



# Development: physical, cognitive and social

Yvonne Kelly

[www.ucl.ac.uk/icls](http://www.ucl.ac.uk/icls)

@icls\_info

@childofourtime

# What is Child Development?

Child development refers to the ordered emergence of interdependent skills of sensori-motor, cognitive-language, and social-emotional functioning. This emergence depends on and is interlinked with the

*A World Fit for*

*Children*

# Developmental perspective

Domains of human development:

Physical and sensori

Cognitive and language

Social and emotional

**What are the influences on  
early child development?**

# Adolescence

The period from the onset of puberty to that of an independent role in society

# Puberty transitions

Physical stature, sexual characteristics

Physiological endocrine

Psychological autonomy, identity,  
decision making, social relationships



# Social transitions

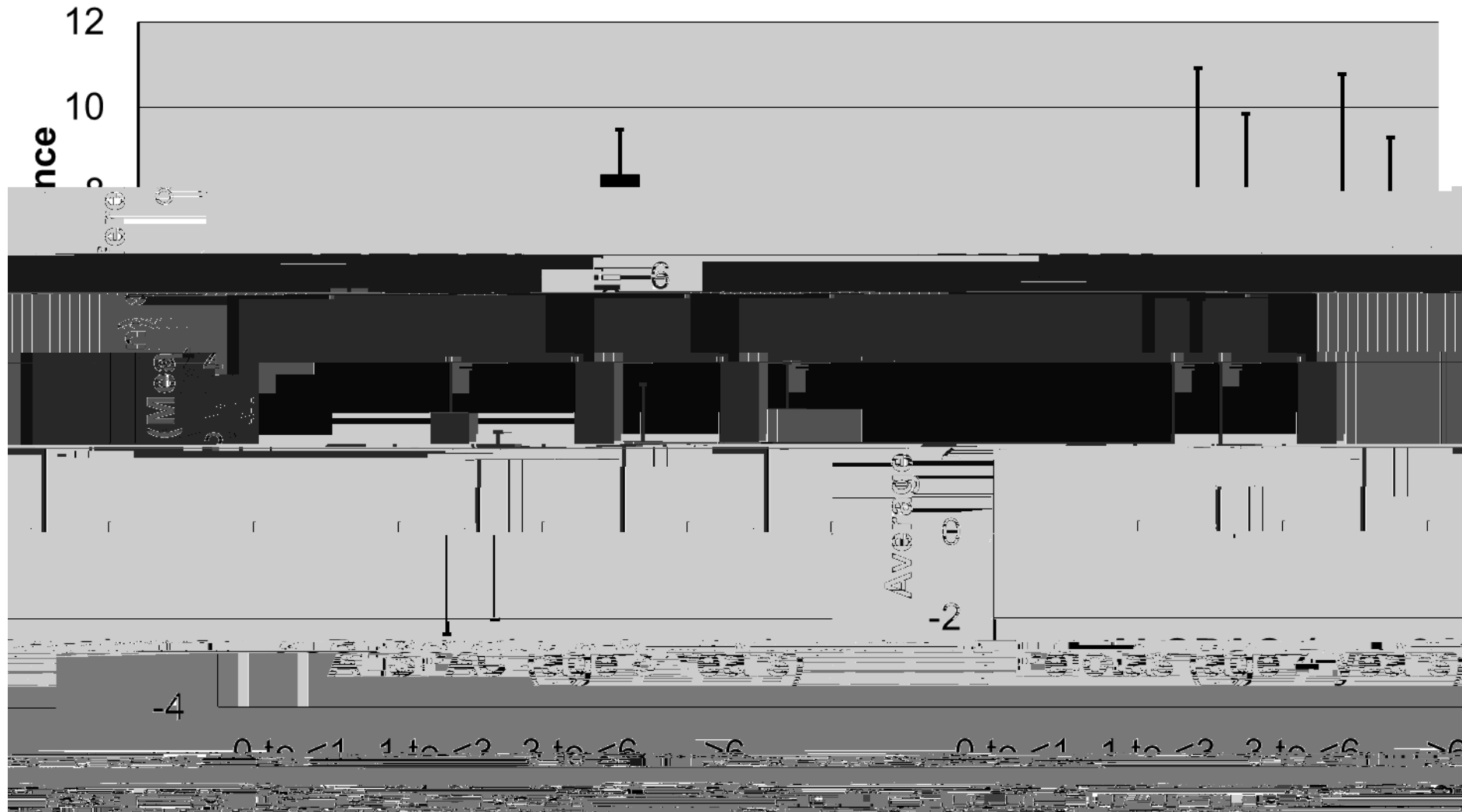
Leaving education

Entering employment

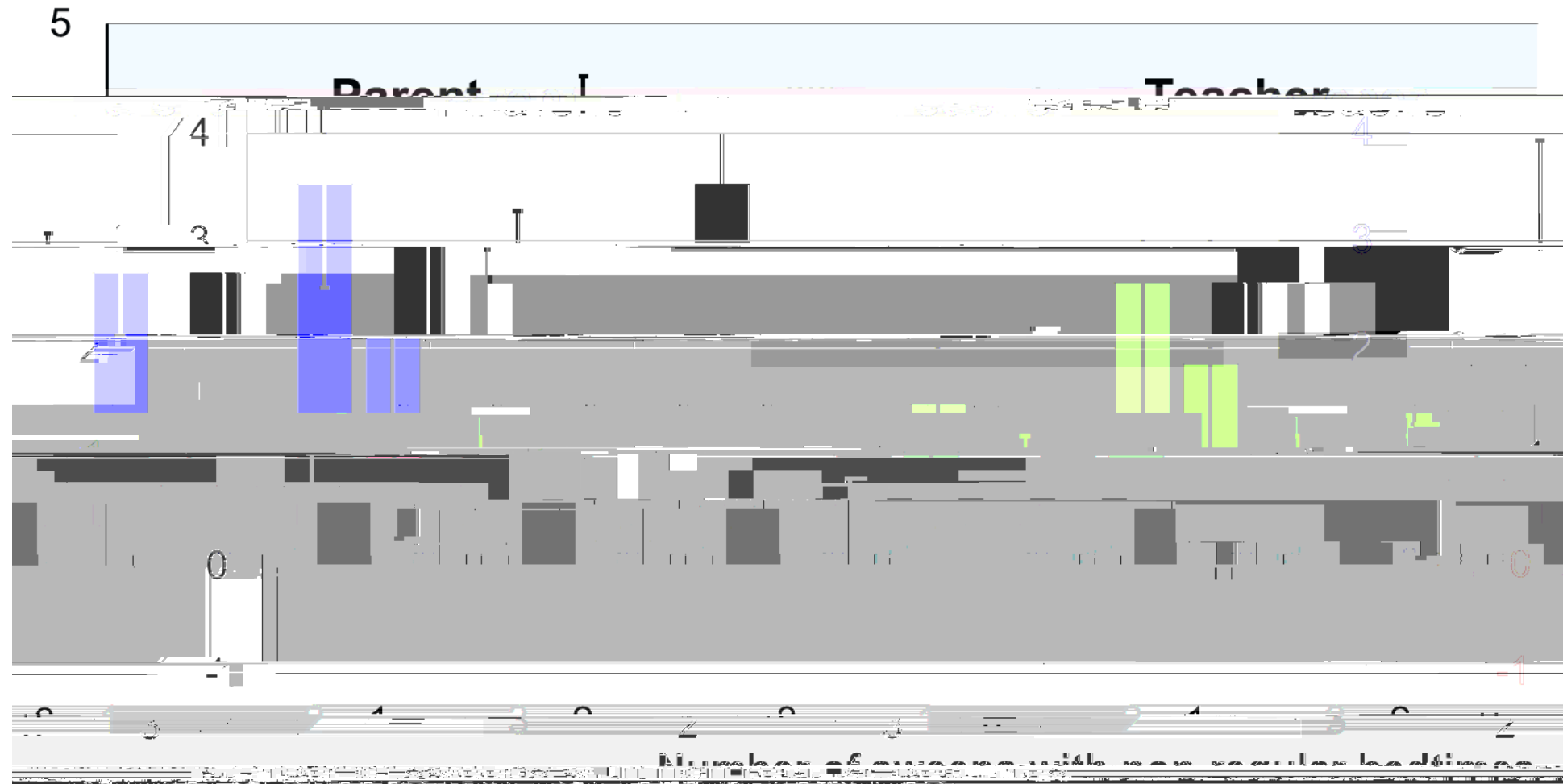
Leaving parental home

Partnership and/or family formation

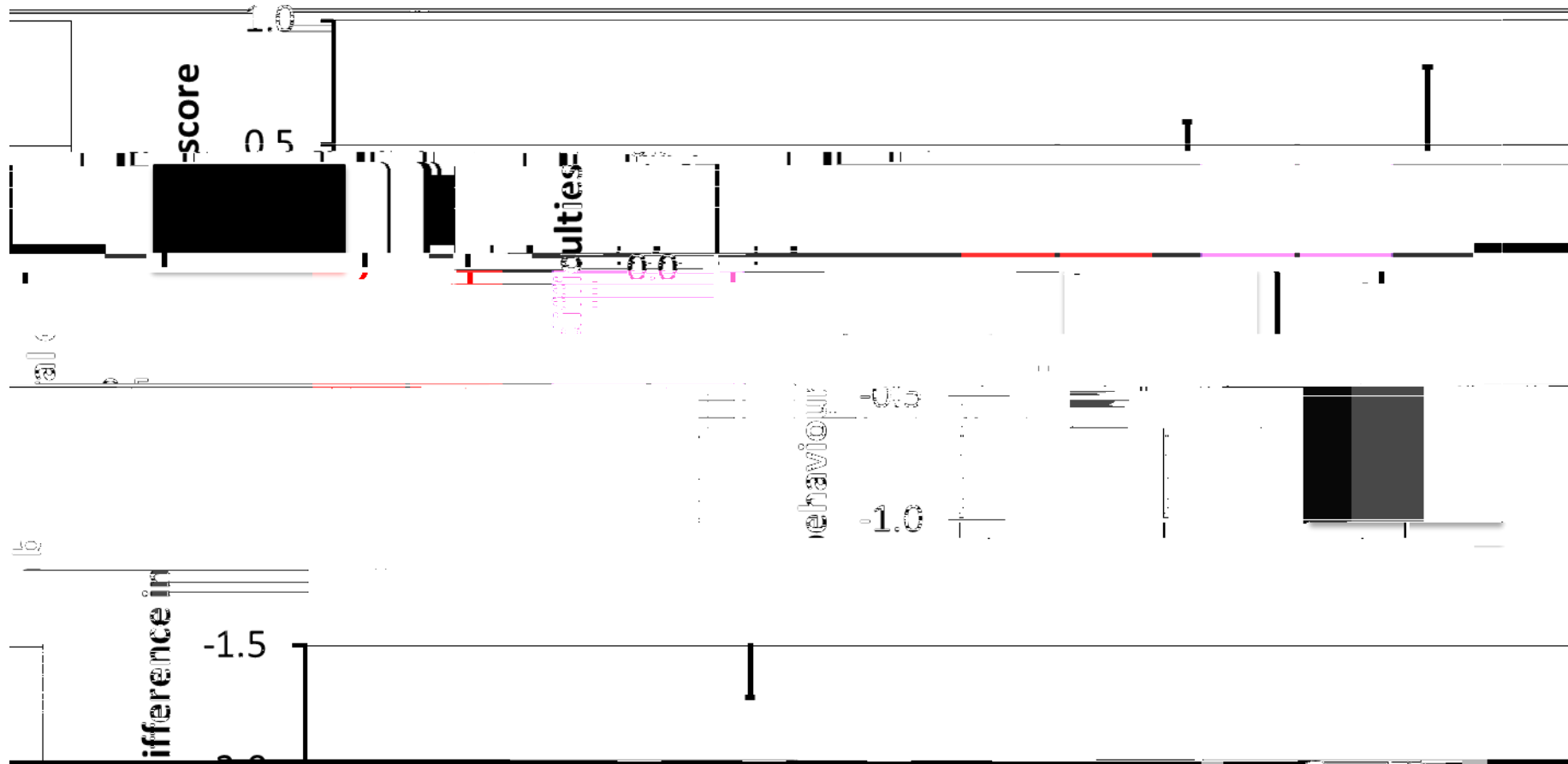




Cumulative effects, regression coefficients for SDQ total difficulties scores at age 7, by non-regular bedtimes throughout early childhood, ref = always regular bedtime.



Quantitative differences between ages 7 and 12 / Qualitative differences between ages 7 and 12



## Longitudinal data resources

### Birth Cohort Studies:

National Survey of Health & Development (NHSD)  
(born in 1946)

National Child Development Study (NCDS) (born in  
1958)

British Cohort Study (BCS) born in 1970

Avon Longitudinal Study of Parents and Children  
(ALSPAC) 1990-1992

Millennium Cohort Study (MCS) born in 2000-2001

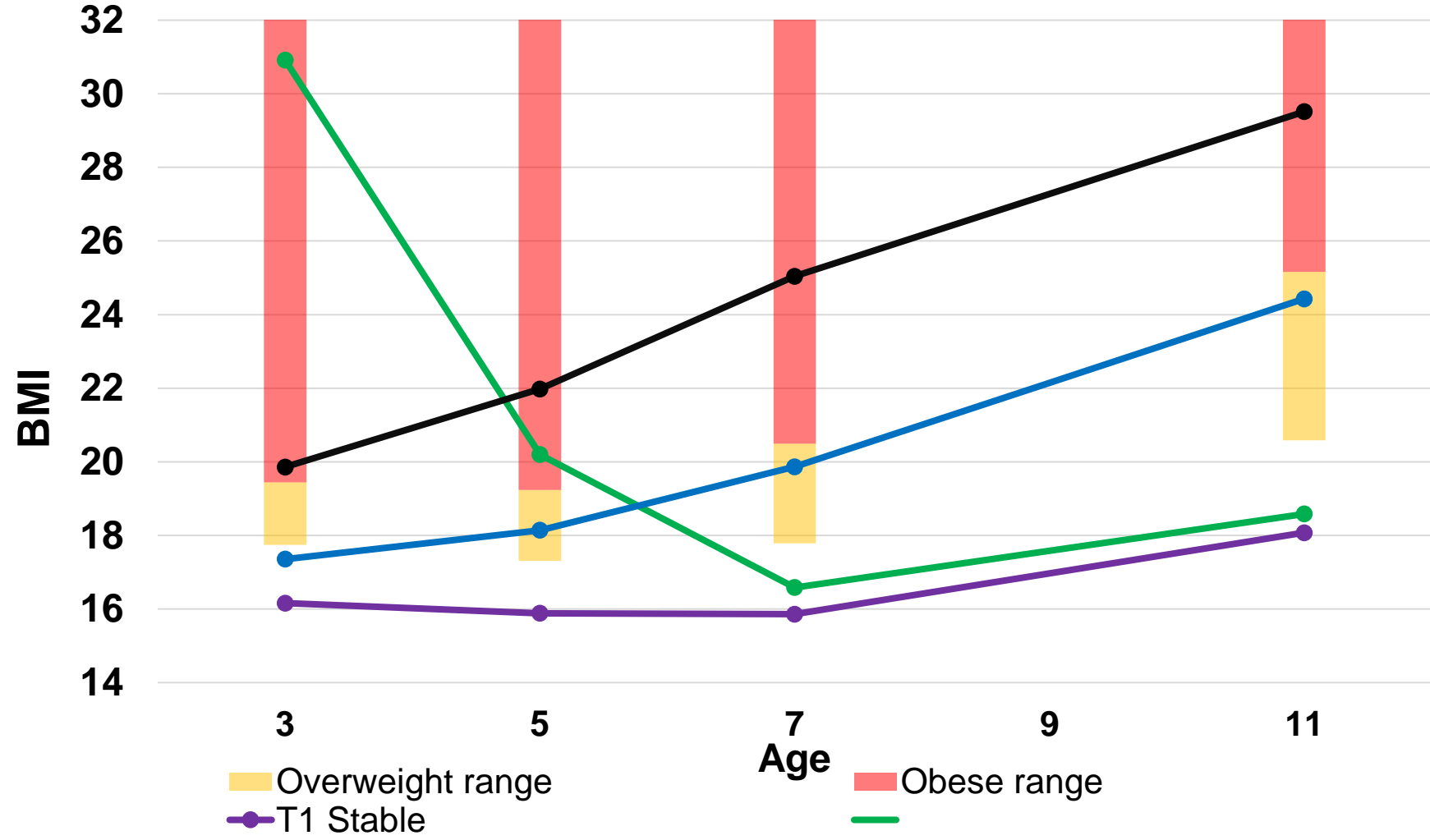
Born in Bradford (BiB) born 2007-2011

### Panel Studies:

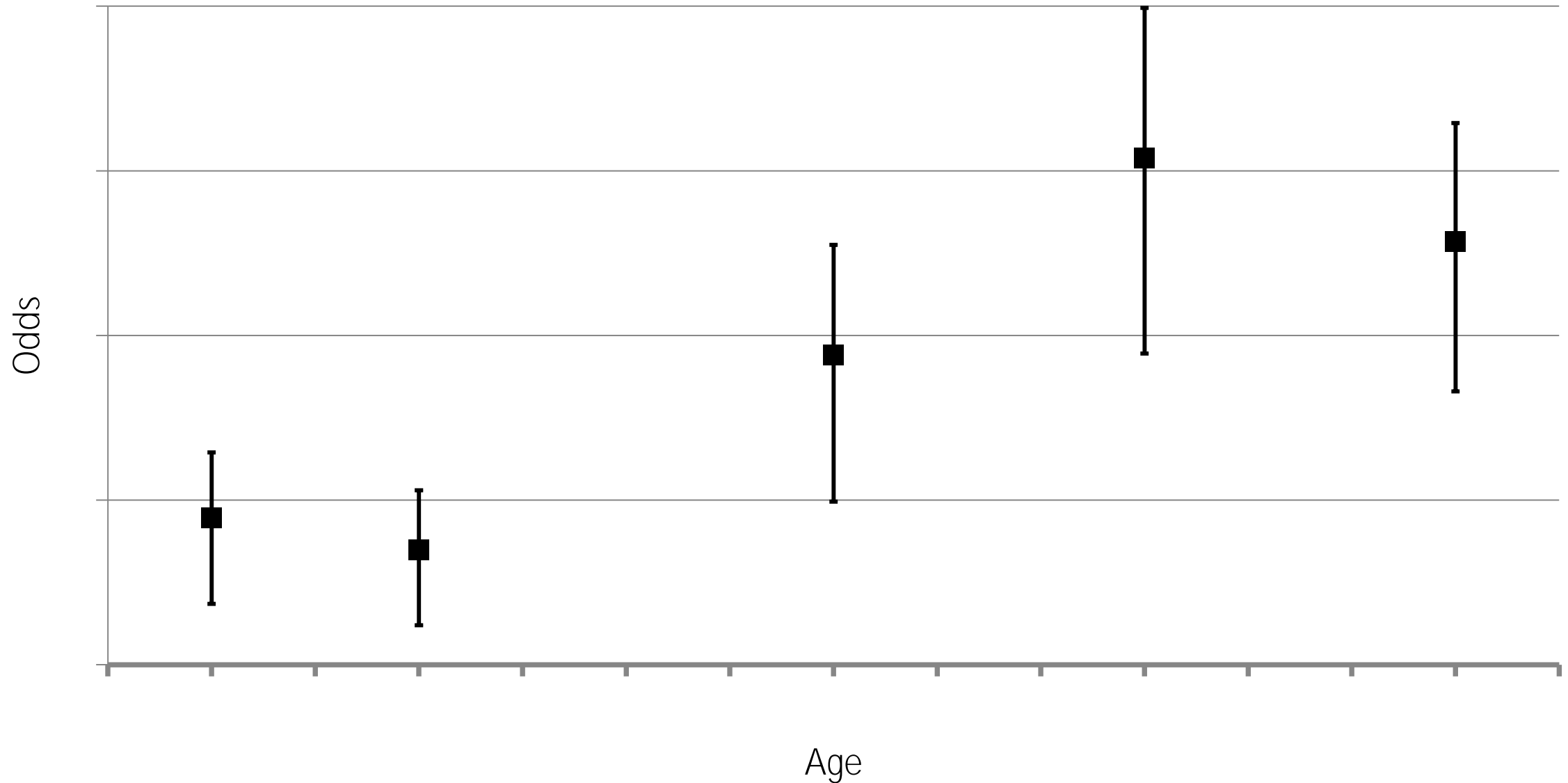
Understanding Society (UKHLS)

British Household Panel Study (BHPTy (UKHLS)

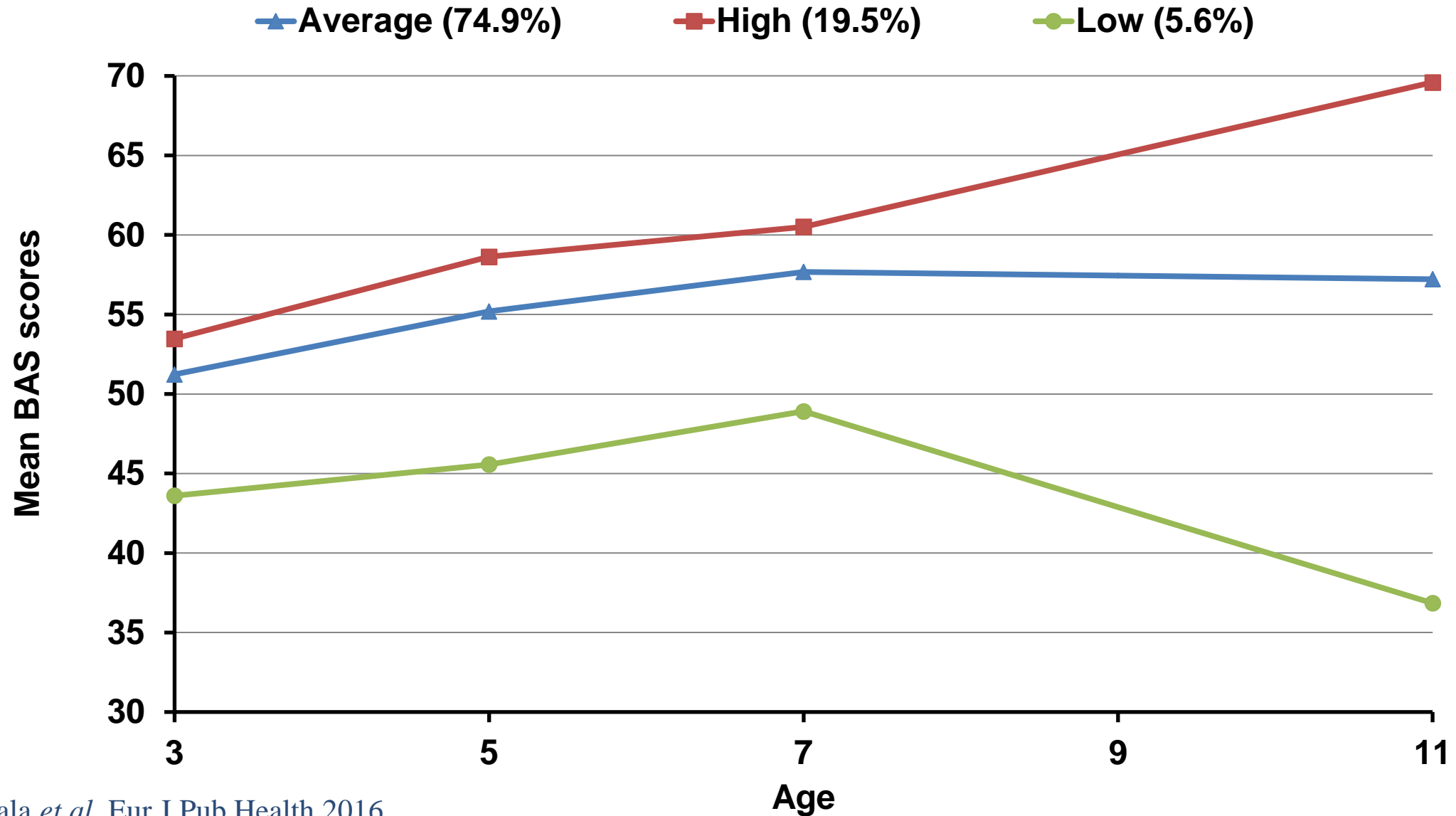
# BMI trajectories in childhood



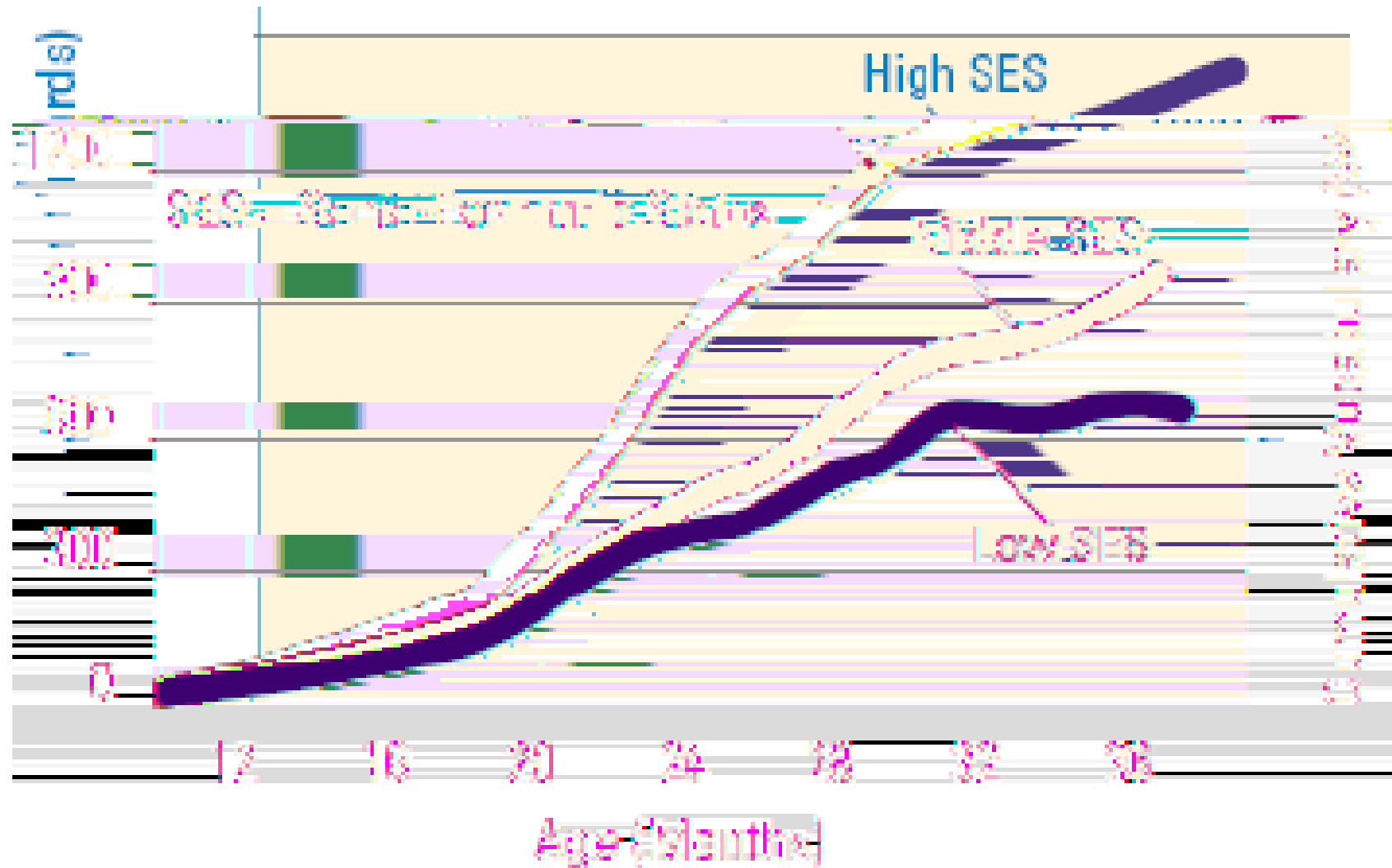
# Inequalities in obesity, poorest vs richest



# Longitudinal Verbal Profiles

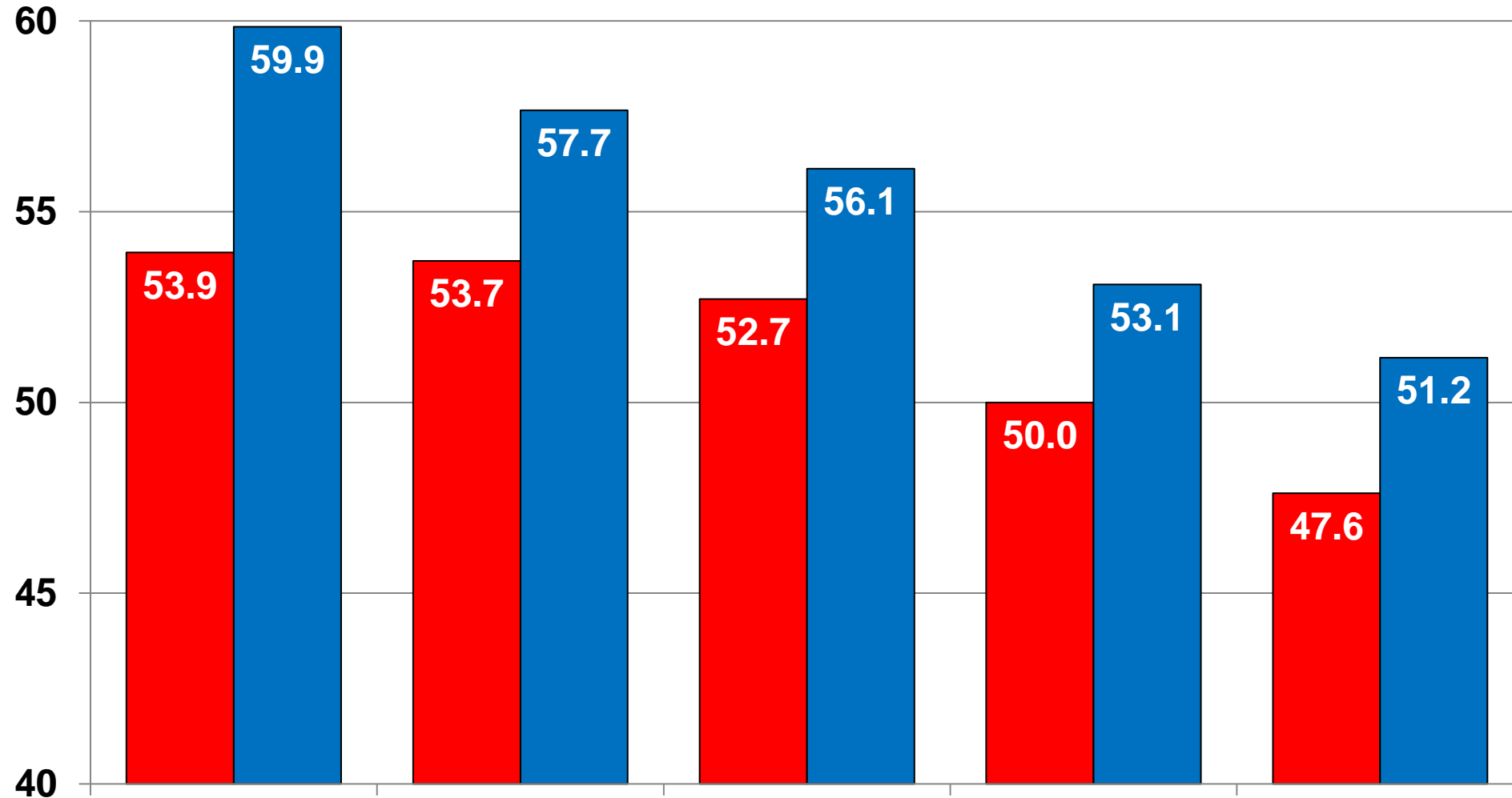


# Inequality starts early



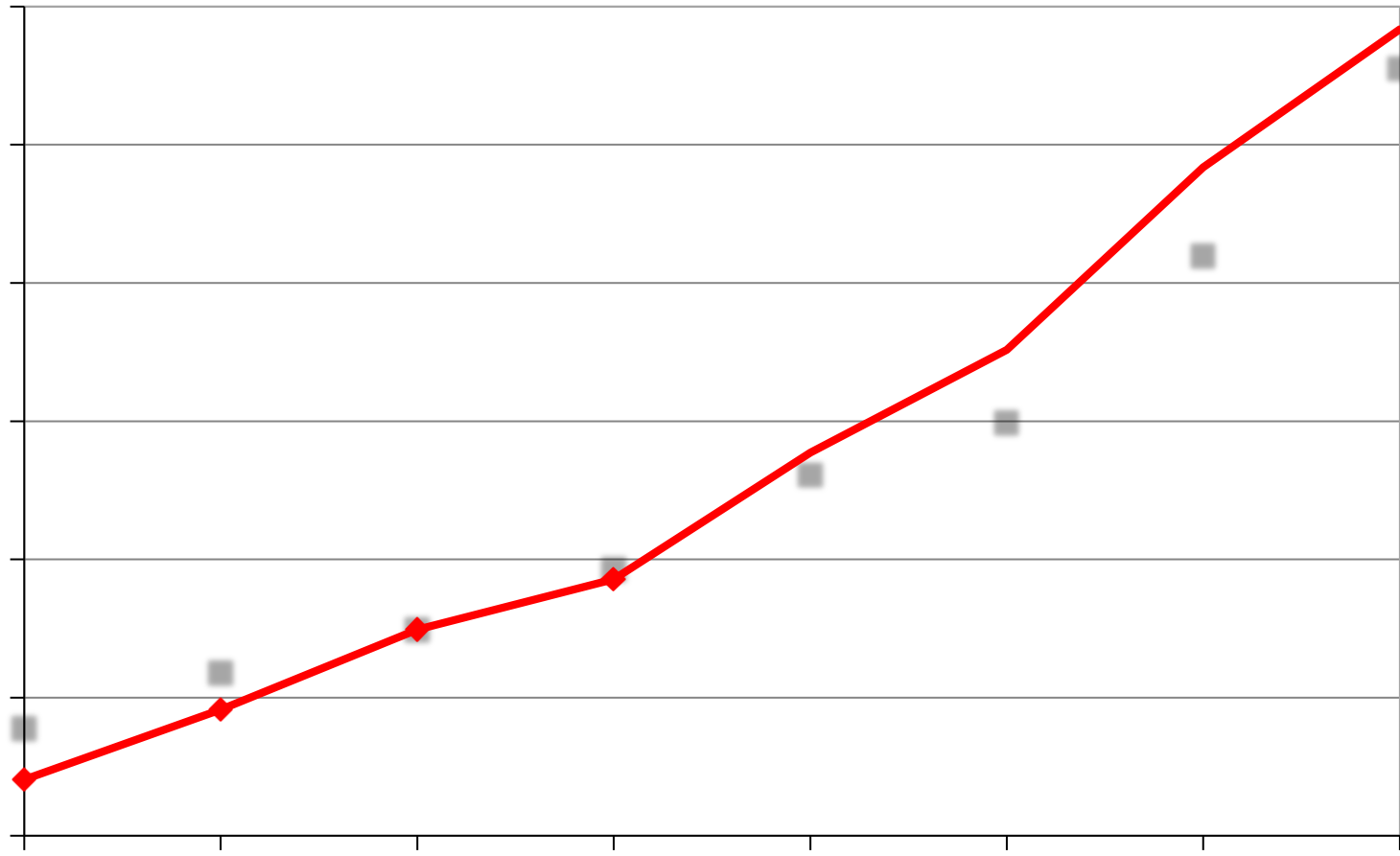


## Verbal ability at ages 3 & 5 by family income

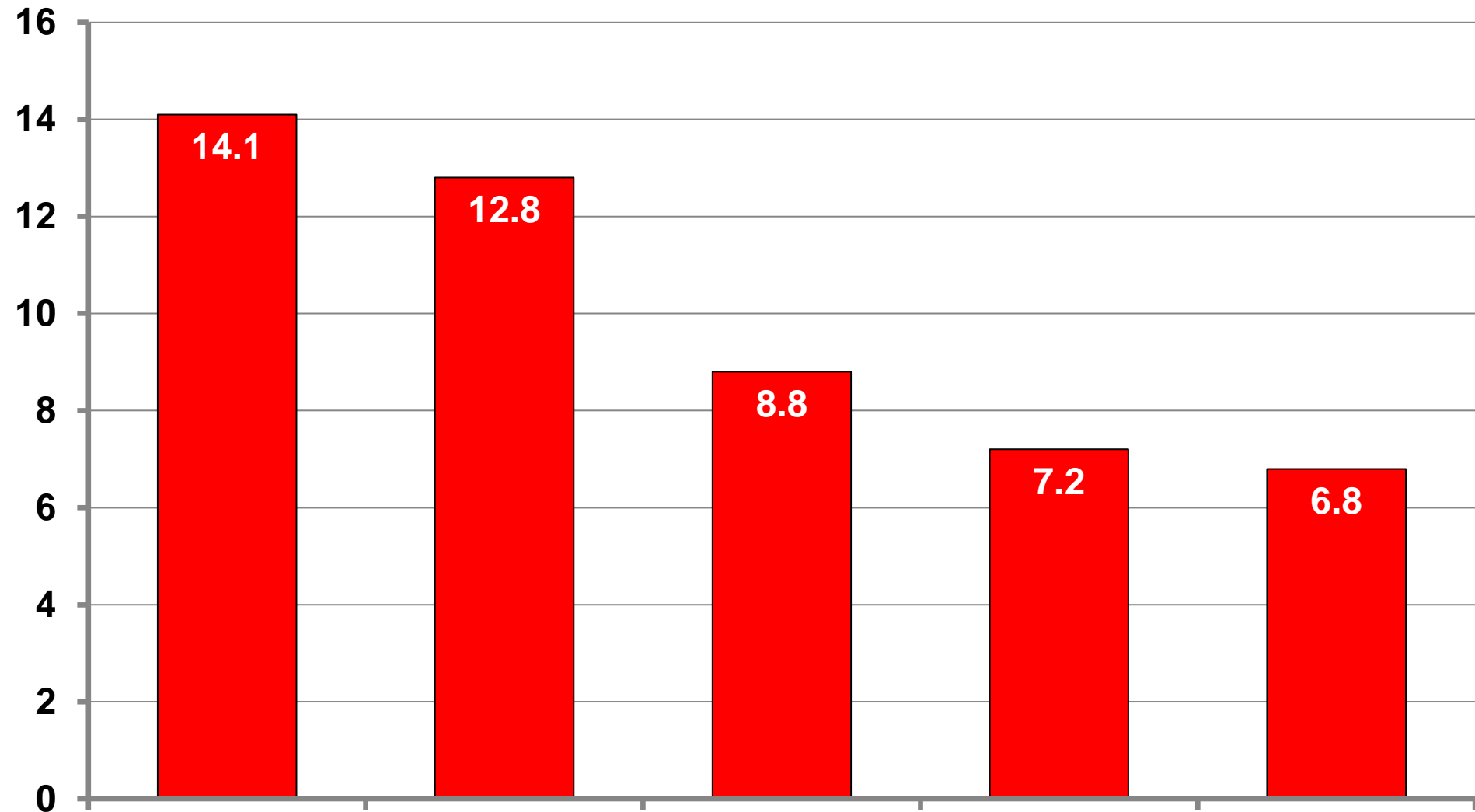


# Verbal months ahead or behind at age 7 by number of risk factors





## Early menarche (by age 11) by family income



## Recent decades - marked changes in health and wellbeing:

Alcohol consumption, smoking, teenage pregnancy rates have declined

Screen based media use, overweight and obesity and poor mental health have increased

## Summary

Child and adolescent health and development matters now and for the future

Stark socioeconomic inequalities are evident and these start early

behavioural, material, psychosocial

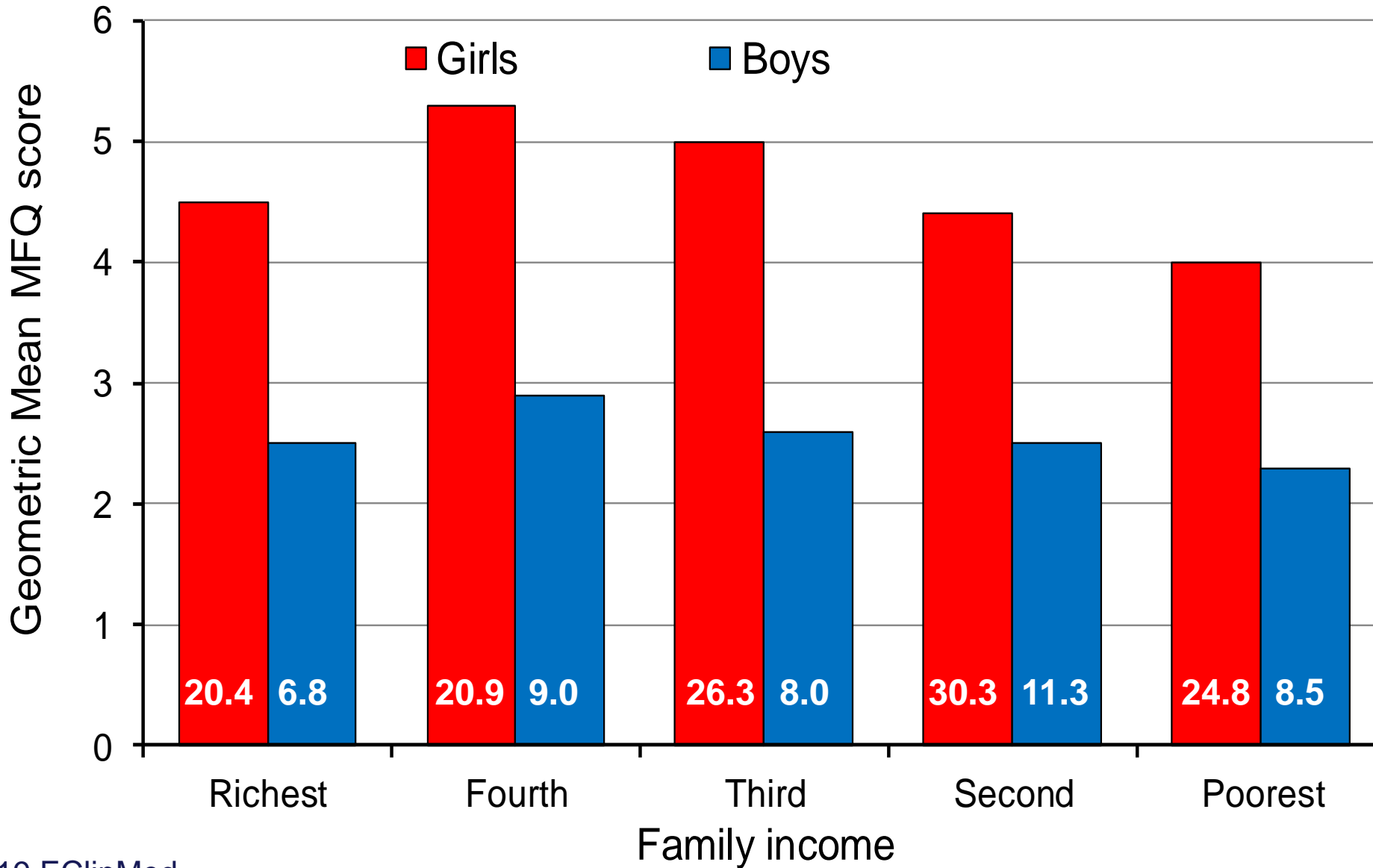
To give every child and young person a good start in life - action is needed on intermediate and structural influences

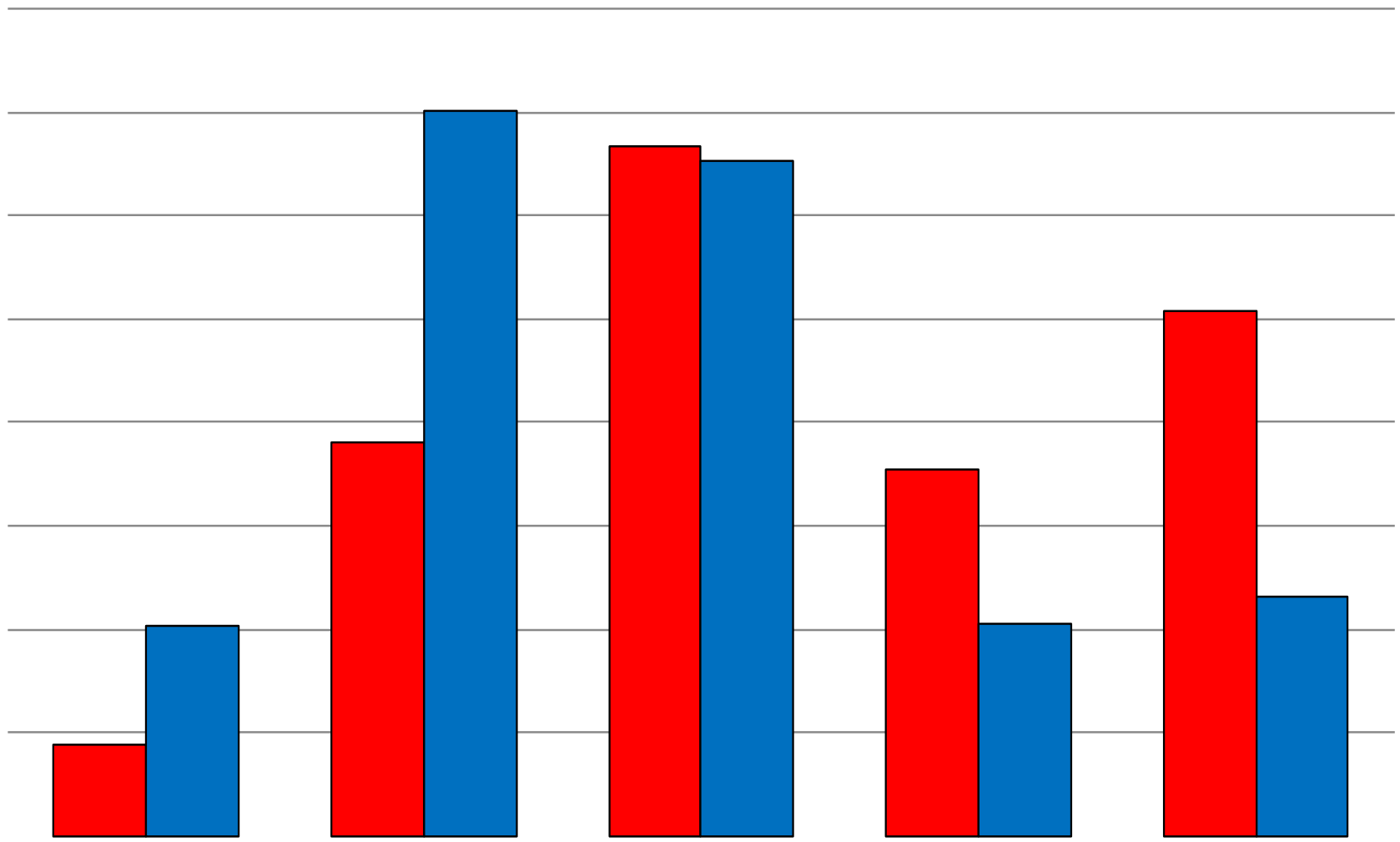
# Health behaviours by income quintile among youth (Age 14, MCS)

	Richest	2	3	4	Poorest
<b>Heavy drinking (All)</b>	7.0	9.0	10.7	10.2	7.1
<b>Heavy drinking (current drinkers)</b>	15.1	18.9	22.1	22.3	23.5
<b>Ever smoked</b>	8.7	11.4	14.7	21.4	20.1
<b>Any illicit drug use</b>	2.6	3.6	5.5	6.6	5.4
<b>Physical activity</b>					
5+ days	41.3	38.4	36.8	35.8	35.5
3-4 days	36.7	34.9	32.7	32.4	30.6
1-2 days	18.9				

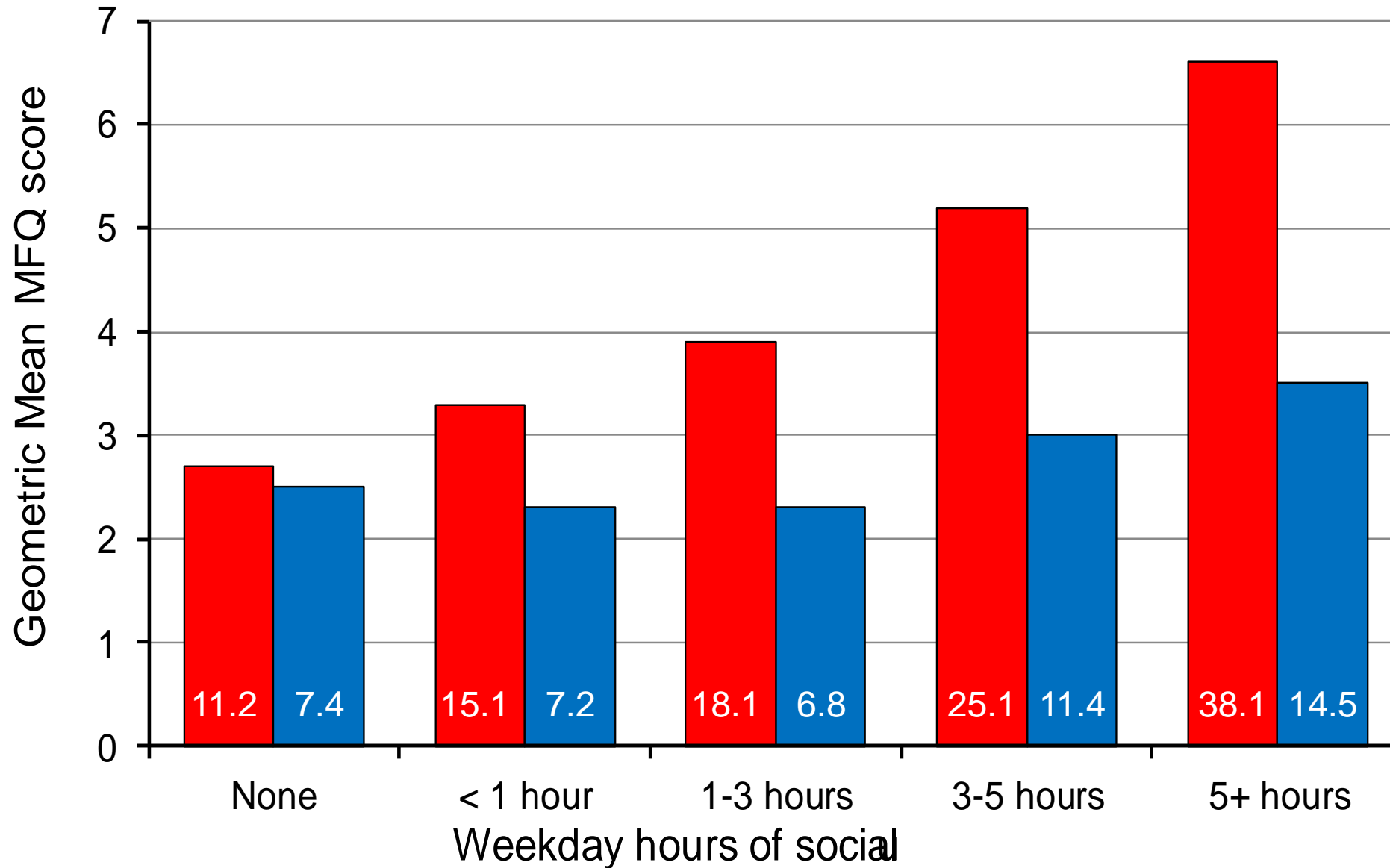


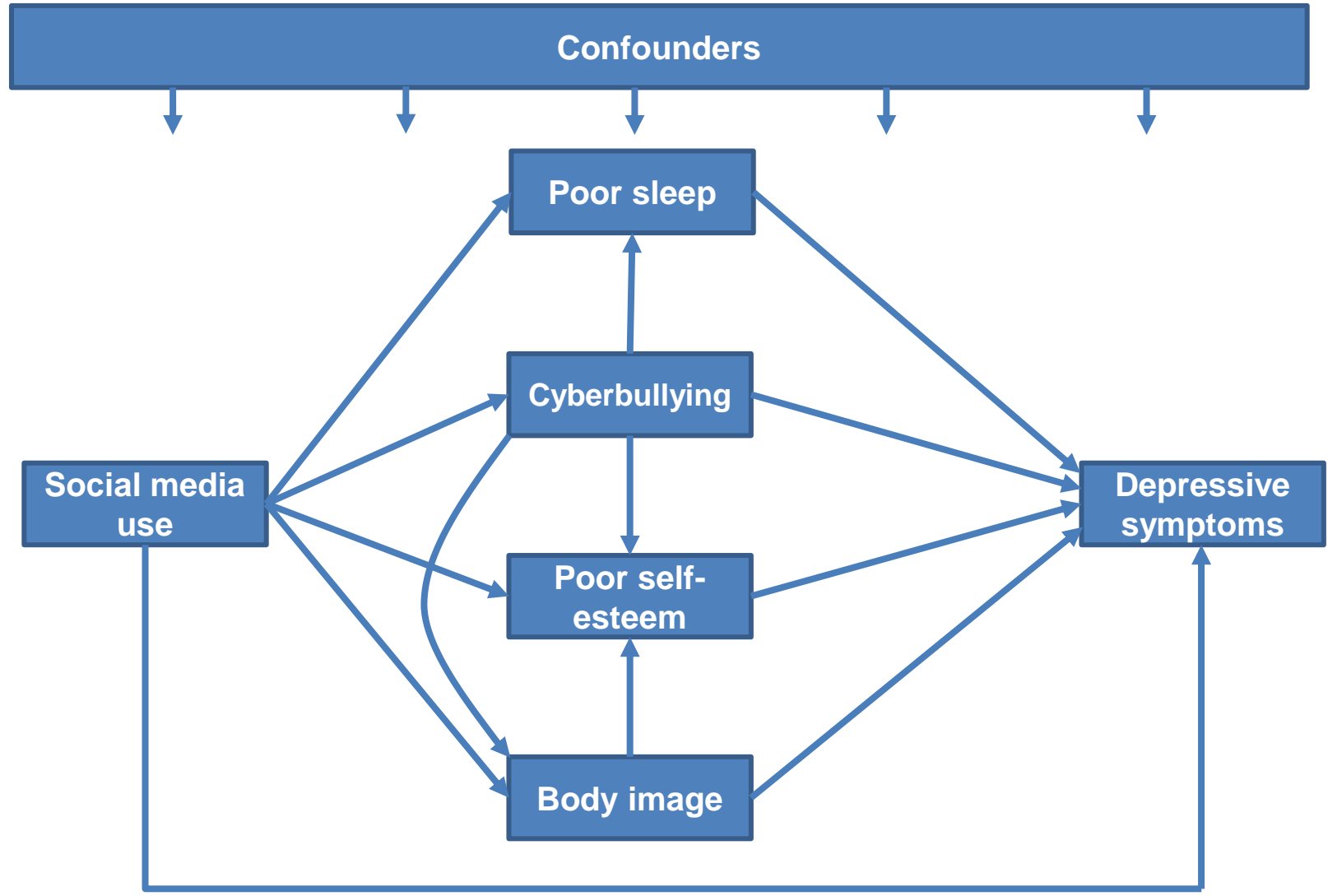
# Depressive symptoms by family income





# Depressive symptoms by social media use







**Major challenges for adolescent  
health and wellbeing what might  
some of the research questions be?**

# CSDH conceptual framework for action on the social determinants of health



Solar O, Irwin A (2010): A Conceptual framework for action on the social determinants of health. Social Determinants of Health Discussion Paper 2 (Policy and Practice). Geneva: World Health Organization.

