



Editor's Note

Dear readers,

We are pleased to welcome you to the June 2021 CRPF quarterly newsletter. This edition presents two summaries of research presented at the monthly CRPF seminars. These are from papers on, 1) Child Labour analysis in Ethiopia, and 2) The Ethiopian health extension programme and adolescent wellbeing. It also addresses Young Lives insights on child work published on the opinion column of Thomson Reuters.

We look forward to your comments, suggestions and contributions. For more information, please contact us via crpf.ethiopia@gmail.com or 011 1 540121.



Young Lives insights on child work published by Thomson Reuters

The Young Lives Ethiopia Director contributed insights from longitudinal research about child work for the World Day Against Child Labor on Thomson Reuters opinion column, titled "Why a blanket ban on child labor can harm children: lessons from Ethiopia".

Young Lives, a longitudinal study of childhood poverty led by the University of Oxford, has followed two cohorts of children since 2002 in Ethiopia, India, Peru and Vietnam. In the light of this longitudinal research Young Lives developed a Working Paper on child work and a book on *Child Work and Labor in Eastern Africa*, findings from which are reflected in the opinion piece.

The opinion piece explains that much of children's work is not harmful and some is beneficial and can be compatible with their education and wellbeing. While preventing the worst forms and excessive child labour is important, without measures to support families, a blanket ban could be counterproductive, going against the wishes of children who often take pride in being able to contribute to their families' livelihoods, especially in hard times. To read this piece follow this, link: <https://tmsnrt.rs/3AIPJol>

Research Summaries from CRPF presentations

Child labour analysis in Ethiopia Vincenzo Vinci and Martha Kibur

Main quantitative findings

- School enrolment and employment increase together until children are 11 years old and thereafter enrolment drops.
- The school life expectancy (number of years of education expected) is lower for child laborers and the age-grade distortion is more severe.
- Higher educational attainment of the household head is associated with a lower prevalence of child labor and higher school attendance for children.
- Most parents believe there is a value in education and that going to school is the best option for their children. This does not necessarily mean that their children are in fact attending school.
- The autonomy of children increases with age with older children more likely to decide whether to work. Nevertheless, this decision is taken by the family in almost 73% of child labor cases.
- Child labor decreases steadily as households get wealthier (as measured by a wealth index), but the pattern is less clear for household expenditures.
- Households with more land are more likely to have children engaged in child labor.
- On average, boys allocate more time to work, while girls spend more time on household chores. Overall boys spend more time on productive tasks. This gender gap increases as children get older.
- Exposure to hazards in the workplace increases with age.
- Youth tend to combine school and work (40.6%), rather than only go to school (26.2%) or only work (26.3%).
- The vulnerable population of NEETs is larger among females (11.3% vs. 3.3% of males) and in urban areas (7.2% vs 6.9% in rural areas).
- Labor underutilization is more

prevalent in urban areas (38.7% vs. 25.2%) and for females (32.5% vs. 22.8%).

- Youth workers are mostly employed in low skilled jobs.
- The majority of youth are employed as contributing family workers (90%).
- Agriculture is the main sector of employment (81%), although the service sector dominates in urban areas (63%).
- 57% of youth have some grade of primary school as their highest education. It is more common in rural areas and for females to have no education at all (41%).
- There is a positive correlation between education and youth earnings.

Main qualitative findings

- Poverty is the underlying factor pushing children into child labor.
- Other factors that might worsen the effects of poverty include: costs associated with education, a high number of siblings, orphanhood, parents' inability to work, family disputes or abusive situations in the home causing children to run away, and empty promises of school enrolment from employers making children move to the cities.
- Many children in rural areas view the city as an attractive destination, and this is one of the reasons why they decide to move from their homes to seek employment in the cities.
- The influence of peers returning from the cities is another push factor, together with aspirations of self-improvement.
- When arriving in the cities, children often face a different reality than expected and are forced to take on exploitative jobs in order to survive.
- Boys often work as shoe shiners, porters or fishermen and girls are more frequently employed as domestic workers

or in sex work, making them susceptible to different types of workplace hazards.

- Children with disabilities are reportedly forced to work in begging.
- Working children in urban areas use various strategies to cope with the difficult situations they are facing, such as mutually sharing resources with other children in similar situations.

Policy recommendations

Based on the results from the quantitative and qualitative studies, this section provides policy recommendations and essential steps to take to improve the current policy response and ultimately eliminate child labor.

- Given that poverty is one of the main reasons for children to engage in child labor, one crucial step is to provide support to families to meet their basic needs and thereby reduce the need for children to engage in work.
- A priority among policymakers should be to create social awareness regarding the many negative aspects and consequences of child labor that have been demonstrated in this policy brief. Unless societal attitudes towards child labor change, it will be difficult to realize the full effects of other policies addressing child labor.
- Helping women in households play a more important role in decision making could help reduce child labor. Incorporating female empowerment within other projects has a role to play.
- Several steps should be taken to improve school retention, such as a strong focus on school quality and equal access to education. Children should further be encouraged to start school at the age of 7 in order to reduce the number of dropouts at a later stage. This could be accomplished by making school attendance mandatory between the ages of 7 and 14, as the legal working age in Ethiopia is set at 15.
- A focus on job creation in urban areas could absorb the more educated population of youth and minimize skill mismatches.
- The alleviation of economic shocks experienced by households can be improved by ensuring that social

protection programmes are widely available to those who are vulnerable to economic hardship in the face of shocks and may otherwise send children to work as a coping mechanism.

- While the Government of Ethiopia already has many important policies and programmes in place, these do not always translate into the desired results without proper implementation. Therefore, the focus should also be on law enforcement, coordination, integration and capacity building among stakeholders to strengthen the positive effects of the commitments and ensure they reach their full potential.
- Tailored approaches are necessary to ensure the effectiveness of policies, as there are many variations in the circumstances between, for instance, rural and urban areas and males and females.



Research Summaries from CRPF presentations

The Ethiopian health extension programme and adolescent wellbeing: A quasi-experimental study William Rudgard, Silinganisiwe Dzumbunu and Rachel Yates

Introduction

There is a current youth bulge in Ethiopia, with 23% of the population represented by adolescents aged 10-19. Adolescents are often overlooked in health and social policies, resulting in unmet needs.

Over the Millennium Development Goals (MDG) period Ethiopia saw a number of gains across health indicators population health, in primary education and in child marriage. A series of multi-sectorial policies, linked to the national growth and transformation plan, are recognised as driving such remarkable progress during this period. A key initiative linked to these policies, was the roll out of the national Health Extension Programme (HEP) in 2003 (21). It is made up of four key components, family health services, disease prevention and control, hygiene and environmental sanitation, and health education and communication.

The expansion of Health Extension Programme (HEP) was gradual, with the number of Health Extension Workers (HEWs) rising to approx. 30,000 in 2009, and their coverage per population achieving a stable rate of around 1 HEW per 2,500 households. Since its roll-out there have been several evaluations of the impact of HEP. There is a need for evidence on the impact of HEP on adolescents.

Research Aim

Evaluate the potential of HEP to impact across multiple domains of adolescent health and wellbeing.

With this background in mind the research aimed to evaluate the potential of HEP to impact across multiple domains of adolescent health and wellbeing.

Data

Young Lives Ethiopia data is used.

Methodological Approach

Treatment: Self-reported exposure before 2010 (from round 4 data)

Outcomes: Self-reported at Round 4

Statistical analysis: Propensity score weighted analysis.

Main Findings

Health

There is no evidence of an association between receipt of HEP and self-reported health

Existing evidence for HEP: Increase in Contraceptive use in mothers (Admassie et al, 2009), Increase in Early contact with HCW during pregnancy (Admassie et al, 2009), increase in Health seeking behaviours (Gelaw et al, 2014)

Existing evidence for adolescent health services in Ethiopia:

Oromia: 20% of adolescents report using SRH services (Binu et al, 2018)

SNNP: 30% of adolescents report using SRH services; 50% report lack of privacy in health centres (Haile et al, 2020)

Child Marriage and Early Pregnancy

There is evidence of reduced risk of child marriage and early pregnancy

Although not the case in all countries across Sub-Saharan Africa (SSA), in Ethiopia, childbearing outside of marriage traditionally has not been tolerated, and the rise in age at marriage has not been accompanied by a rise in premarital fertility.

Education

There is evidence of increased probability of girls and boys enrolment in education at 19, and higher numeracy and literacy for girls.