

Transformative Change for Children and Youth in the Context of the 2030 Agenda for Sustainable Development

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TRANSFORMATIVE CHANGE FOR CHILDREN AND YOUTH IN THE CONTEXT OF THE 2030 AGENDA FOR SUSTAINABLE DEVELOPMENT

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ABSTRACT

The 2030 Agenda for Sustainable Development is a new opportunity to address the key development challenges of our time with the aim to improve the well-being and rights of all people while protecting the natural environment. Children are important agents and beneficiaries in this process: many children are not only among the most vulnerable groups affected by poverty, inequality, conflict and climate change, they are also the generation that will reach adulthood during the realization of the 2030 Agenda. To create the sustainable, long-term transformation ambitiously laid out in Agenda 2030, new transformative approaches to policy must be implemented and applied to children and youth—approaches that target the underlying generative framework of social injustice as opposed to implementing affirmative remedies that simply seek to alleviate the symptoms.

The objective of this paper is to develop a conceptual framework to help assess the transformative potential of policies – particularly with regard to their impact on children and youth – and how these are meaningfully integrated and represented in decision-making processes. It will shed light on the policy space for transformative change by analysing a range of relevant factors which present both challenges and opportunities for fostering child rights and well-being through the implementation of Agenda 2030. The paper then applies the framework to a selection of policy areas that are of high relevance for child development, such as social policy and care policy assessing necessary means of implementation such as resource mobilization and governance systems and looking at economic and environmental impacts in a cross-cutting way. The aim is to stretch boundaries and invite new thinking on how to grasp the numerous opportunities offered by the Sustainable Development Goals (SDGs) to approach development challenges holistically and from a child-centred perspective. This involves integrating economic, social and environmental dimensions of development and fostering cross-sectoral approaches.

ACRONYMS

CBHI	Community-based health insurance
CCT	Conditional cash transfer
CGP	Child Grant Programme
CHW	Community health workers
CRC	Convention on the Rights of the Child
DFID	Department for International Development (United Kingdom)
GHC	Ghanaian Cedi
ILO	International Labour Office
KES	Kenyan Shilling
MCTP	Multiple Category Targeting Programme
MDGs	Millennium Development Goals
MGNREGA	Mahatma Gandhi National Rural Employment Guarantee Act
MWK	Malawi Kwacha
OECD	Organisation for Economic Co-operation and Development
SDGs	Sustainable Development Goals
Sida	Swedish Agency for International Development Cooperation
SSA	Sub-Saharan Africa
UN	United Nations
UNICEF	United Nations Children's Fund
UNRISD	United Nations Research Institute for Social Development
USAID	United States Agency for International Development
VET	Vocational education and training
WHO	World Health Organization
ZMW	Zambian Kwacha

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1. INTRODUCTION: AGENDA 2030 AND TRANSFORMATIVE CHANGE FOR CHILDREN

The 2030 Agenda for Sustainable Development provides a new opportunity to address the key development challenges of our time—with the aim of improving the well-being and rights of all people while protecting the natural environment. Children are important both as agents and beneficiaries in this process: they are often among the most vulnerable groups affected by poverty, inequality, conflict and climate change, and they are also the generation that will reach adulthood during the realization of the 2030 Agenda. A new development agenda that is concerned with *transforming our world* and shaping a better future is an agenda for children and future generations.

Agenda 2030 and the SDGs represent a marked shift from the approach to development engendered by the Millennium Development Goals (MDGs). Despite their successful mobilization of efforts to reduce poverty and to invest in social development, the MDGs had been criticized for being silent on the challenge of rising inequalities and the shortcomings of mainstream market-led approaches, as well as for the absence of clear social, environmental and economic goals that would apply to both developed and developing countries.¹ The new agenda has, in many ways, turned the traditional development approach upside down: it is no longer an agenda from the North for the South, but rather a universal programme that needs to be implemented in all countries, including those that have traditionally funded and implemented agendas elsewhere rather than at home. The new agenda is equally challenging but also promising for traditional aid actors that have designed and delivered programmes for specific groups, such as children. They are now required to stretch the boundaries of their work and to pay greater attention to the interlinkages between sectors and policy areas. This not only creates more complexity but also offers more, and more effective, entry points for interventions and advocacy.

The holistic and universal vision of the 2030 Agenda, along with its comprehensive set of goals and targets – the Sustainable Development Goals (SDGs) – is therefore an important step forward, but also a challenge. To create the sustainable, long-term change ambitiously laid out in Agenda 2030, new approaches to policy must be implemented—approaches that target “the underlying generative framework” of social injustice as opposed to implementing “affirmative remedies”, which simply seek to alleviate the symptoms (Fraser 1995: 82).

Based on this definition, we understand **transformative change** as a process that attacks the root causes of poverty, inequality and unsustainable practices through integrated and synergistic policies and reforms, thereby generating an “eco-social turn”² which can transform economic, social, ecological and political structures with the aim of achieving sustainable development (UNRISD 2016). While non-transformative approaches such as palliative and targeted interventions can certainly improve lives and are in many cases needed to address critical issues in the short term, transformative approaches create long-term and structural shifts that reach beyond specific groups of individuals or communities and spill over into future generations.

The way in which we conceptualize children’s issues and their role in society is key to the formation of transformative policies. First of all, these policies address children not as a set group of individuals between the ages of zero and 18 alive at the present moment, but rather as a dynamic category that

1 Fukuda-Parr 2010, 2014, 2016; UNRISD 2010; Koehler 2015.

2 An eco-social turn requires a reversal of the usual normative hierarchy in policymaking—that markets be re-embedded in social and ecological norms and that social and environmental objectives be positioned above economic ones, see UNRISD 2016.

individuals enter and leave. A transformative policy approach seeks to impact children both today and as future adults, as well as future generations of children. Further, a transformative approach is built on an integrated vision of society that views children as actors who impact and are impacted by the various relational spheres in which they exist – their families and households, communities, cities, nations and environments, both built and natural (Bruckauf and Cook, 2017). These considerations have significant implications for the ways policies are formulated and directed towards children and youth. Such an approach foregrounds issues of intergenerational justice and sustainable development taking a life-course perspective, and centres on the principle of *leaving no one behind*. This resonates strongly with UNICEF's equity approach while at the same time realizing measurable progress for all.

In concrete country and policy contexts, it is necessary to look at transformative change both in terms of processes and outcomes. In terms of *processes*, a key issue would be whether children's voices and agency and their specific needs are respected in policy design and implementation, including in the evaluation and monitoring of policies and institutions. In terms of *outcomes*, transformative change would reflect the best interests of children (Convention on the Rights of the Child Art. 3) and foster their long-term capabilities and potential to contribute in turn to such processes of transformative change.

The questions this paper aims to address are: *What does transformative change and sustainable development mean for children and adolescents in different contexts? What shapes policy space for transformative change for children? How can policy innovations and institutional reforms drive transformative change for children?*

In order to provide answers to these questions, this paper develops a conceptual framework (section 2) to help assess the transformative potential of policies, particularly with regard to their impact on children and youth and the way they are meaningfully integrated and represented in decision-making processes. Section 3 sheds light on the policy space for transformative change by analysing a range of relevant factors and recent trends that present both challenges and opportunities for fostering child rights and well-being through the implementation of Agenda 2030. Section 4 applies the framework to a selection of policy areas of high relevance for child development, such as social policy and care policy. It further assesses necessary means of implementation such as resource mobilization and governance systems and looks at economic and environmental goals in a cross-cutting way. The aim is to stretch boundaries and invite new thinking on how to grasp the numerous opportunities offered by the SDGs to approach development challenges holistically and from a child-centred perspective. This includes integrating economic, social and environmental dimensions of development and fostering cross-sectoral approaches.³

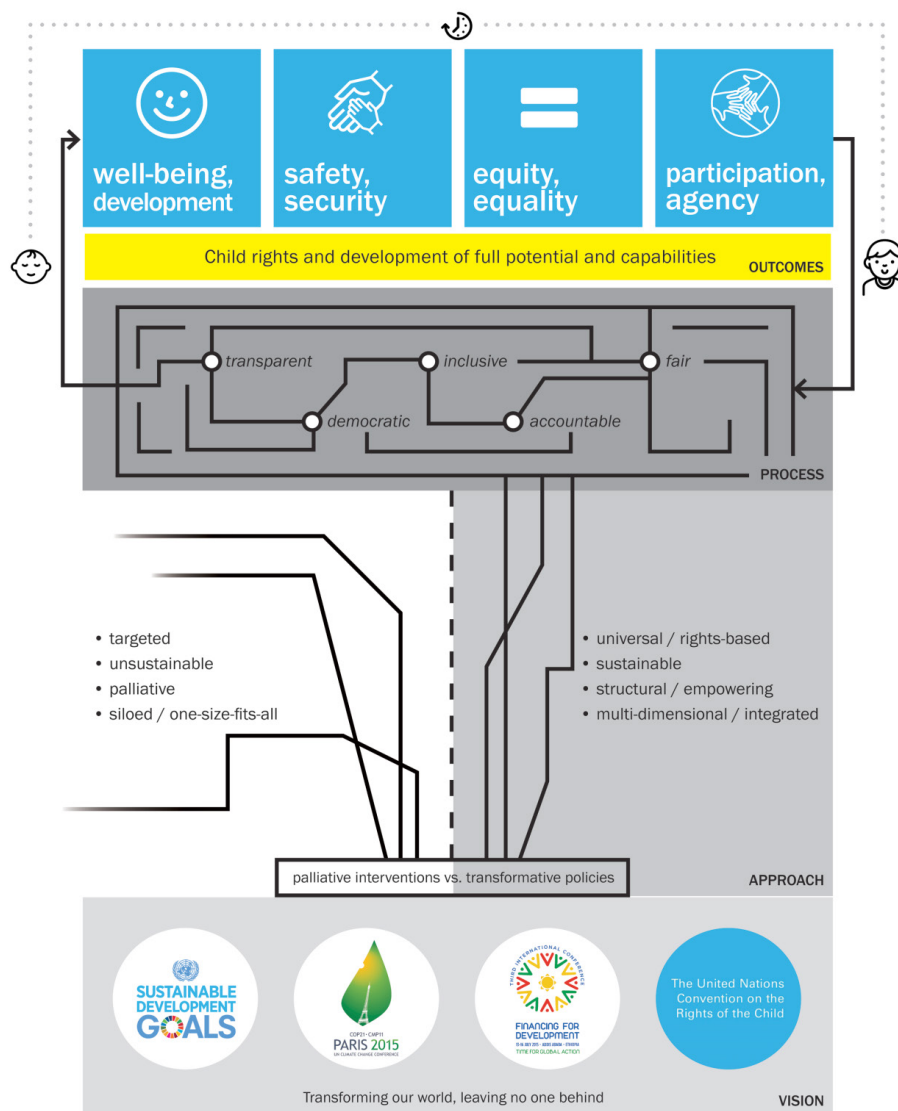
2. CONCEPTUAL FRAMEWORK

As set out in the introduction, transformative change is defined in a normative sense as change that goes beyond residual approaches and short-term, siloed or targeted policies which deal with symptoms of problems rather than their causal drivers. This is illustrated in Figure 1 through the lines departing from palliative interventions and diverting away from the desired transformative outcomes. Transformative change leads to more equal social and economic structures, power

3 UNRISD 2016, UNICEF 2016b.

reconfigurations and sustainable production and consumption patterns. These in turn allow children and youth to thrive and develop their full potential and rights, as part of and together with their families, communities and countries, regardless of who they are and where they live. Figure 1 illustrates pathways to transformative change for children and youth and captures the conceptual approach taken in this paper. The model is a simplified and idealized representation of pathways to transformative change for children. In reality, the links between vision, approach, process and outcomes are complex and dynamic. For example, transformative processes are more likely to translate into transformative visions, approaches or policy design, implementation and outcomes. Transformative visions and approaches also require a transformative implementation process to lead to progressive outcomes. Furthermore, there might be different pathways in different countries towards more transformative policies, moving gradually from residual approaches to more universal and institutionalized ones. On the other hand, there is no linear pathway from a transformative policy design to transformative outcomes, as many factors determine the relative success or failure of a policy approach (some of which are discussed below).

Figure 1: Transformative change for children and youth



Vision

The basis of the framework is the *vision* of the 2030 Agenda for Sustainable Development of “transforming our world” and “leaving no one behind”. It is concretized in the 17 SDGs, the Addis Ababa Action Agenda for Financing for Development and the Paris Agreement on combatting climate change. This vision also incorporates the Convention on the Rights of the Child (CRC) as foundational to ensuring the rights of all children and the development of their full capabilities and potential.

Approach

To achieve the desired outcomes for children in which the SDGs are reflected, approaches to policymaking must meet four criteria. First, they must be based on principles of **universalism and human rights**. They must target all children at all ages rather than focusing exclusively on the poorest and most vulnerable. This is because all children are rights-holders and outcomes tend to have a greater impact when policies strengthen links between population groups, between generations and between different groups of children through universal approaches.⁴ At the same time, responses must reflect the needs of particular groups, especially those facing the greatest obstacles to realizing their rights and leading a dignified and meaningful life. Next, approaches to transformative change must be **sustainable**. They should seek to intervene in the lives not only of the current cohort of children but also of future generations of children. Moreover, they must take a life-course approach, viewing children as future adults who will become empowered, productive citizens. Sustainable approaches must also incorporate an eco-social rationale, which looks at “economic activities as a means to reach equity and environmental sustainability” (UNRISD 2016: 147). Further, approaches must be **structural and empowering**, transforming social structures, institutions and power relations and redefining roles of actors. Interventions must be made at all levels of society, transforming lives across a range of age groups and social classes and institutionalizing empowered participation, especially among young people. The impact of such an approach is measured by the change it engenders on a broad scale rather than on the level of an individual child’s life. Finally, approaches must be **integrated and multidimensional**, rather than siloed and one-size-fits-all, bringing actors together both horizontally and vertically to engage in a collective process of reform by building coherence and coordination across sectors. Such approaches will be shaped by path dependencies and must be attuned to local contexts, tailoring interventions to reflect the variations that exist across cases, be they economic, political, historical or cultural.⁵

Policy process

A *transformative process* is one which respects a number of normative principles such as democratic and fair procedures, transparency and accountability, and inclusion. Striving for these principles at all levels of the policymaking process, from conception, to design, to implementation, to evaluation, is key to ensuring transformative outcomes. Further, a transformative process would not only lead to better outcomes (thereby guaranteeing broad support for policies and avoiding neglect of key interests and issues), but also empower marginalized actors so that their views and demands are reflected in final decisions. Agenda 2030 will be implemented through policies at the national level and supported through regional and global action and reform of global governance institutions. A broad alliance of actors and collaboration between civil society, business, governments and international organizations will be necessary to implement the SDGs and to make sure that power asymmetries are not reproduced or reinforced in partnerships or processes (UNRISD 2016: Chapter 7).

4 The important relational aspect mentioned here is often neglected in evaluation and measuring exercises, which tend to focus on individuals. Social relations and related concepts, for example social cohesion, are more difficult to measure, though attempts exist to quantify them through perception surveys. See, for example, Langer et al. 2015. On universalism vs. targeting, see Mkandawire 2005 and UNRISD 2010, 2016.

5 These principles should be the baseline in any policy design and no actor should be allowed to suggest or impose solutions that are detrimental to them.

Outcomes

Policies that attack the root causes of poverty, inequality and unsustainable practices are more likely to lead to transformative outcomes for children that are visible and measurable.⁶ Such policies include:

- Promoting the physical, social, emotional and mental **well-being and development** of children, for example through adequate nutrition and housing, health and wellness, a clean and diverse natural environment, care and supervision, and access to social services;
- Ensuring the **safety and security** of all children by addressing issues such as political and economic instability, natural disasters and other environmental hazards, crime and violence, and forms of exploitation;
- Increasing **equality** of income and access to services and opportunities (such as education, decent work and health care) regardless of gender, ethnicity, socio-economic status or other factors; and creating greater **equity**, understood as a sense of fairness and social justice, through the promotion of social inclusion policies;
- Promoting **agency** through opportunities for quality education and decent work, freedom of expression, and inclusion; and engendering **participation** through open political processes in which children and young people are engaged, so that they have the tools to transform their lives.

The transformative outcomes identified do not represent the end point in a linear process of change but rather compounding goals that build upon each other. This ensures that children are agents of their own lives and that they grow into actors who are empowered to engage with a wider scope and participate in processes of transformative change. This cycle is represented in Figure 1 as a loop in which transformative approaches produce empowered citizens who in turn engage politically. In this way, transformative change is self-perpetuating and therefore a cornerstone of sustainable development.

Obstacles to transformative change

There are trade-offs and obstacles to transformative change that must be considered when engaging in this process. Firstly, SDG implementation happens in a complex policy space of challenges and opportunities (as outlined in Section 3 of this paper), many of which are out of reach of individual countries or local decision makers. This can be problematic as it undermines the vertical coherence of Agenda 2030, meaning that policy regimes at supranational governance levels (regional, global) – such as the international finance, trade and migration regimes – can undermine policy effectiveness at national and subnational levels, even if efforts are undertaken to strengthen horizontal coherence between the three dimensions of sustainable development: the economic, the social and the environmental (UNRISD 2016). Secondly, the extent, scope and pace of transformative change depends on the specific context of each country and the challenges faced by different sectors and groups. Thirdly, transformative change can be hampered by a variety of actors and circumstances (UNRISD 2016), for example, when declarations of intent are not applied in practice, when interventions remain siloed and unidimensional, when trade-offs occur between different policy areas (for example, when economic interests prevail over social and environmental ones), when power asymmetries continue to determine policy processes and outcomes, when innovations are

⁶ A discussion on indicators to measure the outcomes of transformative change listed as examples goes beyond the scope of this paper. On measuring concepts such as empowerment or fulfilment of human rights, see for example Alsop and Heinsohn 2005, Fukuda-Parr et al. 2008, the overview in Combaz and McLaughlin 2014, and UN 2012. On equality measures, see Stewart 2013.

not accompanied by necessary changes in social norms and behaviours, or when lack of financial resources, political support or state capacity mean that reforms are not implemented or sustainable in the longer term.⁷

It is therefore necessary to view the framework in a circular way: while the aim is to achieve the maximum possible within the time frame of the Agenda, progressive realization requires constant monitoring and review of SDG strategies and implementation and, if needed, renegotiation with different stakeholders. Different actors will use different strategies and methods in this process.⁸ Transformative thinking is both a value-driven and problem-solving mindset—one which emphasizes the need for innovative thinking and knowledge production as well as inclusive processes, and which leads to an eco-social turn in policy and practice (UNRISD 2016).

3. DRIVERS AND CONSTRAINTS: WHAT SHAPES POLICY SPACE FOR TRANSFORMATIVE CHANGE FOR CHILDREN AND YOUTH?

In order to identify the challenges faced by children in different regions and countries, it is necessary to understand some key development obstacles and opportunities that impact children's rights and well-being and to shape context-specific policy responses and policy spaces. This section will look at how children are affected by poverty, inequality and economic crises; what opportunities and challenges are associated with demographic trends; how violence, insecurity and conflict affects children; the impacts of environmental degradation and climate change; and what opportunities and challenges children and youth encounter regarding rapid technological innovation.

3.1. Poverty and inequality trends

Although overall income poverty has consistently fallen in the past 20 years, there are currently 385 million children living in extreme poverty (that is, under the threshold of US\$1.90 per capita per day). In many countries, children are more affected by poverty than the general population, for example, in most OECD countries (OECD 2016, UNICEF 2016a). Children are also more vulnerable to the long-term effects of poverty, particularly those related to health and educational outcomes.⁹ Even in high-income countries, many children live in households experiencing deprivation. The recent Innocenti Report Card (RC) 14 finds that across 41 high-income countries, an average of one child in five lives in relative income poverty,¹⁰ with wide regional variation ranging from one in ten in Denmark, Iceland and Norway, to one in three in Israel and Romania (UNICEF Office of Research - Innocenti 2017). When multidimensional poverty is considered, the same study found that one European child in three is deprived in two or more ways.¹¹

7 See UNRISD 2016 for multiple country examples on these obstacles.

8 There is an interesting discussion about the continuous engagement of different actors in the SDG process, particularly with regard to policy design, partnerships and monitoring and review processes. These include critical research, shadow reporting, advocacy and claims-making, lobbying, negotiation, networking, multi-stakeholder initiatives, etc. On strategies and instruments, see Beisheim 2015, 2016, UNRISD 2016: chapter 7; for shadow reporting, see Civil Society Reflection Group 2017.

9 According to the life-cycle or life-course approach, early childhood care and education have a strong impact on child well-being as well as cognitive and non-cognitive skills, which in turn influence future performance in school and labour markets. See, for example, UNICEF 2015a, Bruckauf and Chzhen 2016, Heckman 2006, and Duncan and Bruce-Gunn 1997.

10 The relative child poverty rate shows the proportion of each nation's children living in a household where disposable income is less than 60 per cent of the national median (after taking taxes and benefits into account and adjusting for family size and composition using the OECD modified equivalence scale) (UNICEF Office of Research - Innocenti 2017, 13).

11 The Innocenti RC14 applies the child rights-based MODA tool (Multiple Overlapping Deprivation Analysis) to study multidimensional deprivation among children, based on 2014 data for 28 European Union countries plus Iceland and Switzerland. Multidimensional deprivation is considered for seven dimensions of child poverty: nutrition, clothing, educational resources, leisure activities, social activities, information access and quality of housing. Children who lack access to at least two of these seven dimensions are considered to be in 'multidimensional child poverty'.

Poverty decline, where it has occurred, has not been homogenous across countries and regions. East Asia and the Pacific and South Asia are the regions with the largest decline in poverty rates, with China and India being the strongest drivers of this success. Europe and Central Asia and Latin America and the Caribbean, which presented relatively low poverty rates, have kept pace in further reducing poverty.

However, the 2008 **economic crisis** has had a slowdown or reverse effect on this trend, as initial counter-cyclical policies were soon replaced by austerity and adjustment policies such as reducing subsidies, wages and social transfers, increasing consumption taxes, and privatizing public assets and services (Ortiz et al. 2015). Austerity policies have been demonstrated to reduce growth prospects while reducing household income and access to public services. Such austerity measures affect children and families directly; in Europe, spending on family benefits decreased in two thirds of European countries and child poverty increased in two thirds of these countries (Cantillon et al. 2017).

As a consequence, **child poverty rates** have been increasing globally. In Europe, rates increased in two thirds of countries between 2008 and 2014, and by particularly large margins in countries such as Iceland, Greece and Spain (Cantillon et al. 2017). In 2015, for the first time in decades, the number of people living in poverty in Latin America and the Caribbean increased (UNDP and UNRISD 2017). In sub-Saharan Africa (SSA), the absolute number of people living with less than US\$1.9 rose from 276.1 million in 1990 to 388.7 million in 2013, mainly due to population growth in the region (UNICEF and World Bank 2016). According to UNICEF (2016a: 70), at current rates, 90 per cent of extremely poor children in the world will live in SSA in 2030.

Uneven success in poverty reduction goes hand in hand with rising **inequality** (UNRISD 2010), which is one of the most important problems the world economy has faced over the last four decades: “Inequality is not only a moral or ethical problem, it is increasingly seen as a key obstacle to sustainable development and poverty eradication” (UNRISD 2016: 42). Indeed, tackling the worst symptoms of poverty without addressing the rising gap between rich and poor and between different social groups does not lead to long-term transformative outcomes. One of the big achievements of recent years has been to produce rigorous evidence to better understand the scope and consequences of rising inequalities within and between countries, and to place the problem squarely on global and national policy agendas, including in the SDGs (Goal 10). However, while progress has been made in raising awareness on the adverse consequences of vertical (income-related) and horizontal (group-related) inequalities, it has been more difficult to tackle their root causes. Inequalities are deeply entrenched in social, economic and political structures and asymmetric power; reproduced through policies and institutions; and the outcome of economic policies that fail to create a level playing field (equal opportunities) while shying away from bolder redistribution (equal outcomes).¹² According to UNICEF (2016a), compared to the richest children, the poorest children are 1.9 times as likely to die before age five, and are five times as likely to be out of school. Children affected by poverty and inequality – particularly those facing intersecting forms of disadvantage and exclusion along lines of class, gender, ethnicity, religion, race, location or migrant status – are not able to reach their potential and are deprived of basic rights.

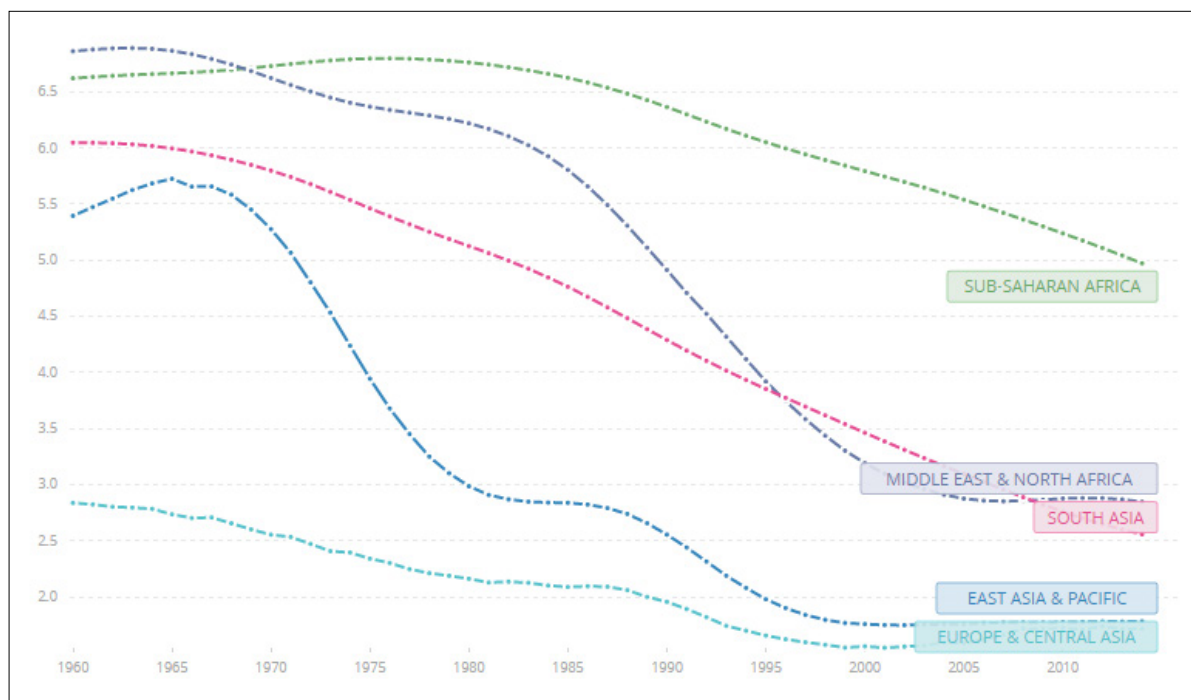
12 Implementing redistributive social contracts based on cross-class coalitions continues to be a political and economic challenge. This question is at the heart of a new UNRISD research project. [http://www.unrisd.org/unrisd/website/projects.nsf/\(httpProjects\)/259326031472FE1BC125834C0038A3B9?OpenDocument](http://www.unrisd.org/unrisd/website/projects.nsf/(httpProjects)/259326031472FE1BC125834C0038A3B9?OpenDocument)

3.2. Demographic trends

Population growth, ageing and urbanization are fairly predictable trends allowing countries to design policy responses in a systematic and forward-looking way, especially with regard to public social services such as education, health and care policies, as well as pension and labour market policies (UNRISD 2016). With a growth rate of 1.18 per cent (83 million people annually), the world population is projected to increase by more than 1 billion people within the next 15 years, reaching 8.5 billion in 2030. Africa and Asia will be the major contributors to the population increase, particularly countries such as India and Nigeria. The European population, by contrast, is expected to shrink further (UN DESA 2015), but even households in Europe with few children face increased risks of falling into poverty (Cantillon et al. 2017).

Data show a clear relation between a country's level of development and population ageing. More developed countries are experiencing a progressive ageing of the population due to low fertility rates and higher life expectancy at birth. Less developed countries, on the other hand, have a younger population with higher fertility rates (see Figure 2). For example, the population of Africa, the region with the youngest population, is made up of 41 per cent children and 19 per cent youth (UN DESA 2015).

Figure 2: Fertility rate, total (births per woman) 1960–2015



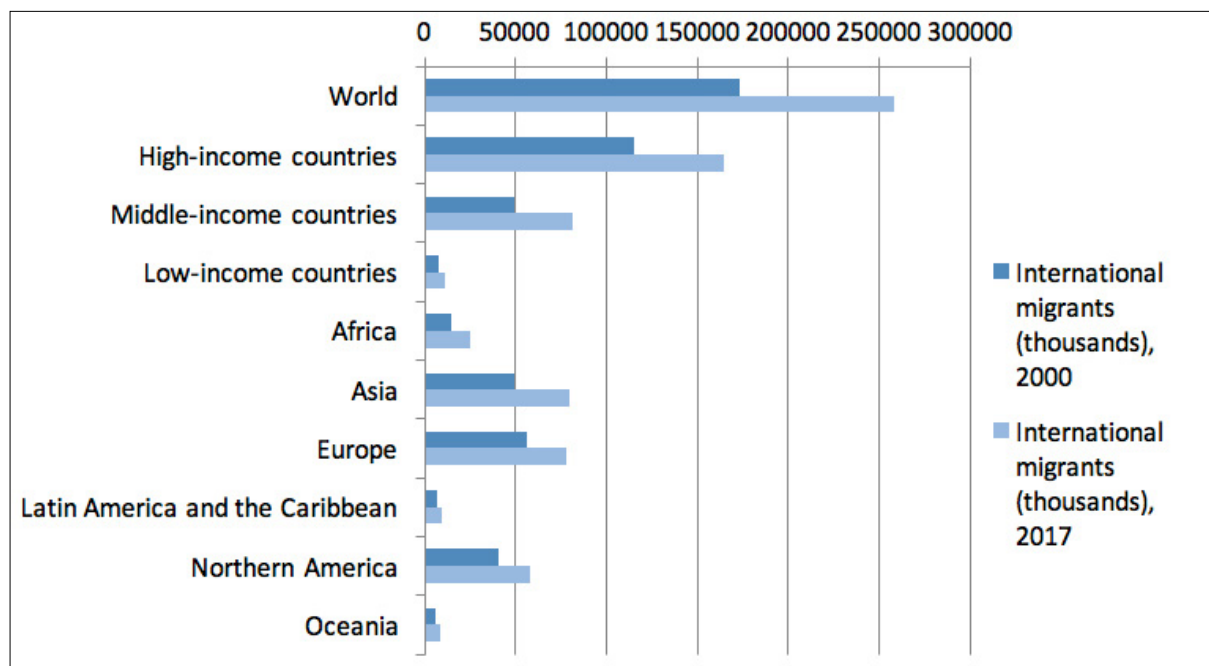
Source: World Bank 2017

The demographic structure of a country can represent a challenge or an opportunity in terms of economic and welfare sustainability. Without changes in fertility, mortality or migration, European countries will face a workforce shortage by 2050 and an aggravation of the dependency ratio—the proportion of the population that is of working age as opposed to children and older persons (DEMIFER 2010). The proportion of young people in the population in most countries is still increasing relative to other age groups, which is termed a 'youth bulge'. At the same time, we see relatively high

rates of youth unemployment and the deterioration of working conditions in many countries. The youth bulge represents a major challenge for countries already facing specific health challenges that affect youth disproportionately, such as HIV, and seeing high rates of youth unemployment.

This in turn could lead to further **migration** pressures for people lacking opportunities and resources, adding to the growing number of internal and international migrants seeking better life chances outside their communities or countries of origin. In 2015, there were 31 million children living outside their country of birth (UNICEF 2016c). The current number of international migrants is 258 million (see *Figure 3*), which is the highest in history and a 49 per cent increase from 2000 (UN DESA 2016).

Figure 3: International migrants (in thousands), 2000 and 2017 compared



Source: UN DESA 2017
(<http://www.un.org/en/development/desa/population/migration/publications/wallchart/docs/MigrationWallChart2017.pdf>).

3.3. Violence, insecurity and conflict

Freedom from fear and the freedom to live a secure life with dignity are basic human rights. This is explicitly taken up in Agenda 2030, with several SDGs aiming to foster more resilient, peaceful and inclusive societies (SDGs 4, 8, 9, 11, 16). While the causes and manifestations of violence and insecurity are numerous and diverse – including, for example, poverty; inequality; ethnic, religious and socio-political tensions and repression; and gender- or age-based violence rooted in stereotypes and power inequalities – the consequences are especially severe for children and young people. Children suffer most from a context of general insecurity, crime and violence.

Violence against children manifests differently across countries and socio-economic and cultural contexts. Violent acts are not isolated acts concerning children and one or more other individuals, but rather a socioecological phenomenon (Maternowska et al. 2016). The likelihood that children

experience violence is determined by a series of factors that operate at different levels—individual, interpersonal, community, institutional and structural. The individual and interpersonal levels represent the personal history and immediate context in which children are located, whereas institutional and structural factors represent a broader context, composed of rules, laws, and macro socio-economic factors (Maternowska et al. 2016). For example, a parent's behaviour towards the child is shaped by his or her personal beliefs about punishment; level of education; cultural norms; or financial situation that may cause stress.

Furthermore, children are subject to different forms of violence at different periods. During their early years, children are more likely to experience violence from their parents or other caregivers within the household with important consequences for their future emotional and psychological well-being. School-age children are more likely to experience corporal punishment at the hands of their teachers and/or peer bullying. Teenagers, in addition to being vulnerable to peer bullying, have higher chances of engaging in gang-related activities. Data show that adolescents affiliate themselves with gangs by the age of 12 or 13 (UNICEF 2014). Teenage girls are more at risk of sexual abuse and harassment and often the insecurity felt in school or on the way to school is a factor in dropping out (UNICEF 2014). There are also specific risks associated with becoming a victim of violence at different ages and with regard to gender identity and sexual orientation (UNICEF 2014). Girls, for example, have greater exposure to intra-family or intimate partner violence as well as forced marriage and sexual violence, and adolescent boys are more likely to engage in gang violence and become victims of homicide (UNICEF 2014). The statistics on violence against children and adolescents paint a dark picture: children and youth under age 20 constitute 20 per cent of all homicide victims (2012); 60 per cent of children aged 2 to 14 are regularly physically punished by caregivers; around 25 per cent of girls aged 15 to 19 report having been victims of violence since age 15; and over a third of adolescents in Europe and North America experience bullying regularly (UNICEF Office of Research - Innocenti 2014).

Children are also among the most vulnerable groups in cases of **political conflicts and war**. Children living in conflict and war zones experience dangerous situations with long-lasting consequences such as education disruption, emotional shock from losing a family member or a friend, permanent injuries or death, sexual exploitation, and recruitment as child soldiers. Further, a large number of children in war and conflict zones are subject to forced displacement and involuntary migration (UNICEF 2016c).

In 2016, 59 per cent of the world's children (1.35 billion) were living in a conflict-affected country, with approximately 357 million living in a conflict zone (that is, within the range of 50 km of fighting). This represents a steady increase since the year 2000 (Bahgat et al. 2018). By the end of 2015, some 41 million people were displaced by violence and conflict within their own countries; an estimated 17 million of them were children. Eleven million children are refugees and asylum seekers living outside their country of origin. Between 2005 and 2015, the number of child refugees under the mandate of the United Nations High Commissioner for Refugees (UNHCR) more than doubled, and during the same period the total number of all child migrants rose by 21 per cent (UNICEF 2016c). The situation of children in Syria is especially worrying, with children being killed (at least 652 in 2016) or recruited to fight in the conflict (their numbers doubling from 2015 to more than 850 in 2016). Moreover, nearly 6 million Syrian children are dependent on humanitarian aid and figures show increasing rates of child marriage and child labour (UNICEF 2017a).

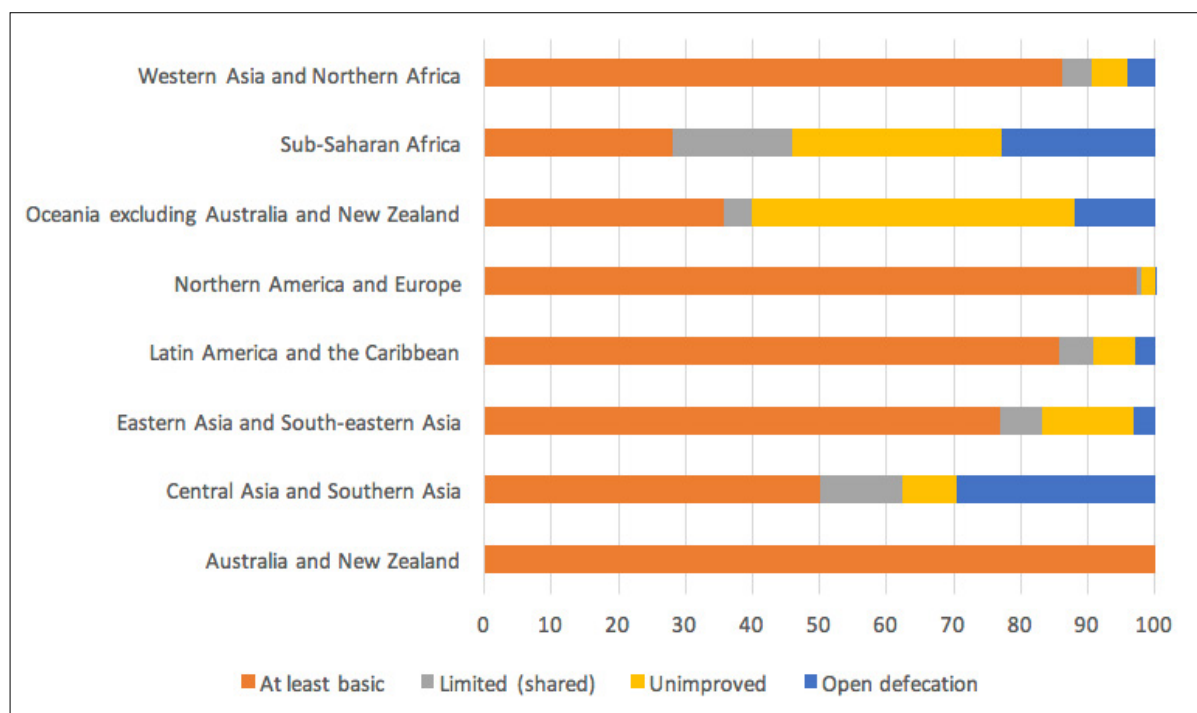
3.4. Environmental degradation and climate change

“Children have the right to good quality health care – to safe drinking water, nutritious food, a clean and safe environment, and information to help them stay healthy. Rich countries should help poorer countries achieve this” (Article 24, CRC). The UN Convention on the Rights of the Child (CRC) commits all signatory states to protecting the right of every child to a safe, healthy environment in which to develop and grow. Environmental degradation and climate change as well as population growth and urbanization along with industrial activity and western-style consumption patterns, have led to a faster depletion of resources, air pollution, deforestation, water scarcity, and other environmental challenges (UNDP and UNRISD 2017). These all have specific health and well-being impacts for children.

Alarming, 92 per cent of the global population is living in places where air pollution exceeds World Health Organization (WHO) limits, with severe effects on human health (heart diseases, respiratory infections, lung cancer, etc.). Outdoor air pollution is an increasing health risk for children, especially in growing urban centres. Children and women are also especially affected by indoor air pollution, a consequence of harmful cooking and heating fuels (UNICEF 2016d).

According to estimates, half of the world’s population will live in water-stressed areas by 2025 (UNICEF and WHO 2015). Although the proportion of the human population with access to clean water resources has grown, 663 million people still do not have access to an improved source and sanitation coverage remains highly unequal (Figure 4). Water scarcity and lack of sanitation facilities can have disastrous effects on children, leading to stunted growth, disease and reduced school attendance and thus perpetuating poverty (UNICEF 2017b).

Figure 4: Percentage of population with sanitation coverage (2015)



Source: UNICEF 2015 <https://data.unicef.org/topic/water-and-sanitation/sanitation/>

Deforestation and desertification due to climate change are among the main causes of land degradation, which in turn represent a threat to food sustainability. Deforestation has negative effects on air quality, greenhouse gas emissions and water supply, further compounding the global crisis of climate change (UNDP and UNRISD 2017).

While some effective measures can be taken at the household or community level to address these problems (especially prevention of indoor air pollution caused by use of harmful cooking fuels or provision of improved water sources), an important part of the problem is related to broader issues of polluting industries and consumption patterns. As such, there is a need for more systemic responses, a challenge that applies to developing and developed countries alike.

Climate change is associated with a double and triple injustice (UNRISD 2016, Cook et al. 2012): those countries and individuals that have contributed least to climate change are most affected by its negative direct and indirect impacts. This is particularly true in the case of children. Countries with the highest risk of climate change are concentrated in SSA and South Asia, the regions with the largest proportions of the world's extremely poor (5.4 per cent and 3.6 per cent of the global population in 2013, respectively, Chen et al. 2015). Direct effects of climate change such as sea level rise and drought place added pressures on communities where clean water, sufficient food and adequate shelter are already difficult to obtain.

3.5. Technological innovation

The 2030 Agenda recognizes the importance of new technologies for implementing the SDGs. Technological innovations can enhance sustainable development, but they may also worsen inequalities and exacerbate exclusion or exposure to risks if they are not accompanied by a range of supporting policies and social innovations as well as increased efforts to tackle global power asymmetries (UNRISD 2016). The impacts of technology on children and youth can be direct and indirect. They include: how technology affects the livelihood and employment opportunities of their parents or caretakers; the impact it has on public service provision (for example water, health, education, security and justice); and how it affects everyday life through communication, culture, political participation, social relations, consumption behaviour and so on. Rapid technological change requires both a critical analysis and monitoring of its economic and social impacts as well as a new mindset with regard to current and future generations' openness to life-long learning.¹³

New technologies have emerged to address **food and water scarcity problems**; for example, biotechnologies have helped create drought-resistant seeds and nanotechnology is being used in desalination and water-cleaning processes (ECOSOC 2015; Nicol et al. 2015). Many technologies, namely renewable energy technologies such as wind and solar energy, have an important role in combating climate change and its negative impacts. Solar energy can potentially make **electricity** affordable for 1.2 billion people who currently do not have access to it (UNDP 2015a), with the sun predicted to become the world's largest source of electricity by 2050 (IEA 2014). Climate-smart technologies and practices can also lower emissions from agriculture (FAO 2016, 2015). However, the transition from traditional carbon/oil-based technology to renewable energy requires significant financial resources to invest in new technologies and necessary skills and capacities, which low-income countries often lack.

¹³ See for example Lagarde 2017. On the use of new communication technologies for social mobilization, networking and multi-stakeholder initiatives, see UNRISD 2016: Chapter 7.

The health sector has also benefited from technological advances. The creation and distribution of new vaccines against, for example, hepatitis B, pneumonia and polio are estimated to save nearly 3 million lives every year and prevent millions of others from contracting deadly viruses (Lilly et al. 2014). Advances in technology can also address spatial inequalities and improve communications between doctors or health workers and patients in rural areas, for example, through mobile health applications (Adibi 2015, *see Box 5*). Finally, mobile phone technology is increasingly used for health insurance payments or receipt of social protection programme benefits such as cash transfers, whereas smart insurance cards with microchip technology are used for registration and data management, for example, in the Indian Rashtriya Swasthya Bima Yojana health insurance scheme for people below the poverty line.

Education is another sector heavily affected by technological development. Information technology has provided new ways of learning, teaching and working by widening access to web-based platforms, including online courses, video conferences and interactive applications. It has also provided flexibility in terms of location, time and costs (West 2015). Technology is an important means of skills improvement and upgrading for those already working (UNDP and UNRISD 2017). Moreover, it has become important in active labour market policies, helping unemployed people to upgrade their knowledge in order to avoid human capital loss during the time spent between jobs. However, rapid changes such as automation and artificial intelligence could also have negative labour market effects, destroying more jobs than are created (Brynjolfsson and McAfee 2014). Radio and TV programmes targeted at children have been used in some developing countries to broadcast educational courses in order to reach students in the least accessible areas (UNESCO 2015). However, technological advancements also present new challenges. Young people are pioneers in developing new cyberspaces where they can be creative, but at the same time they face risks that guardians may not be aware of. Although governments have made efforts to deal with these problems, creating new laws and instruments to prevent online abuse and raise awareness of these risks, interventions are often insufficient (UNICEF Office of Research - Innocenti 2012b).

Additionally, the gains of the digital revolution have not been equally distributed: 81 per cent of households in developed countries have Internet access, compared with only 34 per cent in developing countries and 7 per cent in least developed countries (ITU 2015). There are also significant inequalities in access to technology between rural and urban areas in developing countries, and better-off and more educated individuals tend to reap greater benefits (UNDP 2015).

4. IMPLEMENTING TRANSFORMATIVE POLICIES FOR CHILDREN AND YOUTH: TOWARDS INTEGRATED APPROACHES

In order to illustrate the potential for and obstacles to transformative change for children, this section focuses on selected policy areas that can have multiple and synergistic impacts on the achievement of the SDGs. The featured policy areas have a traditional child focus, particularly social policy, which covers social protection policies, health, education and labour market policies, as well as care policy. The objective is to show the cross-cutting nature of these policy areas and how they intersect with areas outside social policy, such as economic or environmental policy. The latter are usually not designed with a child focus, or they are taken as given in evaluation and impact research. However, these policy areas are highly relevant for children as they determine the broader opportunity and risk space for child development and child-sensitive social policies (*see Box 1 below and previous section*).¹⁴ In addition, when discussing specific policies in these areas, attention should be paid to political, economic, sociocultural and environmental contexts and the policy reform process.

For each policy area and related case studies, investigation of issues relating to policy coherence and multi-level governance is therefore necessary to capture the interconnectedness (or fragmentation) of policies, as well as potential synergies or trade-offs. Child protection interventions are a good example of this, as their cross-sectoral nature requires integrated and systemic responses across different policy areas and at different levels, from the individual and household to higher-level institutions. This integrated analysis allows for a more holistic perspective that also identifies how these contexts affect children and their families beyond specific interventions targeted at children. Indeed, while outcomes for specific child indicators from certain interventions (such as a cash transfer) can be measured at the individual/household level, these micro/household-level interventions aggregated together do not necessarily or automatically translate into transformative outcomes at the macro level. This may be because, for example, coverage of the programme is low, the financing of programmes relies on environmentally harmful instruments or programme design leads to adverse impacts on gender or other dimensions of equality.

The following sections will briefly introduce selected policy areas and identify some key questions with regard to potential for transformative impacts on children.

14 UNRISD 2010, 2016, 1995; Utting et al. 2012; UNICEF 1987, 2014

Box 1: Economic policy and its impact on children

The general economic context in a country – for example, the level and pattern of growth, macroeconomic fundamentals, employment and wages, and fiscal resources – has important implications for the well-being and rights of children and youth. Labour-intensive growth paths and sufficient fiscal revenues provide opportunities for states to invest in child-friendly policies and to provide young people with decent job opportunities once they enter the labour force. Economic crises, on the other hand, tend to affect children and young people negatively by reducing household income (for example through wage cuts, unemployment or inflation) and through a deterioration of public services and social programmes if governments cut public spending as part of austerity measures.

As laid out in the Addis Ababa Action Agenda for Finance for Development and SDG 1a, implementing the SDGs requires expansion of fiscal space and available financial resources through a variety of instruments, ranging from budget reallocations, taxation, official development assistance, foreign direct investment or debt to revenues from natural resource extraction and public enterprises.

The role of **domestic resource mobilization** in this process deserves special attention, not only because it is deemed necessary in a context of declining aid and volatile external flows, but also because it holds its own promises for transformative change, if successfully undertaken. Transformative financing strategies are those that are sustainable in economic, social, political and environmental terms. This rules out prolonged austerity policies as non-viable solutions and violations of human rights, whereas revenue mobilization through taxation, debt or mineral extraction has specific distributional implications from an intergenerational perspective. Financing policies such as tax reforms, debt or mineral revenues need to be analysed with regard to their impact on economic development, social equity, equality, sustainable use of natural resources and environmental impact, and inclusion. The example of **extractive industries** (EIs) illustrates the trade-offs at stake. Some mineral-dependent countries (for example Bolivia or Mongolia) have successfully raised more fiscal revenues from EIs over the last decade and channelled these into social policies benefitting children. However, in order to promote the necessary structural transformation of the economy that minimizes harmful environmental impacts and promotes sustainable development, countries should consider moving away from EIs as these are often considered problematic because of climate emissions and other negative impacts on the eco-social system in which they operate. In analysing processes of bargaining and contestation around resource mobilization and allocation, it is therefore necessary to take into account a broad range of benefits and costs as well as short-term and long-term impacts. In order to make these processes more transformative for children, children and their representatives need to be included in national and global bargains (for example climate finance or ODA), and in the design of financing policies.

Child budgeting or **social budgeting** mechanisms have proven useful in identifying those programmes and sectors with the greatest positive impacts on children and youth. UNICEF also promotes transparency, participation and oversight in budget systems for the realization of children's rights, and a general comment No. 19 was issued in 2016 by the Committee on the Rights of the Child on the issue. However, an analysis that takes into account the transformative nature of both revenue and expenditure policies is most reflective of the integrated nature of the SDGs.

Source: Hatcher et al. 2016; IBP and UNICEF 2017; ILO 2017; Macdonalds 2016; Magno 2016; Nem Singh et al. 2016; Ortiz et al. 2015; UN 2015a; UNRISD 2016.

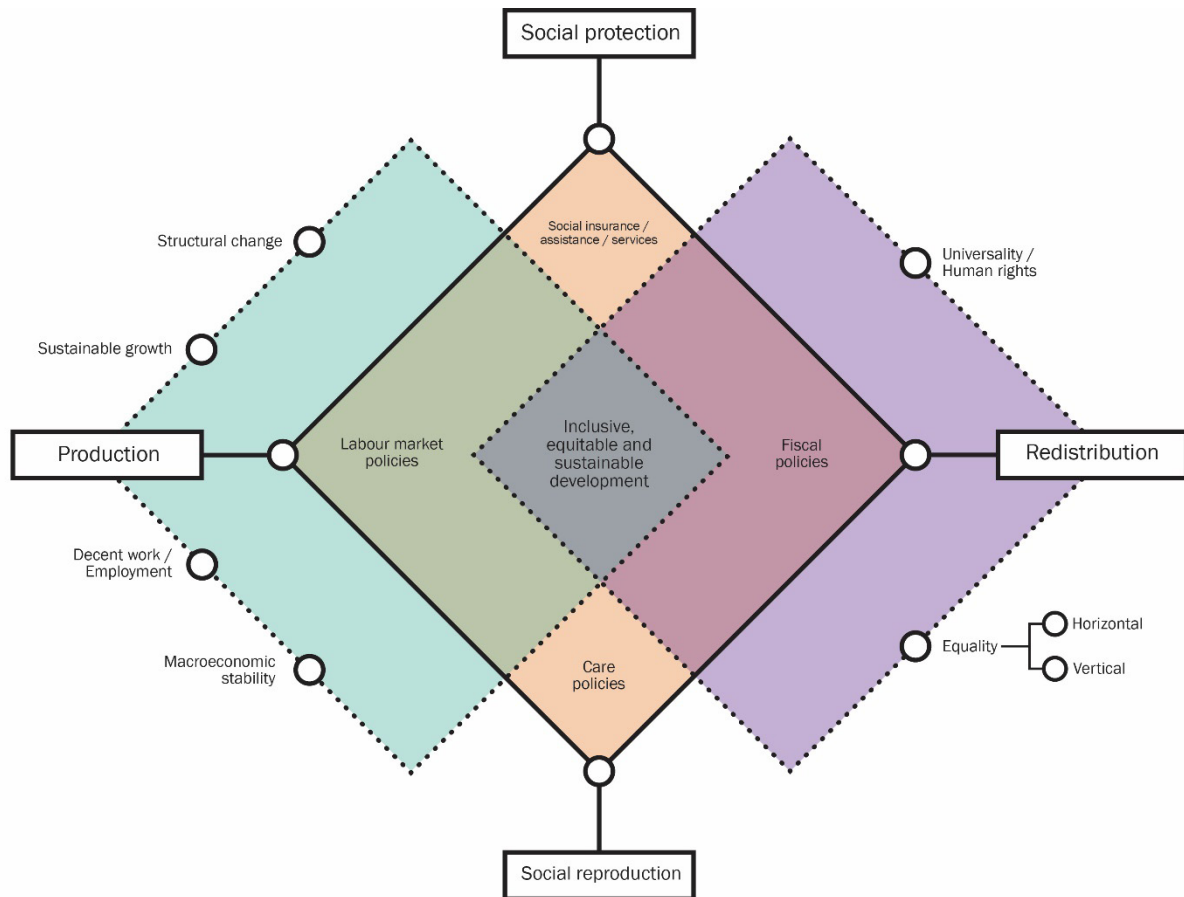
4.1. Transformative social policy: Social protection, health, education and employment

Social policy is a key area of relevance for children, given that the traditional child development objectives including protection; the provision of health, education, water and sanitation, housing and nutrition; and the reduction or prevention of poverty all broadly relate to social policies. SDGs 1 (poverty), 2 (hunger and nutrition), 3 (health and well-being), 4 (education), 5 (gender equality), 8 (decent work), 10 (inequality), 12 (consumption and production), 16 (peaceful and inclusive societies) and 17 (partnerships) are explicitly linked to social policy. The concept of transformative social policy as developed by UNRISD (*see Figure 5*) reflects the interlinkages between social and economic policy, with social policies playing a role not only in protecting vulnerable groups of people but also in redistributing income and wealth; facilitating social reproduction, including care provision; enhancing production through investment in individual and collective productive capacities; and strengthening social cohesion.¹⁵

A number of positive trends in social policy can be identified over the last two decades, such as increasing efforts towards universalization, better integration of policy instruments, more inclusive participation in policy design and implementation, new forms of partnership, and new regional and global social policy initiatives (UNRISD 2016). However, there are also shortcomings in these processes. These include inattention to systemic issues, including macroeconomic austerity and regressive fiscal policies that have increased inequality; limited progress in labour market formalization and opportunities for decent work; lack of integrated or comprehensive approaches to institutionalize universal social rights (both in terms of income security and access to basic services) across the life course; and failure to incorporate environmental objectives across all policy areas. This section of the paper will look specifically at the role of child-centred social policies (for example the promotion and expansion of conditional cash transfer (CCT) programmes), and how specific social policy approaches and their broader context impact children and youth. It will also look at integrated policies – e.g. eco-social policies – which combine social and environmental objectives or policies at the interface between social and economic policy arenas, for example labour market policies and educational/vocational training that promotes the school to work transition of youth.

15 UNRISD 2016; Mkandawire 2004.

Figure 5: Transformative social policy



Source: UNRISD 2016: 60 (Figure 2.1.)

Social protection

Social protection aims to guarantee basic consumption levels and living standards when people are confronted with shortfalls in their personal or household income due to market risks, natural disasters or life cycle contingencies such as sickness, maternity or old age (Cook and Hujo 2013). SDG 1.3 mandates governments to implement nationally appropriate social protection systems for all. However, according to recent International Labour Office (ILO) data, only 35 per cent of children worldwide have effective access to social protection, while 1.3 billion children are not covered. This picture differs across regions, with only 16 per cent of children receiving social protection benefits in Africa, 28 per cent in Asia, and 70 per cent in Latin America (ILO 2017).

While children and youth benefit from adequate and stable household incomes in general, and therefore also from social security programmes such as unemployment insurance or pensions received by adult household members, it is in the area of social assistance programmes (which are usually aid- or tax-financed) that coverage expansion and policy innovation has been most visible.¹⁶ Alongside traditional programmes such as school feeding, in-kind transfers or fee waivers, cash

¹⁶ Social pensions for older persons lacking sufficient income due to poverty or informal employment histories have seen a significant boost globally in recent years (UNRISD 2016: 71; Hujo and Cook 2013); research evidence shows that these are often shared with all household members including children and youth (UNRISD 2010).

transfer programmes for families with children, both unconditional or conditional (usually on regular school attendance and health check-ups), as well as public works programmes, have seen a huge expansion in a wide range of countries over recent decades. Such programmes have been actively promoted by the donor community as effective means of poverty reduction and humanitarian relief, with much evidence indicating that they bring improvements in a range of recipients' social outcomes in areas such as nutrition, health, education, economic productivity and empowerment.¹⁷

Cash transfer programmes vary widely in terms of design and scope – ranging from small and temporary pilots implemented by donors or NGOs to permanent and nationally rolled-out programmes – and not all of them can be considered to be transformative. Handa et al. (2014) correctly point out that one cannot assume that the positive impacts of cash transfers that have been identified in the literature apply to any particular programme; rather, each programme must be evaluated based on its specific design parameters and context, also taking into account initial household conditions as determinants for measured outcomes.

Many cash transfer programmes implemented in the Global South in recent years have indeed been emblematic of the type of palliative interventions described in Figure 1: problematic features included low coverage rates and exclusion errors; low benefit levels; challenges of financial sustainability, weak institutionalization or limited political support; conditionalities that reinforced negative social norms and stereotypes regarding poverty and gender; as well as siloed approaches that failed to link with social services and other policy areas to maximize synergies.¹⁸

However, several countries have also managed to design and implement cash transfer programmes that are more likely to achieve some level of transformation. Many of these are middle-income countries, for example Argentina (Asignación Universal por Hijo, 2009, *see Box 2*), Brazil (CCT Bolsa Familia, 2001/5), Mexico (CCT Progresa/Prospera, 1997) or South Africa (Child Support Grant, 2001). These countries have more comprehensive social policy systems of which cash transfer programmes for children and older persons are one component. In Latin America, Argentina, Brazil and Chile have reached near universal coverage of children with cash transfers (ILO 2017).

17 For an overview on impact studies see cited literature in Cook and Hujo 2013:472, or Handa et al. 2014, 2017.

18 For critical accounts of conditional cash transfer programmes and the "targeting the poor" approach, see Molyneux 2007, Kidd 2015, Mkandawire 2005 and Adesina 2010.

Box 2: Universalizing child benefits in Argentina

Argentina has one of the most developed social systems in the region, with almost universal coverage in a range of social security branches and basic social services. In the 2000s and in particular after the global financial crisis in 2008, the country set out to specifically address identified coverage gaps with regard to income transfer schemes such as old-age pensions and child grants. The existing contributory child grant for formal sector workers (which can be taken as a tax deduction for higher income earners) was complemented in 2009 with a tax-financed child grant (Asignación Universal por Hijo – AUH) for unemployed, informal, domestic or self-employed workers and beneficiaries of public works programmes. It is applicable to nationals and residents with three years of residency and amounts to around US\$47 per month (US\$188 for disabled children), with amounts adjusted yearly to price and wage indexes. The grant is paid for up to five children until the age of 18 (and permanently for disabled children) and requires certification of school attendance and health check-ups for the payment of 20 per cent of the grant (80 per cent of the grant is unconditional and automatically transferred each month). The family benefit programme, of which the AUH component costs approximately 0.8 per cent of GDP per year, covers 85 per cent of all children, with the AUH covering slightly less than half of these children. This demonstrates the considerable coverage extension that has been achieved through this non-contributory benefit. The transformative impact of this reform is associated with the universal, rights-based and gender-sensitive approach, the permanent integration of the grant into the social security benefit system, the poverty impact and the complementarity with comprehensive and free educational and health services.

Source: ILO 2017; Pautassi et al. 2013.

Countries with less comprehensive social policy systems have implemented or expanded cash transfer or public works programmes to become flagship social programmes; for example, Bangladesh (Targeting the Ultra Poor, 2002), Ecuador (Human Development Grant, Bono de Desarrollo Humano, 2003), Ethiopia (Productive Safety Net Programme, 2006), India (Employment Guarantee Scheme, 2006) or the Philippines (CCT Pantawid Pamilyang Filipino, 2008).¹⁹

In sub-Saharan Africa, a number of governments are scaling up and integrating cash transfer programmes targeted at vulnerable populations as well as related programmes (for example, free health insurance or livelihood and employment support), and domestic funding is growing. Examples include Ghana, Kenya, Malawi, Tanzania and Zambia (*see Table 1*).²⁰

¹⁹ Cook and Hujo 2013; UNRISD 2016.

²⁰ The cited literature (*see Table 1*) mentions the socio-economic (e.g. high percentage of poor and labour constrained households), legal (constitutional rights) and political (pro-poor agenda) contexts, as well as positive impact evaluations and experience gathered through pilots as drivers for these scaling-up processes. On the role of donors in the scaling up of cash transfer programmes, *see also* Cherrier 2015.

Table 1: Scaling up cash transfers in sub-Saharan Africa

Country	Programme	Beneficiaries	Benefit Amount	Targeting	Funding
Ghana	Livelihood Empowerment Against Poverty (LEAP)	2008: 1,654 HH in 21 districts 2016: 213,000 HH in all 216 districts	25–45 GHC (US\$12.5–24) for 4+ person HH Free health insurance through NHIS	Poor, vulnerable HH Conditional (health check-up, children’s school attendance)	General budget, World Bank, DFID
Kenya	Cash transfer for orphans and vulnerable children (CT-OVC) Part of broader safety net programme (including PW for young people, school feeding, grants for disabled persons and motherhood)	2012: (69 districts) 150,000 HH 2017: 365,000 HH	KES 2,000 Approx. US\$21	Unconditional Ultra-poor or vulnerable HH	World Bank, DFID, UNICEF, since 2014 government taking lead in funding of scaling up
Malawi	Mtukula Pakhomu	2006: Pilot 1 district 2017: 777,000 individuals (174,500 HH) in 18 districts 2018: national coverage (28 districts)	MWK 3,700 for 4 person HH plus school bonus (MWK 500 primary/1000 secondary): approx. US\$11	10% ultra-poor labour-constrained HH unconditional	World Bank, Irish Aid, national budget increase from 650 to 1.55 billion MKW
Tanzania	Productive Social Safety Net (PSSN)	2013: 275,000 HH 2015: 1.1 million HH (6 million individuals) Access to paid public works programme (approx. US\$1 per HH, up to 60 days in 2 months)	Base transfers approx. US\$1.8 plus conditional transfer per child, up to 4 children Max. amount: approx. US\$18	Unconditional base transfer for poor and vulnerable HH, Conditional transfer for HH with children and pregnant women (health check-up, children’s school attendance)	World Bank credit, DFID, Sida, USAID, UN and government resources
Zambia	Child Grant Programme (CGP) Multiple Category Targeting Programme (MCTP)	2003 pilot with 159 HH 2015 national programme 185,000 HH 2018 planned to reach all 103 districts	CGP: 55 ZMW (US\$12) MCTP: 60 ZMW (US\$12)	CGP targets HH with children <3 MCTP targets vulnerable HH (orphans, disabled etc.) unconditional	2014 funding increased from US\$3.5 million to 30 million

Source: The Malawi Cash Transfer Evaluation Team 2018; UNC 2016; Pereira 2016; Handa et al. 2016; Monteiro Costa et al. 2016; Roelen et al. 2017; The Tanzania Cash Plus Evaluation Team 2018; Natali 2017; Government of Ghana 2013; Rohregger et al. 2018.
Abbreviations: Households (HH); Ghanaian Cedi (GHC); Department for International Development (DFID); Malawi Kwacha (MWK); Swedish Agency for International Development Cooperation (Sida); United States Agency for International Development (USAID); Zambian Kwacha (ZMW); Kenyan Shilling (KES)

Second generation cash transfer programmes and public works programmes – those that have been designed after the pioneering Latin American programmes such as Bolsa Familia in Brazil or Progresa/Oportunidades in Mexico – have some innovative features that make them interesting examples of integrated approaches combining social, economic and environmental objectives simultaneously. These include the Bolsa Verde programme in Brazil, the Mahatma Gandhi National Rural Employment Guarantee Act in India, and the replacement of fossil fuel subsidies through cash transfers in Ethiopia, Ghana, Indonesia and Iran (*see Box 3*).²¹ Cash transfer programmes have also been effective responses in situations of humanitarian crisis, for example in Afghanistan, the Democratic Republic of the Congo, Mozambique, Nepal and Somalia (UNRISD 2016).

Box 3: Eco-social policies

Bolsa Verde, a cash transfer programme established in Brazil in 2011, provides cash benefits and vocational training to poor families (income per household member below BRL85, approx. US\$23) that make a living from collecting forest products or farming in protected or other designated areas, in return for commitments to adopt more sustainable use of natural resources to reduce deforestation. It is mandatory for participants to be beneficiaries of Bolsa Familia, the biggest CCT programme in the country, and to be registered in the single registry (cadastro único) of beneficiaries from low-income households. In 2017, 47,681 households received benefits of BRL300 (approx. US\$82) per month.

Much of the work under the Mahatma Gandhi National Rural Employment Guarantee Act (MGNREGA) – established in 2005 in India and guaranteeing up to 100 days of paid employment to impoverished people in rural areas – is devoted to environmental conservation, natural resource management (including the creation of durable assets), improved water security, soil conservation and higher land productivity. MGNREGA has offered employment to 20–55 million households per year or around 30 per cent of all rural households. In 2017, 51 million households were employed in the programme, with women constituting 53 per cent of total work amounts granted.

Cash transfers can play a significant role in mitigating the negative impacts of fossil fuel subsidy reform. Various countries that have adopted measures to reduce fuel subsidies – such as Ethiopia, Ghana, Indonesia and Iran – are also allocating fiscal savings to cash transfer programmes.

Source: UNRISD 2016:72 with updated figures from Government of India 2018; Government of Brazil 2018.

As the examples presented have shown, cash transfer programmes have seen a global expansion in recent years, with countries varying in their strategies to build social protection systems, responding to specific challenges in their country context and opportunities arising from donor support in this area. Several examples exist where cash transfer programmes have been successfully scaled up in terms of coverage and benefits, reaching universality in some countries. Applying human rights standards in policy design and implementation can help to avoid discrimination and promote equality. Making sure that social protection programmes are accessible to all, affordable, adapted to the varying needs of the population, and gender-sensitive can go a long way in making these policies more transformative (Sepúlveda Carmona 2017).

To sum up, cash transfer programmes have greater transformative potential when they go beyond residual approaches, introducing institutionalized, rights-based and adequate entitlements to child

21 Innovative examples of donor-funded eco-social projects benefitting children can be found in UNICEF 2015c.

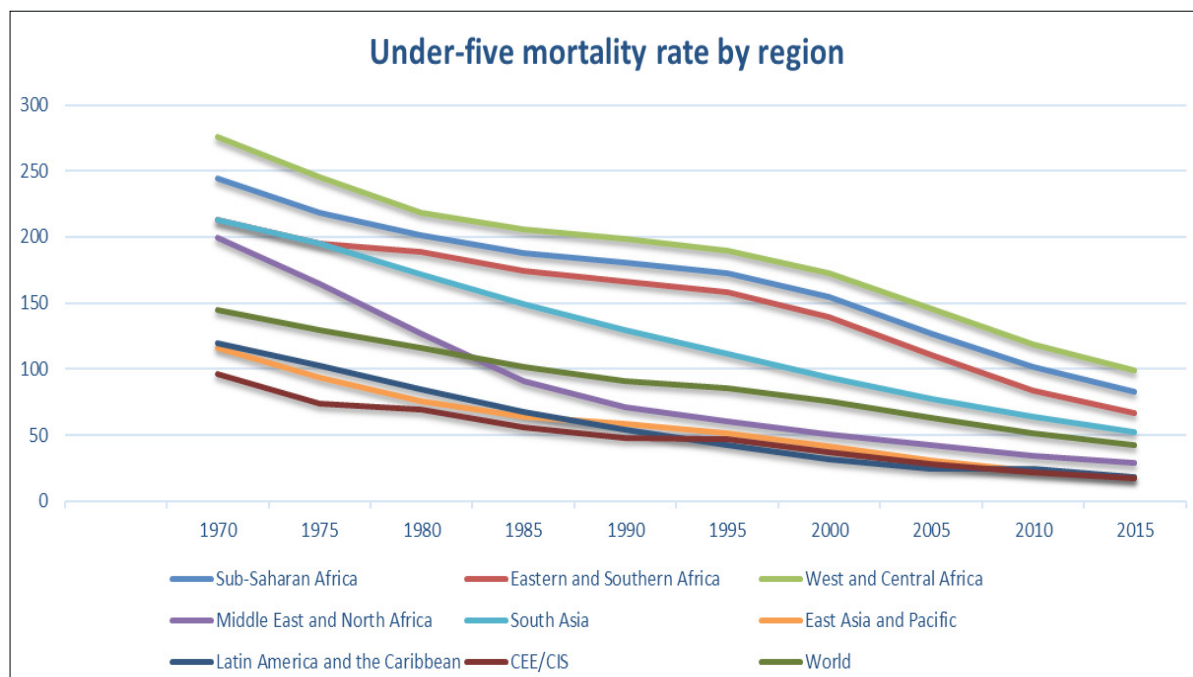
grants or cash transfers for families with children on a universal and long-term basis; are funded domestically through progressive fiscal systems; avoid entrenching gender or poverty stereotypes through conditionalities; and connect income transfer programmes with improved access to quality social services and decent work opportunities (UNRISD 2010, 2016). In order to assess the transformative impact of these programmes on children, it is helpful to analyse them from a more systemic social policy perspective, going beyond the evaluation of single projects and their beneficiaries and asking what role the programme plays in the broader social protection architecture and how it is linked to other essential areas such as social services or employment policy.

Health

The right to health is a key focus of the sustainable development agenda, which seeks (among other targets) to end preventable deaths (target 3.2) and malnutrition (target 2.2) of children under five years of age, and to provide universal access to sexual and reproductive health care services (target 3.7) by 2030. However, these goals are far from being met. WHO estimates that more than half of the globe lacks coverage of essential health services (WHO and the World Bank 2017). Further, the distribution of this access is highly unequal. Health spending in low-income countries was at 2.4 per cent in 2014, well below the global average of 6 per cent (UNRISD 2016). Those in poverty are much more likely to suffer health risks, insufficient access to health care and nutrition, as well as high levels of vulnerability. Key factors contributing to poor health and death of children are poverty, institutional failures and environmental degradation, which all reinforce each other.

In recent years, health indicators have improved globally: For instance, the **child mortality** rate dropped by 53 per cent, while **maternal mortality** fell by 44 per cent over the past 25 years (UN Inter-Agency Group 2015 and WHO 2015).

Figure 6: Under-five mortality rate by region



Source: Estimates generated by the UN Inter-Agency Group for Child Mortality Estimation in 2015. Downloaded from <http://data.unicef.org>

We can attribute many of these improvements to development interventions and technological improvements, such as development of vaccines and access to medical care. However, while health indicators have seen improvements globally, the distribution of these improvements is greatly unequal, with the poor, especially in low-income countries, remaining highly vulnerable to preventable conditions (World Bank 2015 and Figure 6).

For example, despite the improvements in health, 19.4 million children worldwide did not receive basic vaccines in 2015 (Herzlinger 2006). Nearly half of all child deaths, which total 5.9 million annually on average, are a result of undernutrition.²² An estimated 155 million children under the age of five (three quarters of whom are living in Southern Asia or SSA) are stunted due to malnutrition, a condition resulting from poverty and state failure, but which is often also compounded by vulnerability linked to environmental degradation (UNICEF, WHO and World Bank Group 2017).

As noted in above, climate change may affect food security and access to clean water supply through increased frequency of drought, floods and other natural disasters. Over 1.8 billion people drink contaminated water (UNICEF and WHO 2015), which can transmit diseases like diarrhoea, cholera and polio, with diarrhoea alone causing 502,000 deaths each year globally and constituting one of the leading causes of death among children under the age of five. Environmental degradation also has health impacts beyond food and water security. Air pollution is linked with diseases and infections that kill approximately 600,000 children under the age of five every year. According to WHO, one in six child deaths were due to pneumonia in 2012 (UNDP and UNRISD 2017).

HIV is another significant health challenge faced by many children and adolescents. In 2016, there were 2.1 million children (aged 0–14) living with HIV and only 43 per cent of them were receiving antiretroviral therapy. Mortality in children and youth with HIV is very high, with 120,000 children and 55,000 adolescents dying of AIDS-related causes in 2016 (1 million young people aged 15–19 are infected with HIV) (UNICEF 2017e). In 2016 in sub-Saharan Africa, the region most affected by HIV/AIDS, girls accounted for three out of every four new adolescent infections (UNICEF 2017d). Lack of access to education and the inability to stay in school; gender norms that put girls at a disadvantage for negotiating safer sexual relationships; and gender-based violence that is common in many countries in the region are some of the challenges girls are facing, increasing the risk of HIV infections (UNICEF and UNAIDS 2017).

How then can a transformative approach to health provision be employed to reduce health risks globally and make access to health care more equitable? How can approaches to health be better integrated across sectors and policies? A transformative approach to health policy would need to increase the quantity and quality of fiscal resources for health policy spending beyond the current 6 per cent of global annual spending; but it would also address malnutrition and mitigate the detrimental health effects of environmental and climate change by investing, for example, in sustainable agriculture and food sovereignty, improving sanitation and hygiene infrastructure and ensuring access to clean water, along with strategies to improve air quality. Interventions linked across social and environmental policy domains are necessary to ensure the health and well-being of children of today and future generations.

22 UNICEF: Child Mortality Estimates, 2015. Available at <http://data.unicef.org/topic/child-survival/under-five-mortality/>

Box 4: Integrated policy responses to HIV

The UNICEF vision to combat HIV among children and adolescents rests on a combination of high-impact HIV-specific interventions combined with integrated HIV responses across sectors, thereby avoiding a siloed HIV programming approach. Synergies can be strengthened between HIV, health, nutrition, child protection, social policy and education sectors.

Examples are maternal and child health days,²³ or child malnutrition treatment programmes, which may offer opportunities to identify new paediatric and maternal HIV cases while improving child health outcomes. HIV testing in schools may yield more effective adolescent uptake of testing in certain areas, whereas integrated HIV, maternal and drug-dependency services have demonstrated promising outcomes for both HIV and opiate addiction.

Cash transfers have been found to improve access to health, education and nutrition for children and adolescents, whereas health insurance increases access to health services and reduces out-of-pocket payments.

Finally, addressing the social and economic factors that continue to fuel the AIDS epidemic is crucial for a transformative approach. Poverty, food insecurity, drug and alcohol use, social marginalization, exclusion, stigma, inequity, gender inequality, violence and sexual exploitation all increase risk and decrease resilience in vulnerable populations.

Source: UNICEF 2016e, UNICEF 2013, UNICEF and UNAIDS 2017

The challenge of addressing HIV/AIDS for children and youth can also illustrate the overlapping nature of various health-related and non-health-related impediments to improvements in health outcomes. Moreover, it shows the need for an approach that works across sectors to overcome structural inequalities arising from unequal access to affordable care services, medications and vaccines, as well as challenges arising from unequal power relations between patients, policymakers and various business actors. In Thailand, for example, the path to universal health care involved alliances between social movements and progressive bureaucrats, which successfully reduced the power of business interests and resulted in the passage of comprehensive social policy reform (Mongkhonvanit and Hanvoravongchai 2017). In Latin America, health ministers in Mercosur negotiated lower prices of high-cost medicines with a number of pharmaceutical companies, demonstrating the effectiveness of regional organizations in social policy (UNRISD 2016).

Finally, the provision of health care depends to a large extent on functioning institutions, which requires interventions at various levels of governance and care provision to ensure coordination and accountability. Rwanda, for example, has made great strides towards reducing maternal mortality and significantly increasing coverage through an integrated approach engaging stakeholders across various sectors (see Box 5). The country also joined the *All In to end Adolescent AIDS* initiative in 2016 and developed a National Operational Plan for HIV and Sexual and Reproductive Health Among Adolescents and Young Adults 2017–2020 based on a participatory process including youth representatives (Bains and Armstrong 2017).

²³ See https://www.unicef.org/esaro/5479_child_health_days.html, accessed 22 May 2018.

Box 5: Towards universal health care in Rwanda

In a context of persistently high rates of maternal and child mortality, from 1999, the Rwandan government promoted community-based health insurance (CBHI) schemes as a part of nation-rebuilding efforts that drew on the long tradition of faith-based and community-run schemes. Prioritizing reproductive, maternal, newborn and child health, the country has since scaled up national spending, health workforce and infrastructure and has implemented various complementary policy reforms in education, nutrition, transport, as well as water and sanitation. As a result of this integrated and multisectoral approach, Rwanda has halved child mortality rates from 103 deaths per 1,000 live births in 2005 to 50 deaths per 1,000 live births in 2015, and maternal mortality from 1,500 deaths per 100,000 live births in 2000 to 210 deaths per 100,000 live births in 2015, with rates remaining high.

After a pilot phase, the government established a specific legal framework for the CBHI in 2008, making affiliation mandatory for nationals and residents without other insurance coverage. In parallel, the government integrated and deployed donor funds in alignment with the Health Sector Strategic Plan of which the Mutuelle is one of the main pillars. Enrolment increased from 7 per cent in 2003 to 91 per cent in 2010. The new decentralized system relies strongly on voluntary, trained community health workers (CHW) who have also been replacing traditional birth attendants since the late 1990s, the latter being retrained to accompany pregnant women to deliver in a health centre or clinic. CHW use a UNICEF designed mobile phone technology (rapid SMS system) for the monitoring of pregnant women and newborn babies. The system is further characterized by public awareness campaigns, complex supervisory and accountability mechanisms, the use of incentives such as performance-based salary schemes for health or administrative personnel, various benefits for CHW, and sanctions such as fines imposed on women not using the formal health system or in case of late payments of insurance premiums.

In 2015, the government transferred management of the CBHI scheme to the Rwanda Social Security Board in an effort to further scale up its reach, expand the benefit package to the level of social insurance for formal workers, and address financial instability of individual CBHI schemes due to an accumulation of debts to health providers.

Several obstacles still remain in the path of universal insurance coverage in Rwanda. They include exclusion of the poorest of the poor who have difficulty in paying premiums, often women and children in rural areas (the great majority of the population is rural; insurance premiums are per capita); the small benefit package compared to other insurance schemes; limitations in accessing for-profit health providers; and poor service quality. Other challenges towards transformative change include the slow pace of deepening democratic processes in the country.

Source: Chambers and Golooba-Mutebi (2012), Ministry of Health Rwanda et al. 2014; NISR et al. 2015; UNRISD 2016.

Education and youth employment

SDG 4 seeks to achieve “inclusive and equitable quality education for all,” a goal of particular relevance for children. In recent years, some progress has been made in achieving the targets set out by Agenda 2030. Between 2000 and 2014, the global primary school completion rate increased from 82 per cent to 90 per cent. The youth literacy rate rose from 83 per cent in 1990 to 91 per cent in 2015 (UN 2015b). Furthermore, the number of out-of-school girls at the primary level has been reduced

by half since 1999, and two thirds of developing countries have reached gender parity in primary education (UNDP and UNRISD 2017).

These gains aside, there remain significant gaps in education quality and access. There are currently 263 million children out of school, be it primary or secondary (UNICEF 2017c). There are also deep disparities in access to education that exist along gender, class and regional lines. For example, 70 per cent of out-of-school children are in SSA or Southern Asia; reading levels are higher in urban areas than rural areas, and higher in rich households than in poor households (UNICEF 2017c); and 53 per cent of children who do not attend primary school are girls, with the gender gap being greatest in Southern Asia and SSA countries (UN 2015b). In poorer regions such as South-East Asia and Pacific or SSA, lower secondary enrolment rates reflect youth being pushed into employment to contribute to household incomes. In SSA, youth labour force participation is at 45 per cent while upper secondary school enrolment is only at 38 per cent (ILO 2016).

Further, even children who do attend school often do not receive a consistent or quality education. In many countries in Latin America and SSA, more than half of students who complete primary school fail to attain basic math and reading skills (ECOSOC 2016). Some reasons for this include shortages of trained teachers and infrastructural deficiencies (such as lack of running water and electricity) that render the learning environment inconsistent, inadequate and unsafe. For example, in SSA, only 55 per cent of primary school teachers are trained (ECOSOC 2016). Such disparities do not only play out between the developing and developed world, between urban and rural students, and between girls and boys, but also between income groups within countries. The increased commercialization and privatization of education in some contexts contributes to a massive disparity in quality of education between the poor and the wealthy (Bartlett et al. 2002). In many cases, resources are pulled away from public education systems and redirected to exclusive private systems out of reach of most young people. Further, public schools in wealthy areas often have access to much more resources than those in poorer areas. Exacerbating existing problems, an increasing population will place more pressure on already struggling education systems. In SSA, the projected population of school age children in 2030 is more than double the number of currently enrolled students (UNICEF 2017c). Further, children in conflict zones, a growing figure, are twice as likely to be out of school (UNICEF 2017c).

In light of these issues, a transformative approach that addresses challenges in education holistically demands interventions across multiple sectors. Transformative approaches to education must focus on improving quality and access for all children and youth, for example through universal free education at all levels.²⁴ Building a functioning education system requires a holistic approach. For example, simply creating more primary schools to address low enrolment numbers fails to address two key aspects of the problem: the lack of teachers to staff them and the absence of long-term strategies for training more teachers in ways that incorporate new methods, technologies and subject areas such as environmental learning into curricula. A coherent education system capable of producing trained staff, skilled professionals and empowered citizens is one with strong capacities and sufficient resources at all levels, including primary, secondary and tertiary (UNRISD 2010).

Further, improving education systems requires investment in other sectors as well. Schools rely on functioning infrastructure and public transportation systems to provide safe access and basic services like water, sanitation and electricity (UNICEF 2017c). School children face a number of

²⁴ Examples are countries such as Argentina, Brazil, Germany, France, the Nordic countries or Slovenia.

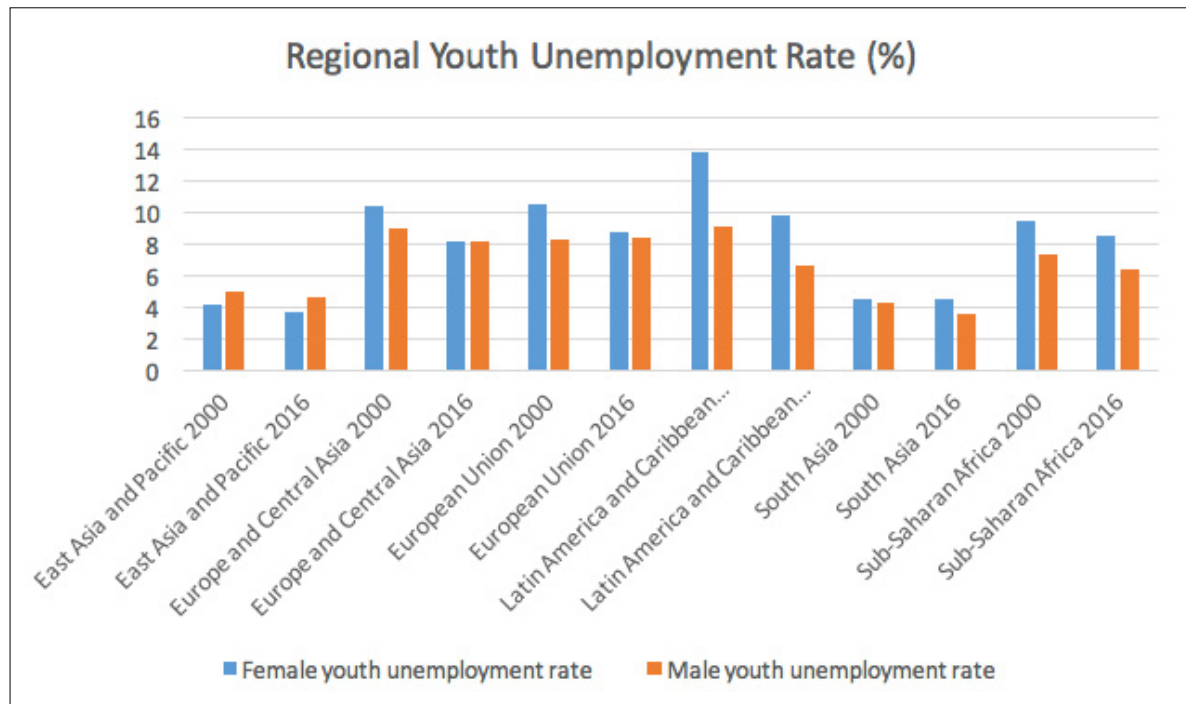
risks, including unsafe commutes (either due to poor infrastructure or because they are travelling unaccompanied), unsafe and unhygienic conditions at school, peer bullying, corporal punishment from teachers, and sexual assault (UNICEF 2017g). Addressing these issues to ensure a safe and accessible learning environment involves an integrated approach that engages actors across sectors, including government ministries, municipal service providers, labour unions, and child and gender advocates, as well as parents and students. Finally, ensuring equal access to quality education also requires addressing cross-cutting issues that threaten the learning potential of certain groups of children: for example, poverty and hunger, which forces children into work at young ages or prevents them from learning; and displacement, whether as a result of conflict, economic insecurity or climate change.

Improving education systems has significant long-term impacts on the lives of children and youth and it has an important impact on productivity and growth. SDG target 4.4 seeks to increase the number of youth and adults with relevant skills for employment. Helping youth to enter the labour market has huge ramifications for the course of their lives and for future generations of children, including poverty reduction, income security, social protection, and access to improved life opportunities.

Outside the education system, other challenges to youth employment include lack of opportunities for decent work and low wages. All up, ILO estimates the share of the world's active youth population being either unemployed or working poor to have reached 40 per cent in 2016 (ILO 2016). Despite being employed, 156 million young people in emerging and developing countries live in extreme poverty (that is, on less than US\$1.90 per capita per day) or in moderate poverty (i.e. on between US\$1.90 and US\$3.10) (ILO 2016).

This situation is compounded by a fast growing youth population. According to the ILO, 12.6 million youth in SSA will enter the labour force over the next four years (ILO 2016). Many countries lack the conditions to reap the benefits of this 'demographic dividend', with high youth (and particularly female) unemployment rates (*see Figure 7*), and high rates of youth neither employed nor in education or training. Several of the BRICS countries, for example Brazil, China and South Africa, have experienced increases in youth unemployment rates over recent years, with more than half of young people being unemployed in South Africa (ILO 2016). Southern European countries have seen rates climbing since the Great Recession (Cantillon et al. 2017), and the Arab States remain the region with the highest average rate of 30.6 per cent (ILO 2016).

Figure 7: Youth unemployment (ages 15–24) by gender, 2000 and 2016 compared, by region.



Source: World Bank 2016.

Some countries have made strides in addressing these issues by treating employment and education as deeply connected issues. The rise of vocational education and training (VET) programmes can represent a transformative approach to empowering youth. Such programmes highlight the importance of investing in all levels of education, emphasizing career paths that the national economy is able to support. While such programmes may have a long-term impact on the lives of young people by creating secure job prospects, they also have the potential for broader transformative impacts. When harmonized with industrial and development objectives, VET programmes can help to push developing countries further towards social development; invigorate green industries with the skills, knowledge and resources needed to render emerging economies environmentally sustainable; and harness new technologies to produce rather than eliminate employment opportunities. However, the most effective approaches are ones that are integrated, bringing together various education, labour and business actors.²⁵ Box 6 explores a case study of VET implementation and outcomes in Singapore.

While employment is a key concern for youth, education has an intrinsic value beyond preparing youth for labour force participation. Generally, education must impart knowledge and skills that go beyond national labour needs, such as critical thinking, creativity and values. Further, education empowers youth to be agents of change both in their own lives and in their communities.²⁶ SDG target 4.7 seeks to ensure that “all learners acquire knowledge and skills needed to promote sustainable development”. In this vein, education produces citizens who are engaged, informed and motivated to participate in processes of transformative change.

²⁵ See the example of Singapore in Box 6. Further examples are VET systems in Germany and Switzerland. Indeed, more evidence is needed on which VET programmes are more successful and what factors serve as enabling conditions, particularly in the Global South.

²⁶ On the transformative role of education, see the seminal works of Brazilian scholar and educator Paulo Freire.

Box 6. Vocational education and training in Singapore

Singapore, a small island nation of five and a half million inhabitants with a long colonial history and a very short tenure as an independent nation, has the 10th highest GDP per capita and one of the lowest unemployment rates globally. While Singapore has few natural resources, it has placed significant emphasis on growing its economy through manufacturing, commerce and services. Its success can be attributed in part to its education system, and specifically the integration of vocational education and training.

The development of the existing education system can be broken down into three phases. Following independence, the creation of a national education system was a key step to building a coherent society in a country made up of several distinct ethnic groups with no common language or shared cultural heritage. The first phase, which took place in the 1960s and 70s, was focused on expanding primary education, as well as the creation of a teachers' college to train teachers to staff the schools. During this time, national departments were created to strategize and coordinate the creation of a VET system and investment was made in infrastructure to expand access. The second phase in the 1980s and 90s was marked by the simultaneous expansion of the economy to include not just more jobs, as was the priority in the past, but higher skilled jobs to support the growth of new, more technical industries, a task more easily met with the key pillars of the education system already in place. During this period, emphasis was placed on improving education at all levels, recognizing that students require a strong foundation in order to advance to higher levels of technical training; and on expanding education and training networks to include companies and unions. During this time, the government, with an eye towards even higher levels of economic development, instituted a mandatory minimum of 10 years of schooling. The current phase is marked by the expansion of a knowledge-intensive economy, with the positioning of Singapore's education system as a global player, instituting exchange and partnership with top universities around the world. The system is highly integrated, with a strong emphasis on coherence across the education system to ensure quality and access. It is cross-sectoral and multidimensional, engaging directly with industry to ensure training translates into employment opportunities. It is inclusive and universal, offering opportunities to students of every ability level and ensuring quality at each level rather than investing heavily in just one, with various tracks from university to technical schools to apprenticeships available after completion of secondary school.

Education, seen primarily as a human capital investment, has without a doubt been one of the key factors in Singapore's development. Today, 91 per cent of Singaporeans are homeowners; unemployment is 2.2 per cent; and 97.3 per cent of adults are literate. The country's education system and labour market efficiency are consistently ranked among the highest in the world. Importantly, its success in these areas cannot be attributed to the design of the education system alone. It is girded by other facts such as infrastructure to ensure access (ranked 2nd in 2017) and a well-functioning public sector to ensure coordination at all levels (ranked 1st in 2017). However, it must be said that while the outcomes of Singapore's VET programme can be understood as transformative, the extent to which the processes of designing and implementing these programmes have been fair, inclusive and transparent is a subject for debate. With the political context in Singapore in which electoral processes are under the control of the leading party and civil society is sidelined, resulting in an effectively authoritarian state, there is little space for truly transformative processes of policymaking to occur. In addition, education is promoted mainly on the basis of an instrumentalist perspective on social policy in the context of the government's anti-welfare and meritocracy ideology, which relies on individualized savings schemes (the Central Provident Fund) without redistributive or risk-pooling elements. Employment is regarded as the best means of alleviating poverty, neglecting both intrinsic values of education and the specific needs of labour-constrained households.

Source: Beng Huat 2015; ILO 2018; Keating 2002; Schwab 2017; Singapore Government Department of Statistics 2018; Song Seng 2012; Tucker 2012; World Bank 2018.

4.2. Care policy: Increasing gender equality and policy coherence through care systems

Care policies are now an integral part of development debates, and they are a good example of a cross-sectoral and integrated policy approach that reflects the holistic vision of the SDG framework. However, the care system's approach is relatively recent and still not well grounded in discourses and policy agendas in either the Global South or North. While the challenge in the South is to elevate care issues on governments' and social movements' agendas, many Northern countries would benefit from overcoming entrenched sectoral divides and social norms regarding care responsibilities.

Children have the right to an adequate standard of living and they have the right to be cared for. States have the obligation to support families and responsible caregivers in the realization of these rights, and many countries have developed policies and legislation facilitating care. A significant innovation and political achievement, the issue of care has been taken up explicitly as a development goal for the first time in the 2030 Agenda under SDG 5. Care work involves direct care of persons as paid or unpaid work as well as related household chores. Apart from young children, persons with intense care needs include frail elderly persons and people with various illnesses and disabilities. Moreover, able-bodied adults as well as older children and adolescents also require and receive care (Razavi 2007). Unpaid care and domestic work has, however, been largely invisible (not least because of a lack of measuring and traditional gender roles) and absent from public attention and global development debates until more recently.

Demographic trends have directed policymakers' attention towards the importance of care. While ageing requires increased investments in health care (including long-term care) and elderly care, youthful societies require greater spending on childcare, education and vocational training. A triple dividend could be reaped by expanding early childhood education and care services, which would not only increase young children's capabilities but also facilitate women's labour force participation and enhance employment creation (UN Women 2015).

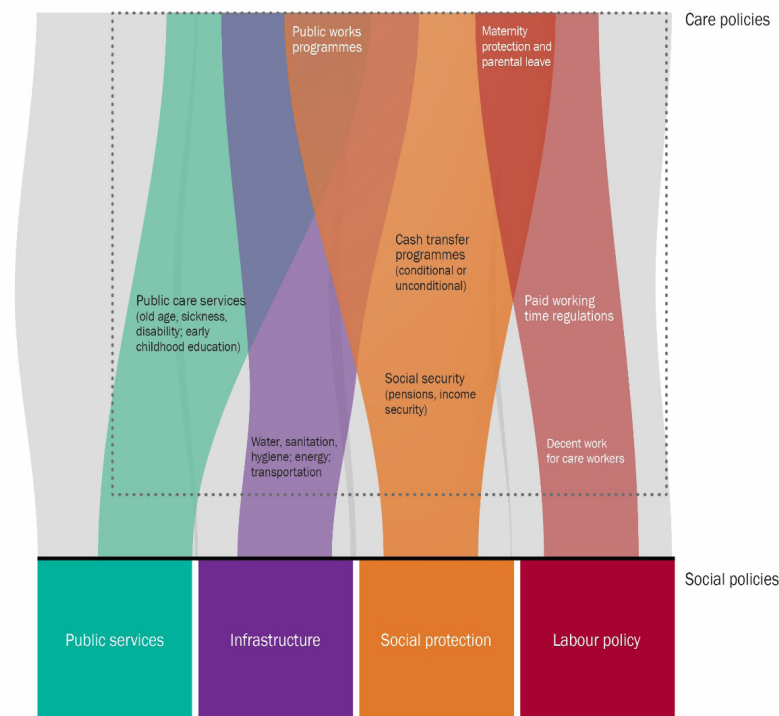
Another trend that leads to a greater demand for care services is the increasing number of single-headed households (mostly female) or lone parents, which puts the household at a higher risk of poverty, especially in the absence of maintenance laws or challenges in implementing them (ISSA 2017; Esquivel and Kaufmann 2017). Missing-middle households have also increased strongly due to the HIV/AIDS epidemic. As of 2016, an estimated 16.5 million children worldwide had lost one or both parents to AIDS. More than 80 per cent of these children (13.8 million) live in sub-Saharan Africa. Many millions more were orphaned for other reasons (UNICEF 2018). Last but not least, it is important to note that the time and drudgery of care and domestic work is highly influenced by the availability of social services and social infrastructure such as energy, water and transportation, as well as the quality and accessibility of education and health services (UNRISD 2010, UN Women 2018). Past trends of privatization and commercialization of these services, or cuts in social provision in the context of austerity measures, have reduced access and increased the unpaid care burden women and girls have to shoulder (UNRISD 2010). In addition, climate change is also a factor that can negatively affect access to food, water or energy, making the care tasks more time consuming and undermining social outcomes for the most vulnerable.

The SDG target 5.4 reflects the importance of care policies, with the aim of recognizing and valuing unpaid care and domestic work and reducing and redistributing it through the provision of public services, infrastructure and social protection policies (UN 2015c). Care policies are defined as public

policies that allocate resources in the form of money, services or time to caregivers or people who need care, spanning sectoral divides between health, education, the labour market and social protection policies (UNRISD 2016: 88, *see Figure 6*). Applying a care lens to this diverse set of policy instruments is a game changer as it allows for increased gender equality, policy complementarity and coordination, better conditions for care workers, and positive macroeconomic impacts. The integrated approach embodied in a care lens in social policy and in care systems reflects the kind of new thinking and new policy approach that is required to realize the SDGs. Figure 8 illustrates how care policies bridge sectoral divides in social policy by bringing together actors from education, health, water, sanitation, energy and transport, social protection and labour policy.

Transformative care policies are defined as those that simultaneously guarantee care receivers' and caregivers' rights, agency, autonomy and well-being (UNRISD 2016) and help to integrate broader perspectives into group-focused policies. In the case of care, it facilitates the simultaneous incorporation of a strong gender perspective into policies for persons with care needs, including children. From a child perspective, children are more often care receivers than caregivers. However, unpaid care work and domestic work carried out and provided by children is an important challenge in many developing countries, particularly for girls (ILO 2017: 13), and tends to reduce their opportunities and life chances while undermining their rights as care receivers. One important goal is therefore to reduce the care burden falling on young children and adolescents, especially girls, through adequate and universal care policies, such as those mentioned in target 5.4. As care receivers, children have the right to quality care and protection against any abuse or violence in their family and in or by public or private institutions. This applies particularly to children with specific care needs such as disabled or mentally-ill children, or children in situations of conflict, emergency, displacement or disaster.

Figure 8: Care policies bridge sectoral divides



Source: UNRISD 2016:91 (figure 3.2)

Despite the fact that care has been recognized as an important dimension of sustainable development, the uptake of the care concept has been relatively slow at national and regional levels, with the exception of Latin America (Esquivel 2017). There, and against the backdrop of ageing, high female labour market participation and the recognition of unpaid care as a driver of gender inequality, care policies are high on political agendas and are firmly grounded in a rights-based approach (Esquivel 2017). Good examples of integrated care systems that are universal and aim to institutionalize inter-sectoral coordination are found in Uruguay and Costa Rica (*see Box 7*). These newly introduced systems have a clear transformative potential in terms of their reform processes (which have to different degrees allowed the combined discussion of care receivers' rights and women's rights) and system designs; however, the outcomes of the reforms cannot yet be fully assessed given the recent implementation date. Many other countries in the region have implemented and are further developing care policies with some innovative approaches in terms of early childhood education and development (Rico and Robles 2016). The newly created systems now require careful monitoring of the implementation process, particularly regarding financing and accountability mechanisms (Esquivel 2017).

Box 7: Care systems in Uruguay and Costa Rica

The Uruguayan National Care System (Sistema Nacional Integrado de Cuidado / SNIC) was created in November 2015. It includes both existing policies on health, education and social security, and new policies for priority populations—particularly adults with specific care needs, persons with disabilities and young children. The SNIC is human rights-based, solidary in its financing and universal in terms of both coverage and minimum quality standards. Other principles include the autonomy of care receivers and the co-responsibility of the state, the community, the market and the family, as well as between women and men, in the provision of care. Changing the sexual division of labour within households and supporting paid care workers are among the SNIC's stated objectives.

The SNIC was the result of political mobilization and broad alliances forged between women's and social movements, women parliamentarians and academics. Together they provided evidence, including through time-use surveys, and positioned care on the public agenda. Yet it was engagement with the ruling party, Frente Amplio, and the inclusion of the SNIC in the 2010–2015 electoral campaign programme that proved crucial. Care thus became a *political*, and not only a technical, public policy issue. An intergovernmental working group, in turn, made possible the institutional development of the SNIC, providing a platform for state actors to develop ownership. Building consensus around the system spanned seven years and three progressive presidencies. Ultimately, delays in the creation of the SNIC were blamed on budgetary problems. When those were solved and funding was allocated to fulfil coverage and quality targets, the SNIC law was passed without opposition.

In Costa Rica, the Early-childhood Development and Care Network (Red de Cuido y Desarrollo Infantil – RedCUDI) was enshrined in law and implemented in 2014 covering children below the age of seven. The objective is to universalize early childhood education and development services comprising both public and private provision. The system establishes early childhood care services as a right of every child and also states the objective to expand opportunities for mothers and fathers to engage in paid work or education.

Source: Esquivel 2017; UNRISD 2016.

In other regions, particularly in SSA but also in Asia, different factors ranging from a generally low level of coverage and spending on social services and social protection, a high percentage of informal employment, low priority of care issues on political and social/women's movements' agendas, and rigid gender norms and stereotypes, have slowed down the uptake of the care concept and a greater assignment of public resources to care. There are, however, several promising examples of greater investment in early childhood care and development policies as well as in maternal and child health care (including for children and young people affected by HIV) in different countries. At the same time, cash transfers, which are growing in all regions (see above), have generally positive effects on women and children in the household. Programmes seldom explicitly recognize unpaid care work and gender equality and are usually framed within poverty reduction policies or in more advanced economies are used to facilitate women's labour market participation.²⁷

Box 8: Early childhood education and care (ECEC) and the SDGs

The recent UN Women Report argues that ECEC can contribute to several child- and gender-related goals and targets, exemplifying a transformative approach. ECEC services that are sustainably financed, regulated, accessible and affordable, adapted to the conditions of beneficiaries, and providing quality services and decent work for care providers contribute to the SDGs by:

- Reducing the time women spend on unpaid care by shifting some of it out of the family (Target 5.4)
- Enabling women to increase their access to employment (Target 8.5)
- Creating decent jobs (Target 8.3) with adequate wages, working conditions and training opportunities in the social services sector
- Improving children's health and nutritional outcomes (Targets 2.2 and 3.2)
- Enhancing school readiness (Target 4.2), particularly among those from disadvantaged backgrounds, thereby contributing to equal opportunity and reducing inequalities of outcome (Target 10.3).

Source: UN Women 2018:231–2

Care policies have a high potential to contribute to economic and social development and to improve the well-being, rights and autonomy of both caregivers and care receivers (see Box 8). Therefore, applying a care lens more forcefully to different sectoral policies and the range of private and public institutions that are targeted at persons with specific care needs will create synergies. Universal and integrated care systems have a high transformative potential, especially if they overcome fragmentation and funding challenges, increase synergies between gender equality and the demands of care receivers, and lead to a better recognition and redistribution of care tasks within society. From a child perspective, quality of care and potential barriers to access programmes and services is a key concern and needs to be factored into design and monitoring of all care arrangements and policies. Children face a number of risks in the context of care, including unsafe or suboptimal conditions

²⁷ Esquivel and Kaufmann (2017) provide an excellent overview of the state of the art of care policies in SSA, Asia and Latin America; see also UN Women 2018, Chapter 6.

when accompanying parents to the workplace, when being left behind alone or under the supervision of siblings, or when being left under the care of low quality community, market or public providers.²⁸

Future research should continue to identify positive examples of gender- and child-sensitive care policies, as well as transformative policy processes resulting in better care for children.

5. CONCLUSIONS

The implementation of the SDGs holds much potential for children, as they are not only the key beneficiaries of positive achievements related to the Agenda but also the generation to live with the consequences if promises and commitments remain unfulfilled. This paper has developed a conceptual framework explaining what transformative change for children means and requires: a clear vision in terms of normative foundations and development agendas; a policy approach that aims to address root causes of problems through universal, rights-based, sustainable, structural, empowering, multidimensional and integrated policies; a policy process that is transparent, democratic, inclusive, accountable and fair; and expected outcomes reflecting fulfilment of child well-being and development, safety and security, equity and equality, and participation and agency.

The holistic and integrated nature of Agenda 2030 is an important step forward compared to previous development agendas, which, rather than constituting a comprehensive development strategy addressing both national and global challenges, were framed around traditional aid sectors. The new complexity of the SDGs seeks to overcome the previous programme-, project- or sector-focussed logic and to apply systems thinking that goes beyond mitigating symptoms and towards more substantive structural changes in all development dimensions and policy areas. This more holistic and cross-sectoral approach will also help to identify synergies and trade-offs as well as costs and benefits for different social groups in the shorter and longer term, therefore supporting informed decision making and evidence-based political processes. Against this backdrop, a pluralistic approach to research, methods, evaluation and monitoring would provide the different types of data and analysis that are needed to underpin advocacy, national and regional policy processes, and the international evaluation and monitoring processes related to the SDGs and other global commitments.

After analysing key global trends and how these affect children, we have reviewed recent developments in policy areas that are highly relevant for children (including some policy areas where the application of a child lens is promising new and much needed insights, for example economic and environmental policy), while also showing the interconnectedness between policy areas. The multiple functions of social policy for production, redistribution, reproduction and protection are one example of these interlinkages. The care system approach that cuts across sectors and policies, and the mainstreaming of migration in development policy, are further examples with relevance for children and youth. Health, education and labour market policies show how connected economic and social policies are, and that positive social outcomes require an enabling economic environment that allows for provision of quality social services, universal social protection, and growth paths that create employment and fiscal resources without exploiting humans or nature.

²⁸ See ILO 2017; Staab and Gerhard 2010; Rico and Robles (2016) elaborate on the incipient regulation and standards applying to care centres for children and elderly persons in Latin America.

In view of humanity's capacities and resources, the realization of this agenda is within reach. The eradication of poverty and access to basic social rights is possible and affordable. However, the implementation of the Agenda is now first and foremost a political process that involves contestation and bargaining around distribution of costs and benefits and different policy alternatives. Transformative decision-making processes are a pre-condition for achieving the SDGs. This requires shifts in power structures and greater equality with the aim of not only meeting the basic needs of children and youth, but also empowering them as agents who will be the change-makers of tomorrow.

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