EXTENDED ABSTRACT

Differences in Health between East and West Germans: The "Long Arm of Childhood" under Divergent Political Regimes in Germany

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"Children spend most of their early childhood in three domains: home, child care, and health care. And the three basic building blocks of capacity formation in early childhood are family nurturing, quality child care/ early childhood education, and medical home (or better yet, health home)" (Lu 2014: 342). Several studies indicate that both poor childhood health and low socio-economic status during childhood have a long-term impact on health (e.g. Luo and Waite 2005; Haas 2008; Fors et al. 2009; Brandt et al. 2012). The aim of our study is to investigate the "long arm of childhood" (Hayward and Gorman 2004) under two divergent political regimes in Germany. Children of the former socialist German Democratic Republic (GDR) grew up in a regime with full-time working mothers and around the clock child care services (Winkler 1990; Frerich and Frey 1996) – in a regime that differed significantly from the German Federal Republic (FRG) (Kreyenfeld 2004). GDR, year 1980: Almost 60% children aged 0-3 attend nurseries and 90% children aged 3-6 attend all-day kindergartens. In contrast, the respective percentages in the FRG are 1% for nurseries and 65% for predominantly part-time kindergartens (Figure 1). Thus, a great majority of children born and raised in the GDR experienced "equal" conditions during early childhood regarded as a critical period of development, irrespective of their families' socio-economic situation. Within few years after the German unification health care in East Germany came up to the level of West Germany (Diehl 2008), nonetheless, for the "former children of the GDR" early childhood influences may continue to affect their adult health in a specific way. Our goal is to answer the question whether the childhood experience under a socialist regime plays a role in explaining health at subsequent stages of the life course.





Figure 1: Day-care use in Eastern and Western Germany (1955-1989)

Quelle: Winkler 1990; Frerich and Frey 1996; Statistisches Bundesamt

Hardly any other country in Europe provides such a unique contextual framework to examine the childhood-health nexus under divergent political regimes and test the critical period hypothesis. We apply the life course framework, assuming that exposures acting during early childhood affect irreversibly the structure or functions of organs, tissues, or body systems (Kuh et al. 2003). To the best of our knowledge, no previous study has yet provided a comparison of the impact of early childhood conditions on adult health for East and West Germans. Because of heightened exposure to adverse environmental factors (e.g. air pollution) as well as delayed medical and technical advancements, we first hypothesize that spending childhood in the former socialist regime of the GDR, unlike in the FRG, might have an adverse long-term effect on health. At the same time, we second assume that due to comparable development opportunities for children from the GDR, irrespective of their family of origin's social position, health inequalities at adult ages should be weaker for them than for children from the FRG. Specifically, we expect that "equal" childhood conditions in socialism might attenuate the impact of parental socio-economic status during early childhood on health later in life.

We examine these hypotheses using the longitudinal data from the German Socio-Economic Panel (e.g. Wagner et al. 1993). Our sample consists of individuals born in the former FRG and GDR between 1955 and 1984 who reached the age 30+ in year 2014. German resettlers and East-West migrants are excluded from the analysis. Several health indicators are used to construct dependent health variables (e.g. SF-12v2 Health Survey instrument). We conduct latent growth curve analyses for both East and West Germans with particular emphasis on inter-individual variability in health, controlling for cohort effects. Childhood conditions are measured by parental socio-economic status, living conditions and items on socialization through family and day care (e.g. mother's employment status).

Our results provide evidence of differences in health according to the kind of socialization: Individuals from the former GDR who experienced "dual socialization" at home and in full-time child care exhibit slightly poorer adult scores on specific health indicators than their counterparts without this experience. Furthermore, we observe different patterns in the social health gradient for West and East Germans, suggesting that political systems may have a long-term impact on health-related inequalities throughout life course.

References

- Brandt, M., Deindl, C. and K. Hank. 2012. Tracing the origins of successful aging: The role of childhood conditions and social inequality in explaining later life health. *Social Science and Medicine*, 74: 1418-1425.
- Diehl, Katharina. 2008. Potential factors for the rapid reduction in Eastern German excess mortality after reunification, Zeitschrift für Bevölkerungswissenschaft, 33(1): 89-109.
- Fors, S., Lennartsson, C. and O. Lundberg. 2009. Childhood living conditions, socioeconomic position in adulthood, and cognition in later life: Exploring the associations, *Journal of Gerontology: Social Sciences*, 64B: 750-757.
- Frerich, J. and M. Frey. 1996. Handbuch der Geschichte der Sozialpolitik in Deutschland. Band 2: Sozialpolitik in der Deutschen Demokratischen Republik. Munich.
- Haas, S. A. 2008. Trajectories of functional health: the 'long arm' of childhood health and socioeconomic factors. *Social Science and Medicine*, 66: 849-861.
- Hayward, M. D. and B. Gorman. 2004. The long arm of childhood: the influence of early life conditions on men's mortality, *Demography*, 41(1): 87-108.
- Kreyenfeld, Michaela. 2004. Fertility Decisions in the FRG and GDR: An Analysis with Data from the German Fertility and Family Survey, *Demographic Research*, special collection 3 (11): 273-318.
- Kuh, D, Ben-Shlomo, Y., Lynch, J., Hallqvist, J. and C. Power. 2003. Life course epidemiology, *Journal of Epidemiology* and Community Health, 57(10):778-83.
- Lu, M. C. 2014. Improving Maternal and Child Health Across the Life Course: Where Do We Go from Here? *Maternal and Child Health Journal*, 18 (2): 339-343.
- Luo, Y. and L. J. Waite. 2005. The impact of childhood and adult SES on physical, mental, and cognitive well-being in later-life, *Journal of Gerontology: Social Sciences*, 60B: S93-S101.
- Wagner, G. G., Burkhauser, R. V. and F. Behringer. 1993. The English language public use file of the German Socio-Economic Panel, *Journal of Human Resources*, 28(2): 429-433.

Winkler, G. 1990. Frauenreport '90. Berlin.