Longitudinal and Life Course Studies • vol 11 • no 4 • 427–430
 • Paper received August 2020/Revised August 2020/Published online September 2020
Online ISSN 1757-9597 • https://doi.org/10.1332/175795920X15976696189639

EDITORIAL

Childhood adversity, life course outcomes and a diamond jubilee

Heather Joshi, h.joshi@ucl.ac.uk
University College London, UK

To cite this article: Joshi, H. (2020) Childhood adversity, life course outcomes and a diamond jubilee, *Longitudinal and Life Course Studies*, vol 11, no 4, 427–430, DOI: 10.1332/175795920X15976696189639

This last issue of Volume 11, 2020, is a showcase for the analysis of cohort data across domains of the life course. It features in particular, but not exclusively, the 1958 British Birth Cohort Study – National Child Development Study (NCDS) – of which more later. Tracking individuals from their birth into (late) midlife, illuminates long-term consequences of childhood circumstances. On the broad theme of childhood adversity, one paper looks at maltreatment in childhood, another at precursors of asthma starting in adulthood and another at the outcomes of having been designated disabled as a teenager in terms of social isolation and loneliness in adult years. Two other papers focus on outcomes in later life: caring for one's own parents by the 1958 British cohort in their fifties, and mortality among older age groups in Finland and Sweden. The latter explores the various dimensions in which social inequality can be measured. The issue is completed by the profile of a new birth cohort study starting out in Hungary.

The first article, 'Child maltreatment (neglect and abuse) in the 1958 birth cohort: an overview of associations with developmental trajectories and long-term outcomes' by Chris Power, Leah Li and Snehal Pinto Pereira, reviews a body of existing research into the adult outcome of a number of forms of maltreatment experienced by the 1958 cohort in childhood: neglect, and abuse – physical, psychological and sexual. Some of this sensitive evidence is unique to NCDS, having been collected retrospectively in the biomedical survey at age 45. The authors report adverse associations of various forms of maltreatment with a number of outcomes from development in childhood, to physical and mental health and social success in adult life. Smoking in adulthood is strongly associated with all forms of maltreatment. Cohort members who reported having been sexually abused as a child had higher rates of mortality from ages 45 to 58. This evidence of the long-term burden of child maltreatment is clearly relevant to policy on child protection in the present.

The second paper, by Catherine Hammond 'Psychosocial predictors of asthma onset during mid-adulthood: evidence from the National Child Development Study', takes as its outcome of interest the onset of asthma in midlife (between ages 33 and 42), among people who had not reported any such symptoms earlier. Asthma, an immune-mediated disease, is closely integrated with the endocrine and nervous

systems, which may be affected by psychosocial pathways. While many life course adversities, including child neglect and biological factors are associated with adult-onset asthma, psychological factors play a mediating role. This adds to the literature of how life course adversity, 'gets under the skin'. There is a new finding of depressive symptoms as precursors to developing asthma in midlife.

The third paper by Anne McMunn, Rebecca Lacey and Elizabeth Webb, is 'Life course partnership and employment trajectories and parental caregiving at age 55: prospective findings from a British Birth Cohort Study'. This addresses another subject of social importance, the provision of informal care for older people. The survey of NCDS at 55 has questions about the provision of care to the older generation – their own parents or parents-in-law (somewhat unfortunately abbreviated to PiLs). Here the focus is on a range of support offered by the cohort to elders, rather than the cohort members' own experience of being cared for (or neglected) in childhood. With social differences pre-controlled in terms of social class and educational attainment, the main factors predicting the propensity to provide care at 55 are the cohort members' histories of employment and partnership to date. These are summarised in sequence analysis and illustrated in chronograms. Subject to having a living parent-figure, being a woman with a longer history of part-time work and being either a man or a woman with more years of marriage were modestly associated with caregiving at 55. This pattern suggests there may be fewer carers available in subsequent cohorts with less stable marital histories and more full-time work for women.

In the fourth paper Sam Parsons and Lucinda Platt present 'The social relationships of three generations identified as disabled in childhood'. They are concerned with disability in childhood as officially identified as warranting special treatment in schools. The outcome in adulthood of interest is social inclusion, measured both objectively in terms of social contacts or in subjective terms of loneliness, another issue of growing concern to social policy. The paper makes use of evidence from NCDS, the Next Steps cohort born in England around 1990 and the UK Millennium Cohort. Making the now familiar adjustments for social background and educational attainment, the authors find long-term consequences of childhood disability for risks of social isolation at age 50. This applies both to smaller friendship networks and lower perceived social support. Although there have been some changes in schools' practice regarding Special Educational Needs, there are also indications of similar patterns in the more recent cohorts.

In the fifth paper, which does not use NCDS, 'Mortality by education, occupational class and income in Finland in the 1990s and 2000s', Rasmus Hoffmann, Hannes Kröger, Lasse Tarkiainen and Pekka Martikainen, take an approach to inequalities in the life course using data on broad adult cohorts created from sampling the census in Finland, linked to administrative records of incomes and deaths. The object of their paper is to investigate the multidimensionality of socio-economic sources of mortality inequalities. To test the relative importance of occupation as well as education and income in predicting survival in two periods before and after the millennium they follow, for seven years, a cohort of male and female workers aged 35–59, and of retired people aged 60–84. While all three dimensions are separately associated with mortality, the hazard ratios are attenuated in mutually adjusted models. Income remains the strongest marker of socio-economic position for most groups. The pattern seems to be relatively stable over time and similar to results for Sweden. The Finnish dataset used here, though with a much higher sampling fraction, has

features in common with the ONS Longitudinal Study of England and Wales. The latter 1% record linkage study was used by Archer et al (2020) in the previous issue of this journal to investigate possible response bias in NCDS.

The final paper in this issue, 'Tracking the development of children from foetal age: An introduction to Cohort '18 Growing Up in Hungary', is a cohort profile by Zsuzsanna Veroszta, Krisztina Kopcsó, Julianna Boros, Balázs Kapitány, Laura Szabó and Zsolt Spéder, unveiling a new addition to the international corpus of national longitudinal studies. It has got off to a successful start, interviewing some 8,000 mothers-to-be in 2018, 60 years after the Perinatal Mortality Study in Britain, which became NCDS. We hope it will prove a valuable resource for national and international research on human development in the coming years, and indeed that it may run for as long as NCDS!

NCDS reaches 60

The major part of this issue is devoted to analyses of data collected in the 1958 Birth cohort, still known as the National Child Development Study (NCDS) although the 'children' are now over 60. It is the second oldest of the national birth cohorts in Britain, and the oldest held at the Centre for Longitudinal Studies at Institute of Education University College London (CLS). The original sample, of 17,415 births in a week in Great Britain, was at first only intended to study maternity services and perinatal mortality. The study became longitudinal at age seven, following up cohort again in surveys at ages 11, 16, 23, 33, 42, 46, 50 and 55, and a major biomedical sweep at age 45 around 2003. The data sets have also been augmented by geocoded linkage and administrative records such as deaths, sets of derived variables and some sub-studies. There were 9,137 respondents at the age 55 sweep. Details of the history of the study can be found in Pearson (2016), Power and Elliott (2006) and the websites of the Centre for Longitudinal Studies, Closer and the UK Data Archive. The Data Archive supplies anonymised versions of the data to bona fide researchers, worldwide, but note that some material is only available on restrictive conditions such as a special licence.

Although the editors would not normally devote so much of any one issue to a single study, this is a major resource for multidisciplinary longitudinal research available internationally. There are already thought to be over 3,300 scientific publications based at least partly on its evidence; this issue presents just four of them. There were two more in the previous issue of this journal. The first three papers here were originally presented at the conference in 2018 to mark the 60th birthday of the cohort. At that time a tenth survey was being planned for age 61–62. Fieldwork on this round started in January 2020 but was brought to a halt in March 200 by the COVID-19 lockdown. Although face-to-face fieldwork was not possible, the CLS embarked immediately on an online survey with members of all the in-house cohorts, including NCDS at 62, about their experience of lockdown. The resulting data set is available for the research community to explore from the UKDS (University of London, 2020), and a second round is planned.

In order to ensure recognition of the efforts that go into the creation and curation of data sets, the UK Data Archive encourages the citation of the data sets themselves through their own document objective identifiers. The articles by Hammond and by Parsons and Platt in this issue provides a good example of how the Archive would

like this to be done, a practice all too often observed in the breach. We look forward to submissions to this journal taking the trouble to cite data resources, where this is possible, and to the prospect of UKDS devising a less cumbersome way of citing a collection of components of a complex data resource.

It is also fitting to close with appreciation of the cohort members' own contribution the study. The longitudinal studies community salutes the voluntary contribution of the cohort over six decades and, from time to time, of their family members. Without their cooperation there would be nothing to report, let alone a jewel among data resources.

Conflict of interest

The author declares that there is no conflict of interest.

References

Archer, G., Xun, W.W., Stuchbury, R., Nicholas, O., Shelton, N. (2020) Are 'healthy cohorts' real-world relevant? Comparing the National Child Development Study (NCDS) with the ONS Longitudinal Study (LS), *Longitudinal and Life Course Studies*, 11(3): 307–30. doi: 10.1332/175795920X15786630201754

Pearson, H. (2016) *The Life Project: The Extraordinary Story of Our Ordinary Lives*, London: Penguin.

Power, C. and Elliott, J. (2006) Cohort profile: 1958 British birth cohort (National Child Development Study), *International Journal of Epidemiology*, 35(1): 34–41. doi: 10.1093/ije/dyi183

University of London, Institute of Education, Centre for Longitudinal Studies (2020) *COVID-19 Survey in Five National Longitudinal Cohort Studies: Millennium Cohort Study, Next Steps, 1970 British Cohort Study and 1958 National Child Development Study, 2020* [data collection]. UK Data Service. SN: 8658, http://doi.org/10.5255/UKDA-SN-8658-1