Reduced inequalities with focus on children and youth

- Inequality starts with lottery of birth
- Disadvantages in early life can limit (life-long) opportunities and potentials
- Early interventions and investing in all (poor) children to break intergenerational inequality
- Cash and in-kind programmes: universal child grants, work integration parents, quality education, health care, housing and infrastructure
Current state of data infrastructure on child wellbeing

• Having consistent, comparable and high-quality data on child wellbeing is crucial for eliminating inequalities through informed policymaking

• Availability of longitudinal data on children as they grow up is currently uneven across Europe, hindering evidence-based policy-making

• Necessary to improve the evidence-base and accessibility of child wellbeing data
## COORDINATE (2021-2025)
(COhort cOMmunity Research and Development Infrastructure Network for Access Throughout Europe)

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<th>Objectives</th>
<th>Overall Aim</th>
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<td>1. Facilitate improved access to existing survey data on child wellbeing</td>
<td>Improve child wellbeing by improving evidence-base and accessibility of child wellbeing data for policymaking</td>
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<td>2. Extend the Growing Up in Digital Europe (GUIDE/Eurocohort) survey network</td>
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<td>3. Initiate the GUIDE survey with a large-scale cohort pilot survey using a harmonised instrument and research design in key European countries</td>
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EuroCohort/GUIDE

- Accelerated birth cohort survey: sample of newborn infants and school age children in tandem until age of 24
- Parental survey from birth to 15; child survey from age 9 to 24
- Topics relating to health and wellbeing, time-use, relationships, social networks, attitudes, education, activities, neighbourhood, etc.
- Pilot to begin in 2023 in 4 countries (Ireland, France, Croatia and Finland)
Child poverty in selected European cities: strategy/ budget

- Cities important stakeholder in providing equal opportunities
- Comprehensive strategies to combating child poverty
- Usually allocate own budget resources and complement policies on state or regional level
- Own funding represents most common source to finance local measures, combined with national and/or regional and sometimes also EU-funding
Child poverty: approaches

- Cities often combine universal approach of family support with means-tested measures to comply with multiple demands
- Both integrated approaches targeting family as a whole and place-based approaches focused on specific disadvantaged urban areas
- However, cities partly do not feature all necessary competences to encompass multitude of issues
- Strong collaboration between local stakeholders and service providers pre-condition for successful strategies and information-sharing
Child poverty: good practices

• Economic status, work intensity: Vienna: cooperation between Department for Social Welfare and PES offering <25 Vienna Youth Support Service with one-stop-shop for MIB-recipient
• Income and financial capacity: Amsterdam: Social service organisations support families with financial problems in income management, emergency assistance and debt restructuring
• Education and care: Warsaw: Local Support System with NGOs improving school results, attendance and social competences of vulnerable children and youth
• Health: Zagreb: coverage of children by health insurance independent of status of parents
• Housing and infrastructure: Barcelona: During COVID guarantee that energy and water supply is not suspended due to delayed payments for families with children
Child poverty: index on material deprivation

- Based on EU-SILC: identification of city inhabitants: Vienna, Brussels, Tallinn, Barcelona, Helsinki, Bucharest
- Domains: Debts and arrears, Financial capacity, Health, Social interaction, Housing and local environment, Education and care
- Results for overall index and each domain
- Interacting with monetary poverty
- Association with socio-demographic characteristics: work intensity, education level, family type, migration background, health limitations, etc.
Social inequalities and juvenile delinquency (1)

1. Ethnographic research in Chicago (Thrasher 1927; White 1943):
   • Crime as a side-effect of population density, overcrowded streets and poverty
   • The gang as a struggling social group that emerged from the social milieu in the neighbourhood.

2. Post-war studies: Political hot climate of social protest against social inequalities
   • Structural and institutionalized inequality → collective experience of strain → sub-cultures and counter-cultures (A. Cohen 1955)
   • Focus on institutions of social control (CJS, police), and on reaction to behaviour, not behaviour itself → labeling (H. Becker 1963).

3. 1980s→ Pragmatism, Rational Choice Theory
   • Deterrence, opportunity reduction, target hardening: Surveillance technologies
   • Social crime prevention: Large-scale quantitative surveys on risk factors (personality, family background, schooling, neighbourhoods, leisure activities)
Youth Delinquency – Control Factors in the ISRD Study

Youth delinquency

- peer-group
- family
- attitudes to crime
- School achievement
- self-control
- neighbourhood
- victimisation
- Social service provision
- Severe life-events

Socio-demographic variables:

- City / town
- School-type
- Age
- Gender
- Migration background and identity
Interventions should be designed to

- establish a strong attachment with *positive role models*
- elaborate social programmes that allow juveniles to be committed to an accumulation of positive achievements in life
- involve young people in *meaningful activities* other than "hanging around"
- influence their *moral convictions* that guide their actions.
Child and adolescent inequalities, Croatia and Moldova case study

- **Inequalities** result from interlinked and evolving causes, with long-lasting effects on wellbeing, quality of life and opportunities.

- **Inequalities** are defined as limited access to education, healthcare, safe environment and participation.

- **Causes of inequalities** are poverty, disability, gender, ethnicity, and migration background.
Evidence, Croatia and Moldova case study

- **Poverty as main driver of inequality**, limiting access to education (quality & duration), healthcare (specialised health care) and justice, all universal but require high informal payments.

- **Disability as an important driver of inequality**, restricting access to education (children with psychosocial disabilities) to healthcare (children with rare diseases, severe disabilities, HIV), to CBS, safety and justice.

- **Gender is also an inequality driver**, limiting access to justice (boys more affected) safety (both girls and boys affected but in different ways), leisure (girls more affected) and youth employment opportunities.
Evidence, Croatia and Moldova case study

• **Ethnicity is a driver of inequality**, limiting access of children and adolescents to essential services and social participation, most problematic is the access to early education services, secondary education, specialised healthcare, social protection.

• **Migration is a driver of inequality**, children with both emigration (MD) and immigration background (HR) have less access to safety, support services, participation and social life.
Importance data collection, analysis and use

• Data mapping exercise to identify gaps, sources, indicators related to national targets
• Collect and analyse data from different sources
• Disaggregate data for disadvantaged children
• Improve reporting on expenditures and programmes with impact on child well-being
• Adopt principles of results-based reporting to spending on children (focus on equity and effectiveness)