across nations is policy salient, through the adoption of anti-bullying strategies or support groups. However variation in the effects of drinking on children's subjective well-being may instead reflect cultural attitudes towards drinking at a young age.

*Andreas Klocke
andreas.klocke@fzdw.de*

Training and mentoring in the Isibindi model of child and youth care

Jane Kvalsvig and Myra Taylor

Public Health Medicine, University of KwaZulu-Natal, SOUTH AFRICA

The National Association of Child and Youth Care Workers created the Isibindi model to reach into the homes and communities where South Africa's most disadvantaged children live, in order to improve care and quality of life for these children. At the heart of the Isibindi Theory of Change lies an integrated system of training and mentoring child and youth care workers (CYCWs). The Isibindi model is being rolled out country-wide through the Department of Social Development with ambitious targets and the attendant complex challenges. In order to safeguard standards of service provision during this dynamic process the Child Development Research Unit has been commissioned to provide a qualitative and quantitative account of the mentoring and training aspects, answering the following questions:

- How adequately does the training cover and convey to CYCWs the skills and knowledge necessary for effective service delivery
- What aspects of mentorship promote quality service delivery to children, and do mentorship needs change as sites become more established?
- How can quality of services be delineated or otherwise defined so as to meaningfully identify high versus low quality service provision?
- To what extent does the quality delivered differ between CYCWs who are still in training, and those who are fully qualified?
- How adequately does the training cover and convey to trainee CYCWs the different areas of skills and knowledge that are required for the job?
- What community or structural changes result from Isibindi?

The research has consisted of five different methodologies which are nevertheless conceptually integrated to provide an overview of the strengths and weaknesses as the system expands. This paper will describe these diverse methodologies – document review, interviews, videos, a survey, and analyses of the in-house databases – and give examples of the way in which the combined research approaches are able to shed light on the research questions.

Jane Kvalsvig
kvalsvig@gmail.com

An ecological, relationship based model of children's subjective well-being in 11 countries

Michael Lawler¹, Lisa Newland², Jarod Giger³, Soonhee Roh³ and Barbara Brockevelt⁴

¹ School of Health Sciences, University of South Dakota, USA

² School of Education, University of South Dakota, USA

³ Department of Social Work, University of South Dakota, USA

⁴ Department of Occupational Therapy, University of South Dakota, USA

The study assessed the international relevance of an ecological, relationship-based model of children's subjective well-being with samples of 12-year-old children from the United States ($n = 784$; $M_{age} = 12.63$, $SD = .55$) and 10 other countries: Algeria, Brazil, Chile, England, Israel, Romania, South Africa, South Korea, Spain, and Uganda ($n = 784$, $M_{age} = 12.06$, $SD = .61$). All children completed the Children's Worlds survey, which includes individual factors, contextual factors of home and family, life and neighborhood, school, and peers, and subjective well-being measures for life satisfaction, mental health, and self-image. Correlation and hierarchical regression procedures were conducted with representative samples of 12 year of children. The strongest predictors of subjective child well-being were relationships, school, gender, and neighborhood quality. The current study adds neighborhoods as a critical context to previous analyses of children's subjective well-being and supports the relevance of an ecological, relationship-based assessment model of subjective well-being in examining International samples of children.

This study of children from 11 countries has global implications for understanding children's perceptions of their well-being. The findings suggest that an ecological, relationship-based assessment model of subjective well-being may provide a framework for future studies assessing children's subjective well-being in various cultural, environmental and socio-emotional contexts. Qualitative research is needed to triangulate the findings and add "voices" to these data. Additional research using the ecological, relationship-based assessment model within and between countries and cultures is warranted.

Michael Lawler
michael.lawler@usd.edu

Urbanization and Child Poverty: Evidence from Uganda

David Lawson¹, Diego Angemi² and James Kabboggoza³

¹University of Manchester, UNITED KINGDOM

²UNICEF, UGANDA

³Ministry of Gender, Labour and Social Development, UGANDA

Cities and urban centres of all sizes have become engines of economic growth and social development; cities present great potential for cost-effective service delivery through economies of scale. Theoretically, at least, urban children should be 'better off' than their rural counterparts. Yet, some of the worst forms of inequality and exclusion are found in cities, putting millions of children at risk – Uganda is no exception to this.

Although Uganda is predominantly a rural nation, with approximately 16% of the population living in urban areas, the rate of urbanization is among the world's highest. Furthermore, approximately 60% of residents in Kampala live in informal settlements, where housing, sanitation and access to basic services are lacking. This provides a number of challenges for the government, particularly in relation service provision.

There are various manifestations of how to measure and analyse acute disparities in access to basic services in cities persist for the poor. Children and adolescents in particular are affected by inadequate access to services such as health, water and sanitation, education, and protection; lack of voice and participation; lack of security and in particular safe spaces for play and recreation; and vulnerability to climate change, environmental hazards, and natural disasters. Ugandan children living in slums or on the streets across are most at risk, but research on child poverty in urban settings is relatively scarce.

For Uganda, the latest Child Poverty Report (2014) highlighted the urban-rural disparities in Uganda: rural children are more deprived than urban children in all six dimensions and the largest gaps for extreme deprivation occur in terms of sanitation (13.2% vs. 2.4%), water (12.8% vs. 2.1%) and health (17.3% vs. 3.4%). However, this 'urban advantage' is not shared by all city dwellers and official statistics that only depict averages tend to mask the actual living conditions of poor urban dwellers. Poor children in urban areas are therefore at risk of remaining invisible to policymakers unless disaggregated information and a more nuanced assessment of spatial disparities are understood and disseminated widely.

The aim of this study is to investigate and explore the question of how issues of urban inclusion can be addressed to support equitable access to services and livelihood options, particularly for the most marginalised and excluded children in Uganda. In doing so, this analysis is expected to provide clear and actionable policy recommendations to alleviate the burden of urbanization on children and vulnerable

households, whilst identifying opportunities to strengthen social protection services for children in urban areas. Ultimately, the intention is to provide information that can assist in identifying (i) how (local) government and municipal authorities can ensure that children's rights are realized in urban settings, and (ii) how donors and external actors, can best support the needs of urban children and address exclusion and marginalization.

*Diego Angemi
dangemi@unicef.org*

Perpetrator explanations for sexual abuse of young children

Kgauhelo Lekalakala

Africa Research and Development Initiative, SOUTH AFRICA

South Africa is alleged to have the highest rate of sexual abuse per capita among 49 other countries. These statistics and media reports have sparked debates about what could account for the sexual abuse of children under the age of six including babies. Speculations about what would account for this allegedly high incidence have used patriarchy, poverty, HIV/AIDS and the 'virgin myth'. To date not enough research has been completed to clarify or test the various theories that abound in the country. This paper thesis explores one element of the problem - how perpetrators make sense of sexual acts with young children in South Africa. Semi-structured interviews were conducted with 27 incarcerated sex offenders, aged between 16 and 86, all convicted for sexual abuse of children aged six years and below.

The perpetrators in this study do not use the virgin cleansing myth as an explanation for the sexual abuse of young children. Instead the interviews tell a story of how childhood adversities, socio-cultural factors including patriarchal notions of manhood, particularly the perpetrators' beliefs about sexual entitlement, are used to explain the sexual abuse of young children. Interviewee narratives also suggest that the democratisation of South Africa has led to feelings of disempowerment in these men and restricted their access to sex and this is used to justify sexual abuse of young children. Although there were assertions that sexual gratification motivated the abuse, the findings suggest that perpetrators were mostly motivated by the need for the acquisition of power to target young children for sex. This paper therefore focuses mainly on perpetrator explanations of their motives for abusing very young children sexually.

Kgauhelo Lekalakala

kgauhelo.lekalakala@gmail.com

Subjective well-being of Taiwan children and its social and behavioral determinants

Yu-Chen Lin, Yu-Wen Chang and Chih-Chiang Yang

Department of Education, National Taipei University of Education, TAIWAN

Child subjective well-being has received global attention recently, but little is known about the subjective well-being of Taiwan children. This study uses internationally comparable indicators, as were used in the UNICEF (2013) Report Card 11, to examine subjective well-being and explore its social and behavioral determinants in Taiwanese students aged 11-15 yrs.

Data were obtained from a 2014 school-based survey. In total, 2112 students aged 11-15 years old in Taiwan completed a WHO Health Behaviour in School-Aged Children questionnaire. The index of subjective well-being consists of life satisfaction, quality of parent and friend relationships, psychosocial school environment and subjective health. The overall subjective well-being score was the standardized combination of the Z scores of these four components. Multiple regression analysis was performed to assess the effect of social and behavioral determinants on subjective well-being.

Taiwan is ranked 14th out of 28 OECD countries for the overall subjective well-being. Boys have higher subjective well-being than girls and subjective well-being is higher at age 11 than it is at age 13 and 15. Children with higher family affluence also have higher subjective well-being. Daily breakfast consumption, eating fruit daily, and taking vigorous exercise more than once a week increase children's subjective well-being, while being a victim of bullying reduces subjective well-being. Currently smoking or ever been drunk has no impact on subjective well-being. Subjective well-being of Taiwanese children falls in the middle of the rankings of OECD countries. Gender and grade differences and socioeconomic inequalities in child subjective well-being are congruent with previous work from other countries. Healthy eating habits and regular exercise could be protective factors for children's subjective well-being, while being bullied may be a risk factor for subjective well-being. These findings suggest appropriate interventions are needed to improve the subjective well-being of Taiwan children.

Yu-Chen Lin

yclin@tea.ntue.edu.tw

The subjective well-being of children in public care

Joan Llosada, Carme Montserrat and Ferran Casas

Research Institute on Quality of Life, University of Girona, SPAIN

Children's subjective well-being (SWB) constitutes an important component in understanding their quality of life. However, little is known about the perceptions and satisfaction with life of children in public care. The purpose of this study is to explore differences in SWB between adolescents in residential care, kinship care and family foster care (non-kinship). The study used data from the care population in Catalonia (Spain) aged 12–14 years (N = 669): 397 adolescents in residential care, 251 adolescents in kinship care and 41 adolescents in family foster care. The mean age was 13.3 years old, 54% were boys and 85% were born in Spain. The questionnaire designed for the International Survey of Children's Well-Being (ISCWeB) was adapted to the context of children in care. It includes a psychometric scale on SWB: the Personal Well-Being Index—School Children (PWI-SC7).

Multiple regressions were used to explore which factors are related to children's subjective well-being according to type of placement. Findings showed that adolescents living in kinship and foster care reported better SWB in all life domains than those in residential care. Those variables that may influence their SWB are on the one hand gender and age, and on the other agreeing with their placement, satisfaction with school, with their relationships with friends, and with their use of time and the Internet. These findings highlight the need to address the participation of children in any decision that affects their lives, the importance of providing support for the education of children in care, and the importance of having friends and leisure time. Results are discussed in view of their value to practice and their political implications.

Carme Montserrat
carme.montserrat@udg.edu

Intra-household distributions and children's subjective well-being

Gill Main

School of Education, University of Leeds, UNITED KINGDOM

Studies on the distribution of resources within households have repeatedly found that sharing between household members cannot be assumed to be equitable. To date, such studies have tended to focus on sharing between adult household members, with a particular focus on sharing between men and women. These offer valuable insight into how resources are distributed within households, and on how different household members tend to use the money available to them. However, children have tended to be treated as passive burdens; children's contributions to household financial resources and decision making are ignored or stigmatised (for example through pejorative terms such as 'pester power'), and spending by adults on children is assumed to be spending which children benefit from.

This study uses data from a representative, school-based survey of 14-year-olds in England to explore children's perceptions of intra-household sharing, their roles in financial decisions, and their subjective well-being. Since the study is the first of its kind, descriptive findings will be presented which will offer initial insight into children's experiences, followed by regression analysis exploring associations between children's perceptions of these aspects of their lives, and their subjective well-being. Findings will be used to complement and challenge those of adult-centric studies.

Gill Main
g.main@leeds.ac.uk

Social protection policy in promoting human development outcomes: The cash transfer programme for orphans and vulnerable children in Kiambu, Kenya

Joyce Marangu

SM and Associates, KENYA

Cash transfers, integral in social protection, are increasingly being viewed as a viable measure of promoting human development outcomes. This is particularly so in low and middle income countries where persistent poverty is exacerbated by the HIV/AIDS epidemic. Sub-Saharan Africa has been the worst hit by the HIV/AIDS epidemic with almost two thirds of the world's HIV patients living in this region. By 2005, 12 million children were orphaned by the disease while 2 million more below 15 years of age were estimated to be infected (UNICEF, 2005:2). To address the plight of orphans and vulnerable children in Kenya the government, together with various international development agencies, launched the Cash Transfer Programme for Orphans and Vulnerable Children (CT-OVC) in 2004 to provide for the basic needs of orphans and vulnerable children and promote their human development outcomes.

With the capability approach as its theoretical framework, this study seeks to determine the value attached by OVC to capabilities in the four broad and systematically selected dimensions of social life, health, education and play. It also seeks to gauge the extent of attainment of functionings in these four dimensions, and the association between participation in the programme and one's functionings in the key dimensions. The capability approach views capabilities as the opportunities that enable one to lead the kind of life they value or have reason to value. Functionings on the other hand are seen as one's achievements or their beings and doings (Sen, 1999). The study further seeks to determine the participants' perceptions of the CT-OVC and its effectiveness in promoting their well-being. The study is conducted through a quasi-experimental design which compares recipients of the cash transfer to non-recipients. A mixed methods approach, combining qualitative and quantitative techniques, is used to collect and analyse data.

Results show that OVC consider capabilities in the dimensions of social life, education, health and play to be of high value in their lives. Children in the recipient group appear to have attained functionings in the four dimensions to a higher degree than their counterparts in the comparison group. There is also an association between participation in the CT-OVC programme and attainment of functionings in all four dimensions. Perceptions from participants explore further opportunities created or expanded through the CT-OVC as well as participants' suggestions on the programme. These findings have far reaching policy implications in all dimensions examined. The findings provide a useful starting point for the formulation of evidence-based policy frameworks that address vulnerabilities of children, and ultimately promote human development for OVC in Kenya and beyond.

Joyce Marangu

joyce.marangu@gmail.com

Who cares for children and why we should care?

Florence Martin¹ and Garazi Zulaika²

¹ Better Care Network, USA

² Columbia University, USA

Understanding better the situation of children in 'care vulnerable situations', including those outside of parental care has become crucial, not only for HIV prevalent countries but for all countries seeking to strengthen their responses and systems for children facing a range of care and protection risks. A number of organizations and initiatives have drawn attention to the need for more systematic data on children's care situations, including family arrangements, parental status, care practices, and their impact on child well-being. The Demographic and Health Surveys (DHS) and Multiple Indicators Cluster Surveys MICS data has clear potential to inform child protection policy and programming, however, currently this potential is not being realized.

A key barrier is that in most cases the data that would be useful, such as on children's care and different living arrangements, is not extracted and presented in national reports.

Furthermore, awareness of this potentially useful DHS and MICS data amongst child protection practitioners is very low. Given the scarcity of national monitoring data on child protection issues in many contexts, it is important that the sector explores the potential of the DHS and MICS data and also is better informed of what it could offer and how it could be used to support better policies and interventions targeting at risk children and families.

This article reviews the potential for more systematic mining of existing household level data sets, particularly DHS and MICS data, to provide a better picture of the patterns and trends relating to children in households who are not living with a biological parent. The authors present an initial analysis of this data for a small number of countries in Eastern and Southern Africa together with an overview of regional and global trends to demonstrate how this data can be used to better understand potential indicators of vulnerability associated with different care and living arrangements and to inform social policies and programmes targeted at these particularly vulnerable children and their caregivers.

Florence Martin

florence.martin@bettercarenetwork.org

A child standpoint on well-being: Part 1. The significance of emotions and relationships for child well-being

Jan Mason¹ and Tobia Fattore²

¹ School of Social Sciences and Psychology, University of Western Sydney, AUSTRALIA

² Department of Sociology, Macquarie University, AUSTRALIA

It can be argued that the concept of well-being is socially constructed. Further, there are likely to be differences in the meanings adults and children attach to this concept because of the positioning of adults and children in terms of generation and consequent life worlds. This was our starting point in the design of a research project we implemented in New South Wales, Australia, in which children were asked what well-being meant to them.

In this paper we briefly describe the epistemological approach that informed our use of standpoint theory in repositioning children as knowers on what well-being means for them. We overview the main elements of the child standpoint, that emerged from discussions with children. These elements were the domains of agency, security and sense of self, and a number of more concrete dimensions. Fundamental to what children told us about these domains and dimensions in relation to their experiences of well-being, were emotions and relationships.

In this paper we place what children tell us about emotions and relationships in the context of the social science literature and of hedonic and eudemonic frameworks of well-being. Our discussion of the place of emotions in child well-being centers on children's references to happiness, but also highlights that children understand well-being as signifying more than happiness, as also including sadness.

As discussed by children, there are two aspects to relationships relevant to well-being. The first of these aspects is about the content of relationships, particularly at the emotional or affective level, but also at the instrumental level. The second aspect of what children told us about relationships as important elements in child-adult relations, is how they structure children's experiences of well-being, in the various domains and dimensions of well-being. This second aspect will be discussed in another paper in reference to the dimension of agency.

In this paper we explore what children say about the importance of relationships for well-being – the specialness of family and friends, the significance they attach to being cared about and cared for, the value they place on caring for others and the importance of child-child relations as a form of solidarity in a generationally structured world. We conclude with a discussion of the significance of this standpoint where it contests the traditional conceptualizations of child well-being and of its implications for the development of indicators.

Jan Mason
jan.mason@uws.edu.au

Violence against children in Cape Town, South Africa: Developing an understanding of the underlying determinants of violence

Shanaaz Mathews¹, Rajen Govender² and Guy Lamb³

¹ Children's Institute, University of Cape Town, SOUTH AFRICA

² Centre for Social Science Research, University of Cape Town, SOUTH AFRICA

³ Safety and Violence Initiative, University of Cape Town, SOUTH AFRICA

Violence against children is considered a pervasive problem in South Africa. Yet, there is an absence of national prevalence and incidence data and less is known about the risk factors associated with violence victimisation during childhood in this setting. This paper aims to present predictive models for violence victimisation and subsequent violence perpetration in a cohort of children.

Data from the Cape Area Panel Study (CAPS) was used in this analysis. The Cape Area Panel Study (CAPS) was initiated in 2002, and is a longitudinal (panel design) study of young people in Cape Town. CAPS aimed to investigate the multidimensional nature of the lives of the young men and women - educational, psychological, familial, sociological, economic, community, among others. The first iteration of CAPS was conducted in 2002 and comprised a sample of approximately 4 750 respondents aged at the time between 14 years and 22 years old. Five successive waves of the survey have been conducted between 2002 and 2009. While attrition is generally a concern in panel studies, the final CAPS wave contained a sufficient sample size to permit robust multivariate investigation. For this analysis we used Structural Equation models (SEM) to predict physical and emotional abuse victimisation and perpetration outcomes. Variables were identified and constructed through the development of a conceptual framework based on prior research on risk factors for VAC. The predictive models were derived from the Socio-Ecological Framework approach to VAC, which examines the inter-relationship amongst variables derived from different interrelated levels i.e.; individual, family/relationship, community and the broader societal factors.

A hypothesised SEM for emotional abuse indicated increased risk for girls with one or no parent in the household, low household income, someone in the household involved in crime and/ or exposure to illicit drugs in the household, with conflict in the family directly increasing this risk (CFI=.98; RMSEA=.02). For boys the SEM shows an increased risk of outcome for physical abuse when they experience the same background and intermediate factors (CFI=.98; RMSEA=.02). For young men current negative influences in the neighbourhood and or current adverse influences in the home increase the risk for domestic violence perpetration while alcohol use or abuse is a predictor on its own to increase the risk for domestic violence perpetration (CFI=.97; RMSEA=.03)

Findings suggest there is an urgent need for interventions in South Africa to strengthen families and reduce adverse exposures in the home as well strengthening strategies to reduce household poverty to reduce risk factors for emotional and physical violence in childhood. Of special interest are strategies employed by families for addressing and resolving conflict without resort to physical, emotional or psychological violence and abuse. The research also highlights the interplay of household level and community level factors in propensity for violence perpetration.

Shanaaz Mathews
shanaaz.mathews@uct.ac.za

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How do income and socio-economic status matter? Disentangling pathways of effect on child well-being

Annie McEwen

School of Public Policy and Administration, Carleton University, CANADA

A wide body of multidisciplinary research has established the correlations between socio-economic status (SES), income and children's well-being. However, understanding how household income and SES affect child well-being is key to designing effective policy interventions to reduce childhood inequality. The relationship between household economic conditions and child outcomes is inherently indirect, mediated and moderated by a range of factors (Jones, Aber & Raver, 2003). Understanding these pathways of effect is crucial to identifying opportunities for public policy to reduce childhood disadvantage. While a growing number of studies investigate mediation of income's effect on children (Gershoff, Aber, Raver & Lennon, 2007; Guo & Mullan Harris, 2000; Linver, Brooks-Gunn & Kohen, 2002; Yeung, Linver & Brooks-Gunn, 2002), few differentiate between the role of relatively fixed characteristics of parental SES (i.e. education and occupation) and the mutability of income (e.g. through policy intervention). Furthermore, the vast majority of research on income mediation uses American data, which, while helpful in explaining the causes of child outcomes in a unique social policy context, is not necessarily applicable to other national contexts.

This study contributes to filling these gaps with an analysis of the pathways of effect between SES, income, and child well-being using four cycles of data from the Canadian National Longitudinal Survey of Children and Youth (NLSCY 2000-2008). Drawing on family stress and family investment theories, the analysis uses Structural Equation Modelling to examine parenting behavior, family functioning, and children's activities as potential mediators of income and SES. Income is measured using an average over three cycles of data, whereas household SES is measured by parents' occupation and education level. I look at three stages of childhood: preschool (age 0-5), middle (age 8-13), and high school (age 12-16) (N=1800 to 4302, dependent on age group and outcome measure). Taking a multi-dimensional approach to measuring child well-being, I use age-appropriate socio-emotional well-being, cognitive development, and behavioral outcome measures in each stage of childhood.

The analysis finds that the effect of income and SES varies greatly between child age groups and outcome domains. In nearly all models, household SES has a stronger relationship with outcomes than income does, both directly and through mediating pathways. Cognitive outcomes are found to have the closest association with SES and are the least mediated by the factors used in the study. Parenting behavior is the strongest mediator across all models and displays the most substantial direct effect on the outcomes of all factors in the models. For the majority of outcomes, family

functioning's effect is significant but indirect, serving as mediator between SES and parenting behavior.

Children's participation in extra-curricular activities in middle childhood and high school is also found to be a significant mediating factor in SES's effect on children's socioemotional well-being. I discuss the findings' policy implications, as well as lessons regarding the importance of national context and using multiple indicators of child outcomes in policy-relevant research.

*Annie McEwen
annie.mcewen@carleton.ca*

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Baseline data from a randomised control trial focusing on the impact of a play-informed, caregiver-implemented home-based intervention on developmental, learning and playfulness outcomes for HIV-positive children (aged 6 months to 8 years) on HAART and their caregivers' self-efficacy

Robyn Meissner, Jessica Ferguson, Caraleigh Otto and Anande Uys

Department of Health and Rehabilitation Sciences, Division of Occupational Therapy, University of Cape Town, SOUTH AFRICA

Despite the provision of anti-retroviral treatment, HIV positive children remain at risk of developmental, play and learning difficulties. Their caregivers face the dual challenges of meeting their own health needs and that of their children amidst often negative social circumstances. Occupational therapy is well positioned to address the occupational needs of this population. Drawing on the value of play as a therapeutic medium, a group of occupational therapists designed and implemented a play-informed, caregiver-implemented home-based intervention (PICIHBI) testing its efficacy in addressing child development, occupational needs of learning and play as well as caregiver self-efficacy. This paper presents baseline results for these outcomes, highlighting the key areas targeted by the PICIHBI.

This study aims to investigate how a PICIHBI (experimental intervention) facilitated by an OT through clinic-based groups with caregiver-child (children aged 6 months – 8 years) dyads, compares with standard one-on-one OT intervention (control) in promoting learning, development and play for children on HAART, and their caregivers' self-efficacy. The study was a pragmatic, single-blinded, randomised control trial starting in April 2014. We recruited 66 caregiver-child dyads as participants from Groote Schuur Hospital's (Cape Town, South Africa) paediatric HIV clinic. These dyads were equally divided and randomly assigned to control and experimental groups, and attended their intervention on a monthly basis planned over one year. Developmental, learning, play and self-efficacy outcomes were assessed using the Griffiths Mental Development Scales – Extended Revised (GMDS), the Beery-Buktenica Developmental Test of Visual Motor Integration (Beery), the Test of Playfulness (ToP), and the Parental Self-Efficacy Measuring Instrument (P-SEMI) at pre-, mid- (after 5 months of intervention) and post-test (after another 5 months of intervention) time points.

The study is ongoing. In this paper we describe the sample and report on the sample demographics and baseline status of the participants on the respective outcome measures. The age range of the child sample was 6 to 85 months who had been on HAART from 1 month to 7 years.

Development (children 6 months-5 years, n=39): The mean GMDS total developmental quotient was 78.6. This mean quotient is interpreted as borderline mental retardation when classified by the standardised categories from the UK.

Learning (children 5-8 years, n=27): The mean age of the sample was 77.5 months but presented a GMDS mean age equivalent of 61 months. The Beery Motor co-ordination sub-test yielded a mean standard score of 83.59 (below average), the visual motor integration sub-test a mean standard score of 76.48 (low), and the visual perception sub-test scoring the lowest with a mean standard score of 75.48 (low).

Playfulness (children 1-8 years, n=57): Baseline ToP data revealed overall low playfulness levels for the study sample, with 91% of the participants falling below the normative score.

Caregiver self-efficacy (n=66): P-SEMI results revealed high levels of caregiver self-efficacy despite the documented challenges of caring for a child with HIV. The highest scoring subscale was the ability to show affection and empathy, and the lowest scoring subscale was establishing discipline strategies.

This paper provides baseline data on the developmental, learning and playfulness status of HIV-infected children on HAART and their caregivers' self-efficacy status. Results highlight areas of concern relevant to OTs and early childhood development practitioners providing care to this population.

Robyn Meissner
robyn.jess@gmail.com

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An Intrinsic Value Approach: A new method for deriving Child Living Condition Scores (CLCS) and poverty in Uganda

Cyprian Misinde

Population Studies, Makerere University, UGANDA

Both direct and indirect methods of child poverty computations remain contentious. This calls for more research and development of appropriate methods of child poverty measurements sensitive to the conditions in which children live. This article is an elaboration of a new Intrinsic Value Approach for the computation of Child Living Conditions Scores (CLCS), and poverty in Uganda. Once CLCS is established, appropriate poverty threshold can be chosen to delineate the poor children from the non-poor as demonstrated using the Uganda Demographic and Health Survey (UDHS) data for 2011.

Using multilevel binary logistic regression, with CLCS as dependent variable, I tested whether orphans were poorer than non-orphans in Uganda, controlling for other background factors. Although the results showed that the odds of a child to live in poverty increased when the child is an orphan than non-orphan in Uganda in 2011, the results were not statistically significant. However, the odds of a child to live in poverty increased significantly if the child lived in a female-headed household, lived in rural areas and lived in any of the other three regions than the central region. The results show that the intrinsic value approach is a robust approach for the computation of CLCS and child poverty.

Cyprian Misinde
misindec@hotmail.com

Youth transitions from care to adulthood: Messages from research in Catalonia

Carme Montserrat and Ferran Casas

Research Institute on Quality of Life, University of Girona, SPAIN

The situation of children and young people belonging to disadvantaged groups of the population should constitute a priority for social policies. Among this group there is the case with young people leaving care or who have already left care. We have developed a research project to assess the types of interventions undertaken and their impact on this population from 1994 to 2012. The Catalan government and the Federation of Organizations with Projects and Assisted Apartments (FEPA) commissioned our research team to carry out research with the following aims: (a) to determine the evolution and current situation of young people leaving care who had been attended to, (b) to understand their situation, identifying factors that facilitate and obstruct the processes of emancipation, (c) to evaluate these young people's passage through the support resources and services from their own perspective, (d) to make proposals for improvement and consider future challenges.

A mixed-method approach was used, performing: (a) a secondary analysis of previously existing data on the program database (N=5,538), (b) a qualitative study using semi-structured interviews with young people and focus groups with young people (N=49) and professionals (N=10), and (c) a quantitative study administering a questionnaire to all professionals working with the age groups 16-18 and 18-21 (N=218). The interviews, focus group scripts and questionnaires shared the same structure, organized into eight major blocks in order to allow triangulation of the results.

The data for the period 1994-2012 show positive results, with half of the young people who have passed through the program achieving emancipation in a satisfactory manner and satisfaction among both users and the professionals working in the services was also high. Young people and professionals give importance to factors related to: (a) the inclusion of young people within the formal education system, which requires greater coordination between the Social Welfare department and the Education department, (b) a firm commitment and improved expectations towards this group from micro to macro level (c) Support for professionals working with these young people in terms of managing emotions (d) a need to diversify the range of services offered in order to reach more care leavers, especially those with a disability, mental illness, behavioral problems or others excluded from the current programs, (e) receiving more personalized attention and establishing close and stable ties with adolescents and young people, (f) providing them with greater stability on their pathways through life, (g) improvements are needed in the data collection system in order to clearly reflect the results obtained and the type of care received on the various programs (h) the need for work on the personal and social autonomy of adolescents living in residential centers, making them more responsible participants in their own process and in the community. Some recommendations have been made based on the findings.

Carme Montserrat

carme.montserrat@udg.edu

Early childhood care and education: The greatest of equalizers? Analysis of the JCHP longitudinal cohort Mauritius

Christian Morabito

Faculty of Psychology and Educational Science, Ghent University, BELGIUM

International organizations, along with workers from various disciplines, argue that inequalities in children's education are associated with conditions in early childhood, prior to school entry. This narrative engenders a plea for a shift in redistributive policies, from schooling to investing in early childhood care and education. The aim of this research is to explore the thesis of early childhood care and education policies as the 'greatest of equalizers', by examining the effect of high quality pre-school settings on educational gains for children 'at risk', from a developing perspective.

This study uses data from the Joint Child Health Project Mauritius, a longitudinal cohort composed by 1,795 children tested on a number of demographic, socio-economic, cognitive and educational outcomes from 1970s up to today, with 100 children randomly assigned to an experiment consisting of 'high quality' pre-school. The paper examines whether 1) inequalities in cognitive development and school performances are associated with early factors, with inequalities actually increasing with age, and 2) these inequalities might be reduced through participation in quality pre-school settings.

Findings of the analysis are partially in line with similar studies conducted in both developed and developing countries. To point out, inequalities in cognitive development and school performances, measured through cognitive skills tests along with the Mauritius national primary education examination (the CPE) at age 11, are significantly associated, in the JCHP cohort, with a number of factors such as sex, socio-economic status of parents, ethnicity, housing conditions, malnutrition and temperament during tests at age 3. Furthermore, inequalities grow throughout childhood. However, equalizing effects of pre-school are partial and limited in size. The results of the study actually leave the debate open about what intervention might better tackle educational inequalities, whether focusing on early years' education – that is before schooling – or possibly changing the structure of school systems in order to enhance attainments of children from poor families.

Christian Morabito

christian.morabito@ugent.be

You are your brain: Neuroscience indicators of children's well-being

Barak Morgan

Translational Developmental Neuroscience MRC/UCT Medical Imaging Research Unit, University of Cape Town, SOUTH AFRICA

It is no longer sufficient to view human development from purely psychosocial or biological perspectives. We now have the scientific tools to ask questions, design interventions and measure impact from a unified biopsychosocial perspective. Rapid advances in biology are providing an ever-expanding armoury of techniques for tracking human biological development in its environmental context while concurrently, interdisciplinary partnerships are integrating this data with psychosocial evidence, forging novel conceptual frameworks and enhanced understandings. We therefore need no longer work in mono-disciplinary silos paying lip-service to the mantra of "gene-environment interactions". We can now peer directly into the epigenetic middle-ground where genes and environment physically meet.

Although biological measures have long been part of health research, a unified biopsychosocial approach employing biological measures is increasingly being integrated into psychosocial research encompassing cognitive, emotional, social, reproductive, economic and behavioural outcomes with/without health outcomes. This use of biological measures represents a fundamental paradigm shift wherein early environment becomes biologically embedded with enduring physiological (e.g. stress, immune, metabolic, cardiovascular, reproductive etc. profiles) and psychosocial consequences (e.g. cognition, social-affective behavior, livelihood outcomes etc.). Biological embedding of early environment has been operationalized according to overlapping conceptual frameworks. These include allostatic load, self-regulation, life-history strategy and the gut-brain connection. Differential susceptibility to context is a further overarching phenomenon of fundamental importance: If gene-environment interactions are ignored, measured impact comprises an average of large impacts on susceptible children and small impacts on less susceptible children. Such average findings conceal hidden impact and falsely portray factitious impact.

Barak Morgan
barakmorgan@gmail.com

Care and support for teaching and learning: Promoting child well-being through policy, advocacy and partnerships

Mhle Mthimkhulu, Jennifer Norins and Lynn van der Elst

MIET Africa, SOUTH AFRICA

Care and Support for Teaching and Learning (CSTL) is an innovative Southern African programme that falls under the auspices of the Southern African Development Community (SADC), and is executed by the Ministries of Education (MoEs) of Member States. CSTL was developed in response to the numerous challenging circumstances that impact thousands of children and youth in the region, making them vulnerable: poverty; hunger; poor health; lack of access to services like water, sanitation and energy; various forms of inequality, such as gender, disability, orphans, etc. These circumstances create barriers to education and development by preventing many children and youth from accessing education, attending school regularly and participating in quality learning and teaching. CSTL supports Member States to address these barriers to education by mainstreaming care and support for teaching and learning into their policies, advocacy strategies, monitoring and evaluation and practices, from Ministry level down to school communities. The goal of the CSTL is that children and youth in SADC region realize their rights to education, safety and protection, and care and support, through an expanded and strengthened education sector response. Determinant of the success of CSTL is that the Member States see improved rates of enrolment, retention and achievement for all children and youth, especially those who are vulnerable.

While the ultimate beneficiary of CSTL is the child, CSTL as a framework is geared towards strengthening MoEs and other relevant stakeholders in order to adequately mainstream care and support for teaching and learning into their respective systems and advocate for the rights of all children and youth, particularly the vulnerable and marginalised. To support this process, MoEs are encouraged to integrate indicators into their EMIS (Education Management and Information Systems) that allow them to monitor 1) the numbers of vulnerable learners that enrol in school and are retained in the system until graduation; 2) the number of schools that are able to identify and respond to the various care and support needs of their learners; and 3) the number of teachers who are trained in care and support. Through bi-annual monitoring and reporting, as well as specific research activities, MoEs are provided with information that can then be used to influence the modification and development of policy and programmes that supports the well-being of children through care and support for teaching and learning. This paper will present key examples of how the research conducted through CSTL has influenced the development of policy and advocacy strategies that promote the education rights of vulnerable children.

Jennifer Norins
jen@miet.co.za

On the apparent non-significance of gender in child undernutrition in India

Simantini Mukhopadhyay

Economics, Institute of Development Studies Kolkata, INDIA

Gender disparity is a well-documented reality in India. Demographic data point out an adverse sex ratio and a strong preference for sons among Indian men and women. A rich body of literature deals with the causes and consequences of such a skewed son preference in the country. Studies have pointed out that anthropometric outcomes of children are influenced by all channels through which gender bias operates. Moreover, anthropometric data are free from the problems of intentional misreporting and ex-post rationalization, which are major concerns in case of commonly used indicators of gender inequality based on ideal number of sons and daughters, as reported by parents. However, much to the surprise of researchers, child nutrition figures for India (and other developing countries infamous for gender inequality) do not differ strikingly between boys and girls. Seeking to explain why evidence on female disadvantage in terms of nutritional status is inconclusive, scholars have examined child specific household level factors such as birth order and sex composition of older siblings. This paper argues that beyond child specific household level factors, the puzzle of gender inequality needs to be understood in the context of the intersection of gender with other dimensions of social identity such as religion, caste and class. To our knowledge, this is the first attempt to examine gender disparity in child nutrition in India by moving out of the framework dealing with inequality along the single axis of gender. Using rigorous econometric methods to analyse intersectional inequalities, the paper tries to identify the varying degree of gender disparity in different social settings. The paper questions if girls face differential treatment at different points of the social spectrum. For instance, does gender disparity in child nutrition operate similarly for the Hindus and other religions? Within the traditional caste-based Hindu society, is there a difference in gender disparity among the poor and the non-poor? Is it the case that girls and boys belonging to certain castes do not have disparate nutritional outcomes? Do certain caste groups treat the girl child differently at different levels of household wealth?

Our analysis reveals that gender disparity in child stunting is prevalent particularly among upper caste Hindus. While girls and boys from backward castes do not have disparate nutritional status, the advantage that poor ST girls enjoy is reversed with improvement in wealth status. Gender inequality deserves attention in spite of the overall non-significance of the child's sex as a covariate of nutritional status. Moreover, children in different social settings need customized policy attention instead of a one-size-fits-all approach. For instance, non-poor ST girls deserve special attention, though they are not victims of wealth related disadvantage. Again, though non-poor upper caste Hindu girls have better nutritional status than girls from other social settings, their situation deserves the attention of policy makers, given the bias that operates in favour of non-poor upper caste Hindu boys.

Simantini Mukhopadhyay
 simantinihalder@gmail.com

A qualitative and quantitative study in relation to subjective measures of hope expressed by young people within the Scottish Secure Residential Care system

Stuart Mulholland¹, Robert Clark² and David Burton³

Welltree Online Training and Consultancy Ltd, UNITED KINGDOM

² Good Shepherd Secure and Close Support Unit, UNITED KINGDOM

³ Smith College, UNITED STATES

Secure Care provision for children and young people within the Scottish system is required to evidence the best possible outcomes for a statistically small but vulnerable group of children and young people. This is achieved through the administration of a range of self-report psychological tests and questionnaires at three monthly intervals throughout the young person's placement. Analysis of the findings reported by 159 young people during the last 4 years has indicated the significance of hopeless feelings correlated with a range of mental health factors and behavioural difficulties including (at the $p < .05$ level) oppositional behaviour, delinquency proneness, criminal assault and antisocial behaviour, psychological trauma symptoms, depression, suicidal ideation and levels of parental attachment.

Analysis of this data also suggested that we could achieve measurable changes in the levels of hope during a young person's placement. This led to the development of a specific hope intervention program (Synder, Cheavens et al, 1997 & Synder, Hoza et. al., 1997, Valle, Huebner & Suldo, 2006). Using the extant research and conceptualization of hope, the program has been delivered in ten 50 min classes across 15 weeks. This has helped us to formulate more in-depth measures of hope and demonstrate whether our interventions could increase hope and evaluate the change in hope over time for youth in residential care.

In its first iteration, we randomised the selection of young people within the residential facility and measured all young people in a classic pre post control group research design. At this presentation, we will present both our hope and wellbeing data, as discussed above, and the preliminary qualitative and quantitative changes noted in relation to participants in the program and control group. We will also discuss outcomes and suggestions for facilitating increases in hopefulness and wellbeing for these young people.

Stuart Mulholland
 SM@welltree.info

Lost emotions, lost opportunities: The cost of inadequate caregiving for children aged 0-3 years in Kenya

Solomon Mumah¹ and Pamela Wadende²

¹Psychology Clinic, PsycheHealth International, KENYA

²Department of Psychology, University of Kabianga, KENYA

Research has consistently shown that the first 1000 days of life are very important in defining a child's adulthood. Rapid brain development experienced at this stage means that the child's later abilities in life (i.e., cognitive, social, physical and emotional) are initiated here and that any developmental delays accrued during the period zero-to-birth may be corrected. Nonetheless, the prognosis changes after the first 1000 days when the child's brain is highly malleable, implying that any developmental lags occurring during this period are seldom corrected in later years. This study focused on emotional development of children during the first 1000 days of life with the premise that during this period, the child bonds with care-givers and thus the basis for later emotional attachments and exhibited responses. Consequently, a good foundation ensures healthy emotional behavior in adult years and vice-versa. This is important due to the ever more stressful lives in developing economies like Kenya, characterized by high societal expectations and individual desires to succeed at whatever cost; coupled with the modernity syndrome. As a consequence, many a Kenyan (prospective) mother misses out on viable training opportunities set forth both by the government (e.g. ECDE, maternal and child health, etc.) and other agencies; and subsequently, the requisite knowledge for child care within the first 1000 days. The net result is a generation plagued with more and more incidences of psychosomatic disorders and the associated negative impacts on quality of life and general well-being both for individuals and society.

The study objective was to find out how parents prepare themselves for child care in the first 1000 days of life and particularly how they prepare to initiate acceptable emotional responses in the children. Qualitative data was collected via IGDs from expectant women (N=120) and fathers (N=40) aged 17-45 years seeking prenatal services at the County Government's hospital in Kericho, Kenya.

Key findings include the fact that the earlier mentioned gap had not been bridged especially with regards to emotional development within the first 3 years. Mothers explained what nutritional, medical and other arrangements they had made for their children but seldom thought about emotional care plans. Sadly, the few fathers present at these sessions were unable to articulate any emotional support they would give their growing children. It is interesting to note that these fathers were articulate regarding material support they needed for the growing child. None had read the Mother-Child-Health booklet provided at the hospital that gave some detail

about how to foster optimum emotional bonding with their children. Implications of these findings are explored further in this paper by the researchers who recommend the provision of support that parents currently need to initiate the right emotional development in their children in the first 1000 days since; failing to do so may result in too high a price to pay.

Solomon Mumah

scjmumah@gmail.com

A Child Equity Atlas for Zimbabwe

Samson Muradzikwa, Dirk Westhof, Chrystelle Tsafack Temah and Rumbizai Tizora

Social Policy, UNICEF, ZIMBABWE

The rationale for producing a Child Equity Atlas in Zimbabwe is to present comparable information at the district level in one view, and the need to have information at the lowest administrative urban level. Until now, the urban information was presented at the district level, but the “Harare Urban” districts have 1.5 million people, so urban data mask a wide range of realities. The Atlas seeks to present indicators at the ward level, in a user friendly way that describes the situation of children and women in Harare and Bulawayo.

This Child Equity Atlas was undertaken principally to achieve two broad goals. First, to analyze the pockets of social deprivations as a call for concerted action to close inequality gaps between areas and population groups in the country. Second, the analysis contained in the child equity Atlas should contribute to policy dialogue to reform and refocus relevant policies and programmes towards more equitable socioeconomic development in Zimbabwe.

The Equity Atlas for Zimbabwe is based upon the 2012 census data. It presents indicators such as under-five mortality, teenage fertility, out-of-school children, net attendance in secondary education, educational attainment of youth aged 20-24 years, teenage marriage (male and female 15-19), birth registration, access to improved water and sanitation, and access to electricity, among others. The major focus of this analysis is children up to 18 years of age, youth as defined by demographic and international standards, and women aged 15-49 years. About 25 indicators were computed from the census data to produce this Child Equity Atlas. With its maps, tables, some graphs and analysis, the Atlas presents important observations about the achievements and problems in Zimbabwe, while the equity focus uncovers the huge inequities still existing.

The Child Equity Atlas describes the situation of women and children in Zimbabwe in 25 district level maps and 12 ward level maps. There are several advantages and dimensions to the evidence generated in the Equity Atlas. First, the census has no sampling errors because it includes all households. This is an enormous advantage over all surveys, especially at the lower geographical level. Second, the Equity Atlas powerfully displays the geographical location of the major problems. The maps provide a unique and powerful visualization of the issues facing different sub-national areas and populations across the country, providing a holistic picture. For example, the out-of-school children maps clearly show where policy instruments should focus more resources towards educational equity by investing in the areas with a high proportion of out-of-school children.

The important outcome is that the census data shows that Zimbabwe is less

homogenous than thought based upon provincial level results, normally the lowest geographical level surveys will report on. The robust Census data at the lower geographical district and ward level show the disparities within provinces, especially within urban districts or provinces with isolated areas. The information aims to facilitate geographical targeting. The composite deprivation index helps to focus on the most deprived areas, the so-called “pockets of poverty”.

*Samson Muradzikwa
smuradzikwa@unicef.org*

Parental incarceration: Associations with child well-being at multiple life-stages

David Murphey and Mae Cooper

Indicators, Child Trends, USA

More than 1.75 million children in the U.S. have a parent currently in prison. Recently available data show that, in 2011/12, more than five million (more than one in seven children through age 17) had ever experienced the incarceration of a parent or guardian. Parental incarceration has been identified in numerous studies as a potentially adverse childhood experience. This study will describe the prevalence of parental incarceration among a nationally representative sample of U.S. children, its associations with other commonly measured adverse childhood experiences, and with multiple measures of child well-being and parental functioning.

The National Survey of Children's Health (NSCH) collects data on a sample representative of all children in the U.S. Information is provided by a parent or guardian. However, the timing of adverse experiences is reported only as "ever" within a child's lifetime. In order to examine possible developmental-stage effects of parental incarceration, therefore, we divide the sample into three age groups: birth to five years, six to 11 years, and 12 to 17 years. This strategy will allow us to study how parental incarceration may be associated with key developmental tasks, including early social-emotional development, school engagement, and out-of-school-time activities, controlling for a number of demographic variables (race/ethnicity, family income, parents' education and marital status), as well as other reported adverse experiences.

David Murphey
dmurphey@childtrends.org

From welfare to well-being: Child indicators in research, policy and practice

Edwin Tinashe Mutambanengwe

Centre for Social Development in Africa, University of Johannesburg, SOUTH AFRICA

A lack of national policy and indicators to monitor and evaluate the implementation of the developmental approach in the welfare field (specifically in child welfare) continues to be a challenge (Patel, Grobelaar, Selipsky, & Curtis, 2011). There are no appropriate guidelines and procedures to evaluate new policy and approaches to child welfare practice, such as the community-based approach to orphans and vulnerable children (OVCs). Orphans constitute approximately 3.54 million of South Africa's total population (Mathews, Jameison, Lake & Smith, 2014) and there is an increase in the number of vulnerable children, that is, those living in circumstances that deter holistic development (Fluke & Wulczyn, 2010; Mathews et al., 2014). These circumstances, together with the paucity of empirical research on monitoring and evaluation (M&E) to inform community-based services for OVCs, informed this study.

This study intended to evaluate the appropriateness and effectiveness of the M&E system in a child welfare agency rendering community-based services for OVCs, and to make recommendations on how the system might be improved. In order to achieve this, a number of objectives were linked to this goal. The first objective was to conduct a situation analysis of the M&E system in a specific child welfare agency. Second, was to evaluate what works and what does not work in the implementation of the agency's design and the utilization of the agency's data. The third objective was to evaluate the utility and appropriateness of the existing M&E data for organisational performance in rendering community-based services for OVCs. Finally, the study endeavoured to make recommendations for an appropriate and effective M&E system for community-based services for OVCs delivered in a child welfare setting.

A qualitative approach was employed and three data collection methods (a documentary study, semi-structured interviews and a focus group discussion) were utilized sequentially. Data was collected from agency M&E documents and participants who were social workers, supervisors and managers within the agency. Thus, rich answers to descriptive and explanatory questions were provided enabling the student to understand the complexity of the phenomenon that was being studied. The study revealed that, first, there were no overall policies and guidelines to inform M&E in the organisation; second, that the agency invented its own system as a stop gap measure, which resulted in M&E not being prioritised. Third, the agency's M&E system was inadequate due to a lack of M&E budgets, technical expertise, knowledge and skills, and appropriate tools for M&E data collection and analysis. The bureaucratic organisational structures limited the participation of social workers and managers in shaping M&E processes. Furthermore, reporting mechanisms and collaboration

among stakeholders resulted in ineffective monitoring and evaluation of the new directions in child welfare. The study concluded that there was a need for sound M&E systems grounded in the developmental approach to child welfare, M&E theory and practice, and informed by national policy, guidelines and indicators. Further recommendations for M&E policy, practice, training of social workers and managers, M&E implementation at agency level, and for further research were identified.

Edwin Tinashe Mutambanengwe
etmutambanengwe@gmail.com

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Leaving the parental home: A comparison between the United States, Taiwan and Germany

Bernhard Nauck¹, Nicolai Groepler¹ and Chin-Chun Yi²

¹ Department of Sociology, Chemnitz University of Technology, GERMANY

² Institute of Sociology, Academia Sinica, TAIWAN

Leaving the parental home has been a core subject and a significant marker in studying tradition to adulthood. However, the overwhelming amount of studies were conducted within a single society and lacks a cross-cultural comparative perspective which enables us to find commonalities as well as differences in the process of transition to adulthood. The United States, Germany and Taiwan were chosen for this comparison in a variance maximizing design, because of their relatively similar stage of economic development on the one hand, and clear differences in the institutional structure, social welfare regime and cultural values related to marriage and intergenerational solidarity. In order to better understand varying processes in the transition to adulthood, two hypotheses regarding effects of the respective institutionalization of the life course are tested:

Kinship Hypothesis: The major cultural divide in family and kinship systems lies in the tradition of patrilineal descent and patrilocal housing as represented by Taiwan, and the bilineal descent and neolocal living arrangement which characterizes special Northwestern European Pathway (Hajnal, 1965) and is represented by Germany and the United States. It was assumed that the fundamental cultural divide results in different household structures as well as the process of home leaving for youth.

School-Work-Trajectory-Hypothesis: The three societies vary in the degree of institutionalization of the school-work-trajectory. The educational system in Taiwan tends to be more inclusive in that the entire population of school-age youth are considered and is thus characterized by the strong institutionalization of the trajectory, making the transition from school to work an almost normative trajectory. Germany represents a society with medium institutionalization by dividing the youth population into a dual system of academic and vocational tracks. In contrast, the United States represent a society with weak institutionalization accompanied by highest "individualized" life courses as well as non-normative transition trajectories.

Three large-scale nation-wide representative panel studies are used in the analyses:

- (1) The National Longitudinal Study of Youth (NLSY) of the United States. This panel started in 1997 with 8,984 respondents of the birth cohorts 1980 - 1984.
- (2) The Taiwanese Youth Project (TYP). This panel started in 2000 with 5,541 respondents of the birth cohorts 1986 - 1987.

(3) The Panel Analysis of Intimate Relationships and Family Dynamics (pairfam) of Germany. This panel started in 2008 with 12.402 respondents of the birth cohorts 1971 - 1973, 1981 - 1983, and 1991 - 1993.

Descriptive analyses revealed distinctive patterns of the school-work-trajectory for three countries. More than 80 percent of the Taiwanese adolescents were in the educational system until the age of 22, and approximately 80 percent in the workforce two years after. The other extreme were the United States, where both an early entry into the workforce and a substantial proportion in the moratorium was salient from age of 19 and onwards. As expected, Germany held a position in the middle with more resemblance with the United States than Taiwan. The same pattern showed up in the entry into first romantic relationships, which was delayed in Taiwan in comparison to Germany and the United States.

Multivariate results revealed pronounced differences in the respective effect sizes, sometimes even reversals in the direction of effects. In general, our results suggest to take into account institutionalized school-work-trajectories and institutionalized kinship systems in explaining home leaving for youth.

Bernhard Nauck

bernhard.nauck@soziologie.tu-chemnitz.de

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Early childhood development programming in the city of Johannesburg: From measurement to action

Stewart Ngandu and Shirin Motala

Economic Performance and Development, Human Sciences Research Council, SOUTH AFRICA

The National Planning Commission Diagnostic Overview Report (2011) recognizes the importance of investing in early childhood development (ECD) for human health, well-being and productivity. The presence of promotive factors in the care environment can make a difference in the life of a child. Access to quality ECD interventions, particularly targeting children from disadvantaged communities can prevent or offset potential negative impacts on a child's cognitive and social development. This makes an investment in ECD a key responsibility for government and not a luxury nor a privilege, which can yield lifetime benefits for children and society (NDP, 2011). While children have traditionally been the concern of social cluster departments namely Education, Health and Social Development, Schedule 4, Part B of the Constitution provides for a local authority to pass legislation relating to childcare facilities. It then follows that the relevant services and associated responsibilities and budgets of local government in fulfilling its ECD obligations should be reflected in municipal Integrated Development Plans and specific sectoral policies and by-laws, which should in turn be reviewed and harmonized with the provision of the National ECD policy. This means that interventions are required at two levels. At the developmental level that recognises the need to ensure a conducive ECD environment, which will meet the developmental requirements of the child, and local government driven support level interventions. In order to address the developmental issues there is a need to identify vulnerable centres, and local government interventions require that centres comply with regulations. In 2014 the City of Johannesburg conducted an audit of ECD centres in 17 priority wards. The audit represented a census of these wards and through a comprehensive sampling approach, that used existing sample frames and a snowball approach which tried to ensure that new centres were also identified, 381 centres were surveyed in the 17 wards. Through a fit-for-purpose approach three composite indices were constructed using indicators from the audit. A vulnerability index which summarizes 17 indicators that capture internal ECD centre vulnerability was constructed. To address issues around compliance, the CoJ was interested in assessing the general level of compliance in order to design interventions that would allow the targeting of centres. To this end a set of three summative indices were constructed that highlighted different levels of compliance. One of the priority areas for the city was around understanding the dynamics of ECD centre overcrowding, to this end another basic summative index was constructed based on indicators that assessed the availability of space at the centre including the child per classroom ratio. This suite of indices was then used to feed into the City's strategic plan and has informed entry strategies around remedial interventions. The process of developing these composite indices showed how ECD audits can be used to feed into, in a fit-for-purpose approach, the strategic interventions of local government.

Stewart Ngandu

sngandu@hsrc.ac.za

Family social participation in childbirth: Implications for child well-being in South Africa

Michael Nguatem and Mulugeta Dinbabo

Institute for Social Development, University of the Western Cape, SOUTH AFRICA

Childbirth in South Africa, especially amongst the poor, poses a huge challenge for the family, government and civil society. The government of South Africa has progressively increased its investment in child well-being over the last 10 years. These social investments in the form of the Child Support Grants, have contributed significantly in mitigating the scourge of poverty and inequality. In addition, despite the resilience of poverty and inequality, family support amongst low income earners has acted as a safety net to ensure child survival and child well-being. However, research on family contribution towards child well-being in South Africa is yet to reflect social strategies of the poor in overcoming the challenges of childbirth. Drawing evidence from the National Income Dynamics Study (NIDS) dataset, this study synthesises the theory of social capital and participation in a localised context to understand the dynamics of family social participation in child well-being in South Africa.

This study uses the Wave 3 of NIDS to assess family participation in childbirth in South Africa. The aim was to identify critical family social capital indicators amongst low income earners. Statistical analysis was done using STATA. Four elements of social participation were identified using variables such as childcare, childbirth and family loans. Various statistical tests were done to determine the level of family participation in ensuring child well-being at birth and after birth. To achieve the results, income was categorised into three to determine income thresholds which were used to identify lower and higher income earners in the minimum wage context as stipulated by the Department of Social Affairs framework for eligibility to child support. Population Group 'A' earned <R3500, 'B' earned >=R3500 & <R6500, and Population Group 'C' earned >=R6500. Within the context of social capital theory, the study found a statistically significant difference in family participation in childbirth when comparing families whose income was less than R3500 with those earning over R6500. The research proposed that for further research in child and family studies, family social capital and family participation should be contextualised as indicators of child well-being.

Michael Nguatem
mickybround@gmail.com

Child nutrition inequalities in South East and North West Nigeria: Determinants of under-five nutritional status

Omosefe Osaze-Amayaevbo and David Dairo

Dept of Epidemiology and Medical Statistics, University of Ibadan, NIGERIA

Wide inequalities in under-five childhood malnutrition across socio-cultural groups have been observed in Nigeria, with growing scientific evidence pointing to the pervasiveness of socio-economic inequalities in health at any stage of development. To provide efficient and effective policy recommendations and interventions that advance health equity and enhance nutritional well-being of children, it is necessary to understand the levels of malnutrition and the extent of disparities in nutritional status of children in the geo-political zones. Hence the aim of this study is to quantify the magnitude of inequality and identify the demographic correlates associated with under-five malnutrition rates (stunting, underweight, and wasting) in both the South East and North West regions of Nigeria.

Data on 14,615 under-five children were derived from the Nigeria Demographic and Health Survey (NDHS) 2013 which was a nationwide cross-sectional descriptive survey. Multinomial logistic regression was also used to identify demographic correlates and prevalence ratio (PR) to show the magnitude of relative inequality in malnutrition rates in the regions. The level of significance for all tests was 5%.

The prevalence of severe stunting, underweight, and wasting in the North West using the WHO child growth standards were 38.7%, 23.3% and 17.9% respectively; and 6.2%, 2.7%, 4.9% respectively in the South East. The odds of stunting declined with an increase in the child's age. However, the odds for mild stunting, severe underweight and wasting were higher among children from the South Eastern region compared to those from the North Western region. Stunting levels also increased steadily from birth and peaked at 24-35 months. Factors that significantly predicted observed under-five malnutrition were shorter preceding birth interval, small size at birth, state of residence and lower maternal age and body mass index (BMI); all have statistically significant effects on risk of malnutrition. Child size at birth and state of residence are important determinants of severe childhood malnutrition.

High inequalities in under-five malnutrition were observed with higher level of education, higher maternal age, child's age and richest wealth index. The greatest inequality was observed among those who were severely underweight.

Appropriate guidelines to alter nutritional intake and focused programme attention should be targeted at the poor to enhance the level of nutrition and behavioural changes. These findings have important policy implications and call for more research to identify left-out variables that might account for this unexplained variation.

Omosefe Osaze-Amayaevbo
osaze_amayaevbo@yahoo.com

The influence of the socioeconomic context on social exclusion in early childhood: A multilevel analysis for Colombia

Ana María Osorio Mejía¹, Luis Fernando Aguado Quintero¹, Katharina Rathmann² and Beatriz Caicedo³

¹ Dept of Economics, Pontificia Universidad Javeriana Cali, COLOMBIA

² Institute of Medical Sociology, Martin Luther University of Halle-Wittenberg, GERMANY

³ Dept of Basic Sciences, Universidad de Antioquia, COLOMBIA

The exclusion of the use and access to social goods and services denies the children's right of well-being. If it is true that early childhood is a priority issue in the economic and social agenda of Colombia, the country has not succeeded in closing the great territorial inequities. This paper aims to examine the influence of the level of economic and social development, as well as programs aimed at early childhood, on a composite index of social exclusion in early childhood in 32 Colombian departments (administrative subdivisions) and the capital city, Bogotá.

The indicator seeks to present, from a broad perspective, a quantitative image that reflects the minimum elements which are changeable by public policy in the short-term, but with long-term effects in the context of the mother-infant dyad. Including variables not frequently used in empirical literature for developing countries, the index takes into account aspects such as education and autonomy in the decision-making process of the mother; preventive factors such as pre-natal care, breastfeeding and vaccination; the family context; parenting; learning opportunities through playing activities and the legal visibility of children (birth certificate).

Using data from the 2010 Colombian Demographic and Health Survey (DHS), the Principal Component Analysis (PCA) using polychoric correlations is applied to construct the composite index. The role played by the socioeconomic context of departments on the indicator of social exclusion in early childhood is examined using multilevel models.

Preliminary results show that a significant percentage of variability in the indicator of social exclusion in early childhood is explained by the socio-economic context of the department, even after controlling for individual, household and community characteristics.

We hoped that the findings will permit recommendations to be made for a differential policy addressed to early childhood, which will take into account the different social and economic dynamics of the departments.

Ana María Osorio Mejía
anao@javerianacali.edu.co

Children's participation in the Child Welfare Services in Norway

Veronika Paulsen

Department of Social Work and Health Science, NTNU, NORWAY

This paper will discuss to what extent children and adolescents experience being able to practice their right to participation during their contact with the Child Welfare Service in a Norwegian context. Further, the paper discusses which factors influence the level of participation. To shed light on these issues, I have conducted qualitative interviews with 45 adolescents aged 16- 25 years. The main goal is to focus on the children and adolescents' thoughts and experiences of their relation with the Child Welfare Services. The data consists of both individual and focus-group interviews. The paper highlights children and adolescents' own perspectives, and is thus a contribution to a field that traditionally has been dominated by adults' voices.

According to the law, participation rights on an individual level are concerned with giving children and youth the opportunity to participate have a say. This is also stated in the UN Convention on the Rights of the Child, article 12 that states: "States Parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child." However, previous research shows that implementing/practicing children's rights is not a straightforward process and there are discussions about children's participation related to age, nature of the case and what question the decisions are related to. According to Nigel Thomas, several models have been developed in recent decades to understand and analyze various degrees of involvement. What these models have in common is that they attempt to describe different levels of participation in decision making. In the last decade, however, the trend reversed slightly, from developing models to explore the factors that influence the level of participation. This paper focuses on the complexity of participation-processes in the Child Welfare Services, and which factors, according to the children and adolescents that can promote good and less good participation- processes.

Veronika Paulsen
veronika.paulsen@samfunn.ntnu.no

Measuring social connectedness as a constitutive feature of children's well-being: Prospects and pitfalls

Shirley Pendlebury¹, Marlene Ogawa² and Renald Morris²

¹ School of Education, University of Cape Town, SOUTH AFRICA

² Synergos Institute, SOUTH AFRICA

Over a period of some five years, in collaboration with several other organisations, Synergos South Africa has developed and advanced the Social Connectedness Programme to examine and address chronic isolation as it relates to children and youth in the context of poverty, in South Africa and the Southern African region. The programme rests on the premise that the well-being of children and adults alike depends critically, although by no means solely, on fulfilling relationships and secure bonds with others. Poverty, the stigma of disease, disability, abuse within the family, maternal depression, migration, and the death of parents or caregivers – among many other adverse circumstances – can all break these vital connections and lead to social isolation.

Conceptually the Social Connectedness Programme owes much to research on social connectedness as one of the missing dimension of poverty data, undertaken at the Oxford Poverty and Human Development Initiative (see Samuel et al 2014; Zavaleta, Samuel & Mills 2014). Zavaleta, Samuel & Mills (2014) have proposed a conceptualisation and indices for measuring social isolation and connectedness, a task which they acknowledge as daunting. Useful and conceptually rich though it is, the proposal is not specifically child-focussed, nor was it intended to be. Our purpose in this paper is to examine whether and how the work of Zavaleta and colleagues might be refined and adapted for use in addressing what Samuel (2014) calls the 'wicked problem' of social isolation (both objective and subjective) among children. In so doing, we consider briefly the case for regarding social connectedness as a constitutive and measurable feature of children's well-being. Following Ben-Arieh & Frønes (2011), we take the capability approach as a framework for an understanding of the state and processes of children's well-being, and illustrate this with examples from field work and practice by organisations associated with the Social Connectedness programme.

Shirley Pendlebury
shirley.pendlebury@uct.ac.za

Measuring well-being: The case for a new longitudinal survey on children's and young people's well-being in Europe

Gary Pollock and Haridhan Goswami

Dept of Sociology, Manchester Metropolitan University, UNITED KINGDOM

There has been a growing interest among academics, researchers, policy makers and practitioners in the subjective well-being of children and young people (CYP). The recognition of CYP's rights to having a good childhood and good future life chances, coupled with the injunction from the New Sociology of Childhood to consult with CYP as active agents also have resulted in increasing interest in the use of well-being in policy programmes in many countries in the European Union (EU). The main challenge for the EU is to identify the best policies and approaches to effectively improve the well-being of children and young people and measure systematically the changes in child well-being within and across its member states over time. In this paper, we discuss the potential need for a new longitudinal survey among CYP's subjective well-being in Europe using the initial findings from two and a half year long project called Measuring Youth Well-being (MYWEB) which received funding from the European Commission. We hope this paper will stimulate methodological debates and contribute to the research, policy and practice on child well-being in Europe.

Haridhan Goswami
h.goswami@mmu.ac.uk

Who's in my family? Using consultations with children and young people to design a survey instrument

Gerry Redmond¹ and Jennifer Skattebol²

¹ Flinders University, AUSTRALIA

² Social Policy Research Centre, University of New South Wales, AUSTRALIA

While there is a growing literature on mixed methods research, the literature is currently light on the use of children's and young people's voices to design survey instruments. Indeed, it is only recently that children's surveys have begun to use young people's voices in a systematic way in designing survey content and language. The purpose of this paper is to show how young people's voices have influenced survey instrument design for the Australian Child Well-being Project (ACWP). The Project set out to collect information on the well-being of children in their middle years (aged 9-13 years) with a particular focus on children who are marginalised in the Australian context (materially disadvantaged, Indigenous, living in rural and remote areas, young people with disability, young people from ethnic minorities, young carers and young people in out of home care). As a prelude to designing the survey instrument, ACWP researchers talked extensively and in a very open-ended way with about 100 young people (most, but not all, in one or more of the marginalised groups listed above). Young people were simply asked to talk about what was important in their lives, and what things might get in the way of them having a 'good life'.

While a wide range of issues came up in these discussions, almost without exception, young people highlighted the importance of family in their lives. However, it became apparent to the researchers that young people employed the concept of 'family' in a number of different ways – some only included parents and siblings; others added pets; some included uncles, aunts and cousins; some included their own or family friends; some equated 'family' with 'home', and some did not. These differences in the conceptualisation of family raised some tricky issues, since many surveys that have children as respondents ask extensively about 'your family'. The research team could not find a satisfactory means of asking the question 'Who is in your family' in a self-completion online survey instrument, so instead they asked, 'who are you closest to?' As the diagram shows, respondents were asked to drag specific people (mother, father, sister, brother, other child, et.) as close to them as they wished.

While the ACWP survey (N=5,440) has only been recently completed, initial analysis suggests that responses to this question will provide very useful information on young peoples' social networks and relationships – whether the number of people that the young person reports being close to matters in terms of their subjective well-being and other outcomes, and whether some particular people matter more than others. This will allow detailed exploration of relationships as a factor that modifies the association between marginalisation and outcomes of importance for children, and for policy.

Gerry Redmond

gerry.redmond@flinders.edu.au

Explaining variation in the subjective well-being of children

Gwyther Rees and Jonathan Bradshaw

Social Policy Research Unit, University of York, UNITED KINGDOM

We have been exploring the subjective well-being of children for the last ten years using national (with The Children's Society) and international school-based surveys of children (HBSC and Children's Worlds). The UK Millennium Cohort Survey 11 year old sweep presents a new opportunity to advance this work because it is the first to ask children about their well-being and because of the size (17 000) and richness of the data (child, parental, and school questionnaires).

The analysis creates and assesses a scale of happiness based on six seven point Likert questions and measures of positive and negative affect. It then explores variation in mean scores and the proportion in the tail of the distribution using multi-level regression analysis which builds from the basic characteristics of the child, adding the family characteristics (including parental depression), adding the school characteristics and then finally incorporating some behaviours and attitudes including experience of bullying. The paper will end with a discussion about the implications of the findings to policy.

Jonathan Bradshaw

jonathan.bradshaw@york.ac.uk

Indicators of resilience in children: An asset-based perspective

Steve Reid¹ and Justine Gatt²

¹Primary Health Care Directorate, University of Cape Town, SOUTH AFRICA

²Neuroscience Research Australia & School of Psychology, University of New South Wales, AUSTRALIA

Most indicators of child health focus on the morbidity and the mortality associated with childhood diseases, on the assumption that child survival through the reduction of disease and death is the first priority. This is premised on a deficit approach, whereas an asset-based approach would emphasize the positive features of living, thriving and being well. From the perspective of children, what is it that they most value? What kind of measurements could indicate living well or thriving, even in the face of disease or illness or difficult social circumstances?

“Resilience” is understood as the positive adaptation to significant adversity in the context of a particular group or population. What is it that enables certain children to thrive even in situations of extreme disruption, which destroy or debilitate others? What indicators of child health could be derived from the so-called “positive deviants”?

We present the initial results of a 5-country study of resilience in young people in situations of migration, as an example of significant adversity. The objectives of the study are to identify how environmental, cultural and contextual elements promote resilience and positive health outcomes in migrant youth across cultures and within multiple ethnic groups, as well as to work towards a better understanding of the biological, cognitive and social-emotional mechanisms of resilience in order to develop both effective measurement tools and culturally-salient health interventions for adolescents of migrant families. Methods include literature reviews, consultations and qualitative interviews with young people between the ages of 13 and 18, and the testing of resilience measures in different environments. It is anticipated that a number of longitudinal studies may arise from these initial projects that would allow the study of the outcomes of early resilience measures over time in diverse cohorts. The initial findings of the study will be presented, and the indicators of resilience will be highlighted in this presentation.

Steve Reid
steve.reid@uct.ac.za

The lottery of birth: Giving all children an equal chance to survive

Jose Manuel Roche, Lisa Wise, Dimitri Gugushvili and Luisa Hanna

Policy and Advocacy, Save the Children UK, United Kingdom

In many countries across the world, the odds of children surviving to celebrate their fifth birthday have improved considerably in recent years. Today, 17,000 fewer children die every day than was the case in 1990 and the global under-five child mortality rate nearly halved, from 90 to 46 deaths per 1,000 live births, between 1990 and 2013. The Millennium Development Goals (MDGs) have received credit for some of this acceleration, but have also been criticized for being “blind” to inequalities. The critics argue that as a result, inequalities in development outcomes are growing and the most disadvantaged groups are at risk of being left behind.

This paper assesses to what extent progress in MDG4 has been equitable across different social and economic groups during the MDG era. We compare the rate of progress in child survival across social and economic groups in a total of 64 countries. The research is based on newly processed data of 257 Demographic and Health Surveys (DHS) and Multiple Indicator Cluster Surveys (MICS), as well as compilation of aggregated public sources (the UN Inter-Agency Group for Child Mortality Estimation, WHO, UNICEF, DHS) and official disaggregated figures for a few countries additional countries. The metric used to measure inequality is the ratio between groups with the highest and lowest under-five child mortality rates, which effectively shows how much more likely a child from one group is to die than a child from the other group.

Similar to Wagstaff et al (2014), we found that that disparities between rich and poor children have been reducing in the majority of countries (64%). Our new analysis of progress in urban and rural areas also shows inequalities are decreasing for most countries (58%). However, we found that subnational regional disparities increased in 59% of the countries for which data are available, and disparities between ethnic groups increased in 76%. These findings indicate that disadvantaged geographical regions and ethnic groups were left behind in the majority of countries. It also shows that in a large number of countries inequalities in child survival between poor/rich, urban/rural are persisting or increasing. As we explore in a set of projections, this is not only unjust, but also threatens prospects for ending preventable child deaths in the foreseeable future.

But the analysis found also grounds for optimism. Almost a fifth of the countries covered in the analysis have successfully achieved faster progress than most countries, while at the same time ensuring that no groups of children are left behind. The findings show that faster progress was more common among countries that have narrowed the gap in child mortality rates between advantaged and disadvantaged groups. This finding contradicts a widespread belief that reaching the poorest and most disadvantaged groups is harder and therefore likely to slow down progress.

Dimitri Gugushvili
D.Gugushvili@savethechildren.org.uk

Understanding child well-being in Sub-Saharan Africa: A cross-country comparison

Keetie Roelen

Institute of Development Studies, UNITED KINGDOM

This paper compares community-based understandings of child well-being in five countries in Sub-Saharan Africa: Burundi, Ethiopia, Ghana, Rwanda and South Africa. Adults and children were asked about their perspectives regarding what constitutes child well-being and what it means for a child to be happy, healthy and well cared for. In this paper, a comparison is drawn across these five different countries, providing insight into how notions of a good life for children differ across space and context. A particular aim of this paper is to investigate the extent to which notions of child well-being differ across contexts of macro-economic development and standards of living, and the extent to which monetary means are considered part and parcel of child well-being. An additional country case study of Vietnam is included to allow for further investigation of the links between child well-being and monetary means, both at household and macro-level. Qualitative research in each country included focus group discussions, participatory exercises and interviews with approximately 100 adults and 80 children.

Initial analysis points towards common themes across all countries, in reference to 'basic needs' or material and physical well-being as well as 'non-material' needs or aspects of social and mental well-being. More detailed analysis within overarching themes reveals strong context-specific differences. Undertaking domestic work, for example, was considered a virtue and manifestation of good child well-being according to both adults and children in Ethiopia, while in Rwanda domestic work was referred to primarily as denoting poorer well-being for non-biological children. Preliminary findings suggest that the availability of monetary means may be considered a necessary but not sufficient condition for child well-being, although adults and especially children in all countries also indicated that elements of psycho-social well-being such as love and affection are independent of household resources. References to such 'non-material' needs or aspects of psycho-social well-being were more frequently made in more affluent contexts, including South Africa and Vietnam.

Keetie Roelen

k.roelen@ids.ac.uk

Poor children living in rich households: A blurred picture, lagged effects or hidden realities?

Keetie Roelen

Institute of Development Studies, UNITED KINGDOM

There is increasing evidence that single indicators of child poverty are unable to capture its complexity, and that monetary and multidimensional measures of poverty identify different groups of children as being poor. Nevertheless, measurement remains largely uni-dimensional (either monetary or non-monetary based) and cross-sectional, and is often exclusively based on quantitative methods. Not only does this provide an incomplete picture of the situation, it also limits the study of underlying causes that keep children trapped in poverty. While the mismatch between different indicators of child poverty is now firmly established, evidence about factors contributing to this mismatch is limited. This paper aims to shed light on (i) the extent to which mismatch between monetary-based and multidimensional outcomes of child poverty persist over time, and (ii) what underlies such mismatch patterns.

The paper will present findings from a mixed methods study in Burundi, Ethiopia and Vietnam - using secondary quantitative survey data and primary qualitative data in all three countries - on the overlap and mismatch between monetary and multidimensional indicators of child poverty and the drivers for differential outcomes. It investigates the role of measurement error, lagged improvements in non-monetary outcomes following increases in monetary resources, availability and costs of infrastructure and services and awareness, attitudes, aspirations and children's agency.

Preliminary findings suggest that mismatch patterns hold over time, including in contexts of rapid monetary poverty reduction. Measurement error provides a partial explanation for differential findings but cannot account for the full extent of mismatch. Improvements in non-monetary aspects of child poverty appear to lag behind reductions in monetary poverty. A lack of infrastructure and services - particularly schools and clean water, limits the extent to which greater monetary resources in the household can be translated into improved child well-being. At the same time, opportunity costs may lead to a trade-off between greater economic resources within the household and reductions in child poverty, particularly in terms of the balance between school, work and leisure. Greater household wealth may be achieved by involving children in productive or household work, compromising child well-being with respect to time use. Parental awareness of and attitudes towards the raising and educating children play an important role in translating household resources in improved child well-being. Qualitative findings point towards a gender dimension with 'positive' mismatch (low household resources but good child well-being) occurring more frequently in female-headed households and 'negative' mismatch (higher household resources but low child well-being) being more prevalent among male-headed households. Finally, children's aspirations are important in their own

considerations of what constitutes child well-being and how to achieve it. Qualitative findings indicate that lack of local economic opportunities and role models within the community compromised children's perceptions of the value of education and the extent to which this would bring them well-being at present and wealth in the future.

Keetie Roelen
k.roelen@ids.ac.uk

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Beyond income and outcomes: Shaping policy decisions on child-centered measurement of well-being and happiness

Andrea Rossi

Social Policy, UNICEF, MOZAMBIQUE

Most existing child indicators reflect a very adult way of looking at the world – they focus on income-related measures, or on outcomes in the health and education sectors. Yet these measures tell us very little about the multiple dimensions of children's well-being, the importance of their environment (cultural, natural, social), the way they use their time, their level of participation and their aspirations. At the same time, existing measures fail to capture what determines children's subjective well-being and levels of happiness.

This paper will explore the importance of expanding current approaches of measuring child well-being, looking at components such as having strong bonds with their parents, families and friends; feeling safe and protected; having time to play; being able to make their voices heard and express their identities; and having reason to be optimistic about their futures.

Building on previous work with governments around the world, including the experience in Bhutan on happiness, this paper looks at the importance of using data to shape policy decisions that generate sustainable well-being of children over time, providing not only statistically sound averages, but also measuring inequalities, looking at both individuals and the communities they live in.

In addition to presenting the concept, proposing indicators and discussing their methodological challenges, the paper will also highlight participatory methods for data collection which include children and youth and make use of new technologies. Finally, the paper will conclude by discussing possible applications of such data on child well-being in policy-making in the case of Mozambique, as well as the limitations of such approaches.

Andrea Rossi
arossi@unicef.org

How can administrative data help improve the situation of children in Mozambique?

Andrea Rossi¹ and Birgit Weyss²

¹ Social Policy, UNICEF, MOZAMBIQUE

² Independent researcher, SOUTH AFRICA

This article explores how administrative data (territorial statistics) can be used to identify worst-off populations, inform the policy making process, and monitor progress related to access and coverage of essential services in the health and education sector in Mozambique.

Mozambique is among the 10 least developed countries according to the 2014 Human Development Index. Despite considerable progress over the last decade some child development indicators remain stubbornly high. These include stunting which affects 43% of under-5 year olds. Looking beyond the national average the situation in some areas is even more alarming. For example, under-5 mortality is more than twice as high in Zambézia Province as in the provinces with the lowest mortality. In order to better identify geographic areas with the lowest performance on key health and education indicators and to monitor their progress, administrative data at district level have been analyzed.

The article discusses potential entry points on how this type of analysis can inform planning and budgeting processes at central and decentralized level. Using Mozambique as a powerful case study, it tries to debunk the hidden assumptions associated with the promotion of decentralized data for policy making purposes. It assesses strengths and limitation of geographical analysis of poverty and inequalities and explores possible additional approaches.

Important aspects of data quality and methodologies are discussed, including the use of administrative data vs. surveys and the possible use of new technologies. The article looks at the critical aspect of timing of data production and dissemination, and the existence of any possible trade-off between quality and timeliness of administrative data, as data need to be available at the right time to influence the policy decision-making process.

Finally the article looks at issues such as data access, dissemination and transparency, and it addresses the importance of strengthening the link between the national statistical system and other stakeholders, in particular with local civil society, media and citizens.

Andrea Rossi
arossi@unicef.org

Protecting kids: Child policy and child poverty through the Great Recession in liberal welfare states

David Rothwell¹ and Annie McEwen²

¹ Social Work, McGill University, CANADA

² Policy, Carleton University, CANADA

While the 2008 global economic crisis is over and many countries are into a recovery phase, the impacts continue to linger. Analysis of its aftermath offers insight into how economic shocks affect the lives of children and families. This study examines how children in five liberal welfare states fared through the Great Recession of 2008. We focus on liberal welfare states, following Esping-Anderson's (1990) typology. These English-speaking countries are characterized by reliance on means-tested social assistance, higher economic inequality, and less unionization. While prior studies have examined within-country (Waldfogel, 2010) and cross-country variation in child poverty (Gornick and Jäntti, 2012), there is a lack of knowledge about how child poverty varies within welfare regimes. Further, there is limited in-depth understanding about the extent to which social welfare policies mitigated the Recession's effects on children.

This study builds on the UNICEF report card (2014) to ask: How well have liberal welfare states protected children from the Great Recession? We used the latest nationally representative household survey data from Waves VI, VII, and VIII of LIS (formerly the Luxembourg Income Study), approximately aligning with 2004, 2007, and 2010. Countries included were Australia, Canada, Ireland, the United Kingdom and United States. Child poverty was measured in relative terms, as 50% of median equivalized household income. Poverty thresholds were anchored in 2004 to control for considerable overall shifts in income distributions during the Recession. Household income was measured pre-tax (market) and post-tax (disposable) and comprised of earnings from (a) labor, (b) capital, (c) transfers, and (d) others minus (e) taxes.

We found large cross-country variation in child poverty rates during this period. For example, in Canada poverty fell consistently across years (17% to 11%), whereas poverty increased slightly in the U.S. (20 to 21%). To understand the degree to which child poverty was reduced by social welfare transfers, we compared market income poverty to disposable income poverty (post-tax and transfers). Canada and the U.S. reduced far less poverty through policy (average 35%) compared to the U.K. and Ireland (averaged 68%). Australia was in between. To further understand the impact of social welfare transfers we decomposed changes in poverty rates over time by income source (labor, capital, transfers, and other). For example, the poverty reduction in Canada was largely due to increases in labor earnings whereas in the U.K. poverty was reduced primarily via transfers. In the U.S., the transfer system offset what would have been a large (4 percentage point) increase in poverty. Social policies had considerably more impact than changing demographics.

We contextualize our findings with a discussion of differences in child and family policy frameworks as well as differing policy responses to the Recession. Our research describes the different levels of protection provided by different social policy frameworks, as well as the effect on children of different government responses to the Recession. Aside from investigating the financial crisis as a discrete event, this study gives a richer understanding of the economic position of children within liberal welfare states.

David Rothwell
david.rothwell@mcgill.ca

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Establishing methods to enumerate children outside of households: Lessons learned and preliminary results from Cambodia

Beth L. Rubenstein¹, Lindsay Stark² and Richard Rinehart³

¹ CPC Learning Network: Epidemiology, Columbia University Mailman School of Public Health, USA

² CPC Learning Network: Program on Forced Migration and Health, Columbia University Mailman School of Public Health, USA

³ Center on Children in Adversity, USAID, USA

Two national surveys, the Demographic and Health Surveys (DHS) and the Multiple Indicator Cluster Surveys (MICS), drive assessment of the Millennium Development Goals, Poverty Reduction Strategies and other major international platforms in most low and middle-income countries. Such household surveys are essential to monitoring development progress and informing government priorities. However, little attention has been given to the fact that, by definition, household surveys are limited to people living in households. Our most important source of global data systematically excludes some of the world's most vulnerable populations, including the homeless, people living in institutions and migrant laborers. The situation of children outside of households is particularly precarious because many of these children are also outside of families or in homeless families that cannot adequately care for them. These children lack the most fundamental protections provided by a permanently engaged and/or minimally resourced parent or caregiver, with grave consequences for their physical, intellectual and emotional growth.

Recognizing this gap, a consortium of actors representing academia, government, donors and NGOs developed a set of methods and tools for establishing a nationally representative estimate of the number, distribution and basic characteristics of children outside of households. The methods are currently being piloted in Cambodia, under the leadership of the National Institute of Statistics. The approach revolves around gathering data on two proxy sub-groups of children outside of households: children living on the street and children living in residential care institutions.

Validation measures have been built into the pilot to assess the strength of the different components so that future enumerations can be adjusted accordingly. Specific measures to be field-tested include the selection of sentinel surveillance sites to serve as barometers of population-wide trends, comparison of daytime records and night-time bed counts at residential care institutions, and capture-recapture using social network sampling to assess the completeness of street counts. All data will be disaggregated by child age, gender and province.

Data collection is planned for May 2015 and preliminary findings are expected to be available by the time of the conference.

In order for governments, service providers and policy makers to adequately protect children and promote equity, they must have inclusive data that captures all children, including children outside of households. This pilot in Cambodia demonstrates that it is feasible for a government in a low-income country to establish a baseline count of children outside of households. A follow-up enumeration in Cambodia is planned for 2018. Future work should focus on scaling these methods to other countries and leveraging the results for advocacy. The overall goal should be to quantifiably reduce the number of children outside of households on a global level.

*Beth L. Rubenstein
br2304@cumc.columbia.edu*

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A visual method to facilitate child participation in risk and protection assessments

Mónica Ruiz-Casares

Dept of Psychiatry/Division of Social and Transcultural Psychiatry, McGill University, CANADA

There are numerous benefits to involving children and their insights in community development and planning processes (Driskell, 2002). Incorporating children's perceptions of risk and safety can help develop effective strategies for risk and injury prevention as well as promote child physical and psychological development. However, children's perspectives are rarely elicited and incorporated in program planning and evaluation. This presentation will describe an innovative visual method developed to facilitate young children's participation in research and evaluation (Ruiz-Casares et al., 2013; Ruiz-Casares, 2015). It will illustrate its use in consultations held in Central and Western Liberia and in Northern Laos, where young children reflected about elements in their communities that foster or hinder safety and well-being.

Photo-elicitation and community mapping were used to elicit young children's views and experiences of risk and protection and the meanings that they attach to community features that facilitate or hinder well-being. Sessions were conducted with children aged 7-11 years living in rural and urban settings in the Republic of Liberia (n=59) and in Lao People's Democratic Republic (n=103). Visual methods facilitated active and thoughtful participation among young children. In Liberia, children unanimously identified lack of food and clothing, violence and corporal punishment, smoking and other substance use by children, and child labor as sources of risk. Access to food, clothing, transportation, healthcare, and schooling; having time to sing, play, and practice sports; praying and attending religious services; children living with and helping parents at home; and parents playing, joking, and reading with children, were all considered protective factors. In Laos, children identified lack of hygiene, unintentional injuries, corporal punishment, domestic violence, gambling, and children sleeping in the streets as primary risks. In contrast, representations of artistic, religious, and cultural practices; food and shelter; supportive interpersonal relationships; and schooling were described as protective and sources of safety. Some images prompted conflicting interpretations which need to be interpreted in context. The presentation will end with advice to further enhance the efficiency of the method as a means for children to contribute to their own communities. Researchers and decision-makers will benefit from using this developmentally appropriate, context-sensitive visual method as a diagnostic and an education tool.

*Mónica Ruiz-Casares
monica.ruizcasares@mcgill.ca*

Global indicators of child care and supervision: Evidence from international child household surveys

Mónica Ruiz-Casares and Emmanuelle Bolduc

Dept of Psychiatry/Division of Social and Transcultural Psychiatry, McGill University,
CANADA

The effects of inadequate child supervision are well documented and may be far-reaching for children. Researchers have found that injuries, antisocial and risky behaviors, poorer school performance, and negative developmental outcomes seem to rise when children are not properly supervised. Lack of quality supervision of children has been mentioned as risk factors for child injuries in low-, middle-, and high-income countries. Caregivers' ability to supervise children is often limited as a result of poverty, unemployment, and demanding working conditions.

Additionally, the HIV/AIDS pandemic and armed conflict have increased caregiving burden, strained support networks, and reduced household resources. Recognition of the seriousness of inadequate care has led to the accumulation of a large body of research yet population-based data on this phenomenon is scarce, particularly in low- and middle-income countries.

This paper will present results from a global study aimed at assessing the prevalence of non-adult supervision of children under five and the factors associated with that practice cross-culturally.

Both quantitative and qualitative methods are used. Descriptive and multivariate analyses were conducted using key indicators of child development and supervision across more than 70 countries participating in the Multiple Indicator Cluster Survey (MICS) 3-5 and the Demographic and Health Surveys (DHS) VI. Both surveys, supported by UNICEF (the former) and Measure DHS and USAID (the latter), provide internationally comparable statistical estimates of socioeconomic and health indicators to monitor the situation of children and women in low- and middle-income countries. These quantitative results were complemented with semi-structured interviews with experts involved in these surveys and in child care and supervision in participating countries and regions. Information on child supervision is critical to inform policymakers as well as clinicians. This paper will draw recommendations for the measurement of non-adult child care and supervision and to inform the development of suitable policies and interventions to enhance child development and protection in participating countries.

Mónica Ruiz-Casares
monica.ruizcasares@mcgill.ca

Household dietary diversity and the nutritional status of children in South Africa

Winnie Sambu

Children's Institute, University of Cape Town, SOUTH AFRICA

Undernutrition remains a major concern in sub-Saharan Africa. It is one of the leading causes of child morbidity and mortality, has been shown to result in lower cognitive development in children and also result in poorer educational outcomes. Research has also pointed to long term negative impacts on productivity and transmission of intergenerational poverty. South Africa continues to record high rates of undernutrition. Stunting rates are high, and underweight and wasting remain a problem. In addition, the country is increasingly battling with the problem of over-nutrition. While there are various basic, underlying and immediate causes of child undernutrition, food insecurity remains one of the most common. According to the 2011 General Household Survey, over 2.5 million children in South Africa suffer from reported child hunger. Where food is available, diets in many parts of sub-Saharan Africa are monotonous and mostly cereal-based. Many interventions also target increase in quantity of food and less on the quality of diets that households consume. This is despite the fact that research conducted in other parts of the world, especially in developing countries, has shown the positive impacts that more diverse diets can have on child nutritional outcomes. Dietary diversity is also an important indicator of food access and a household's socio-economic level.

While most of the research around dietary diversity that has been conducted in South Africa has focused on adults, there has not been much studies on how household diet diversity impacts on children. This paper seeks to establish the nutritional status of children in South Africa (as measured by stunting, wasting and underweight), to examine household dietary diversity levels, and explore the links between dietary diversity and the various indicators of child nutritional status in South Africa. The study will use household survey data from a nationally representative survey - National Income Dynamics Study (NIDS) wave 1 which was carried out in 2008. Preliminary results show that stunting rates for children under the age of 5 remain high at 25%. Using a dietary diversity score, the study has found higher dietary diversity to be associated with lower rates of undernutrition. Households with high dietary diversity (in the highest dietary diversity group) have been found to have significantly lower stunting rates.

Winnie Sambu
winnie.sambu@uct.ac.za

Is schooling associated with cognitive functions of children in rural Burkina Faso? Preliminary results from the PROMISE Saving Brains study

Anselme Simeon Sano¹, Abdoulaye Hama Diallo¹, Houreratou Barry¹, Penny Holding², Ingunn Engebretsen³, Thorkild Tylleskar³, James Tumwine⁴ and Nicolas Meda¹

¹ Centre MURAZ, BURKINA FASO

² Aga Khan University Hospital, KENYA

³ Centre for International Health, University of Bergen, NORWAY

⁴ Makerere University, UGANDA

Psychometric evaluation of child development has never been reported from rural areas in Burkina Faso. We measured the impact at 6 to 7 years old of children involved in the PROMISE Exclusive Breastfeeding (EBF) study (NCT00397150) using a battery of psychometric tests assessing cognitive functions. The role of these instruments in monitoring child development will be evaluated.

The PROMISE-EBF study was a cluster-randomized trial conducted in 24 villages in the South West rural area in Burkina Faso. Children who were present in the original 24 clusters, or still living nearby, at the time of the psychometric assessments were re-recruited. Data collection included household questionnaire interview, clinical evaluation and psychometric assessment. Different psychometric tests including the Kauffman Assessment Battery of Children, Second edition (KABC-II) were administered by formally trained psychologists. A mixed-effects linear regression model was used to evaluate the effect of school enrolment on cognitive functions while accounting for the study cluster-design.

Results of the 699 alive children by 5 years of age, 574 were formally traced and 99% re-enrolled. Psychometric assessments were carried out on 563 children of whom 370 (65%) were ≥ 7 years, 303 (54%) were boys and 313 (55%) were enrolled at school. School enrolment was found to be significantly associated with higher scores of simultaneous processing using the KABC-II test for 6 and 7 year-old. The reliability and validity of the measures will also be presented.

Schooling was associated with cognitive functions in rural Burkina Faso. This finding needs to be cautiously interpreted as our analyses assumed a fair reliability and validity of the KABC-II subtests in the context of rural Burkina Faso.

*Anselme Simeon Sano
ansebf1@yahoo.fr*

Developing indicators of well-being for children in the care of Local Authorities in England

Julie Selwyn¹ and Andrew Radford²

¹ School for Policy Studies, University of Bristol, UNITED KINGDOM

² Coram Voice, UNITED KINGDOM

This presentation will describe the development of indicators to capture the well-being of children in care in England. In England about 68,000 children are in the care of local authorities (LAs) primarily because of parental abuse and neglect. Research on care populations throughout the world has consistently reported poor adult outcomes such as lower educational achievement, increased risk of homelessness, drug/alcohol abuse, mental health problems and involvement with the criminal justice system. This study began by asking, 'Which LAs are able to provide a good care experience for children and how do they do it?' We quickly realised that available indicators were inadequate and did not include children's own views about their well-being. Therefore the team, a partnership between a University and an advocacy charity, set out to develop a set of indicators that children in care identified as being important to them. Children and young people living in foster and residential care have been involved at every stage of the project.

To develop the indicators and design the on-line survey the methods used have been a) a desk based literature review b) expert roundtable event with professionals, c) focus groups with 150 children and young people in care age 6-24yrs and d) individual interviews with asylum seeking young people and children in care with a disability. Four key themes emerged: relationships, respect, rights, and residency. A draft survey was developed and taken back to three children and young people's focus groups for comment. Questions were revised and reduced. A designer developed the 'look' of the survey using best practice guidelines and input from young people and software was developed to visualise the data.

The online survey is in the pilot stage (March-Sept 2015) with nine LAs taking part. The survey is intended to be completed in school by children in care (age 4-18 yrs). Cognitive interviewing is taking place. Data will be analysed and presented in a visual form for LAs to compare their children's well-being with comparator LAs and make some comparisons with general population data. We hope that by 2016/17 all LAs will be using the survey. Our aim is for the survey to identify the LAs who are providing a good care experience for their children and to prompt those who are not to improve their practice. Further work will be undertaken to understand the policies and practices that are in place that provide good care experiences.

*Julie Selwyn
j.selwyn@bristol.ac.uk*

The chronic water shortage and early childhood development in Palestine: Making the link and implications for policy and practice

Ghassan Shakhshir

Welfare Association, PALESTINIAN TERRITORY

The percentage of Palestinian children who are not on track in their social, cognitive and physical development, is higher than their peers in neighboring countries. A considerable body of research and interventions have addressed the health impacts of the inadequate access to domestic water supply, but they have rarely addressed its long term impacts on early childhood development. This research establishes evidence that the inadequate access to water supply in Palestine influences early childhood development directly and indirectly through the mediated and moderated effects of poverty, child care and child health. Implications of this link on child well-being and development related policy and practice are discussed.

The objectives of the study are to establish and explain the causal link between water supply and early childhood development; and to investigate the implications of this link on policy and practice.

Demographic and Health data obtained from nationally representative surveys were merged and analyzed. Descriptive analysis was used to investigate the trends and characteristics of water access and early childhood development in Palestine. The causal mediation modelling was developed and used to explain the pathways through which water supply interacts with child health, family care and poverty. Ecological data of multidimensional social, economic, health and environmental conditions in 52 communities in Palestine were collected, merged and used to develop a water-child well-being index to be used as a single summary measure that captures the impact of water supply on children well-being and development. To investigate the implication of this link on programs and practices, evidence based evaluation for the early childhood programs was conducted.

The study found that the intermediate level of water supply service in Palestine poses low risk for diarrhea and stunting occurrence, however, it influences early childhood development through the mediated effect of inadequate family care and poverty.

The study concluded that children born and raised in households and communities with inadequate water supplies are at greater risk of not achieving their development potential. The long term exposure to inadequate access to water supply exacerbates the negative impact of poverty and inadequate family care on early childhood development, suggesting new perspectives in child well-being and development monitoring systems, and interventions in Palestine.

Ghassan Shakhshir

shakhshir@jwelfare.org

Thermal care for new-born babies in rural southern Tanzania: a mixed-method study of barriers, facilitators and potential for behaviour change

Donat Shamba¹, Joanna Schellenberg², Zoe Jane-Lara Hildon³, Irene Mashasi¹, Suzanne Penfold², Marcel Tanner⁴, Tanya Marchant², Zelee Hill⁵

¹ Data Analysis Cluster, Ifakara Health Institute, TANZANIA

² Faculty of Infectious Diseases, London School of Hygiene and Tropical Medicine, UNITED KINGDOM

³ Saw Swee Hock School of Public Health, National University of Singapore and London School of Hygiene and Tropical Medicine, UNITED KINGDOM

⁴ Swiss Tropical and Public Health Institute, and University of Basel, SWITZERLAND

⁵ University College London Institute for Global Health, UNITED KINGDOM

Hypothermia contributes to neonatal morbidity and mortality in low-income countries, yet little is known about thermal care practices in rural African settings. We assessed adoption and community acceptability of recommended thermal care practices in rural Tanzania.

This is a multi-method qualitative study, enhanced with survey data. For the qualitative component we triangulated birth narrative interviews with focus group discussions with mothers and traditional birth attendants. Results were then contrasted to related quantitative data. Qualitative analyses sought to identify themes linked to a) immediate drying and wrapping the baby; b) bathing practices, including delaying for at least 6 hours and using warm water; c) day to day care such as covering the baby's head, covering the baby; and d) keeping the baby skin-to-skin. Quantitative data (n=22,243 women) on the thermal care practices reported by mothers who had delivered in the last year are given accordingly.

The results show that 42% of babies were dried and 27% wrapped within five minutes of birth mainly due to an awareness that this reduced cold. The main reason for delayed wrapping and drying was not attending to the baby until the placenta was delivered. 45% of babies born at a health facility and 19% born at home were bathed six or more hours after birth. The main reason for delayed bathing was health worker advice. The main reason for early bathing was a belief that the baby is dirty, particularly if the baby had an obvious vernix as this was thought to be sperm. On the other hand, keeping the baby warm and covered day-to-day was considered normal practice. Skin-to-skin care was not a normalised practice, and some respondents wondered if it might be harmful to fragile new-borns.

Most thermal care behaviours needed improving. Many sub-optimal practices had cultural and symbolic origins. Drying the baby at birth was least symbolically imbued. Practical interventions such as having more than one attendant to help both mother and baby, and culturally anchored sensitization are recommended.

Donat Shamba

dshamba@gmail.com

Incidence and comorbidity for children with Down syndrome: Results from the applications of health data linkage strategies

Shu-Fang Shih¹, Likwang Chen², and Chen Li Lin³

¹ Dept of Health Promotion and Health Education, National Taiwan Normal University, TAIWAN

² Institute of Population Health, National Health Research Institutes, TAIWAN

³ Obstetrics & Gynecology, Taipei City Hospital, TAIWAN

Down syndrome is a condition that results in a range of physical and intellectual disabilities. So far, there has not been a national surveillance system for constructing the health indicators for Down syndrome children, although Taiwan has rich data sets such as birth registry and national health insurance claims data. Our study aims to analyze the incidence rate of Down syndrome (DS) and their comorbidity in order to construct the health indicators for these children with special healthcare needs using data linkage strategies.

We used birth registry data, National Health Insurance (NHI) claims data, and death registry from 2009 to 2011 and linked these data to construct an integrated data sets for analysis. The ICD9 codes for retrieving the DS cases are 7580 or 758 and the types of disease of these children will be retrieved from the inpatient and outpatient records from the national health insurance claims data.

Our study has shown that the number of incidences of Down syndrome from the birth registry data alone is mostly underestimated. The comorbidities of these DS children are complicated. Further attention should be paid to the continuity of and integrated healthcare for these children in order to maintain their quality of life in Taiwan.

Shu-Fang Shih
annsshih@ntnu.edu.tw

Orphanhood prevalence, living arrangements and orphanhood reporting in Lesotho, Malawi and Zimbabwe

Mercy Shoko and Latifat Ibisomi

School of Public Health, University of the Witwatersrand, SOUTH AFRICA

The orphanhood magnitude, measured from orphan prevalence is old and has been necessitated by the upsurge in adult mortality levels in human history due to wars or epidemics. Children's orphanhood status forms the basis of some important child indicators and therefore the understanding of its measurement is crucial. The reliability of orphanhood estimates is dependent on the quality of the data used to derive the estimates. Sources of orphanhood data are largely model estimates and surveys; the latter include censuses and sample surveys. The model estimates have been criticised for overstating the underlying adult mortality and the subsequent orphan estimates, but have been continually updated by the Joint United Nations programme on HIV and AIDS (UNAIDS) Reference Group on Estimates, Models and Projections. Maternal and paternal orphan model estimates are computed using Spectrum's Estimation and Projection Package modules; Demographic Projection (DemProj) and AIDS Impact (AIM) Models. They are based on demographic-epidemiological model projections of mothers/fathers fertility and mortality and the mortality of children using a method developed by Grassly and Timæus (2005). Survey estimates have been shown to either under-or-overstate orphan prevalence because of the bias known as the adoption effect or absenteeism effect, wherein foster parents are substituted for biological parents that are dead and absent parents reported as alive or dead. The survey orphanhood estimates are obtained from two separate parental survival questions on whether or not the index persons' mother/father is alive. The discourse on the quality of the survey orphanhood data have been on going at least since the mid-20th century and there is evidence suggesting that children's living arrangements may affect orphanhood declaration. This study is an examination of the relationship between living arrangements, orphanhood reporting and orphanhood estimates; a relationship which remains largely underexplored.

The study uses the Demographic Health Survey data for Lesotho, Malawi and Zimbabwe for 2009, 2010 and 2010 respectively, and the model orphan estimates for the same periods and the 2006, 2008 and 2012 census orphan estimates for Lesotho, Malawi and Zimbabwe respectively. The orphanhood definition used is consistent with international standards for children under 18 years and non-mutual exclusivity for maternal and paternal orphanhood. The survey and model estimates are compared for maternal, paternal and double orphans. Assessment of the quality of survey orphanhood data is done by checking the quality of age data and the proportion of data with missing parental survival information both which can affect the quality of the orphanhood data. Internal consistency checks are also done between mothers'

reports of children present in the household with them and children's reports of their mothers which should be comparable except in cases where the mother was not successfully interviewed. Also the association between orphaned children (maternal/parternal) and children co-resident with the respective parent is examined to check if there was association between the two to investigate any systematic misreporting of orphans.

*Mercy Shoko
0705367W@students.wits.ac.za*

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"Don't just measure our health, measure it with us": The role of youth in health and well-being indicators

Annie Smith

McCreary Centre Society, CANADA

In 2010, the Office of the Representative for Children and Youth in the province of British Columbia (BC), Canada and the Provincial Health Officer aimed to develop an accurate and measurable picture of child and youth health and well-being in the province. They contracted the local not-for-profit McCreary Centre Society to consult with over 200 youth about how child and youth health should be measured.

The inclusion of youth voices was fundamental to identifying the indicators to be used, and youth provided context to the research evidence which was available at that time. Some of the indicators suggested by youth have now been adopted across Canada to measure child and youth health and well-being. In 2014, 228 young people from a variety of backgrounds and experiences were asked to review a range of new and updated data on youth health, and provide their feedback and perspectives.

Indicators reviewed by youth covered the following domains: child behaviour, child physical and mental health, child safety, child learning, family economic well-being, and family peer and community connections. The young people who participated came from 18 urban and rural communities across BC, and included 55 youth with experience of government care who provided additional feedback on inequalities which surfaced in the indicators. These included graduation rates, post-secondary attendance, income assistance take up, food security, and placement change among youth in the care of the BC government. The on-going involvement of youth in the measurement and reporting process enriched understanding in BC of child health and well-being, and provided context to the research evidence and directions for improvement which would not otherwise have been captured.

This presentation will share youth's perspectives on the indicator set and their interpretation of the data. It will also describe the methodology used to include youth, as well as the challenges and benefits of this methodology.

*Annie Smith
annie@mcs.bc.ca*

Measuring health disparities among youth living in the slums of Kampala, Uganda: Conceptual issues and comparisons with nationally representative school-attending youth

Monica Swahn¹ and Rogers Kasirye²

¹ Epidemiology and Biostatistics, Georgia State University, USA

² Uganda Youth Development Link, UGANDA

This study examined the extent to which youth that live in the slums of Kampala, Uganda experience worse health outcomes with respect to mental health, sexual risk behaviors, violence, alcohol and drug use than nationally representative school-attending youth. Analyses were based on three cross-sectional surveys: 1) The Kampala Youth Survey (convenience sample of service seeking youth living in the slums; conducted in 2011; N=457); 2) The Global School-based Student Health Survey (nationally representative sample of school-attending youth, conducted in 2003; N=3215); 3) The Global School-based Student Health Survey (urban representative sample of school-attending youth, conducted in 2003; N=1,709). Analyses restricted to youth aged 14-18 assessed the differences in prevalence of indicators across mental health, sexual risk behaviors, violence, alcohol and drug use, using Chi-square tests.

The results of these comparisons indicate that youth in the slums differed markedly from urban and nationally representative youth on several mental health indicators (i.e. loneliness, worrying, sadness, and suicide ideation), sexual health indicators (i.e. condom use, number of partners, and age of sexual initiation) and violence (i.e. involvement in physical fights). Youth in the slums did not differ from urban and nationally representative youth with respect to alcohol and drug use (i.e. alcohol use, drunkenness, problem drinking and drug use).

Youth living in the slums of Kampala had significantly higher prevalence of indicators pertaining to mental health, sexual health and violence underscoring dramatic disparities and grave concerns for their health and well-being. Additional research and data collection are needed to better understand the health context of these vulnerable youth. This is particularly important since these youth are likely to not be captured in other epidemiologic and systematic data collection efforts handled through household surveys or through schools. Additionally, health and development indicator development will be needed as are indicators to facilitate the measurement of the structural drivers for these health risks to determine community contexts.

Monica Swahn
mswahn@gsu.edu

"Every time that month comes, I remember": Improving the measurement of adolescent grief through cognitive interviewing

Tory Taylor¹, Tonya Thurman² and Lineo Nogela³

¹ School of Public Health, Tulane University, USA

² School of Social Work, Tulane University, USA

³ UNFURL Human Capital Development, SOUTH AFRICA

The objective of this research is to implement a cognitive interviewing protocol with results used to adapt standard psychological scales for research with bereaved adolescents in South Africa. Cognitive interviewing is a qualitative method designed to provide detailed information about how individuals comprehend potential survey questions, recall the information needed to provide a response, decide if and how to use that information, and choose or generate an answer. Used to improve the validity, reliability, and cultural acceptability of survey questions, cognitive interview data may be especially valuable for psychological scales and other subjective well-being measures. Twenty-one adolescent former participants in bereavement support groups from the Free State participated in cognitive interviews in order to adapt questions about bereavement and its effects for use in an upcoming program evaluation.

The research provides a blueprint for the successful implementation of cognitive interviews with orphaned adolescents as well as important information about the quality and utility of the measures tested. Respondents who spoke Sesotho with their families at home still experienced notable difficulty completing a cognitive interview in Sesotho, likely due to the commonality of English as an instructional language. Interviewees varied in their comfort level with the free association and examination of one's own thought processes that cognitive interviews entail, suggesting the need for enhanced orientation to the response task for groups whose cultural practices favor deference from children. Participants provided valuable insights into bereavement-related social and linguistic preferences (e.g. the use of "loss" over "death," consensus that not thinking frequently about a deceased loved one was shameful), and response option complexity was a significant issue, suggesting that standard grief scales should be shortened and simplified for use with this population.

The study highlights the unique challenges associated with applying Western psychological scales in developing countries, as well as the potential utility of cognitive interviews to guide the adaptation process. As psychological support programming continues to be expanded in response to the needs of orphans and other vulnerable children, methods designed to support the accurate measurement of program outcomes will be critical for evaluation quality assurance.

Tory Taylor
ttaylor@tulane.edu

Reinforcing prioritization of child-friendly equity focused strategies using Multiple Overlapping Deprivation Analysis (MODA) in Malawi

Maxton Tsoka¹ and Stanley Gwavuya²

¹ Center for Social Research, University of Malawi, MALAWI

² Social Policy, UNICEF, MALAWI

The multidimensional nature of the poverty concept is widely recognized, yet its use to guide programming and targeting of policy interventions in the fight against poverty is rarely used especially in developing countries. Malawi is no exception, and poverty prevalence obtained from the monetary poverty measures are used to define the target groups for programme such as the social cash transfer programme, the public works programme and the Food Input Subsidy Programmes.

We use data from the 2013 Integrated Households Panel Survey (IHPS) and apply the Multiple Overlapping Deprivation Analysis (MODA) to highlight the overlap between multidimensional poverty and monetary poverty in Malawi. MODA provides a comprehensive approach to facilitate analysis of inequities and to provide instruments to identify deprived children. We compute and use the deprivation rate which is based on a threshold of four deprivations for children 0-59 months and three deprivations for children 5-17 years.

The results show a significant overlap between the poverty measures when using the national poverty datum line and the multidimensional measure. We conclude that not all children who are deprived are living in poor households as defined by the national poverty line. Therefore policies and programmes that are targeted exclusively on monetary poverty will miss children who are deprived. The intersection between poverty measure and the multidimensional poverty measure can be used to refine targeting thresholds for social protection programmes in Malawi.

Maxton Tsoka
tsokamx@gmail.com

Social policy and programs focused on children in Peru (2010-13): An evaluation based on the Multidimensional Poverty Index

Enrique Vásquez

Economics, Universidad del Pacífico, PERÚ

During the first decade of the new millennium, the economic growth of Peru was impressive. According to the official statistics, the monetary index decreased dramatically. However, in 2011 a new government was elected because the gains of the economic boom was not tangible for the poorest and a more inclusive approach of the economic and social policy was necessary. In this context, the government allocated 10 billion US dollars per year of public budget to social programs focused on children.

This paper is an evaluation of the Peruvian government's social expenditure focused on children. This issue is studied from two perspectives. On the one hand, the Multidimensional Poverty Index, based on Alkire Foster (2007) methodology has been applied to the LSMS (2010-13), taking into consideration the different age groups of children, ethnic groups and geographical dominium. On the other hand, the social expenditure focused on the main 10 government programs targeted on children has been analysed based on data from the Integrated Financial Websystem hosted by the Ministry of Economics and Finance.

The primary findings of the paper draw attention to the fact that the Peruvian public policy has implemented a regressive approach to the public social expenditure focused on children. While many of the new law and policy instruments (2010-13) followed a children rights approach, the public management allocated resources not taking into consideration multidimensional poverty, vulnerability of ethnic groups and level of rurality. Moreover, a comparison of the monetary and multidimensional poverty indexes in Peru (2010-13) focused on children showed critical gaps of size of children population group. This gap might explain the fact that an important part of the under-18 year old population was not visible for the policymakers and economic managers. Thus, the lack of proper measurement of the real level of poverty of children could be misleading the allocation and use of public resources. As a result, social conflicts at sub-national level in Peru could be nurturing.

Enrique Vásquez
vasquez_ee@up.edu.pe

The dynamics of child poverty in South Africa between 2008 and 2012

Marisa von Fintel, Asmus Zoch and Servaas van der Berg

Economics, Stellenbosch University, SOUTH AFRICA

Data from household surveys indicate that, despite the decline in poverty in South Africa since the mid-2000s, there are many households for whom it has been impossible to break the cycle of poverty in which they find themselves. The existence of a poverty trap as well as the causes and consequences arising from this have stimulated much research. Some important findings from this research indicate that the best chance of success in stemming poverty traps relies on early-life intervention. In particular, investment in children at the earliest stages of development is now seen as a critical policy intervention for positively influencing later welfare (Currie and Vogl (2012) and Heckman and Masterov (2007)). This linkage between tomorrow's economic development and a healthy and nurturing environment for today's children is what underpins UNICEF's call to action to put children at the centre of sustainable development.

Although research on child poverty in South Africa, as set out above, exists, there is a scarcity of studies examining the depth of deprivation among children as well as tracking the changes in child poverty over time. The aim of this paper is to examine and decompose the determinants of child poverty, understand who is falling behind, and to look more specifically at how children were affected by these trends. For this purpose, we make use of the theoretical framework first developed by Carter and May (2001) and later applied by May and Woolard (2007).

To conduct our study we use data from the National Income Dynamics Study (NIDS). The NIDS dataset, which comprises longitudinal data on approximately 18 000 individuals interviewed in all three waves over the period 2008 and 2012, is the first nationally representative panel dataset in South Africa. Of the approximately 18 000 individuals interviewed, 43% were 18 years old or younger in 2012. Using data on households who remained in the sample over this period, we are able not only to track the changes in income and expenditure, but also to decompose and examine these changes further using the wealth of household- and individual-level information included in the survey.

The framework we use allows us to identify those children in households that are in structural poverty with an asset base which is too low to escape poverty in the long run. We find that almost 40% of the children in our sample found themselves in this structural poverty trap between 2008 and 2012. As expected, these children have suffered as a result of this deprivation, even in comparison to their peers who have also been chronically poor over the period but were living in households with access to more assets.

We conduct some preliminary investigations into the potential causes of welfare changes over time. In line with previous work on the topic, we identify low initial levels of education, low asset-holdings, low initial employment and adverse household formation as possible causes of these poverty traps.

Marisa von Fintel

marisa.vonfintel@gmail.com

Child survival and development: Understanding the cost of child-care in the first 1000 days of life in Kenya

Pamela Wadende¹ and Solomon Mumah²

¹ Dept of Psychology and Foundations, University of Kabianga, KENYA

² The Psychology Clinic, PsyHealth International, KENYA

Researchers concur; the early years of a child's life are crucial for their future healthy growth. The years backtrack beyond zero and include the mother's preparation for the pregnancy, gestation and into the first eight years of life. Among other things, material and psychosocial support are critical for the mother and unborn child and later the new-born. And while all researchers agree on the importance of optimum child-care practices in the first eight years of life, in Kenya there may be a gap of crucial knowledge-based procedures regarding care in the first 1000 days of life, when the child is most vulnerable to their environment. Child survival and development is heavily dependent on this period. Developmental lags that accumulate then due to inadequate emotional/material support seldom get corrected in later years. Ironically, it is at this age that essential child specific services are most uncoordinated. The researchers underscore that health, social services, and education providers all have roles to play in the healthy development of the child. However, they lack coordination to best serve the needs of the growing child.

Because of this, we conducted this study on child care preparedness and arrangements that parents (120 females; 40 males) made for their children's first 1000 days. Subjects were parents seeking pre-and-postnatal care at a public hospital in Kericho, Kenya. The study sought to understand parents' and care-givers' preparedness to successfully serve children's needs in the psychomotor, affective and cognitive domains; foundation stones for child survival and development. Qualitative FGD data was collected from four days of one hour sessions each with different groups of parents, following an explanation about the importance of the first 1000 days of life for children's health outcomes.

Findings are that 80% followed directions about pre/postnatal care as contained in the mother and child clinical booklet provided by the Ministry of Health, especially in keeping appointments for review and immunization. Some 20% had read the book fully and especially the section that gives guidance on how to stimulate a child for the development of the three critical human domains. A number regarded the booklet as merely the clinic's documentation of their visits. The majority of respondents had care arrangements for their children in the form of an adult (grandmother, aunt, Ayah) baby-sitting but had not prepared the caregiver for the task of stimulating the child's development in the three human domains. Still a number of the respondents had planned to get a caregiver after the baby was born or after they completed their three

months maternity leave from work. Overall, there seemed an aura of uncertainty among the respondents about child-care practices for the initial 1000 days of life. This uncertainty is echoed in education policy addressing this age-group, which quickly glazes over this age and moves on to address the years 3+; no wonder that the parents are uncertain about optimum cognitive development at this stage. There is a need for policy that streamlines child care services and practices in Kenya.

Pamela Wadende

pamela.wadende@gmail.com

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Youth unemployment in Australia and the United Kingdom

Melissa Wong¹ and Gill Main²

¹ Social Policy Research Centre, University of New South Wales, AUSTRALIA

² School of Education, University of Leeds, UNITED KINGDOM

Since the global financial crisis, youth unemployment has been a pressing issue in many countries. In Australia, official statistics show that unemployment rates for those aged 15 to 24 years reached its peak of 14 percent in 2014 – the highest rate in the last ten years and more than double the overall unemployment rate of around 6 percent. Similarly in the UK, the unemployment rates of young people aged 16 to 24 years has been reported at around 16 percent in 2014. Faced with a weak labour market, young people in both countries are finding it harder to find and maintain a first job. In particular, disadvantaged youth lacking basic education who were finding it hard to attain employment before the global financial crisis are now at an even higher risk of being left behind.

This paper examines the characteristics of young people in Australia and the UK who were unemployed and not in employment, education or training (NEET) during the period following the global financial crisis. These groups of young people are compared across the two countries in terms of individual, household and employment characteristics. Specific attention will focus on young people who were unemployed and NEET for long periods of time and those who received social security payments and other forms of government cash assistance. This paper uses quantitative data from the Household, Income and Labour Dynamics in Australia (HILDA) Survey and Understanding Society: The UK Household Longitudinal Study covering the period from 2009 to 2013. The paper also includes a brief review of policies related to the youth labour market in both Australia and the UK.

Gill Main

g.main@leeds.ac.uk

