

Because We are Girls

Real Choices, Real Lives Cohort Study

As 'Because I am a Girl' will show, discrimination against girls and young women remains deeply entrenched and widely tolerated throughout the world. Many of the challenges girls will face start from the moment they are born; in fact in some parts of the world, girls are the target of a social preference for boys even before birth.

The 'Real Choices, Real Lives' cohort study was set up to follow 135 girls from birth until their ninth birthday, in 2015. Every year, researchers will visit the girls and their families to talk to them about what they eat, how healthy they are, their education, and over time will build up a picture of how the fact that they are girls impacts on their lives. Findings from the study will be published in each of Plan's 'State of the World's Girls' annual reports.

1. Born in July 2006, Dossa lives in Benin. She was born in a local health centre and is lucky enough to have been in good health throughout her first few months of life. The infant mortality rate in Sub-Saharan Africa is 101 per 1000 live births. Dossa's mother has only ever been to primary school and is a market trader. There is a striking correlation between under-five mortality rates and the educational level attained by a child's mother.

2. Vo Le is the daughter of Vietnamese farmers. She was born in the local hospital with the help of a midwife in February 2006. Uniquely for Vietnam, Vo Le's mother has had more years of schooling than her father. This should place Vo Le at an advantage.

The girls are from nine countries around the world. Some girls are from two of the poorest countries in the world – Benin and Togo. Others

are from rapidly growing economies, such as Vietnam. Some are from countries where the government has invested heavily in social programmes to benefit poor families, like Brazil.

3. Brenda celebrated her first birthday at the beginning of March 2007. Her family lives in a village in El Salvador. Brenda was born at home, with no trained birth attendant or midwife for support. She has been ill with an ongoing chest infection, as well as occasional diarrhoea. Brenda's mother is Adina. She is herself still a girl. Adina is 14 years old. Brenda is Adina's second daughter.

4. Mary Joy was born in February 2006 at home with the help of a birth attendant. She lives with her family in a poor village in the Philippines. Mary Joy's mother takes care of the home and her father is a farmer. There is both an early years centre and a primary school in their village. The family has access to a hand pump which supplies them with water.

The 'Real Choices, Real Lives' study will examine several key issues of importance to children, and in particular to girls who, as the report outlines, are increasingly vulnerable to a series of risks because of the position girls occupy in society:

- What is the family's access to quality services like?
- Is education girl-friendly?
- What about early years' provision, and the general needs of girls before adolescence?
- How are girls faring alongside their male siblings? What roles do they have to fulfil in the home?

5. Chhea was born in August 2006 in a Cambodian village. She is the daughter of farmers. Chhea was born at home with the help of a birth attendant – there is no local health facility. The family uses a well for water and have no sanitary facilities. There are no schools in the village.

6. In a small village in Togo, Faissatou was born in February 2006. She was born at home, with her grandmother assisting the birth. Faissatou's parents were educated up to primary level. Her mother takes care of the family and her father is a farmer. There is no local health centre nor is there a secondary school locally. The family use a well for water all year round.

So why do a study on girls' lives?

- **There is a need for qualitative information about why girls continue to face discrimination.** An eight year study will provide the opportunity to talk to girls and their families about their attitudes and opinions on the girls' upbringing. Surveys often focus more on issues that are easy to measure, such as the number of girls in school, and less on how girls may feel about their school environment.
- **Information on girls is often segmented,** as we have seen in the research undertaken for this report. There is some good information about their education or about aspects of their health. This has not been brought together to produce a comprehensive picture of what is going on in girls' lives over a period of time.
- **The life cycle approach** taken in the report, provides an important lens for examining girls' rights. As the study will

cover several important stages of the girls' lives over eight years, evidence of pervasive issues and critical points of vulnerability should start to emerge.

7. In her short life, Trassy has already had a bout of malaria. Malaria is the biggest killer of children under the age of five in Sub-Saharan Africa, often leaving those who survive with persistent anaemia. Trassy was born in May 2006 in Uganda. She was born at the local health post with the assistance of a midwife. Trassy's mother, Elisabeth, went to secondary school. She now farms together with Trassy's father. There is both a primary and secondary school within reach of their home.

8. Rosane was born in July 2006 on the outskirts of a Brazilian town. She is being brought up by her mother who has only completed six years of schooling. There is no local secondary school, which will massively limit Rosane's chances of attending school beyond primary level.

This year's report has introduced you to eight of the girls taking part in the study. Over the next eight years, the lives and challenges of the other girls and their families will form part of this annual publication.

Despite living thousands of miles away from each other, what these girls all have in common as they grow up is their experience as girls. This will unite them in the choices they can or cannot make about their lives.

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