EDITORIAL

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Pathways towards wellbeing

This set of papers has come independently from a number of places and disciplines, but, as befits the journal's theme, all of them explore some aspect of human well being, over various stages of the life course, using various sources of longitudinal data. The outcomes considered range from health, behavioural and emotional adjustment, life satisfaction and body mass, analysed in terms of some antecedent social. psychological and biological predictors. The countries where the evidence is taken range from Australia, England, Germany, New Zealand, Scotland and USA.

The first research article covers a broad sweep of ages from three to seventy-five. In Early-life conditions and the risk of later function-limiting long-term conditions, Matthew Iveson, Chris Dibben and Ian Deary follow a linked records on children born in Scotland in 1936. These are a population register on home circumstances in 1939, an all-Scotland test of the cognitive ability at age 11, the level of their educational attainment and adult social class leading to a set of health indicators from the censuses of 1991, 2001 and 2011. The Scottish Longitudinal Study provides a linked sub-sample of the census which records the prevalence of any limiting long-term condition at age 55, 65 and 75, self-assessed general health at 65 and 75, and a details on types of functional impairment at age 75. Path modelling is used to show how the links of early life conditions and ability can be traced through to later life outcomes, and how far these links are fed through intervening experience of education and occupation. The extent of mediation increases with the age at measurement, but some direct impact of early years can still be detected. This paper complements another one by these authors using the same data source and a slightly different modelling strategy taking economic activity, of men and women separately, in the same range of ages from 55 to 75. Childhood socio-economic circumstances, cognitive function and education and later-life economic activity: linking the Scottish Mental Survey 1947 to administrative data can be found (Open Access) in the previous issue of this journal, Volume 11, number 1, pages 55-79.

The second paper, Sociodemographic and maternal health indicators of inhibitory control in preschool age children: Evidence from Growing Up in New Zealand, by Jude Buckley, Elizabeth. Peterson, Lisa Underwood, Stephanie D'Souza, Susan Morton and Karen E Waldie, focuses on an much shorter span of development, from a much more recent cohort, the cohort recruited in the North Island of New Zealand in 2009-10. The children are followed from an ante-natal survey of their mothers, through several intervening data collections to an interview at age four- and-a —half. At this point a novel instrument measuring psychological self-control, the Luria handclap task, was administered. It is expected to be predictive of subsequent development on both cognitive and emotional fronts. This will be tested as this cohort is followed up. Meanwhile the work reported here established a number of potentially modifiable features of the maternal background (such as smoking in and before pregnancy) which predict this measure of self-control in pre-schoolers.

The third paper, *Neighbourhood deprivation and child behaviour across childhood and adolescence*, by Eirini Flouri, Emily Midouhas and Marta Francesconi, follows four indicators of children's behavioural and emotional problems from ages three to fourteen (2004-2015). In a sense, conduct problems, hyperactivity. emotional and social problems are all deficits to wellbeing. They have well-established correlates in the parental social, economic and psychological circumstances, and they tend to vary across types of neighbourhood in which families live. This paper explores the latter, ecological, aspects of trajectories of behavioral and emotional development. The authors do this using data on England from the UK Millennium Cohort study, and the separate dimensions of the Index of Multiple Deprivation which is constructed for that country. They use a 3-level growth model to allow for change over childhood age, in the outcome variables and family circumstances, and for various selections of domains of deprivation. Their contribution is to find that socio-economic domains – education, income and employment - were more consistently related to problem behaviour in children than other domains such as crime and living environment. They also confirm previous findings that the association of any ecological factor with these child outcomes is relatively modest.

Brigitte Schels contributes the fourth paper: When poverty becomes detrimental to life satisfaction in the transition to adulthood. Here the ages under observation are 15-29, during the period from 2006 to 2016, The aspect of wellbeing studied is life satisfaction, and the individuals reporting on their experience are in Germany, members of the Labour Market and Social Security Household Panel (PASS). Satisfaction with life is analysed (in Fixed Effect regressions) in terms of age, transition into the labour marker, transitions out of the parental home and to own family, along with various indicators of material and financial

poverty. The poverty indicators were little associated with life satisfaction for those under the age of 20, but became of increasing significance as the transition to adulthood proceeded. Age had an association with life satisfaction in its own right, over and above other markers of the transition to adulthood. This could be part of the supposed lifetime U shape of life-satisfaction, see *A cohort analysis fo subjective wellbeing and ageing: heading towards a mid-life crisis?* by Steffen Otterbach, Alfonso Sousa-Poza and Valerie Møller, another analysis of trajectories of wellbeing in another German panel (pairfam) in Volume 9 4 number 4, pages 382-411 of this journal.

The fifth paper, *Explaining disparities in BMI trajectories among older adults: A test of the double jeopardy and intersectionality hypotheses*, by Hui Liew takes the reader to some findings from the US Health and Retirement Survey (HRS), 1992-2014. Individuals analyzed are aged from 50 upwards, to a few becoming centenarians, The outcome of interest is the trajectory of overweight and obesity among these older Americans, and how it is related to cohort, race/ethnicity, sex, and education. BMI tended to fall over time for those over 62 at the outset, but to rise for those initially somewhat younger, presumably raising other risks to health. Liew uses growth curve modelling to estimate the extent of intersectionality – the degree to which disadvantages interact in predicting unhealthy weight. He has also addressed the question of intersectionality in another aspect of health recorded by the HRS '*Explaining disparities in transitions among visual-functioning states*. Vol 10, number 3 pages 327-347 of this journal.

The final item, *The Australian and New Zealand Intergenerational Cohort Consortium: A study protocol for investigating mental health and wellbeing across generations*, (Craig Olsson. George Patton and collaborators) takes us back to the antipodes, and to the intergenerational aspect of the life course.. It takes the slot for a study profile, but is a protocol for future research rather than a report on a mature study. It is remarkable for being an exercise to pool result from 3 existing long standing longitudinal (and indeed mature) studies in Australia and New Zealand to advance knowledge on the intergenerational transmission of mental health and child development. The three studies, the Victorian Intergenerational Health Cohort Study, The Australian Temperament Project Generation 3 Study and the Dunedin Multidisciplinary Health and Development Study have all run for sufficient time to collect data on the offspring of the original cohort. The new study will map associations between the mental health of parents in their earlier lives and outcomes in the next generation outcomes in early childhood. Pre-conception evidence is otherwise notoriously difficult to establish. Bringing the studies together is a non-trivial achievement and requires effort of co-ordination and harmonization. It promises valuable insights for new approaches to breaking intergenerational cycles of risk and disadvantage, and to promoting social and emotional wellbeing across generations as well as the life course of individuals.