THE RESOURCE OF DATA THAT WILL BE USED IN ALL THE SEMINARS

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These are the studies on which we draw in this seminar series.

Figure 1: The large long-term cohort studies that begin at or before birth or early in childhood and have measures of cognitive function

	Age at Data Collections							
Study, birth years and N at beginning	Pregnancy	Birth	1-5 yrs	6-16 yrs	Early Adulthood 17-30 yrs	Early & Middle Adulthood 31-45 yrs	Later Middle Adulthood 46-65 yrs	Later Life 66 + yrs
NSHD 1946 (N = 5,362)		→	→	→	→	→	→	
NCDS 1958 (N = 17,414)		→	→	→	→	→	→	
BCS70 1970 (N=17,198)		→	→	→	→	→		
ALSPAC 1991-2 (N = 14,000)	→	→	→	→				
Millennium (MCS) 2000-01 (N = 20,000)		→	→					

These studies cover a period of extensive change in Britain in terms, for example, of social, health and educational policy, in scientific concepts of the relationship of the developmental period with the rest of life, in the concept, measurement and care of health, in attitudes to education, and in expectations in many aspects of life.

Each of the 5 studies has;

- a reasonably representative sample
- measures of physical growth and development early in life
- data on physical and mental health and illness

- measures of cognitive development
- measures of personality
- information on parents' socio-economic circumstances, educational attainment, concern and aspirations for the study child's education
- the 3 oldest studies have data on adult socio-economic circumstances, occupation, family development, and social participation

The studies grew into such extensive data sets mostly because of their scientific value as sources of data on development and ageing, with the value of ;

- (usually) known sequence of events and experiences
- opportunities for the study of interactions between early and later life circumstances development

They have therefore been greatly used in the study of development, of the association of the developmental years with adulthood, and of ageing.

Initially, however, the 3 older studies were set up and maintained for policy purposes. For example;

- The cost (pre NHS) of pregnancy and birth, the availability of midwifery and obstetric care, the chances of infant and maternal survival and health before and after birth
- The effects of restricted hospital visiting policy on the child's later attainment and development
- The effects on attainment and development of single parenting
- The geographic and social distribution of ability and attainment and their association with family and school circumstances

Most of these policy related studies did not set out to compare findings across the samples. Our present concern is to show that comparison of results from these studies can have a great deal of value for policy purposes.

However, whereas the studies have the great advantage of data collected from individuals across many years of life, the time and age related advantage tends to work against inter-study comparisons of the kinds we wish to undertake, because measurements of all kinds differ between the studies. They differ mostly because;

- Ideas about what to measure differ between the studies as a result of scientific and policy changes
- Each study tended to use the best available (and most widely comparable) measuring instruments

Our tasks in this first seminar are therefore;

- To make clear our aims
- To describe the extent of change in educational policy over the period
- To address the question of inter-study comparability