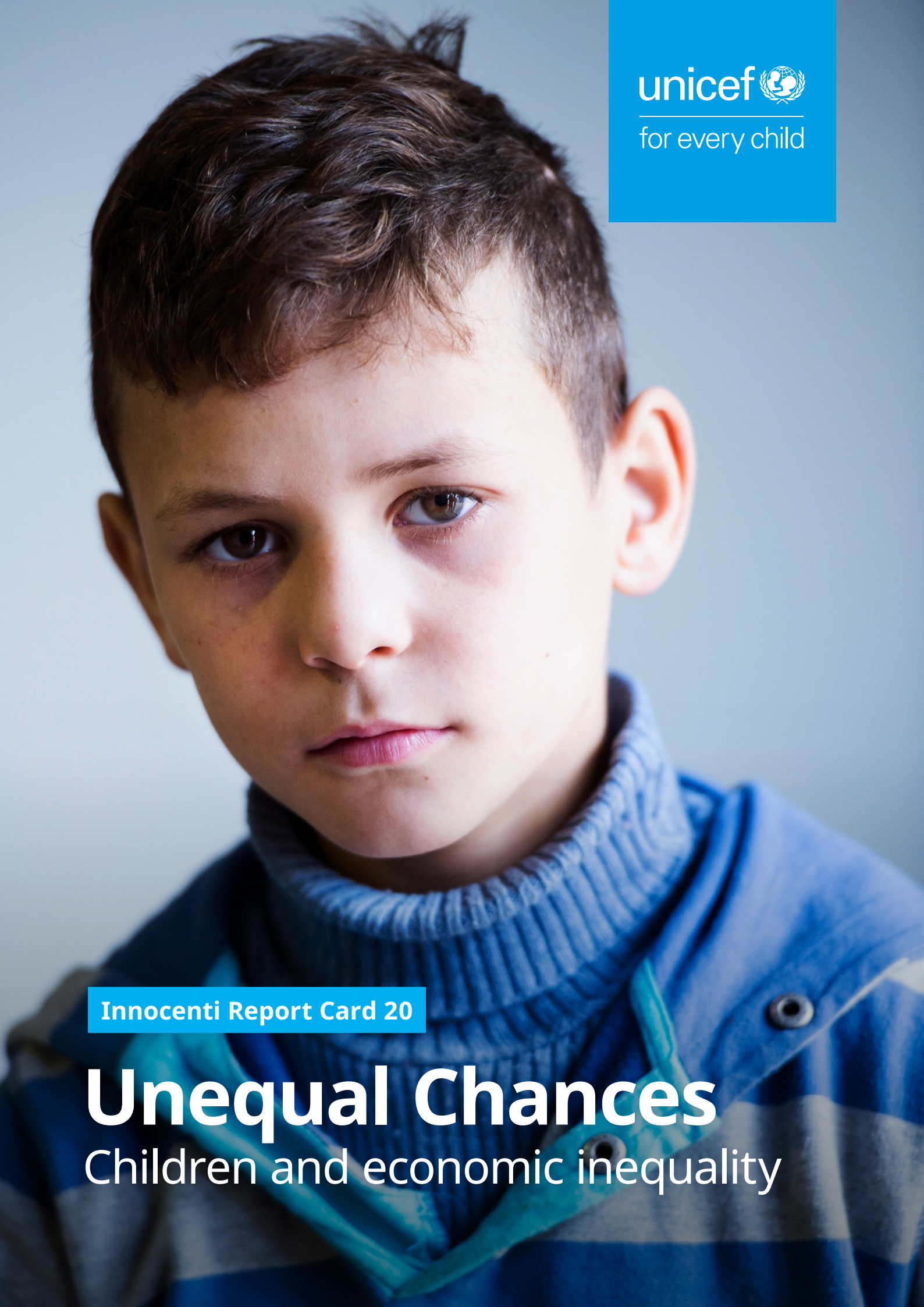


unicef
for every child

Innocenti Report Card 20

Unequal Chances

Children and economic inequality

Contents

1: Introduction

An imbalance between rich and poor is the oldest and most fatal ailment of all republics.[1]

– Plutarch, Greek philosopher (c. AD 50–120)

The wealthiest countries in the world continue to get richer.[2] But despite this increasing prosperity, large inequalities persist within these countries. In fact, there is an increasing accumulation of wealth among people with the highest incomes.[3] Countries are becoming more prosperous but are not succeeding in sharing this benefit more equitably.

Why do these persistent inequalities matter? Some may say that the important thing is that living standards are improving for everyone – that even the poorest people in rich countries have a far better life now than they did in living memory. For example, in Europe, extreme poverty, still relatively common in the 1950s, is now a rare occurrence.[4]

But that is only part of the story. Inequalities still matter profoundly, not only for individuals but for societies. Countries with higher levels of inequality have lower levels of trust.[5] And these same countries tend to have lower intergenerational mobility, meaning that inequalities are reproduced and transmitted from one generation to another.[6]

These issues have particular importance for children. As this report shows, children growing up in poorer economic circumstances have much worse physical health and academic outcomes than more advantaged children. That has consequences for both their childhood and their adulthood. Of course, there are famous exceptions – people born into disadvantage who defied the odds. But these individual atypical cases must not be allowed to obscure the reality that, on average, poorer children have far worse life chances. And this inequality does not reflect 'merit'. Instead, it poses fundamental questions of social justice, reflecting societies in which, too often, the family circumstances and neighbourhood in which children are born have a major influence on their childhoods and futures.

This report, the twentieth in UNICEF Innocenti's Report Card series, explores the potential impact of inequalities on children's lives in 44 countries that are classified as 'high income' and/or are members of the Organisation for Economic Co-operation and Development (OECD). It:

- updates a league table of six key indicators of child well-being (first published in 2020 in Innocenti Report Card 16)[7] that track how these countries are doing for children.
- provides an overview of indicators and trends on economic inequalities.
- evaluates whether countries with greater economic equalities have better child well-being.
- examines how economic inequalities within each country are linked to variations in child well-being.
- describes the pathways through which economic inequalities may impact child well-being.
- identifies potential policy solutions to reduce the negative impact of economic inequalities on children's lives in the present and the future.

This report presents a clear picture of how damaging economic inequalities can be for child well-being and presents a challenge to all countries to ensure that they do better for *all* children.

2: A league table of child well-being

The Report Card series makes use of the best available comparable data, based on six criteria – quality, relevance, coverage, recency, comparability and variability.

The concept of child 'well-being' has many different definitions. In this report, it means a set of dimensions – physical health, mental well-being and skills – that are seen as fundamental aspects of children flourishing in the present and the future.

The league table for this report uses six key indicators based on the above criteria and conceptualization, which were introduced in Report Card 16, in order to present a balanced picture of child well-being across these three dimensions. Box 1 provides a brief overview of these indicators.

BOX 1

Measuring child well-being

The league table presents a summary of how children are doing in terms of physical health, mental well-being and skills, utilizing two indicators for each of these three dimensions.

Dimension	Components	Indicators	Source
Physical health	Child mortality	Child mortality rate, ages 5 to 14	UN IGME project, 2024
	Overweight	% of children and young people overweight, ages 5 to 19	NCD-RisC data, WHO/Lancet 2022
Mental well-being	Life satisfaction	% of children with high life satisfaction at 15	OECD, PISA 2022
	Adolescent suicide	Suicide rate, ages 15 to 19	WHO Mortality Database, 2023 or latest available data
Skills	Academic proficiency	% proficient in reading and mathematics at 15	OECD, PISA 2022
	Social skills	% who make friends easily at school at 15	OECD, PISA 2022

Note: NCD-RisC – NCD Risk Factor Collaboration; PISA – Programme for International Student Assessment; UN IGME – United Nations Inter-agency Group for Child Mortality Estimation; WHO – World Health Organization.

Table 1 presents the league table ranking countries equally weighted on the six indicators (see the Technical appendix for the method of ranking).

- The first column shows the overall ranking, from highest to lowest.
- Columns 3 to 5 show the ranking for the above three dimensions.
- The top third of countries overall and in each dimension are shown in the lightest colour, and the bottom third are in the darkest.

Countries are only given an overall ranking if data were available for all six of the above indicators. The countries that do not have full data are provided with rankings for the dimensions where data for both indicators related to that dimension were available.

It can be seen that:

- The three countries with top ranking overall – the Kingdom of the Netherlands, Denmark and France – rank in the top third on all three dimensions of child well-being.
- On the other hand, four of the bottom five ranked countries – Chile, Türkiye, Uruguay and and Colombia – rank in the bottom third on the three dimensions.
- Some countries – Greece, Iceland and Slovenia – are in different thirds of the rankings for all three dimensions.

The rankings therefore demonstrate different areas of strength and weakness across countries.

Table 1: A league table of child well-being

Rank	Country	Physical health	Mental well-being	Skills
1	Netherlands	5	1	11
2	Denmark	1	4	7
3	France	2	12	9
4	Portugal	10	3	21
5	Switzerland	8	15	6
6	Ireland	11	24	1
7	Lithuania	13	13	13
8	Spain	22	5	17
9	Romania	24	2	22
10	Hungary	29	6	14
11	Sweden	14	16	15
12	Italy	17	10	25
13	Slovenia	16	29	2
14	Finland	23	17	16
15	Croatia	34	7	4
16	Austria	20	23	8
17	Japan	3	32	12
18	Latvia	12	9	29
19	Slovakia	25	11	26
20	Iceland	6	26	27
21	Czechia	4	25	31
22	Canada	27	22	20
23	Greece	26	8	33
24	United Kingdom	21	28	19
25	Germany	15	21	34
26	Malta	19	18	35
27	Republic of Korea	30	34	3
28	Bulgaria	32	14	32
29	Estonia	28	30	24
30	Poland	18	31	30
31	Costa Rica	37	20	39
32	New Zealand	33	37	23
33	Colombia	39	27	37
34	Uruguay	35	35	38
35	Mexico	41	19	40
36	Türkiye	36	36	36
37	Chile	40	33	41
	Australia	31	n/a	18
	Belgium	7	n/a	5
	Norway	9	n/a	10
	United States	38	n/a	28

Source: See Technical appendix for full details.
Note: Due to lack of availability of data, it was not possible to include three countries in the league table – Cyprus, Israel and Luxembourg. These countries are included in other parts of the report where data were available. In addition, it was not possible to fully rank the last four countries due to missing data on life satisfaction.

Changes in the rankings

The overall ranking is similar to that in Innocenti Report Card 19,[8] as, since the publication of that report in 2025, more recent data were only available for two indicators – suicide rate and mortality rate. Nevertheless, as a result of this update, the ranking of some countries has changed. A summary of these changes is provided in the Technical appendix.

Types of inequality explored in this report

This report uses two main approaches to examine inequality: 'between-country' and 'within-country' inequality. While each provides useful insights, the difference between them can be confusing.

- Measures of between-country inequality are based on comparing averages in each country. This helps to understand how countries compare with each other.

- These averages, however, paint only part of the picture. In two countries with similar averages, one may have a much greater range of inequality within it than the other. This variability is the within-country inequality.

Figure 1 illustrates these two types of inequality using children's test scores in mathematics in the 2022 PISA study.

It is important to understand both types of inequality:

1. Why do some countries do better, on average, than others?
2. Why, within the same country, do some children do better than others?

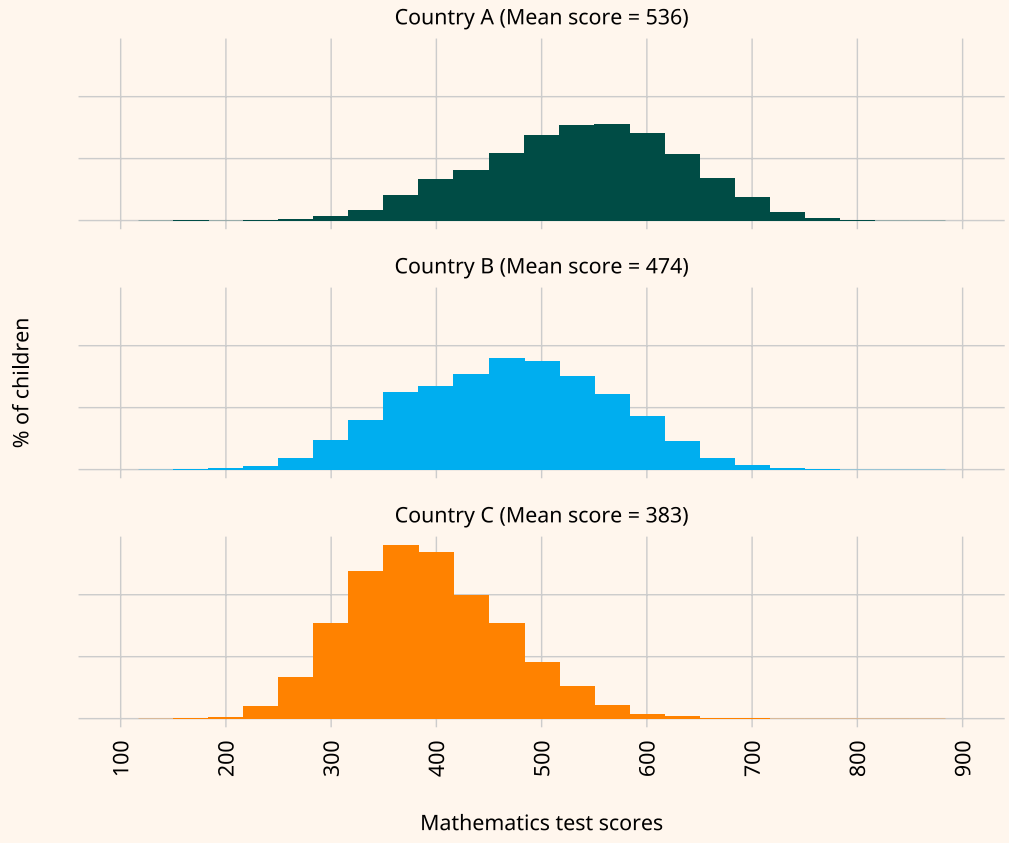
Explainer: Different types of inequalities

Figure 1 shows the variations in mathematics test scores at age 15 in three Report Card countries that had the highest, median and lowest average test scores.

- Country A had the highest average test score (mean = 536), Country B was the middle-ranked country (mean = 474) and Country C had the lowest average score (mean = 383). This is between-country inequality – on average, children in Country A did better in mathematics than children in Country B, who did better than children in Country C.

- Nevertheless, the chart shows the within-country inequality between children. While children in Country C had the lowest test scores on average, 1 in 9 children (11 per cent) scored more than the average in Country B, and 1 in 40 (2.5 per cent) scored more than the average in Country A. Similarly, more than 1 in 4 children (26 per cent) in Country B scored more than the average in Country A.

Figure 1: Distribution of PISA mathematics test scores at 15 years old in three selected countries, 2022



Source: Authors' analysis of PISA 2022 dataset. See Technical appendix for more details.

This report explores how economic factors may provide an explanation for both of the above types of inequality in child outcomes.

Regarding the first question posed above, as to why some countries do better for children than others, there is substantial evidence that countries with higher levels of economic inequality fare worse on a number of measures of adult well-being. These more unequal countries tend, for example, to have lower levels of social and institutional trust, higher levels of incarceration and poorer adult mental health. Moreover, the 'Great Gatsby Curve' demonstrates that such inequalities tend to persist across generations. The presence of correlations between economic inequalities and societal well-being does not automatically demonstrate that the first causes the second. In fact, the relationship between the two may be more complex. Rather than being a root cause, economic inequalities may be symptoms of underlying social and economic factors, often deeply rooted in the structures and attitudes in societies, that constitute the context for poorer well-being. The link between country-level inequalities and child well-being has been explored less often. This report provides an up-to-date picture of this link, using the six key indicators of child well-being from the league table presented in this section.

Regarding the second question, the report summarizes the substantial evidence that there are economic inequalities within countries in children's physical health, mental well-being and skills. It explores the pathways and mechanisms through which these inequalities occur.

The evidence presented in this report is the outcome of a detailed analysis of these questions, and further information about this can be found in a working paper that accompanies the report.

3: Economic inequalities

Economic inequalities are present within any given society at various levels – between regions, neighbourhoods, schools, households and individuals. Perhaps the most familiar types of economic inequalities are those between households and individuals measured in monetary terms.

However, it is also possible to consider inequalities in terms of broader measures of socioeconomic status and in terms of material resources available either to the individual or household or within neighbourhoods or schools. These types of resource-based inequalities are discussed below and in Sections 4 to 7.

Monetary inequalities

Monetary inequalities can be measured in terms of both income and wealth, and there are various ways of summarising these inequalities. The analysis presented in this and the following sub-section focuses on two key measures:[8]

1. income inequality, measured as the ratio of income of people at 20 per cent of the income distribution and people at 80 per cent of the income distribution (the P80–P20 ratio)
2. the rate of child poverty, based on a threshold of 60 per cent of the median income – poverty can be considered as a measure of 'bottom-end' inequality

These two measures have been selected to illustrate the key aspects of the relationship between economic inequalities and child well-being outcomes. The results from the analysis of wealth inequalities are also reported. A working paper accompanying this report provides more details of the full analysis conducted with a wider range of economic inequality indicators.[9]

Figure 2 shows the most recent picture for both of these indicators in Report Card countries.

Looking first at income inequality:

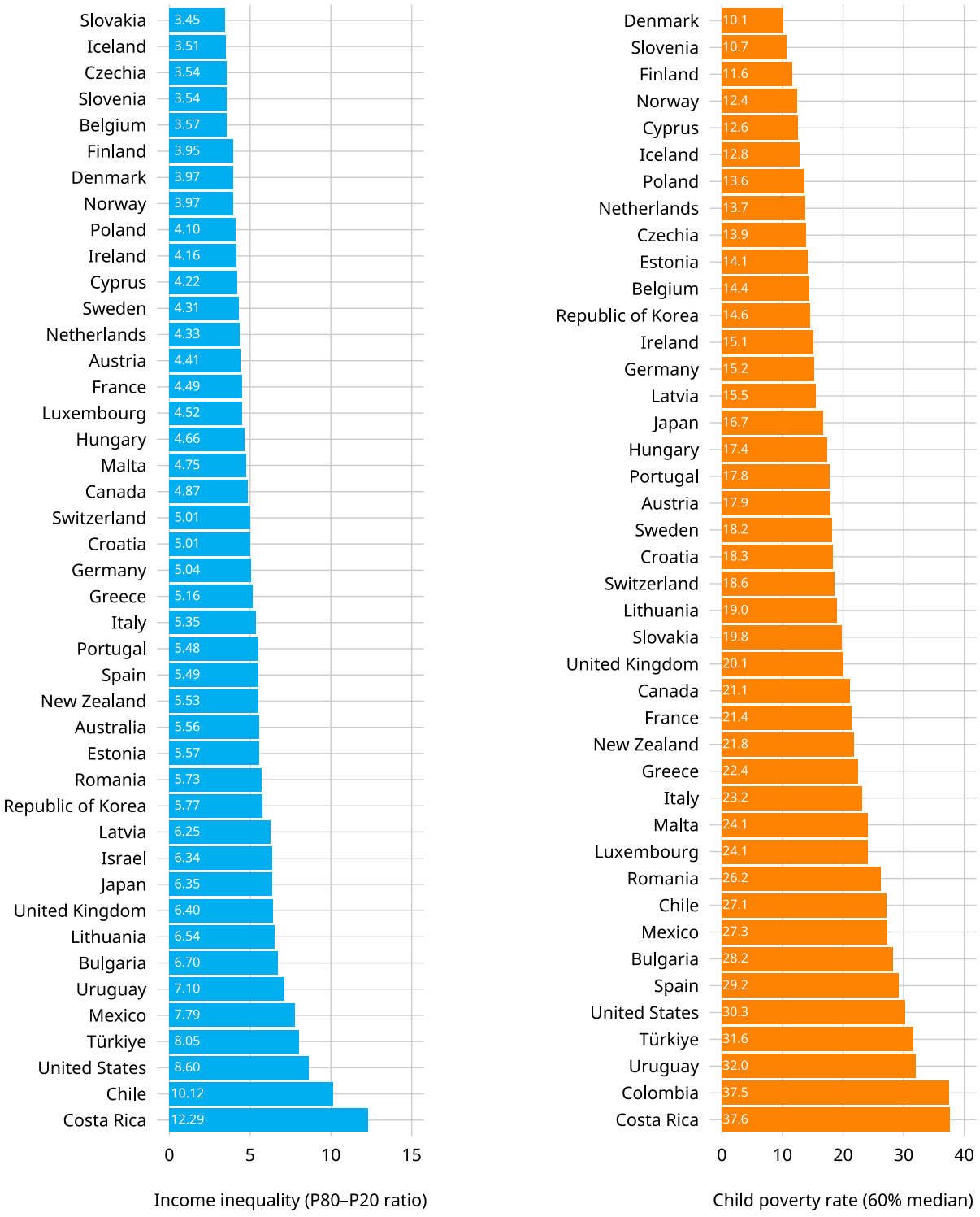
- Even in the most equal countries – Slovakia, Iceland, Czechia, Slovenia and Belgium – people in the top fifth of the income distribution have approximately 3.5 times as much income as people in the bottom fifth.
- In the four most unequal countries – Costa Rica, Chile, the United States of America and Türkiye – people in the top fifth of the income distribution have at least eight times the income of people in the bottom fifth.

In terms of child poverty:

- Child poverty rates range from around 10 per cent in Denmark to around 37 per cent in Colombia and Costa Rica.
- Innocenti Report Card 18 showed that there have been only modest overall reductions in child poverty in this group of countries in recent decades, while child poverty rates have increased substantially in some of the world's wealthiest countries.[10]

A comparison of child poverty rates with the overall picture of income inequality shows that, in general, countries with higher levels of income inequality have higher rates of child poverty. However, there is some variation in this connection across countries. For example, France and Luxembourg are in the top half of the ranking on income inequality (they are more equal than the average) but in the bottom half of the ranking for child poverty (with relatively high rates), but the opposite is true for Japan, Latvia and the Republic of Korea. These differences may be partly to do with different shapes of income distribution. They are also likely to be partly due to benefits and taxation policies, as well as coordination with employment policies and services for children and families.[11] This variation in the relationship between income inequality and child poverty also points to potential policy interventions to reduce the impact of economic inequalities on children's lives. These will be discussed in the final section of the report.

Figure 2: Income inequality (P80–P20 ratio), 2023 or most recent available data; child poverty rate, 2024 or most recent available data



Source: See Technical appendix for details.

This report examines the overall picture for children as a group. It is important to acknowledge that different subgroups of children may be affected in different ways by economic inequalities. Unfortunately, data scarcity and resource limitations do not allow for exploration of these types of intersectional issues in this report, but they remain an important consideration for a more in-depth understanding of the many ways in which economic inequalities affect children's lives.

Measures of socioeconomic status

While the above monetary indicators are a valuable way of exploring economic inequalities, they are not the only way of doing so, and sometimes it is not practically possible to use them. For example, because children may not know about, and be able to accurately report on, household income, surveys that gather data directly from children often include other measures of family socioeconomic status, such as:

- the PISA index of economic, social and cultural status, developed by the OECD, which is based on the responses of children aged 15 to questions about parental education, parental employment and home possessions;[12]
- the Health Behaviour in School-aged Children (HBSC) study, which uses a 'family affluence' scale based on a number of material aspects of the home environment, such as the number of vehicles in the household and the number of bathrooms in the home.[13]

Both these measures are used in this report, particularly when data based on income were not available.

4: Economic inequalities in physical health

This is the first of three sections looking at economic inequalities in the three dimensions of the league table presented in Section 2. Each of these sections follows the same structure. First, the key league table indicators are presented. Then the results of the analysis are shown for between-country and within-country inequalities (see Section 2 for further discussion). Therefore, after presenting the key indicators, this section explores the following questions:

1. Do countries with greater or less economic inequalities have better child physical health, on average?
2. Within countries, are economic inequalities in families and communities linked to inequalities in children's physical health?

Key indicators of physical health

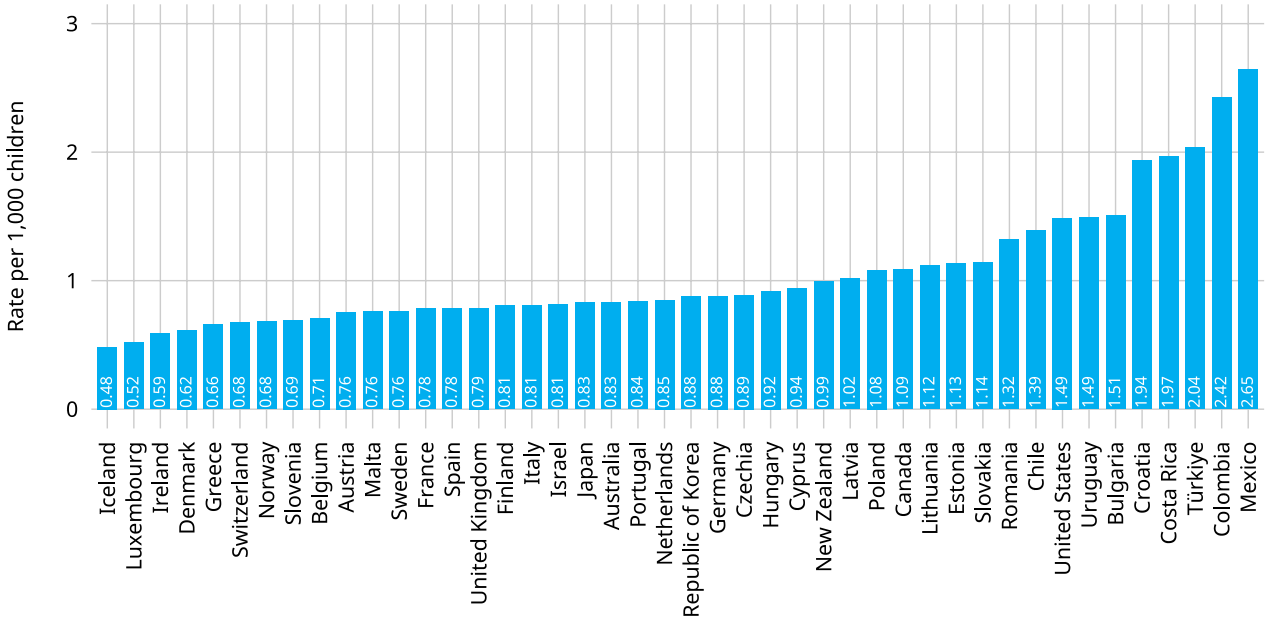
The two indicators of physical health in the league table are presented below. The rate of mortality between the ages of 5 and 14 was selected because this type of mortality includes a number of causes – such as road traffic accidents – that are largely preventable and there is substantial variability in the rates of this indicator across countries. The percentage of children who are overweight was chosen as the second indicator because, while undernutrition leading to stunting and wasting in children has been largely eliminated in rich countries, rates of overweight and obesity are a substantial public health concern. Overweight and obesity are linked to a number of negative physical, psychological and psychosocial outcomes for children, both during childhood and later in adulthood.[14]

Child mortality, ages 5 to 14

Figure 3 shows the rate of mortality per 1,000 children in the 10-year age span from 5 to 14 years old in 2024. The rate was lowest in Iceland, Luxembourg and Ireland, and highest in Mexico and Colombia. The mortality rate tends to be higher among boys than girls in Report Card countries.

As shown in Report Card 19, the mortality rate has fallen substantially in most countries in recent decades. However, there are signs that mortality in this age group is increasing in some countries, including the United States[15] and Croatia and Poland.[16]

Figure 3: Child mortality rate, 5 to 14 years old, 2024



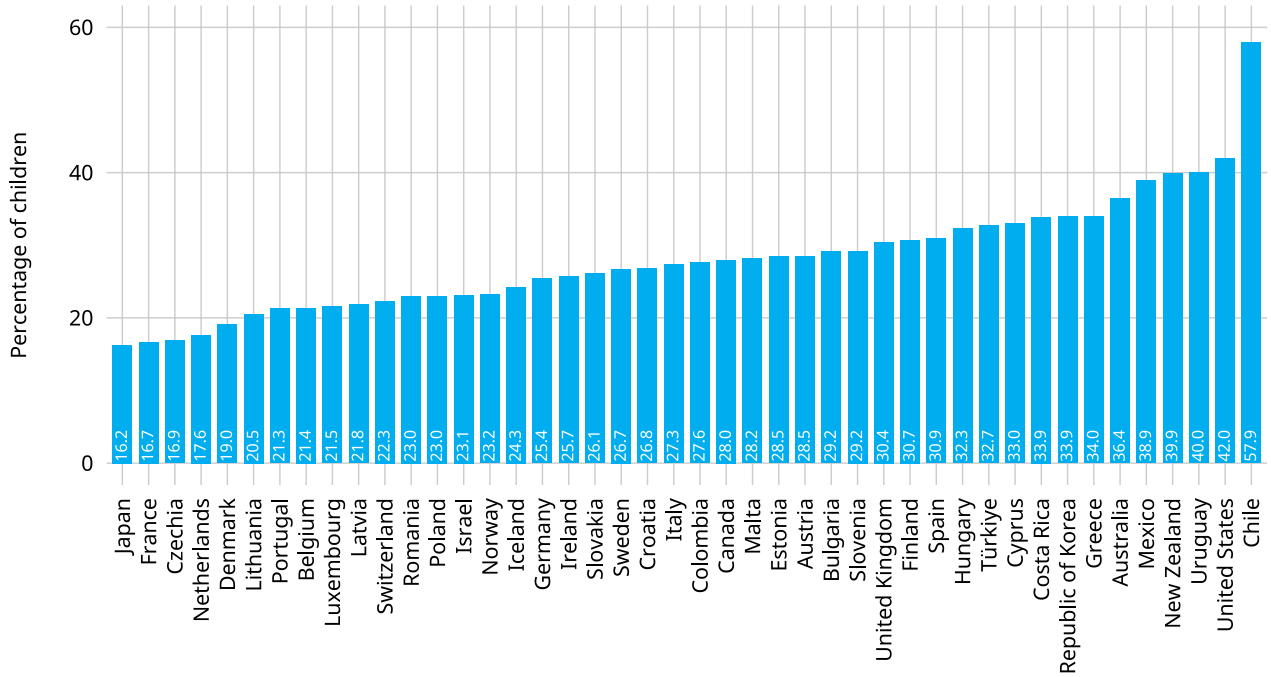
Source: UN IGME project. See Technical appendix for full details.

Overweight

Figure 4 shows the second league table indicator for physical health – the rate of overweight for children aged 5 to 19 years. In 2022, this ranged from 16 per cent in Japan to 58 per cent in Chile. In this group of countries, the rate of overweight tends to be higher among boys than girls.

As outlined in Report Card 19, there has been a long-term increase in the rate of overweight and obesity among children globally, including a steady and persistent rise in this group of countries from around 17 per cent of children aged 5 to 19 in 1990 to around 28 per cent in 2022.

Figure 4: Rate of overweight, 5 to 19 years old, 2022



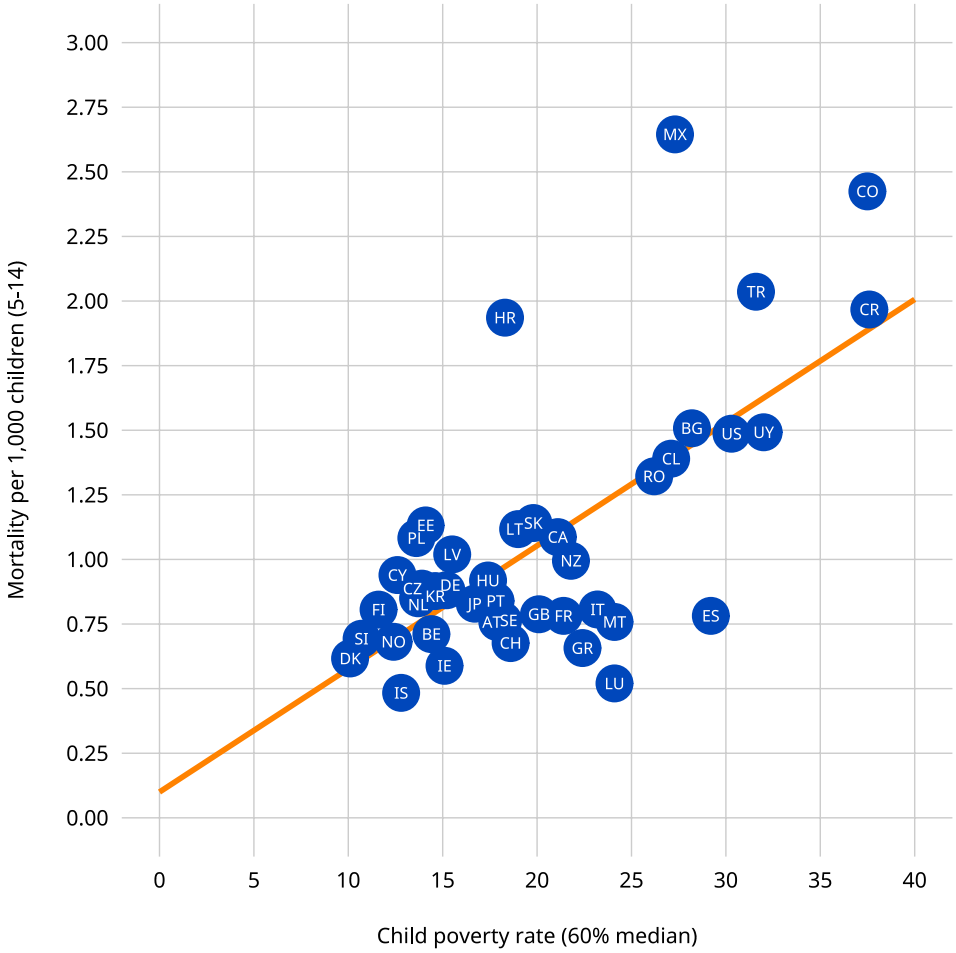
Source: NCD-RisC. See Technical appendix for full details.

National economic inequalities and average child physical health

How do these indicators of children's physical health link to measures of economic inequality in each country?

Figure 5 shows that countries with higher child poverty are also likely to have a higher rate of child mortality. The relationship here is strong.[17] For example, Denmark has low child poverty and relatively low child mortality, while Colombia and Costa Rica have among the highest rates of child poverty and and child mortality.

Figure 5: Rate of child mortality, 5 to 14 years old, by child poverty, 2023



Source: As Figures 2 and 3. See Technical appendix for further details.

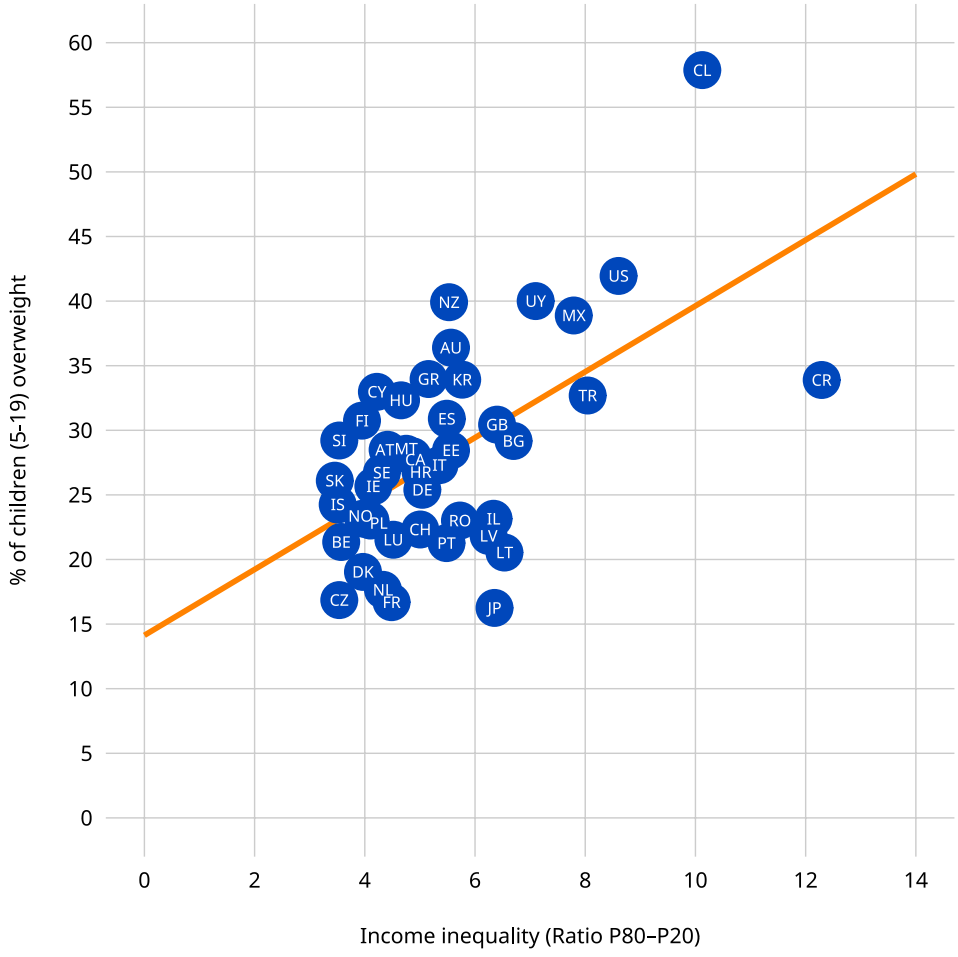
It may appear from the named countries that this could be explained by different levels of wealth between the countries. But more detailed analysis

indicates that, at a given point in time, income inequality is a much stronger predictor of child mortality (ages 5 to 14) than is national income per capita.[18] This finding is consistent with evidence that, among high-income countries, the rate of child unintentional injury mortality is higher in countries with greater income inequality.[19]

Figure 6 shows a similar analysis for the link between Report Card countries' income inequality and their rate of child overweight. Here also there was a marked tendency for higher income inequality to be associated with a higher rate of overweight.[20]

Wealth inequalities were much less strongly associated with mortality rate and rate of overweight, although there was still some tendency for countries with higher wealth inequalities to have poorer child health.[21]

Figure 6: Rate of overweight, 5 to 19 years old, by income inequality, 2022



Source: As Figures 2 and 4. See Technical appendix for further details.

In summary, there are strong correlations between a country's level of economic inequality at a given point in time and average child health outcomes.

Economic inequalities within countries and differences in children's physical health

Turning to the question of within-country inequalities, the evidence on links between economic inequalities and child health outcomes within a country is well-established and conclusive.

Child mortality

A summary of evidence published in 2014 noted "a persistent inverse association between socioeconomic status and childhood mortality in high-income countries".[22] Studies since that time have continued to reflect these findings.

In the United States, children whose mothers had not graduated high school, which is correlated with lower income, were estimated to face a 40 per cent higher risk of early life mortality than children of college graduates.[23] This disparity was partially driven by unintentional injuries and interpersonal violence.

In Norway, children of mothers with the lowest education had substantially higher risk of death before age 18 (observed across nearly all causes of death, the exceptions being suicide and cancer). This association was strongest in households in the lowest third of the income distribution and particularly pronounced for those in the bottom tenth percentile.[24]

Child overweight

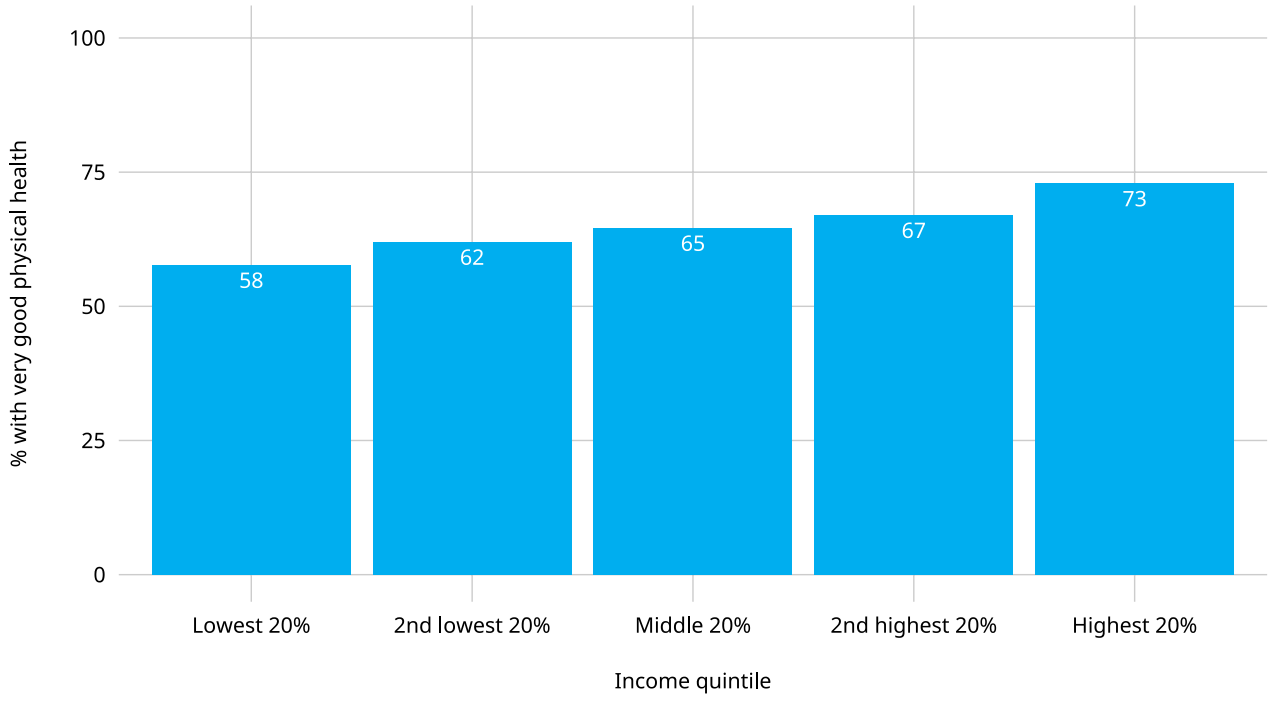
In high-income countries, children in economically disadvantaged contexts are at higher risk of overweight and obesity, although the opposite pattern has been observed in low-income countries.[25] The socioeconomic gradient in overweight in rich countries is linked to variations in children's food environments according to family affluence. Lower-income families tend to experience higher levels of food insecurity, have more limited access to healthy foods and find energy-dense foods with lower nutritional value to be more affordable.

Other indicators of physical health

These findings specific to the two league table indicators are consistent with an extensive body of evidence of a strong income-based gradient in physical health outcomes with, in some cases, a particular impact at the lower end of the income distribution.[26] Figure 7 shows the percentage of children rated by a parent/carer as being in very good health in 2024 in 20 countries in the eurozone. There is a clear and consistent economic gradient.

Other studies in countries covered in this report also find socioeconomic inequalities in general health outcomes for children. Data from the HBSC study in 2021–2022 indicate that on average across 31 Report Card countries (30 in Europe plus Canada), 39 per cent of children living in more affluent households rated their own health as "excellent", compared to only 27 per cent of children living in less affluent households.[27]

Figure 7: Children rated by a parent/carer as in very good health by income quintile, European Union, 2024



Source: Eurostat database. See Technical appendix for further details.

The impact of economic inequalities can have ongoing negative health impacts throughout childhood. In Australia, Canada, the United Kingdom of Great Britain and Northern Ireland, and the United States, children in households with low income or low socioeconomic status during the first five years of life were found to have worse physical health outcomes in later childhood and adolescence (ages 6 to 18), including activity-limiting illness, poor parent-reported health, infections, higher body mass index or overweight and hospitalizations.[28]

SUMMARY

Economic inequalities and children's physical health

Variations between countries

- International comparisons show that countries with higher income inequality tend to have poorer child health in terms of mortality (ages 5 to 14) and overweight (ages 5 to 19).
- This link between income inequality and poorer health outcomes remains even when taking into account differences in national wealth.
- The question of whether a country's level of income inequality directly causes poorer average health outcomes remains open to debate.
- National wealth inequalities are only weakly associated with children's health.

Variations within countries

- There is strong evidence of economic inequalities in children's physical health within countries.
- Children in poorer families tend to have a higher mortality rate, a higher rate of obesity and poorer overall health.
- The links between economic inequalities in early life and physical health can persist throughout childhood.

5: Economic inequalities and children's mental well-being

This section has the same structure as Section 4. It first presents the two league table indicators on mental well-being, then explores the extent to which there are between-country and within-country differences in mental well-being linked to economic inequalities (see Section 2 for further discussion of these two types of inequality).

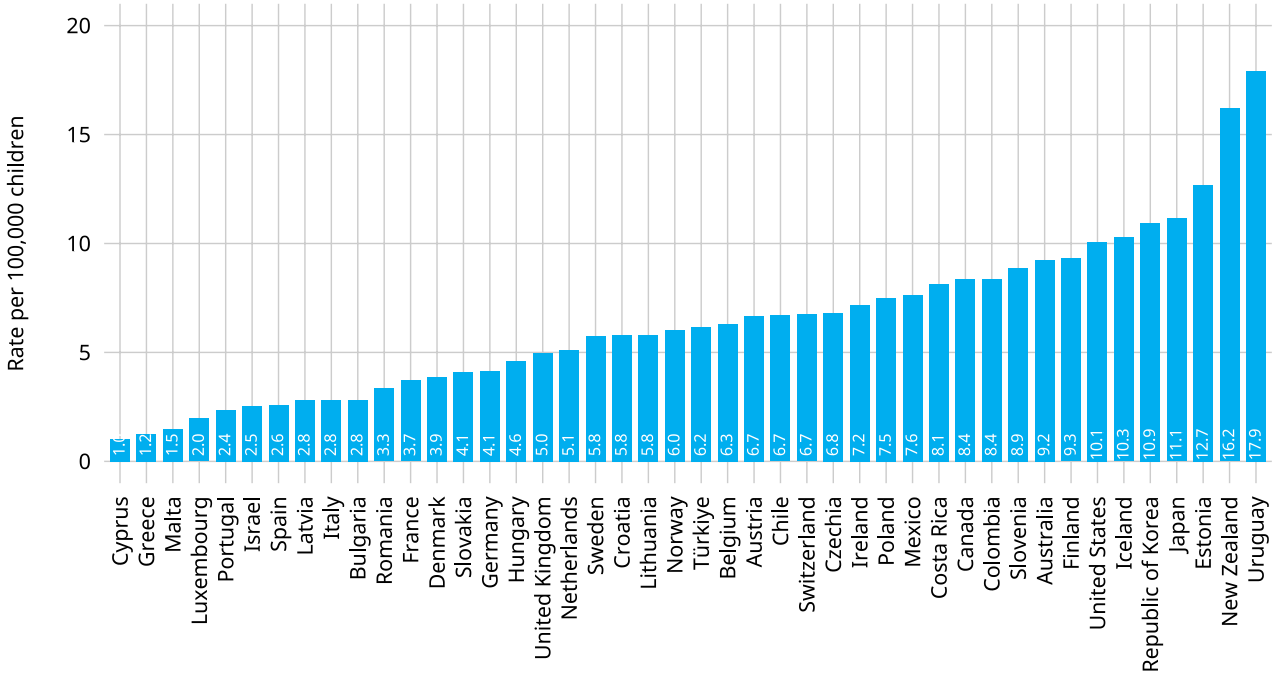
Key indicators of mental well-being

The two indicators of mental well-being used in the league table were chosen because they have the most available comparative data across Report Card countries. However, these indicators have limitations. Severe outcomes such as suicide provide important signals of well-being but represent only one part of the overall picture. Life satisfaction also only represents one way of looking at positive well-being. Ideally, a more rounded view of adolescents' mental well-being would include measures of aspects such as depression and anxiety, as well as a wider range of positive mental well-being indicators that represent flourishing.[29] This therefore remains an aspect of child well-being where there are major gaps in international comparative data.

Adolescent suicide

Figure 8 shows the suicide rate in the 15–19 age group in 2023 or the most recent year available.[30] The lowest rates were in three countries in the Mediterranean region – Cyprus, Greece and Malta. The highest was in Uruguay, followed closely by New Zealand. The rate of suicide is typically higher among males than females. Trends in adolescent suicide (ages 15 to 19) have been broadly stable in this group of countries over the past 15 years.

Figure 8: Suicide rate, 15 to 19 years old, 2023 or most recent year



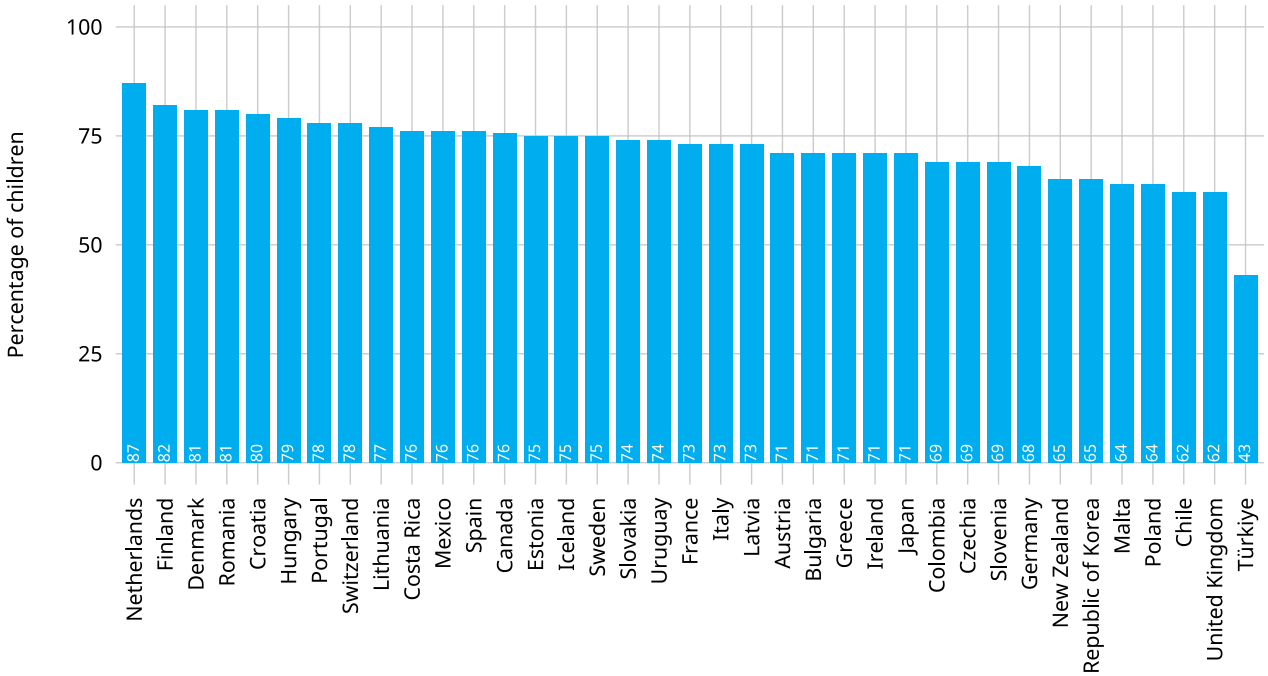
Source: WHO Mortality Database and some government websites. See Technical appendix for full details.

Life satisfaction

Figure 9 shows the proportion of schoolchildren aged 15 who scored above 5 out of 10 in response to being asked to rate their current life on a scale of 0 to 10 from "not at all satisfied" to "completely satisfied". The percentages ranged from 43 per cent in Türkiye to 87 per cent in the Netherlands. At this age, boys are more likely than girls to have high life satisfaction.

As noted in Report Card 19, in all but one country (Japan), the proportion of children with high life satisfaction declined between 2018 and 2022, often substantially.

Figure 9: High life satisfaction, 15 years old, 2022



Source: Authors' analysis of PISA 2022 dataset. See Technical appendix for full details.

National economic inequalities and average child mental well-being

The analysis undertaken for this report found a weak link between country-level income and wealth inequalities and adolescent life satisfaction and suicide rates. Charts and further details are presented in the accompanying working paper. As shown below, this does not mean a lack of socio-economic differences in mental health within countries.

An important limitation of this analysis is that the two indicators of child mental well-being do not represent the full range of this phenomenon. As noted earlier, there is a much wider range of measures of both mental health difficulties and positive mental health, but unfortunately international comparative data on these aspects are not available.

More generally, this is a complex area with a range of contrasting findings. Some studies of adult populations do find evidence, either at the country level or between regions within countries, that higher levels of economic inequalities are linked to poorer average mental health.[31] On the other hand,

some reviews do not find such evidence.[32] Nevertheless, physiological studies suggest that macro-level inequality is associated with patterns of brain development that are linked with poorer mental health.[33]

It is important to clarify here that this discussion only relates to the question of whether more unequal countries have poorer *average* child mental well-being. This does not mean that there are no differences in mental well-being between different socioeconomic groups within a country. This question is explored in the next section.

Economic inequalities within countries and differences in children's mental well-being

Suicide

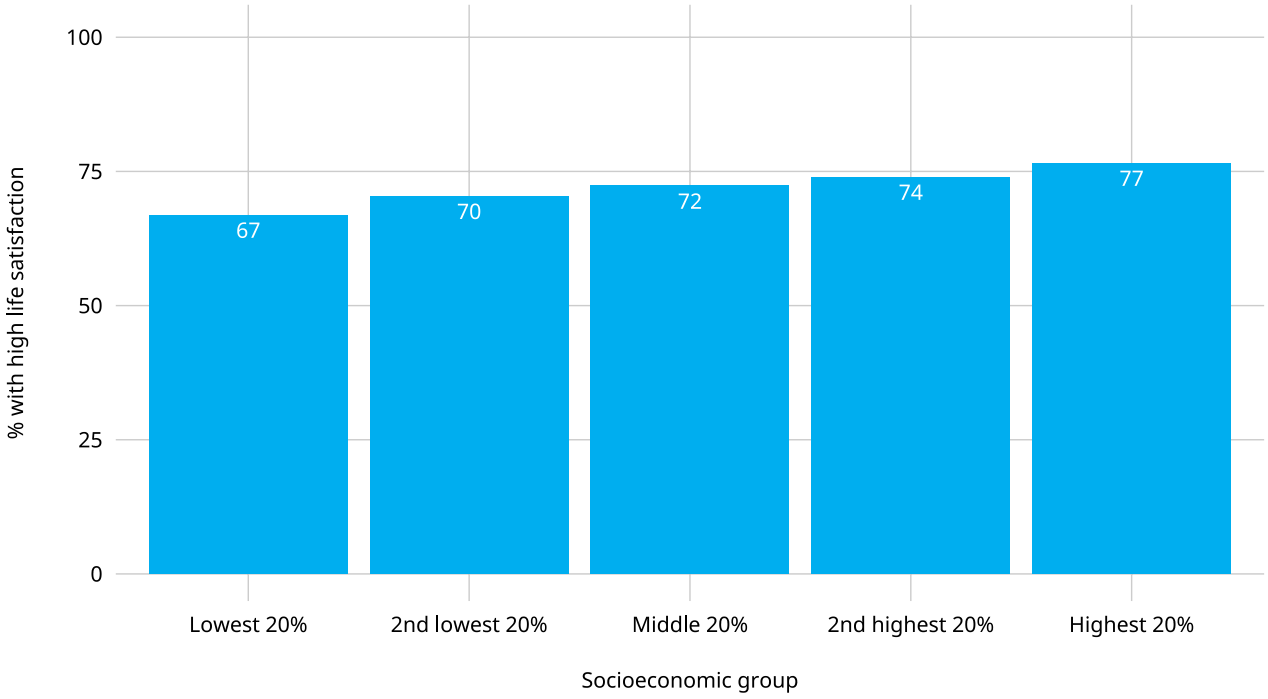
There is limited evidence about socioeconomic differences in adolescent suicide rates. Some studies in the United States suggest that rates are higher in poorer localities.[34]

Life satisfaction

There is more evidence available on the extent of economic inequalities in adolescent life satisfaction. In general, children in poorer economic contexts have lower levels of life satisfaction.

Figure 10 illustrates this link using data for school children aged 15 in 2022. There is a steady socioeconomic gradient, from 67 per cent of children with high life satisfaction in the most disadvantaged families to 77 per cent of children in the most advantaged families.

Figure 10: High life satisfaction by socioeconomic group, 15-year-olds, 2022



Source: Authors' analysis of PISA 2022 dataset. See Technical appendix for further details.

More detailed analysis indicates that there are stronger socioeconomic differences in life satisfaction for girls than for boys.

Other aspects of mental well-being

The above findings reflect evidence from a broader range of mental well-being research, including studies of depression, anxiety and externalizing behaviours. In a review of evidence up until 2011, 52 out of 55 identified studies found that socioeconomically disadvantaged children had poorer mental health. More recent work has illustrated that this is a complex relationship. Findings can vary according to the measure of socioeconomic status used.[35] They can also vary according to the aspect of mental health measured (e.g. behavioural difficulties or depressive symptoms).[36] And there are also differences in terms of who assesses mental health – one study in the United Kingdom found that parents' ratings of adolescent mental health were much more strongly related to socioeconomic factors than were adolescents' own ratings.[37] A recent review of 13 studies in the United States since 1980 found "small to moderate associations with adolescent mental health of both low family income and other socioeconomic factors".[38]

SUMMARY

Economic inequalities and children's mental well-being

Variations between countries

- There is no strong evidence of links between the level of economic inequalities in a country and the two league table indicators – suicide and life satisfaction.
- However these two indicators do not fully capture the phenomenon, and the relationship depends on the specific measures being used.

Variations within countries

- On average, children from disadvantaged backgrounds have lower life satisfaction.
- Other studies also often show similar links for other aspects of mental health.
- Thus, within countries, socio-economic disadvantage is an important factor in poorer mental well-being among children.

6: Economic inequalities and children's skills

This is the third of the three sections that explore the link between economic inequalities and child well-being. This section focuses on children's social and academic skills. It presents the key indicators and then explores whether economic inequalities are linked to variations in skills both between countries and within countries (see Section 2 for further discussion of this distinction).

Key indicators of skills

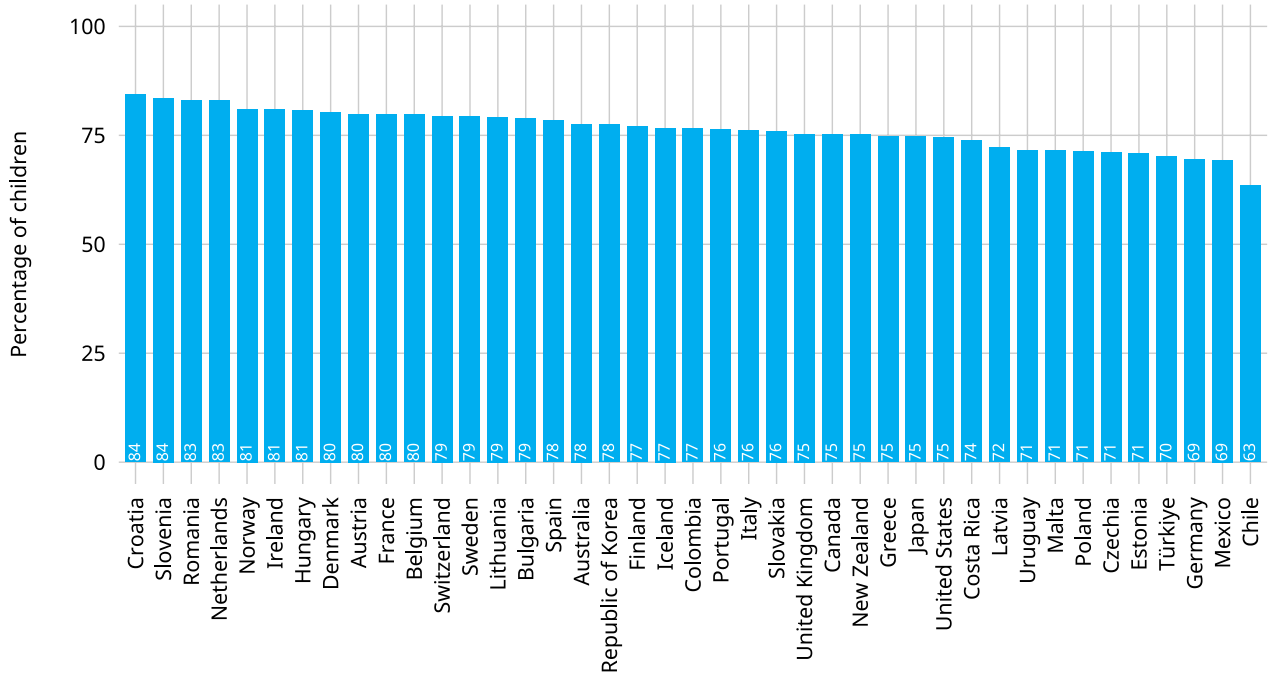
The two indicators of skills used in the league table relate to social and academic competencies. These are key areas for children's development, but other types of skills, such as interpersonal and digital skills, are also important and were reviewed in more detail in Innocenti Report Card 19.

Social skills

The measure of social skills used as an indicator is the percentage of school children aged 15 who feel confident that they can make friends easily. The percentages in different countries in 2022 are shown in Figure 11. In all countries, at least around two thirds of children felt confident in their social skills, but there was some variation across countries, ranging from 63 per cent in Chile to 84 per cent in Croatia. Boys tend to have higher self-reported ratings for this indicator than girls.

As shown in Report Card 19, these skills changed little in the period from 2018 to 2022, which is encouraging given the potential impact of the COVID-19 pandemic on children's social lives during that time span.

Figure 11: Social skills, 15 years old, 2022



Source: PISA 2022. See Technical appendix for full details.

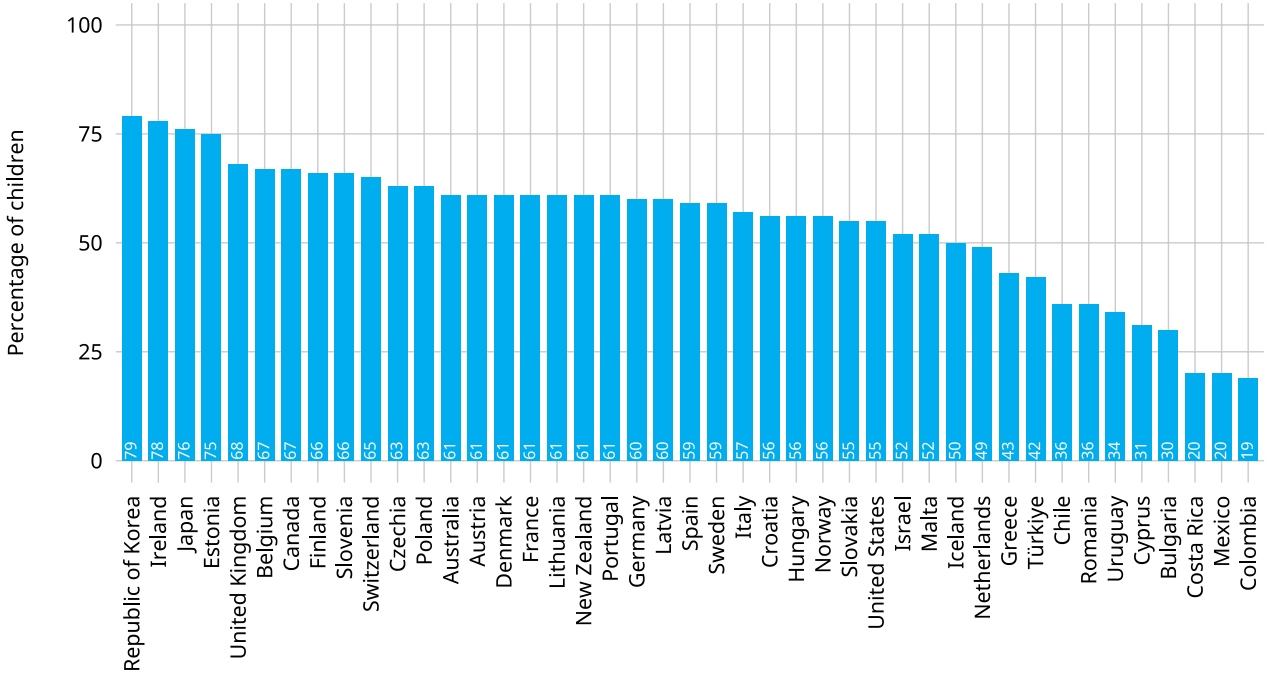
Academic skills

The second indicator is academic skills, measured as the percentage of children who are still enrolled in school at 15 years old and have reached basic proficiency (functional skills for daily life) in both reading and mathematics. Figure 12 shows the proportion of children who have these skills in each country, ranging from around 20 per cent in Colombia, Costa Rica and Mexico to over 75 per cent in Ireland, Japan and the Republic of Korea. Around a third of children in Report Card countries do not reach basic academic proficiency in reading and mathematics by 15 years old, which is remarkable given the high degree of wealth in most countries in this group.

Gender differences in this indicator vary depending on academic subject. There is a tendency (not in all countries) for boys to do a little better at mathematics and (again, not in every country) for girls to do substantially better at reading.

Between 2018 and 2022, the proportion of children with basic academic proficiency declined substantially in 21 out of 37 countries and increased substantially in only 3. Report Card 19 reviews evidence that demonstrates the impact of the COVID-19 pandemic on children's academic skills.

Figure 12: Academic proficiency in mathematics and reading, 15 years old, 2022

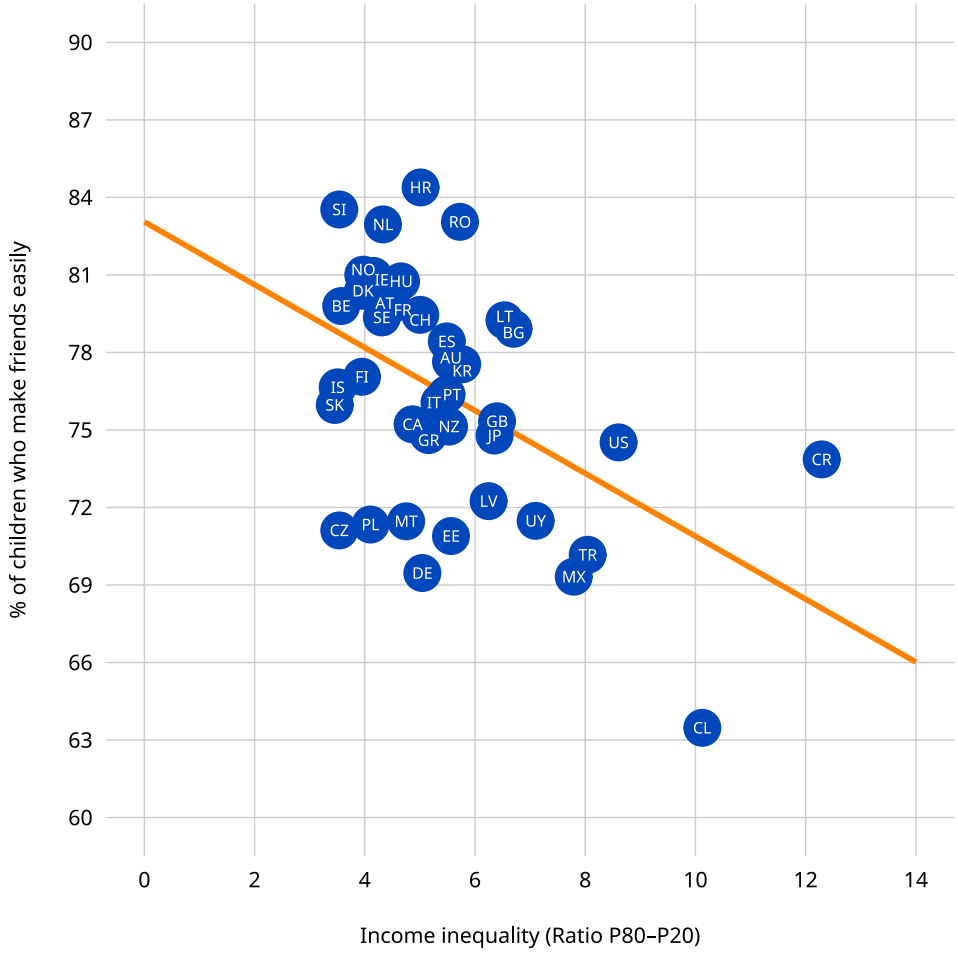


Source: PISA 2022. See Technical appendix for full details.

National economic inequalities and children's average skills

In countries with higher economic inequalities, children tend to report having lower confidence in their social skills, particularly when the measure of general income inequality is used (see Figure 13).[39]

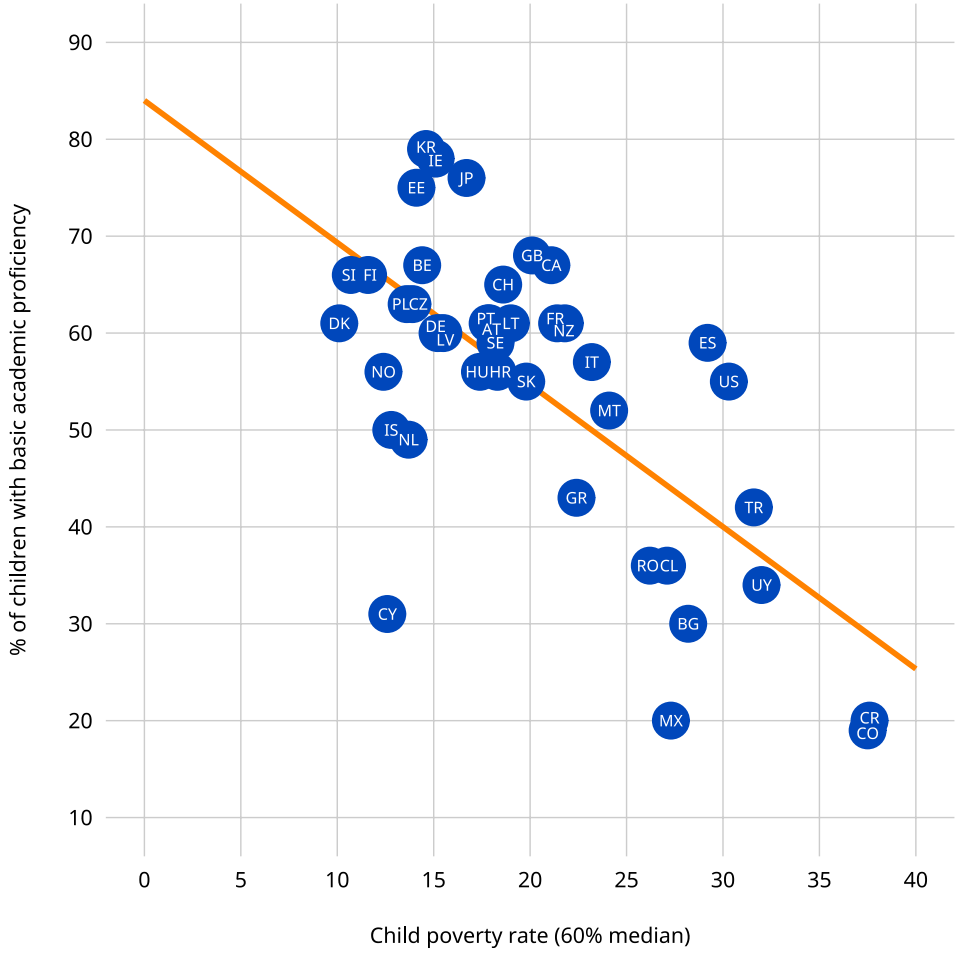
Figure 13: Social skills by income inequality, 2022



Source: As for Figures 5 and 7. See Technical appendix for further details.

Countries with greater levels of economic inequalities had substantially lower levels of academic proficiency (see Figure 14).[40] Here, the association was stronger for child poverty than for overall income inequality. This association remained statistically significant when controlling for different levels of national income.

Figure 14: Academic proficiency at 15 years old by child poverty, 2023



Source: As for Figures 6 and 7. See Technical appendix for further details.

Economic inequalities within countries and differences in children's skills

Detailed analysis within each country also demonstrates links between economic inequalities and children's skills.

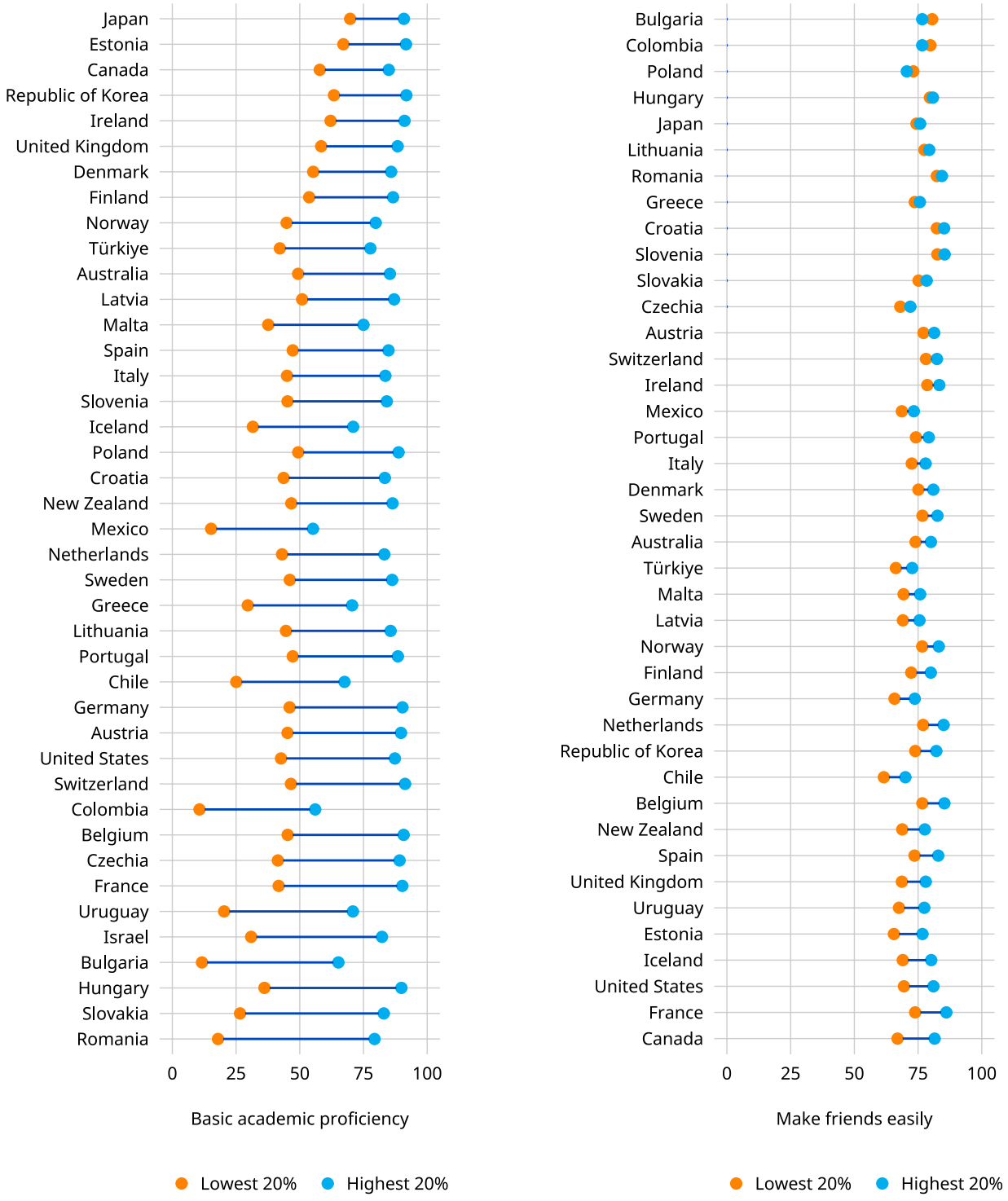
Academic skills

For academic proficiency, there were very substantial differences between socioeconomic groups. The difference between the lowest and highest 20 per cent of socioeconomic groups ranged from 21 percentage points in Japan to 61 percentage points in Romania (see Figure 15, left-hand panel).

Social skills

There was a weaker pattern of differences across socioeconomic groups for the social skills indicator (see Figure 15, right-hand panel). Overall, on average, the most advantaged children tended to be a little more confident in their social skills (77 per cent) than the least advantaged children (72 per cent). This gap was largest in Canada, France and the United States. However, in most countries the gap was not so evident, and in Bulgaria, Colombia and Poland, less advantaged children had slightly higher levels of social confidence.

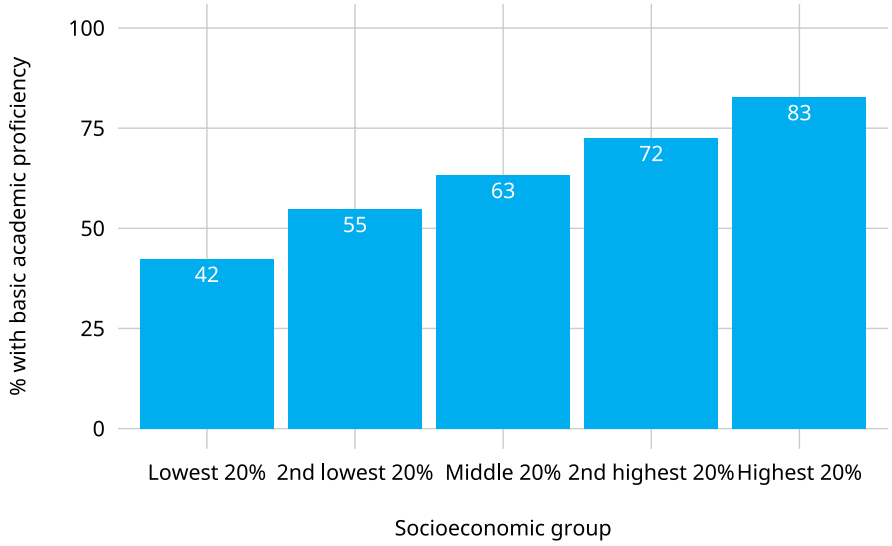
Figure 15: Academic proficiency and social skills by socioeconomic group, by country, 2022



Note: Countries are ranked in ascending order by the size of the socioeconomic gap.
Source: Authors' analysis of data from PISA 2022 survey. See Technical appendix for more details.

In summary, socioeconomic differences are bigger for children's academic skills than for their social skills. Figure 16 shows the average proficiency scores across countries for socioeconomic groups, based on the PISA 2022 study. On average, children in the highest 20 per cent of the socioeconomic distribution within a country were almost twice as likely to have basic academic proficiency in reading and mathematics at 15 years old than children in the lowest 20 per cent (83 per cent compared with 42 per cent).

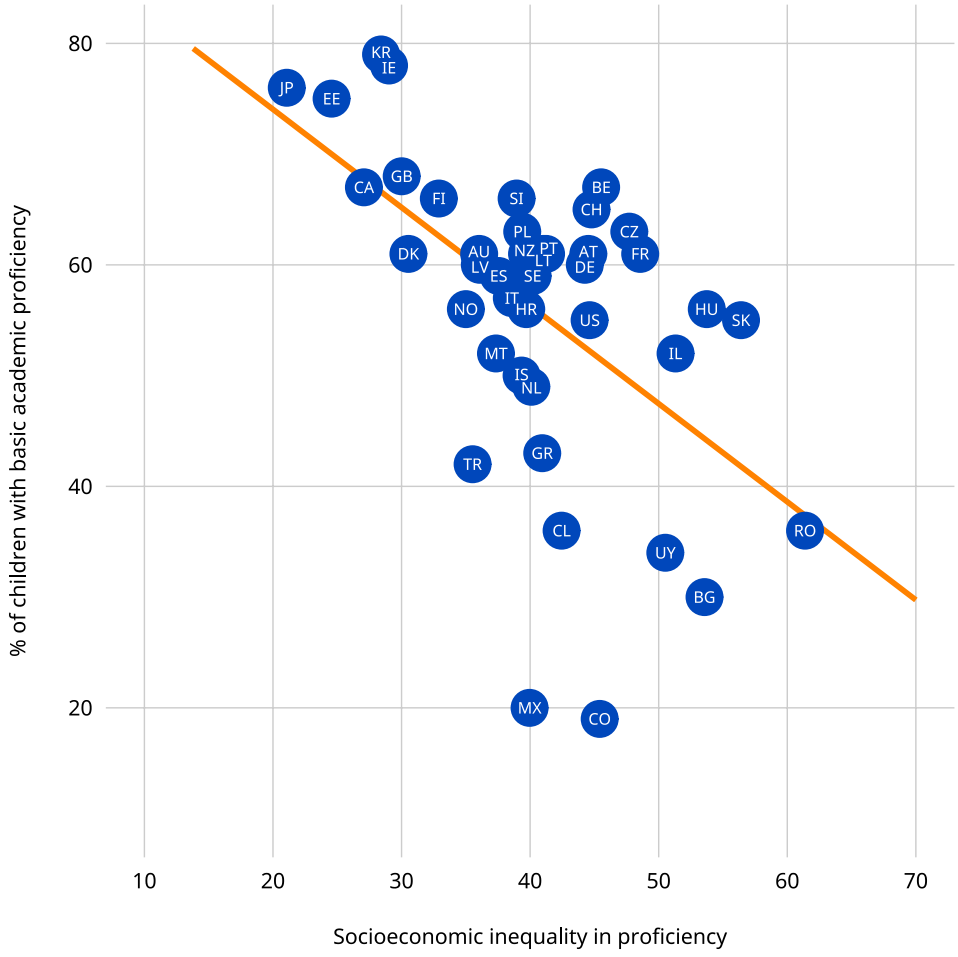
Figure 16: Academic proficiency by socioeconomic group, average across countries, 2022



Source: Authors' analysis using data from PISA 2022 dataset. See Technical appendix for more information.

Notably, the level of socioeconomic inequality in academic proficiency was quite closely related to average proficiency. Countries with greater socioeconomic inequality in proficiency also tended to have lower average proficiency (see Figure 17).

Figure 17: Averages and socioeconomic differences in academic proficiency, 2022



Source: Authors' analysis using data from PISA 2022 dataset. See Technical appendix for more information.

The link between higher economic inequality in a country and lower academic test scores has been confirmed in previous research.[41] The strong economic inequalities within countries in children's academic skills near the end of compulsory education are also very well-established.[42] These childhood inequalities can be a major source of inequalities in adulthood in terms of access to higher education and work opportunities. These childhood socioeconomic achievement gaps also appear to be widening over time.[43]

While the statistics in the right-hand panel of Figure 15 indicate smaller socioeconomic differences in children's social skills, other research suggests that this is an important issue.

Studies in Sweden have found that adolescents from low-income households tend to be less likely to try to initiate friendships, receive fewer friendship nominations and are more likely to experience difficulty in making friends easily (peer rejection).[44]

In a study in Germany, broader social-emotional-behavioural competencies were found to be higher among youth from more advantaged families.[45]

SUMMARY

Economic inequalities and children's skills

Variations between countries

- Children in countries with higher levels of income inequality tend on average to have lower levels of academic and social skills.
- National wealth inequalities are not strongly linked to children's skills.

Variations within countries

- There is very strong evidence of economic inequalities in academic skills between children. Growing up in a disadvantaged family background is a strong predictor of poorer academic skills.
- There is also some evidence of economic inequalities in children's social skills and more generally in peer dynamics from an early age.

7: How do economic inequalities affect child well-being?

The previous three sections presented evidence on the extent to which economic inequalities in countries are linked to child well-being outcomes. This section explores the potential pathways through which this can happen. It uses the framework for child well-being presented in Innocenti Report Card 16, which is based on ecological theories of child development. Figure 18 adapts the diagram from this earlier report in which children are depicted at the centre of various layers of factors across three dimensions:

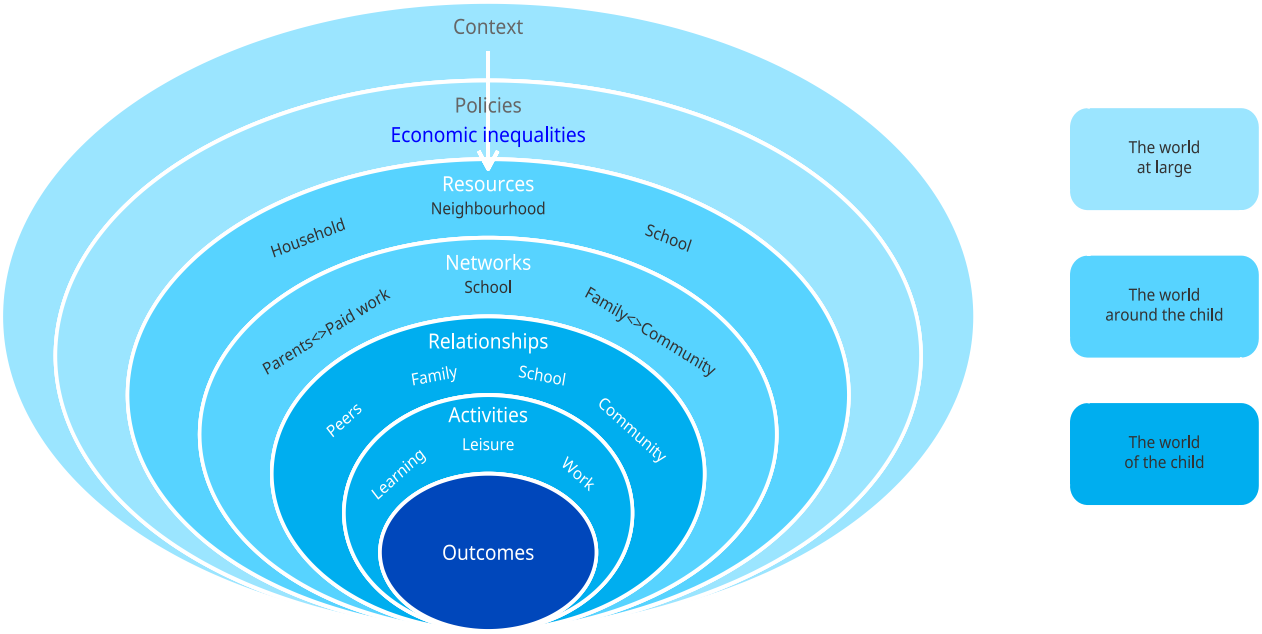
- their immediate world, consisting of daily activities and close relationships;
- the world around them, including social networks and the resources available at home, at school and in the neighbourhood; and
- the world at large, characterized by large-scale social, economic, technological and environmental factors as well as government policies.

In this adaptation, economic inequalities lie in the outer part of the diagram (the world at large) and are interwoven with other contextual factors such as the economy, the labour market, social attitudes and government policies. There are numerous potential pathways of influence between these inequalities and child outcomes. Overall economic inequalities can be reflected in inequalities in the following:

- the resources available for children
- the social networks around the child
- children's relationships
- children's activities and daily lives

All of these can ultimately be reflected in inequalities in child outcomes in terms of physical health, mental well-being and skills.

Figure 18: Framework of child well-being



Source: Authors' elaboration based on the framework originally presented in Innocenti Report Card 16.

Two influential approaches have guided analyses of how economic inequalities enter children's lives: the 'investment' model and the 'stress' model.[46]

- The investment model explains how family income shapes the resources available to children and how deprivation in these resources can directly harm a wide range of child outcomes.
- The stress model focuses on how family income affects family dynamics and relationships through factors such as parental stress and depression.

These approaches are useful in highlighting the central role of the family in shaping children's outcomes. However, children's lives extend beyond the household. Schools and neighbourhoods also function as important settings through which inequality pathways influence child outcomes.

The strength and relevance of these pathways vary by developmental stage, outcome domain and policy context. Applying a multilevel framework of child well-being helps to clarify where and how these pathways influence children's lives.

The next sub-sections explore economic inequalities in the world around the child and the world of the child, which can elucidate the potential pathways between economic inequalities and child well-being. This analysis can also help to inform potential actions to reduce the impact of inequalities on children's lives.

Additionally, it is important to recognize that economic inequalities are linked with other characteristics of children and families that may lead to inequalities in child well-being. Some groups within society face barriers and discrimination in accessing services, and these issues can exacerbate the impacts of economic inequalities on children.

Economic inequalities in the world around the child

Economic inequalities can lead to inequalities in resources and networks in the world around the child that ultimately affect their well-being.

The household

The monetary resources available to the household through income and wealth have a major impact on the household material situation, which can have profound effects on children's lives.

Household material deprivation

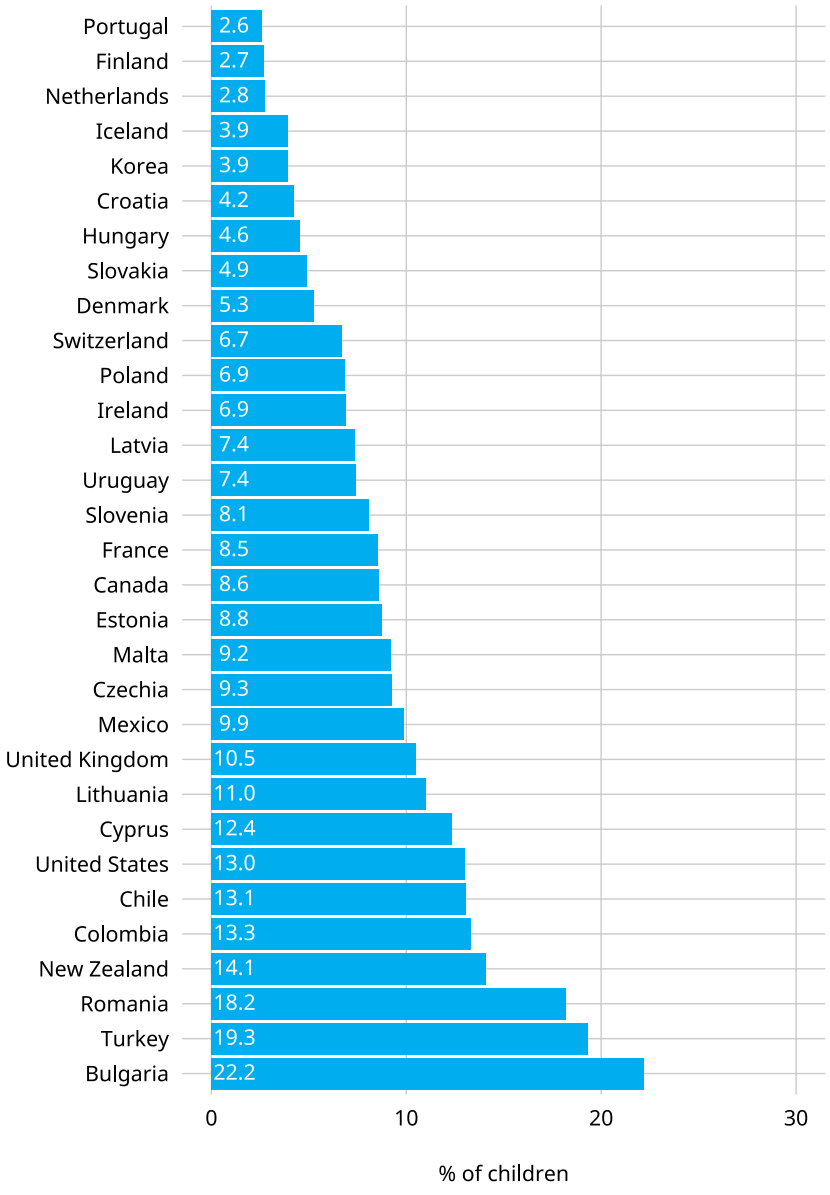
Families with lower levels of financial resources often struggle to provide the material conditions for children to thrive. The European Union includes a measure of 'material and social deprivation' in its suite of measures of poverty and social exclusion.[47] This measure represents the enforced lack of at least 5 out of a list of 13 individual and household items. Examples are enough money to replace worn-out clothes and household items and enough money for family celebrations and leisure activities. In 2024, almost one in seven children (14 per cent) in the European Union lived in this type of deprivation, ranging from under 4 per cent in Croatia to almost 29 per cent in Greece.[48]

The existence of this kind of deprivation overlaps substantially with low income. Nevertheless, it should be noted that there is not a complete overlap. While, in 2024, around a third of children (34 per cent) in households in the lowest fifth of the income distribution were classified as deprived, this also

applied to 8 per cent of children in the middle fifth of households and 1 per cent of children in households in the highest fifth.[49]

One specific aspect of household material deprivation is food insecurity. The PISA study in 2022 asked school children aged 15: "In the past 30 days, how often did you not eat because there was not enough money to buy food?" Figure 19 shows the proportion of children who responded that this had happened at least once in the last 30 days in all Report Card countries where this question was asked. On average, across these countries, 1 in 11 children (9 per cent) sometimes did not eat because of lack of money.

Figure 19: Percentage of children aged 15 who missed meals due to lack of money, 2022



Source: PISA 2022 compendium. See Technical appendix for further details.

Around 13 per cent of children in households with the lowest occupational status reported missing food because of lack of money, compared to less than 6 per cent in households with the highest occupational status. Food insecurity is linked with poorer child outcomes in various ways. For example, a national study in the United States found that adolescents experiencing food insecurity had poorer mental health.[50]

Housing conditions

Closely linked with material deprivation, families with less money often struggle to maintain good housing conditions. As a consequence, children living in poorer households are more likely to live in overcrowded and poor-quality housing with problems such as damp, mould and poor heating, all of which are harmful for health.

One example of this is provided in data from European Union countries. In 2023, 8.8 per cent of households with the lowest 20 per cent of income were classified as living in severe housing deprivation, compared to only 1.0 per cent of households with the highest 20 per cent of income.[51] Specifically in relation to children, 27 per cent of children in the European Union below the poverty threshold were living in a dwelling with a leaking roof, damp walls, floors or foundation, or rot in window frames or floors, compared to 16 per cent of children above the poverty threshold.

Economic inequalities can therefore be linked via housing conditions to environmental risk factors that affect child outcomes. The potential impacts of poor housing conditions affect not only children's physical health but also their broader development.[52]

Parental well-being

Economic inequalities can create differential stresses and risks for parents, affecting their well-being, and this can then have a detrimental impact on children.[53] For example, the quality of parents' working conditions can affect the quality of family relationships. On average in high-income countries, employees in lower-paid and lower-status jobs do not necessarily work longer hours than employees with higher pay and status.[54] However, employees in lower-status jobs do face higher degrees of work-related stress and mental health difficulties.[55] In the case of working parents, this stress can translate into poorer-quality relationships with their children, as outlined in the 'stress' model.

The neighbourhood

Services

Economic inequalities at the household level may be reflected at the neighbourhood level. Inequalities in local services can be one of the pathways through which economic inequalities translate into inequality in child outcomes.

Some studies have shown that in neighbourhoods that have populations with higher average socioeconomic status, there tends to be better access to public services.[56] At the regional level, based on the most recent data available, OECD found that regions with higher gross domestic product (GDP) averaged 3.5 physicians per 1,000 inhabitants compared to 2.9 in lower-GDP regions.[57] Despite increases in early childhood provision in many countries, rates of access are still lower among lower-income families.[58] These patterns are not always present, but this can be overcome through policy actions.

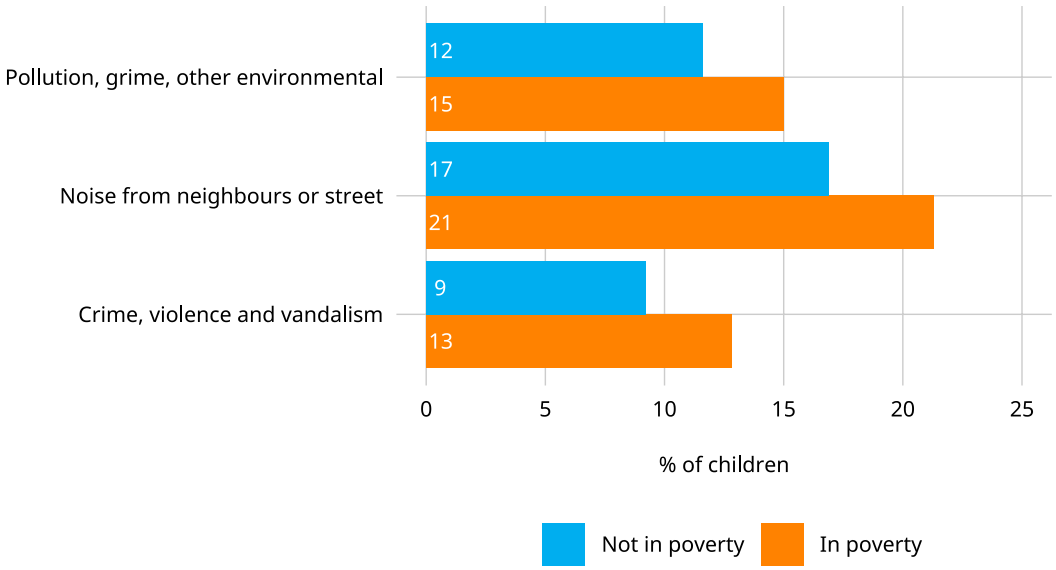
Environment

Inequalities in the quality of the local environments in which children grow up can also be part of the link between economic inequalities and child well-being.

As shown in Figure 20, in the European Union, among low-income households with children, there are higher rates of the following:

- crime, violence or vandalism
- pollution, grime or other environmental problems
- noise from neighbours or from the street

Figure 20: Neighbourhood quality by whether households with children are living in poverty, European Union, 2023



Source: Eurostat database. See Technical appendix for further information.

Neighbourhood factors such as violence, pollution and noise represent risks for a wide range of child well-being outcomes.

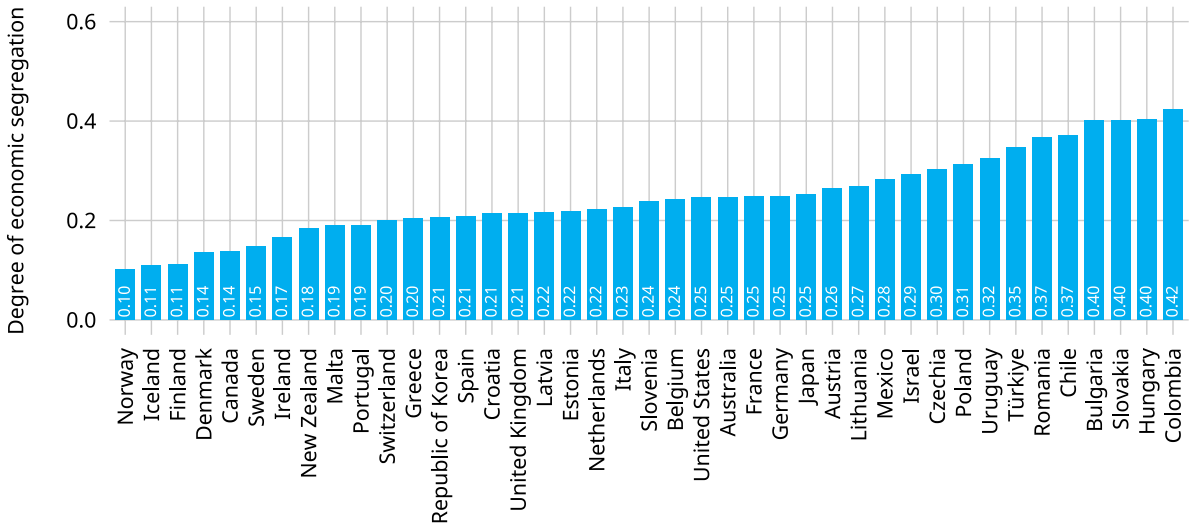
Schools

The quality and context of the schools that children attend can clearly have a substantial impact on outcomes, particularly in terms of academic proficiency. Analysis of the resources available in schools in high-income countries shows some contrasting findings.[59] PISA 2018 results show that, on average across OECD countries, class sizes in secondary schools were smaller in schools with more economically disadvantaged children. As smaller class sizes are generally associated with more responsive teaching, this pattern could benefit disadvantaged children. On the other hand, teachers in schools with more economically advantaged children typically had higher levels of qualification. Additionally, headteachers of more economically disadvantaged schools were more likely to report staff shortages, inadequacy of educational materials and physical infrastructure issues that impeded teaching.

An additional factor related to economic inequalities is the potential segregation of children according to economic circumstances. This can occur due to geographical, parental and educational system factors. Figure 21 shows the degree of economic segregation between schools in each

Report Card country in 2022. A larger number means that there is greater segregation between schools and more similarity between children within schools based on socioeconomic characteristics. Norway, Iceland and Finland had the lowest levels of segregation, while Colombia, Hungary and Slovakia had the highest.

Figure 21: Socioeconomic segregation between schools, 15-year-olds, 2022

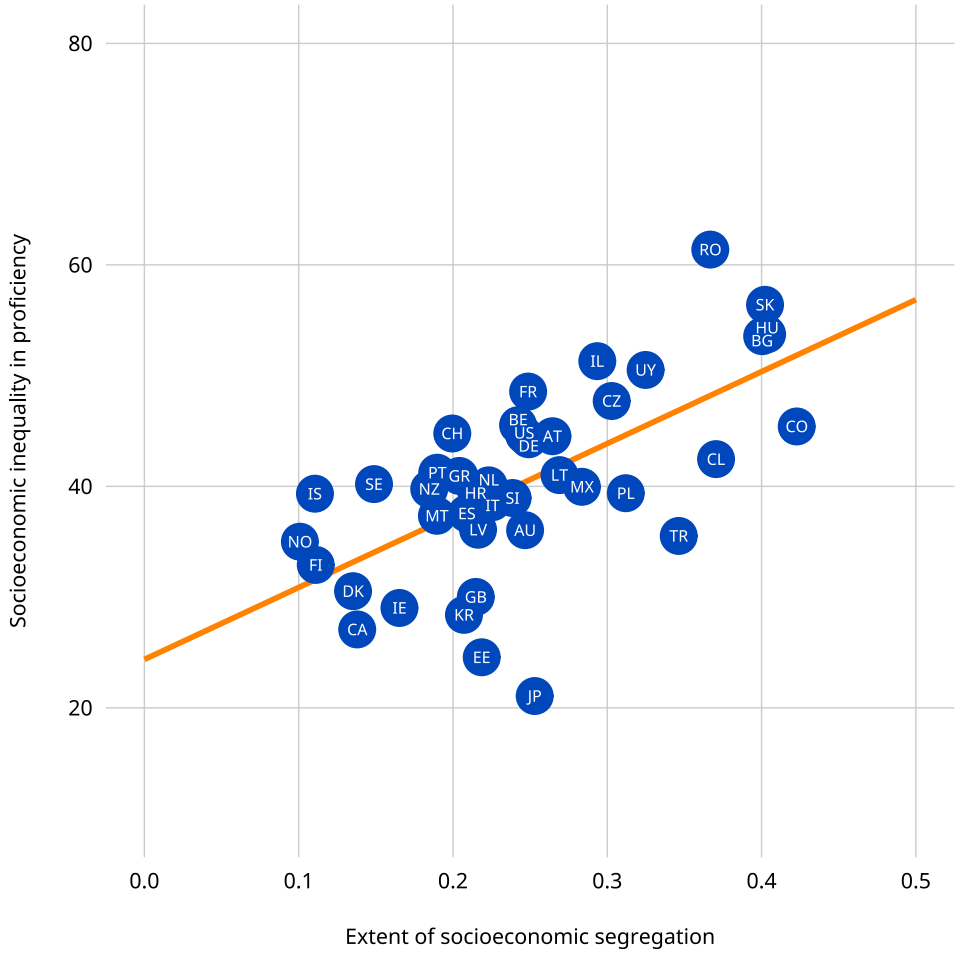


Source: Authors' analysis using data from the PISA 2022 database. See Technical appendix for further information.

This variation in socioeconomic segregation between countries is important because a lower degree of segregation is associated with both of the following:

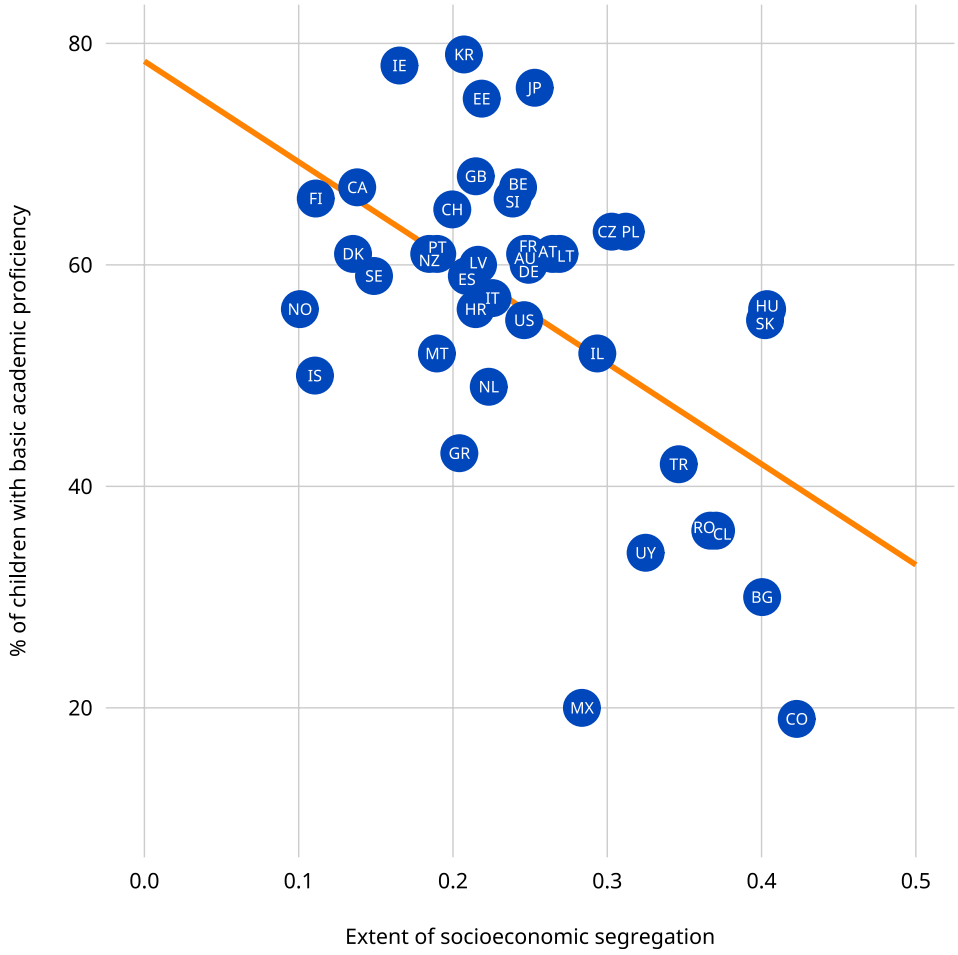
- lower socioeconomic inequality in academic proficiency (Figure 22)
- higher academic proficiency (Figure 23)

Figure 22: Socioeconomic segregation between schools and socioeconomic gaps in academic proficiency, 15-year-olds, 2022



Source: Authors' analysis using data from the PISA 2022 database. See Technical appendix for further information.

Figure 23: Socioeconomic segregation between schools and levels of academic proficiency, 15-year-olds, 2022



Source: Authors' analysis using data from the PISA 2022 database. See Technical appendix for further information.

Economic inequalities in the world of the child

In addition to having direct impacts on child outcomes (as in the investment model discussed earlier), inequalities in the resources and living conditions in households and neighbourhoods may then impact the world of the child in terms of their direct relationships and their daily lives. This section considers some of the evidence on these topics from recent surveys of children in Report Card countries.

Children's relationships

Family

The stress model presented earlier predicts poorer-quality family interactions in more disadvantaged contexts. Evidence from the PISA 2022 survey supports this hypothesis. Children in more advantaged families (top 20 per cent) were substantially more likely to regularly talk with their parents (59 per cent) than children in the least advantaged families (46 per cent). This finding is in line with studies that demonstrate greater parental engagement with children and in the home environment in higher income families.[60] These findings can be linked to the increased stress that lower-income families experience.

Friends and peers

On average across Report Card countries, there was no clear strong socioeconomic pattern in the likelihood of being bullied at school. In 2022, the rate was around 21 per cent for the most disadvantaged fifth of children compared to 19 per cent for the most advantaged fifth. In some countries (e.g. France and Bulgaria), children with lower socioeconomic status were more likely to be bullied, but the opposite was the case in other countries (e.g. Denmark). Other analysis of PISA and HBSC data has also found limited and/or weak evidence of socioeconomic differences in children's likelihood of being bullied.[61]

There were somewhat stronger inequalities in the likelihood of feeling lonely at school. On average, 19 per cent of the most disadvantaged children felt lonely compared to 14 per cent of the most advantaged. The direction of this pattern was consistent across almost all countries.

The HBSC survey undertaken with children aged 11 to 15 in many Report Card countries in 2021–2022 found that on average children living in less affluent families had poorer-quality peer relationships.[62]

Three studies in Sweden show that adolescents from low-income households receive fewer friendship nominations and are more likely to experience difficulty in making friends easily (peer rejection).[63] Broader social-emotional-behavioural competencies tend to be higher among youth from more advantaged families.[64] And research experiments suggest that children display wealth-based friendship preferences from early childhood that may create socioeconomic inequalities in peer relationships.[65]

Activities and behaviours

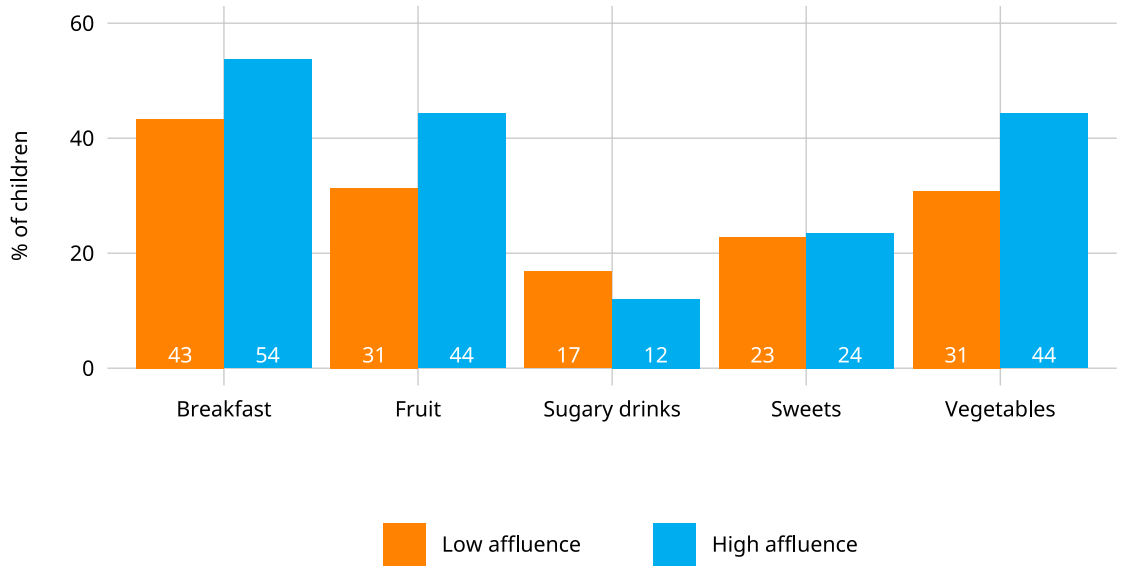
The combined effects of all of the layers of influence already described shape children's daily activities and behaviours. Children in more disadvantaged families face greater constraints, which can can affect the patterns of their daily lives.

Health behaviours

An example of this phenomenon is socioeconomic variation in children's health behaviours (see Figure 24). Statistics from the HBSC study, conducted in 29 Report Card countries in 2021–2022, found that children living in less affluent households were:

- less likely to eat breakfast every day.
- less likely to eat fruit and vegetables.
- more likely to drink sugary drinks.[66]

Figure 24: Differences in children's nutrition by family affluence, 11 to 15 years, 2021–2022



Source: HBSC survey, 2021–2022. See Technical appendix for more information.

This pattern is supported by a review of evidence on this topic, which found that children from higher socioeconomic backgrounds tend to have healthier lifestyles, including eating more fruit and vegetables and a generally nutritious diet, having breakfast regularly and being active.[67]

In the PISA 2022 survey, there was also fairly consistent evidence that children in the most disadvantaged families (53 per cent) were less likely to exercise regularly (more than three times a week) than children in the most advantaged families (58 per cent). This may be linked to differences in opportunities and access to leisure facilities.

These findings on health behaviours should not be seen as a criticism of the choices of poorer children, or the choices of their families, but as a result of the constraints and conditions that they face as result of economic disadvantage.

School work

There is a fairly strong link between family socioeconomic status and the amount of homework that children do at 15 years old. In all countries in the PISA 2022 study, school children in more advantaged families did more homework – sometimes substantially more (see Figure 25, left-hand panel). On average, across countries, 48 per cent of children in the most disadvantaged fifth of families did frequent homework compared to 61 per cent in the most advantaged families. The impact of frequent homework may be complex. It is likely to be linked to better academic performance, but could have a negative effect on mental well-being. The HBSC study found that in some countries, children in more affluent families had significantly higher academic stress than those in less affluent families.[68]

Paid work

In the PISA 2022 survey, on average across participating countries, 32 per cent of the most disadvantaged fifth of school children reported that they worked for pay before and/or after school, compared to 26 per cent in the most advantaged fifth of children (see Figure 25, right-hand panel).

Working for pay can provide children with both a sense of purpose and money that they can choose how to spend. But the association with socioeconomic status may reflect pressures on children to do paid work due to a shortage of money. This may have negative implications for other aspects of their lives, including time for leisure and for school work. Indeed, children who did paid work tended to do less homework and to be less likely to have reached basic academic proficiency.

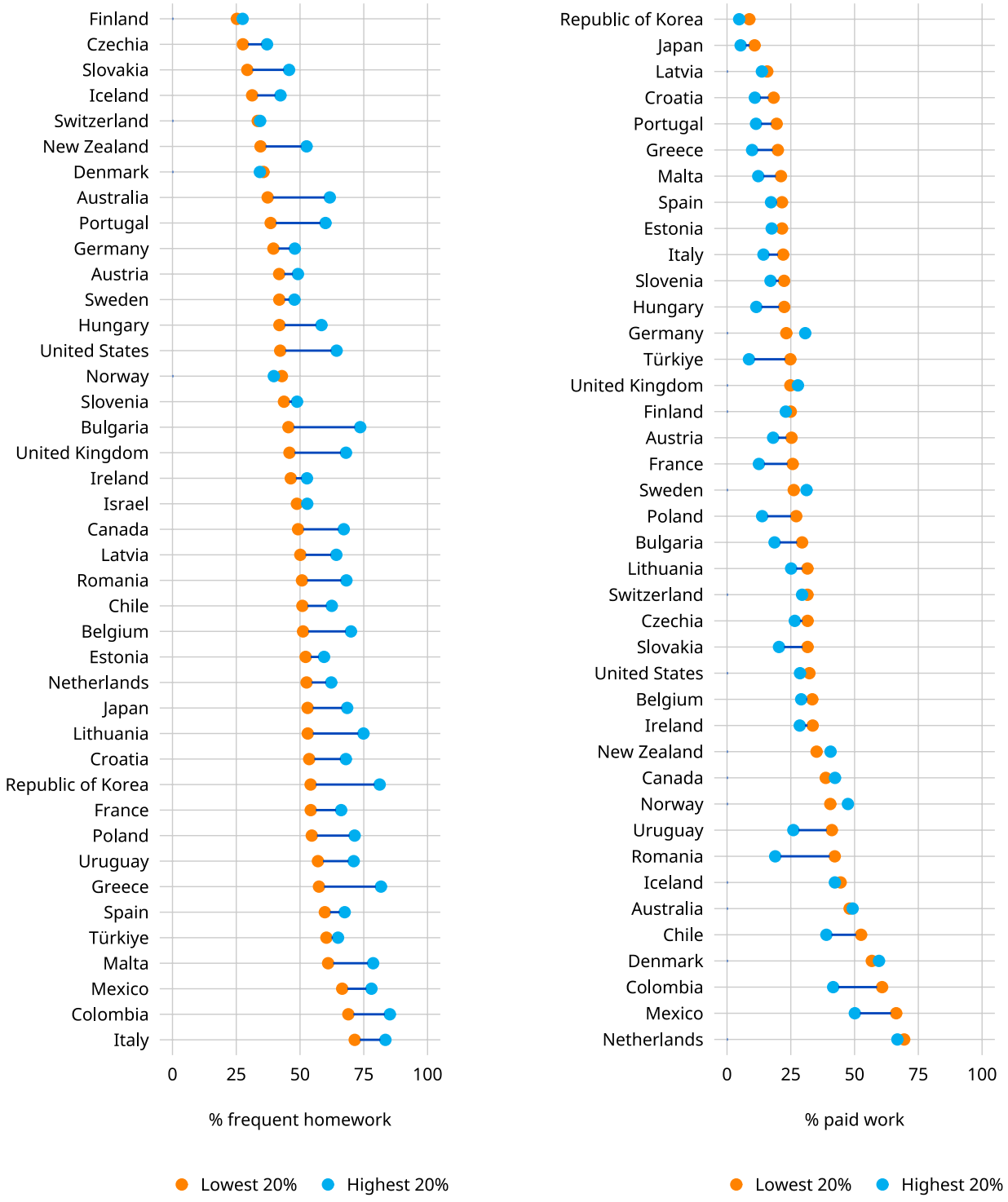
SUMMARY

How do economic inequalities affect child well-being?

This section presents a way of exploring the pathways through which broad-based economic inequalities can result in sharp inequalities in child well-being.

- The evidence presented shows that children living in economic disadvantage have poorer access to resources at home, at school and in the neighbourhood, including public services and facilities.
- Economic stress, together with lack of resources, also means that these children experience poorer-quality social relationships and are less likely to be able to engage in activities that promote their well-being.

Figure 25: Children doing frequent homework and paid work by family socioeconomic status, 15 years, 2022



Source: Authors's analysis of PISA 2022 data. See Technical appendix for further details.

8: Children's views on inequalities

This report is the first in the Report Card series to include the voices of people under 18 to complement findings based on national statistics and adult-led research and interpretation.

This inclusion reflects Article 12 of the United Nations Convention on the Rights of the Child, which states children's right to participate in matters affecting their lives. Moreover, it aligns with research showing that children are not passive recipients but active interpreters of their experiences and social contexts, meaning that inequalities are also understood and shaped in their everyday actions and relationships.

Building on this perspective, this section presents children's views on the causes and determinants of inequalities, how these shape and impact their lives, and what actors, in their opinion, should be held accountable to address them.

Methodology

Between October 2025 and January 2026, 10 focus groups were conducted with 13- to 14-year-olds in six countries: Chile, Colombia, Ireland, Italy, Spain and Switzerland. The groups of children came from contexts with different levels of advantage and disadvantage.

The focus groups followed a structured set of participatory activities implemented consistently across countries. Facilitators recorded detailed notes as close to verbatim as possible. Children also produced written texts and posters. All materials were collected and archived. Data were analysed using a coding approach and organized into the thematic areas presented below.

Ethical approval was granted in September 2025 by the Health Media Lab Ethics Review Committee.

Which children are most affected by inequalities and why?

Children identified multiple groups as being affected by daily barriers linked to inequalities, depicting a society where inequalities are based on group identity, socioeconomic status and individual characteristics.

Gender was frequently understood as *"inequality against women in the world"* (child in Chile) or as discrimination towards the LGBTQI+ community. Children also highlighted disadvantages faced by people with a migration background, a different race or ethnicity and a minority religion:

> *... if he's a person of Chinese race ... but overall, it's about skin colour.* (Child in Spain)

> *Christian Nigerians struggling every day.* (Child in Ireland)

> *... immigrants have difficulties accessing jobs and education.* (Child in Chile)

Socioeconomic status was mentioned as a key driver of inequality, with children linking disadvantage to lack of money, material resources and housing:

> *Some people who are rich might have things easier, but some people who are poor might have things a lot harder.* (Child in Ireland)

> *Those who are rich and have money are better off than those without.* (Child in Spain)

> *Some have a home and others do not.* (Child in Colombia)

This type of statement was echoed repeatedly across all groups of children.

Individual characteristics, responding or not to normative aesthetic standards, or in the words of a child in Chile, *"being stereotypically attractive according to society"*, were also discussed as determinants of inequality: *"in the city centre, anyone who isn't slim can't go"* (child in Italy); *"many things are harder if you have a disability"* (child in Switzerland).

Overall, the analysis of focus group discussions revealed a tension between meritocratic and system-driven explanations of inequality. On the one hand, most children recognized the unfair and discriminatory nature of group-based disparities (e.g. those due to socioeconomic status, gender, migration status, normative bodies), emphasizing that inequalities are largely shaped by societal structures. As one child in Chile noted, inequalities reflect social systems that privilege certain groups while marginalizing others:

> *I think about social causes, and I say causes because they involve people or groups that have been oppressed due to differences, not for being different in themselves. As a society, we have historically created a model of the 'perfect' human being, but it only helps to divide us as people.*

On the other hand, some children pointed to the role of individual attitudes and skills in giving some people more opportunities than others – these included *"being bold"*, *"being good at speaking"*, *"being respectful"*, *"being a good student"* and *"being intelligent"*. This suggests that although structural explanations were provided and underlined by many participants, merit-based interpretations of inequality persist in various contexts.

How do inequalities shape and impact children's lives?

Research participants remarked that inequalities impact children's lives in multiple domains, both material (sport and leisure opportunities, health, etc.) and relational (social exclusion, discrimination, etc.).

Many participants noted that inequalities lead to reduced opportunities for education and health. One child from Colombia illustrated how economic hardship can directly affect educational opportunities:

> *[My dad] had a virus and was bedridden and couldn't get up, and we didn't have any money. He was the one who worked, and my brother had to drop out of school to take care of my dad. We had to pay for his doctor's appointments.*

Another child described inequalities in access to health care services:

> *It's not the same when you arrive at a hospital sick, and they treat you because you have money or they don't treat you because you don't have money.*

According to the children interviewed, unequal access to resources leads to limited participation in sport, leisure and social activities. For example, one child in Switzerland explained:

> *A friend of mine would like to take a dance class, but her family doesn't have much money for it.*

Similarly, a participant in Ireland pointed out:

> *If you're poor and your friends invite you out, you might get left out if you don't have any money to go with them.*

When it comes to relational aspects, unfair treatment and discrimination were often discussed as consequences of inequalities. One participant described situations of *"exclusion due to appearing less wealthy"* (child in Chile); others pointed to discrimination based on origin or nationality:

> *If you have a different background than Switzerland, you get insulted. I was called a bomb maker.* (Child in Switzerland)

Children also referred to bullying based on other factors. A participant in Spain noted that *"a person was physically and mentally abused for being slightly overweight"*, while another child in Italy explained that their *"autistic friend is teased at school"*. Gender was also mentioned several times as a source of exclusion in everyday life, as highlighted by a child in Ireland who observed that *"the girls always are picked last for sports"*.

Experiences of inequality were described as translating into emotional and psychological consequences, with children mentioning feelings of loneliness, sadness and low self-esteem: *"it can affect your confidence"* (child in Ireland). One interviewee in Spain suggested that inequalities may lead children to *"feel bad with themselves, feel pressure or social anxiety, or overthink what people think about him or her"*. Many children described what happens to them when they experience the negative consequences of inequalities:

"I stand in a corner and cry" (child in Italy); *"you get sad or have bad thoughts"* (child in Switzerland); you engage in *"self-harm"* and *"violence"* (children in Colombia).

Children also insisted that inequalities shape future life chances. A participant in Spain explained that children facing disadvantages *"have more difficulties to move forward and achieve the same as others"* in their futures; one in Chile noted that *"education and social class influence"* children's futures.

Who are the actors responsible for inequalities, and what could they do to improve children's well-being?

Children highlighted that those responsible for reproducing or challenging inequalities include a wide range of actors operating at different levels, from individuals and peer groups to institutions and broader societal structures.

At the interpersonal level, children frequently identified other young people, including classmates, and members of their communities. One participant in Chile gave an example of inequality as when *"a group of children excludes another child for wearing glasses"*. Some described intervening when witnessing unfair treatment or bullying: *"I try to defend my classmates who are being treated unfairly"* (child in Italy). Others emphasized the importance of raising awareness and confronting discrimination, suggesting actions such as *"speak[ing] up and mak[ing] discrimination and inequality visible"* (child in Chile). However, while children recognized their own agency in responding to inequalities, they were also aware of the social risks associated with challenging discriminatory behaviours. A child in Spain reflected:

> *When someone is going through a hard time, you would like to act, because you see that it is unfair, but sometimes you don't do it so that it does not affect you, and to avoid that the majority criticize you.*

Schools were frequently mentioned as environments where inequalities are both reproduced and mitigated. Children highlighted positive practices, such as provisions for students who lack resources:

> *In this school, many people need materials. The teachers give us uniforms. Some don't have the means to get them.* (Child in Colombia)

At the same time, they pointed to situations where educational institutions generate inequalities or fail to address some of their consequences:

> *There are schools that when a girl is Roma, as they are accustomed that Roma girls don't study, they place them in support classes even if they get good grades.* (Child in Spain)

> *There are schools where those who do not have money cannot enter.* (Child in Colombia)

> *High schools do nothing about harassment, but they issue a report in case[s where] you are chewing gum.* (Child in Spain)

Furthermore, children referred to governments and public institutions, as well as international organizations and civil society actors, as being responsible for addressing inequalities at a broader societal level. One child in Switzerland, for example, stated that the government should *"give children the right to vote and more money for social aid for children"*. This was echoed by many other children, who supported the idea that the state should provide social support to *"poorer people and help adults find well-paid jobs"*. Some participants referred to organizations such as UNICEF, noting that *"they run programmes that reach the community"* (child in Colombia). Others highlighted the importance of non-governmental organizations in supporting vulnerable children and families, *"because they can help children who lack education, food or a home – for example, through money from donations"* (child in Spain).

Beyond institutions and non-profit organizations, some participants highlighted the role of the private sector, including media organizations, in shaping inequalities. One child in Spain pointed to the influence of companies in shaping consumption patterns and social expectations through advertising:

> *Companies can be responsible of inequalities. For instance, TV and commercials can influence us in decisions we make.*

A participant in Chile reflected on the role that digital platforms and social media could play in promoting more inclusive social environments, suggesting the need for *"more empathy, stronger moderation and algorithms focused on care and well-being"*.

Finally, some children went beyond identifying specific actors as being responsible for inequalities, explaining that inequality can occur when *"a group or person can be more privileged socially, economically, politically"* (child in Chile). When reflecting on the root causes of unequal opportunities and power relations in society, they referred to broader social and economic systems that they perceived as contributing to inequalities, mentioning *"machismo and patriarchy"* or *"capitalism"*.

One child in Spain considered whether the way we live and build our societies, culturally and economically, is itself the cause of inequalities:

> *It is the same with the economy. It is seen [as] normal that people depend too much on money, but I think money isn't so necessary – it's just that things are given a price, both literally and figuratively. Literally, we set things a price when living should be free, because if you are in this world, you haven't chosen. I don't know why prices increase so much when it is not necessary, because there are people who can't afford it.*

9: Key messages

Summary of key points

Child well-being

This report began by evaluating evidence on three dimensions of children's well-being – physical health, mental well-being and skills – in 44 countries that are defined as 'high income' and/or are members of the OECD.

The evidence shows that despite the wealth of these countries, they still have a long way to go to ensure well-being for all children. More than a quarter of children are overweight, a similar proportion do not report high life satisfaction, and more than a third do not achieve basic competencies in reading and mathematics towards the end of compulsory schooling. The report explored how economic factors may explain the existence of these inequalities both between and within countries.

Economic inequalities

After a period of rising economic inequalities in these countries between 1980 and around 2010, the levels have stabilized but are persistently high, with wide variations in income and wealth. In some countries, people in the top fifth of the income distribution have more than 8 times the income of those in the bottom fifth. Even in the most equal countries, the top fifth has at least 3.5 times more income than the bottom fifth.

The child poverty rate remains a substantial issue affecting at least 1 in 10 children in every country. In 18 countries, more than 1 in 5 children live in relative income poverty.

Do countries with higher economic equality have better child well-being?

Countries with higher economic equality – measured according to either overall income or child poverty – tend to have better child well-being in a number of aspects. In particular, they have lower child mortality rates, lower rates of overweight and higher levels of academic competencies. These differences between countries remain even when national income is taken into account.

While this link does not prove that greater equality causes a higher level of child well-being, the evidence is consistent with a wider range of studies linking greater equality with better population well-being. It may be that these links are more complex and that greater economic equality reflects a range of underlying structural conditions that also promote greater well-being.

There is also evidence that higher levels of economic inequality lead to persistence of inequalities over time, through lower levels of intergenerational social mobility.

Are economic inequalities within countries linked to variations in child well-being?

There is strong evidence of economic inequalities in child well-being across all dimensions. Children living in more disadvantaged contexts tend to have poorer physical health, poorer mental well-being and lower levels of academic skills. These inequalities tend to be present in most or all countries. Broad reviews of evidence indicate that income inequality has a causal impact: growing up in an economically disadvantaged context within a given society leads to lower well-being. The impacts of these lower levels of well-being can persist throughout childhood and adolescence, and into adulthood.

How do economic inequalities affect child well-being?

The report presents a framework to understand the various pathways through which economic inequalities affect child well-being. Economic inequalities shape inequalities in the world around the child (household, neighbourhood and school resources) and in the world of the child (relationships and activities).

For example, children living in less economically advantaged contexts have access to fewer resources and poorer-quality resources and living conditions in their homes, neighbourhoods and schools. These poorer conditions then affect the world of the child in terms of relationships and activities. Children living in disadvantage experience poorer-quality relationships, which are likely to be linked to greater levels of economic stress. And there are tangible differences in their daily lives, including poorer-quality diets and a higher likelihood of engaging in paid work rather than school studies.

This network of influences can ultimately lead to inequalities in children's physical health, mental well-being and academic and social skills.

Children's views on inequalities

Research undertaken with children in six countries for this report demonstrates children's strong awareness and understanding of inequalities.

Children discussed and identified a number of aspects of inequalities, including economic factors and discrimination on the basis of gender, race/ethnicity, disability and migration status, as well as physical appearance.

Children identified these inequalities as being rooted in, and amplified or mitigated by, a range of systems and contexts, including the education system, government and public policies, and a wider range of social and economic actors.

What can countries do to reduce the impact of inequalities on child well-being?

The answers to this question must be based on an understanding of the different pathways through which economic inequalities at the societal level can ultimately affect children. As discussed in Section 7, there are various pathways and mechanisms at play:

1. Economic inequalities are linked to inequalities in the available **resources** to which children and their families have access, within their homes and within their neighbourhoods, including services.
2. Living in economic difficulties creates **stress** for parents and children that negatively impacts their relationships and well-being.
3. Economic inequalities overlap and intersect with other inequalities, which can result in children and families experiencing **barriers to access to services**, including discrimination.

Reduce monetary inequalities experienced by children

Given the very substantial evidence of the negative impact of economic inequalities on children's lives, there is a strong case for countries to aim to reduce these inequalities. However, even when countries decide to pursue this goal, it is a relatively long-term one. Income and wealth inequalities at the national level are slow-moving and are often intrinsically linked to a broader range of structural and social issues that may take considerable time to change.

Nevertheless, countries can do more, even in the short term, to address 'bottom-end' inequality which translates into child poverty. As discussed in Innocenti Report Card 18, a number of countries have achieved substantial reductions in child income poverty rates in recent years, including through child and family benefits, tax measures and labour market policies such as establishing a minimum wage. This can be achieved through a mixture of universal and targeted policies.

Promote equity of resources across households, schools and neighbourhoods

The report presents a persuasive case that broad-based economic inequalities in societies are often connected to poorer access to resources for children within households, schools and neighbourhoods (including service provision). This connection is not inevitable, and a range of public policies have the potential to ensure that all children have access to the material conditions and experiences that can promote and ensure their well-being. Such policies can include the following:

- financial support with housing costs and improvements for low-income families;
- local area policies that improve environments in disadvantaged neighbourhoods;
- public services, such as leisure facilities and school meals, that can ensure all children can access places to play and exercise, healthy nutrition, etc.;
- school policies that ensure equity of teaching staff, educational materials and physical infrastructure irrespective of the socioeconomic composition of the school; and
- educational policies that avoid segregation of children by socioeconomic group.

While the availability of universal basic services is a fundamental requirement to ensure equity of access to resources, it is not in itself sufficient to guarantee access to all. It is also vital for policies and services to remove barriers to access, including ensuring safety and tackling the stigmatization and discrimination that many groups experience.

An example of a coordinated effort to ensure the rights of all children, particularly the most disadvantaged, to basic needs is the European Child Guarantee. This aims to guarantee effective access to a set of key services:

free early childhood education and care; free education, including school-based activities and at least one healthy meal each school day; free health care; healthy nutrition; and adequate housing.[69] This programme includes a specific focus on disadvantaged groups, including homeless children; children with disabilities; children with a migrant background or minority ethnic origin, particularly Roma; and children in alternative, especially institutional, care.[70]

Evidently, a key precondition for equitable access to resources is that governments ensure that sufficient public funding is provided for facilities and services across all contexts.

A wider range of policies for equity

Beyond impacting material resources, economic inequalities can affect child well-being through other pathways. Economically disadvantaged children, and their families, often face greater levels of stress, stigmatization and discrimination in various aspects of their lives.

Public policies play an important part in reducing the impact of economic inequalities. This can include the following:

- labour market policies that ensure adequate pay, good working conditions and adequate parental leave as well as sufficient accessible early years services;
- public health policies that promote healthier living conditions for children, including better food environments and reductions in pollution; and
- psychosocial support services for parents and children, which help to promote mental well-being.

A set of such policies and provisions can go a long way towards reducing the impact of broad-based economic inequalities on child well-being.

Create solutions jointly with children and others

The solutions to the impact of economic inequalities on children's lives are often highly specific to a given context. For this reason, it is vital that policymakers and practice-based organizations engage with children and their families and communities to devise policies that are adapted to the specific context. Children can, and do, have important contributions to make in analysing and tackling social issues, as the views presented in Section 8 show. The time has come for children to be fully engaged in creating policy

and practical solutions to matters that affect their lives, as envisaged in Article 12 of the United Nations Convention on the Rights of the Child.

Better data and monitoring

This report has made the best use of available high-quality data to explore economic inequalities in child well-being in a group of 44 primarily high-income countries. However, even in these countries with substantial resources, there is still a lack of data on many aspects of inequality. For example, there is limited international comparative data on children's mental well-being. There is also a need for better data that enable disaggregation among different subgroups in the population to enable an exploration of how economic inequalities intersect with other types of social inequality. There are also gaps in data coverage – for example, children not in school. Finally, for many aspects of child well-being, there remains a lack of data gathered from children themselves.

Such data gaps hamper a full understanding of this issue, as well as preventing monitoring of progress and identification of successful policies and strategies.

Endnotes

1 Stanford Center on Poverty and Inequality (n.d.). Plutarch. https://inequality.stanford.edu/publications/quote/plutarch. Accessed 21 February 2026.

2 GDP in OECD countries has grown in all but 2 years since 2000, at an average rate of almost 2 per cent. <https://data.worldbank.org/indicator/NY.GDP.MKTP.KD.ZG>

3 Authors' calculations for the group of countries in this report using data from: World Inequality Database. (n.d.). https://wid.world/data. Data retrieved 21 February 2026.

4 Extreme poverty rates in Western and Eastern Europe in 1950 were estimated as 21 and 19 per cent respectively in Moatsos, M. (2021). Global extreme poverty: Present and past since 1820. In OECD (Ed.), How Was Life? Volume II: New Perspectives on Well-being and Global Inequality since 1820. OECD Publishing. Recent (2023) rates for 25 European Union countries are less than 0.5 per cent on average. Source: World Bank (n.d.) Poverty and Inequality Indicators. https://pip.worldbank.org/poverty-calculator. Accessed 28 April 2026.

5 Regarding trust in others, see Pickett, K., Wilkinson, R., Gauhar, A., & Sahni-Nicholas, P. (2024). *The Spirit Level at 15: The enduring impact of inequality*. University of York. https://doi.org/10.15124/YAO-DE9S-7K93; regarding trust in political institutions, see Goubin, S., & Hooghe, M. (2020). The effect of inequality on the relation between socioeconomic stratification and political trust in Europe. *Social Justice Research*, *33*(2), 219–247. https://doi.org/10.1007/s11211-020-00350-z; Jin, S., Hu, Y., & Meng, T. (2024). Why economic inequality undermines political trust: An analysis of mechanisms. *Public Opinion Quarterly*, *88*(2), 337–358. https://doi.org/10.1093/poq/nfae013

6 Corak, M. (2013). Inequality from generation to generation: The United States in comparison. In R. S. Rycroft (Ed.), *The economics of inequality, poverty, and discrimination in the 21st century* (Vol. 1, pp. 107–126). Praeger; Durlauf, S. N., Kourtellos, A., & Tan, C. M. (2022). The Great Gatsby Curve. *Annual Review of Economics*, *14*(1), 571–605. https://doi.org/10.1146/annurev-economics-082321-122703

7 UNICEF Innocenti. (2020). *Worlds of influence: Understanding what shapes child well-being in rich countries*. Innocenti Report Card 16. UNICEF Office of Research – Innocenti.

8 Both measures use 'equivalized' household income, which refers to adjustments that are made to take account of economies of scale in larger households.

9 Timár, E., Cuchcatla Méndez, C., Carraro, A., & Rees, G. (2026). *Economic inequalities and child well-being in rich countries, Innocenti Working Paper*. UNICEF Office of Strategy and Evidence – Innocenti.

10 UNICEF Innocenti. (2023). *Child poverty in the midst of wealth*. Innocenti Report Card 18. UNICEF Office of Research – Innocenti.

11 De Schutter, O., Frazer, H., Guio, A.-C., & Marlier, E. (2023). *The escape from poverty: Breaking the vicious cycles perpetuating disadvantage*. Policy Press. https://doi.org/10.51952/9781447370611

12 Avvisati, F., & Wuyts, C. (2024). *The measurement of socio-economic status in PISA* (OECD Education Working Papers No. 321). OECD Publications. https://doi.org/10.1787/0c5b793c-en

13 Currie, C., Alemán Díaz, A. Y., Bosáková, L., & De Looze, M. (2024). The international Family Affluence Scale (FAS): Charting 25 years of indicator development, evidence produced, and policy impact on adolescent health inequalities. *SSM - Population Health*, *25*, Article 101599. https://doi.org/10.1016/j.ssmph.2023.101599

14 Clark, H., Coll-Seck, A. M., Banerjee, A., Peterson, S., Dalglish, S. L., Ameratunga, S., Balabanova, D., Bhan, M. K., Bhutta, Z. A., Borrazzo, J., Claeson, M., Doherty, T., El-Jardali, F., George, A. S., Gichaga, A., Gram, L., Hipgrave, D. B., Kwamie, A., Meng, Q., … Costello, A. (2020). A future for the world's children? A WHO–UNICEF–Lancet Commission. *The Lancet*, *395*(10224), 605–658; United Nations Children's Fund (UNICEF). (2025). *Feeding profit. How food environments are failing children – Child Nutrition Report 2025*. UNICEF.

15 UNICEF Innocenti, Report Card 19.

16 Hucko, A., Weigel, R., Nizamov, F., & Black, M. (2025). Child and adolescent mortality in the WHO European Region: Concerning trends requiring urgent action. *Public Health in Practice*, *10*, Article 100668. https://doi.org/10.1016/j.puhip.2025.100668

17 Correlations = 0.61 (income inequality) and 0.59 (child poverty). These remain broadly similar (0.65 and 0.59) when excluding Mexico, which is an outlier.

18 Timár, E., Cuchcatla Méndez, C., Carraro, A., & Rees, G. (2026). *Economic inequalities and child well-being in rich countries, Innocenti Working Paper*. UNICEF Office of Strategy and Evidence – Innocenti.

19 Shimony-Kanat, S., Orr, D., & Falk, A. (2024). Social and economic factors associated with child unintentional injury mortality in high-income countries. *Injury Prevention*, *30*(3), 194–199. https://doi.org/10.1136/ip-2023-045016

20 Correlations = 0.58 (income inequality) and 0.50 (child poverty). They are 0.46 and 0.50, respectively, without Chile, which is an outlier.

21 Timár, E., Cuchcatla Méndez, C., Carraro, A., & Rees, G. (2026). *Economic inequalities and child well-being in rich countries, Innocenti Working Paper*. UNICEF Office of Strategy and Evidence – Innocenti.

22 Sidebotham, P., Fraser, J., Covington, T., Freemantle, J., Petrou, S., Pulikottil-Jacob, R., Cutler, T., & Ellis, C. (2014). Understanding why children die in high-income countries. *The Lancet*, *384*(9946), 915–927. https://doi.org/10.1016/S0140-6736(14)60581-X

23 Braudt, D. B., Lawrence, E. M., Tilstra, A. M., Rogers, R. G., & Hummer, R. A. (2019). Family socioeconomic status and early life mortality risk in the United States. *Maternal and Child Health Journal*, *23*(10), 1382–1391. https://doi.org/10.1007/s10995-019-02799-0

24 Størdal, K., Christensen, A., Stene, L. C., & Strøm, M. S. (2025). Child and adolescent deaths by socioeconomic status in a high-income country: A cohort study. *BMJ Open*, *15*(6), Article e099603. https://doi.org/10.1136/bmjopen-2025-099603

25 Vazquez, C. E., & Cubbin, C. (2020). Socioeconomic status and childhood obesity: A review of literature from the past decade to inform intervention research. *Current Obesity Reports, 9*(4), 562–570. https://doi.org/10.1007/s13679-020-00400-2

26 Cooper, K., & Stewart, K. (2017). *Does money affect children's outcomes? An update* (CASE 203). Centre for Analysis of Social Exclusion, LSE. https://sticerd.lse.ac.uk/CASE/_new/publications/abstract/?index=5500

27 Calculated from: HBSC. (n.d.). Measure: Self-rated health. https://data-browser.hbsc.org/measure/self-rated-health/. Data retrieved 8 February 2026.

28 Spencer, N., Thanh, T. M., & Louise, S. (2013). Low income/socio-economic status in early childhood and physical health in later childhood/adolescence: A systematic review. *Maternal and Child Health Journal*, *17*(3), 424–431. https://doi.org/10.1007/s10995-012-1010-2

29 OECD. (2026). *Measuring children's subjective well-being: Rationale, empirical approaches and future directions*. OECD Publishing. https://doi.org/10.1787/a9b57ebc-en

30 As these rates can fluctuate substantially from year to year, a three-year average is shown.

31 Rakesh, D., Shiba, K., Lamont, M., Lund, C., Pickett, K. E., VanderWeele, T. J., & Patel, V. (2025). Economic inequality and mental health: Causality, mechanisms, and interventions. *Annual Review of Clinical Psychology*, *21*(1), 353–377. https://doi.org/10.1146/annurev-clinpsy-081423-025710

32 Sommet, N., Fillon, A. A., Rudmann, O., Cunha, A. R. S., & Ehsan, A. (2025). No meta-analytical effect of economic inequality on well-being or mental health. *Nature*, *649*, 926–937. https://doi.org/10.1038/s41586-025-09797-z

33 Rakesh, D., Tsomokos, D. I., Vargas, T., Pickett, K. E., & Patel, V. (2025). Macroeconomic income inequality, brain structure and function, and mental health. *Nature Mental Health*, *3*(11), 1318–1330. https://doi.org/10.1038/s44220-025-00508-1

34 Hoffmann, J. A., Farrell, C. A., Monuteaux, M. C., Fleegler, E. W., & Lee, L. K. (2020). Association of pediatric suicide with county-level poverty in the United States, 2007-2016. *JAMA Pediatrics*, *174*(3), Article 287. https://doi.org/10.1001/jamapediatrics.2019.5678; Yildiz, M., Demirhan, E., & Gurbuz, S. (2019). Contextual socioeconomic disadvantage and adolescent suicide attempts: A multilevel investigation. *Journal of Youth and Adolescence*, *48*(4), 802–814; Runkle, J. R., Harden, S., Hart, L., Moreno, C., Michael, K., & Sugg, M. M. (2023). Socioenvironmental drivers of adolescent suicide in the United States: A scoping review. *Journal of Rural Mental Health*, *47*(2), 65–80.

35 Zaneva, M., Dumbalska, T., Reeves, A., & Bowes, L. (2024). What do we mean when we talk about socioeconomic status? Implications for measurement, mechanisms and interventions from a critical review on adolescent mental health. *General Psychiatry*, *37*(6), Article e101455. https://doi.org/10.1136/gpsych-2023-101455

36 Rees, G. (2021). Different factors predict different aspects of adolescent well-being: Evidence from the UK. *Sciences et Bonheur*, *6*, 35–54.

37 Hazell, M., Thornton, E., Haghparast-Bidgoli, H., & Patalay, P. (2022). Socio-economic inequalities in adolescent mental health in the UK: Multiple socio-economic indicators and reporter effects. *SSM - Mental Health*, *2*, Article 100176. https://doi.org/10.1016/j.ssmmh.2022.100176

38 Peverill, M., Dirks, M. A., Narvaja, T., Herts, K. L., Comer, J. S., & McLaughlin, K. A. (2021). Socioeconomic status and child psychopathology in the United States: A meta-analysis of population-based studies. *Clinical Psychology Review, 83*, Article 101933. https://doi.org/10.1016/j.cpr.2020.101933

39 Correlations = -0.46 (income inequality) and -0.28 (child poverty).

40 Correlations = -0.58 (income inequality) and -0.67 (child poverty).

41 Chiu, M. M. (2010). Effects of inequality, family and school on mathematics achievement: Country and student differences. *Social Forces*, *88*(4), 1645–1676; Condron, D. J. (2011). Egalitarianism and educational excellence: Compatible goals for affluent societies? *Educational Researcher*, *40*(2), 47–55; Thorson, G. R., & Gearhart, S. M. (2018). The adverse effects of economic inequality on educational outcomes: An examination of PISA scores, 2000–2015. *World Affairs*, *181*(3), 286–306.

42 Cooper and Stewart, *Does money affect children's outcomes?*; Rakesh, D., Lee, P. A., Gaikwad, A., & McLaughlin, K. A. (2025). Annual research review: Associations of socioeconomic status with cognitive function, language ability, and academic achievement in youth – a systematic review of mechanisms and protective factors. *Journal of Child Psychology and Psychiatry*, *66*(4), 417–439. https://doi.org/10.1111/jcpp.14082

43 Chmielewski, A. K. (2019). The global increase in the socioeconomic achievement gap, 1964 to 2015. *American Sociological Review*, *84*(3), 517–544. https://doi.org/10.1177/0003122419847165; Workman, J. (2022). Inequality begets inequality: Income inequality and socioeconomic achievement gradients across the United States. *Social Science Research*, *107*, Article 102744. https://doi.org/10.1016/j.ssresearch.2022.102744

44 Hjalmarsson, S. (2018). Poor kids? Economic resources and adverse peer relations in a nationally representative sample of Swedish adolescents. *Journal of Youth and Adolescence*, *47*(1), 88–104; Hjalmarsson, S., & Mood, C. (2015). Do poorer youth have fewer friends? The role of household and child economic resources in adolescent school-class friendships. *Children and Youth Services Review*, *57*, 201–211; Raabe, I. J., La Roi, C., & Plenty, S. (2024). Down and out? The role of household income in students' friendship formation in school-classes. *Social Networks*, *78*, 109–118.

45 Lechner, C. M., & Urban, J. (2025). Inequalities in adolescents' social, emotional, and behavioral skills: Differences across social categories and their intersections. *Learning and Individual Differences*, *118*, Article 102605.

46 Cooper & Stewart, *Does money affect children's outcomes?*

47 Eurostat. (n.d.). Statistics Explained. https://ec.europa.eu/eurostat/statistics-explained/index.php?curid=99141&oldid=534257

48 Eurostat Data Browser. (n.d.). Material and social deprivation rate by age and sex. https://ec.europa.eu/eurostat/databrowser/view/ilc_mdsd07__custom_20675827/default/table. Data retrieved 24 March 2026.

49 Eurostat Data Browser. (n.d.). Material and social deprivation rate by income quintile and household type. https://ec.europa.eu/eurostat/databrowser/view/ilc_mdsd02__custom_20675748/default/table. Data retrieved 24 March 2026.

50 McLaughlin, K. A., Green, J. G., Alegría, M., Costello, E., Gruber, M. J., Sampson, N. A., & Kessler, R. C. (2012). Food insecurity and mental disorders in a national sample of U.S. adolescents. *Journal of the American Academy of Child & Adolescent Psychiatry*, *51*(12), 1293–1303. https://doi.org/10.1016/j.jaac.2012.09.009

51 Eurostat Data Browser. (n.d.). Severe housing deprivation rate by income quintile'. https://ec.europa.eu/eurostat/databrowser/view/ilc_mdho06q__custom_20093130/default/table

52 Dunn, J. R. (2020). Housing and healthy child development: Known and potential impacts of interventions. *Annual Review of Public Health*, *41*(1), 381–396. https://doi.org/10.1146/annurev-publhealth-040119-094050

53 Sano, Y., Mammen, S., & Houghten, M. (2021). Well-being and stability among low-income families: A 10-year review of research. *Journal of Family and Economic Issues*, *42*(S1), 107–117. https://doi.org/10.1007/s10834-020-09715-7

54 Bick, A., Fuchs-Schündeln, N., & Lagakos, D. (2018). How do hours worked vary with income? Cross-country evidence and implications. *American Economic Review*, *108*(1), 170–199. https://doi.org/10.1257/aer.20151720

55 Řimnáčová, Z., & Kajanová, A. (2019). Stress and the working poor. *Human Affairs*, *29*(1), 87–94. https://doi.org/10.1515/humaff-2019-0008

56 Pennerstorfer, A., & Pennerstorfer, D. (2021). Inequalities in spatial accessibility of childcare: The role of non-profit providers. *Journal of Social Policy*, *50*(1), 122–147. https://doi.org/10.1017/S0047279419000990; Macintyre, S., Macdonald, L., & Ellaway, A. (2008). Do poorer people have poorer access to local resources and facilities? The distribution of local resources by area deprivation in Glasgow, Scotland. *Social Science & Medicine*, *67*(6), 900–914. https://doi.org/10.1016/j.socscimed.2008.05.029

57 OECD. (2025). *To have and have not: How to bridge the gap in opportunities*. OECD Publishing. https://doi.org/10.1787/dec143ad-en

58 Guio, A.-C., Frazer, H., & Marlier, E. (2021). *Study on the economic implementing framework of a possible EU child guarantee scheme including its financial foundation: Final report.* European Commission Publications Office. https://data.europa.eu/doi/10.2767/398365

59 OECD. (2019). *PISA 2018 results (Volume II): Where all students can succeed*. OECD Publishing. https://doi.org/10.1787/b5fd1b8f-en

60 Cooper and Stewart, *Does money affect children's outcomes?* Page 18.

61 For example: Hosozawa, M., Bann, D., Fink, E., Elsden, E., Baba, S., Iso, H., & Patalay, P. (2021). Bullying victimisation in adolescence: Prevalence and inequalities by gender, socioeconomic status and academic performance across 71 countries. *eClinicalMedicine*, *41*, Article 101142. https://doi.org/10.1016/j.eclinm.2021.101142; Cosma, A., Molcho, M., & Pickett, W. (2024). *A focus on adolescent peer violence and bullying in Europe, Central Asia and Canada: Health Behaviour in School-aged children international report from the 2021/2022 survey. Volume 2*. World Health Organization, Regional Office for Europe.

62 Badura, P., Eriksson, C., Garcia-Moya, I., Löfstedt, P., Melkumova, M., Sotiroska, K., Wilson, M., Brown, J., & Inchley, J. (2024). *A focus on adolescent social contexts in Europe, central Asia and Canada: Health Behaviour in School-aged Children international report from the 2021/2022 survey, Volume 7*. World Health Organization, Regional Office for Europe.

63 Hjalmarsson, Poor kids?; Hjalmarsson and Mood, Do poorer youth have fewer friends?; Raabe et al., Down and out?

64 Lechner and Urban, Inequalities in adolescents' social, emotional, and behavioral skills.

65 Shutts, K., Brey, E. L., Dornbusch, L. A., Slywotzky, N., & Olson, K. R. (2016). Children use wealth cues to evaluate others. *PLOS ONE*, *113*, Article e0149360. https://doi.org/10.1371/journal.pone.0149360

66 Calculated from: HBSC. Eating Behaviours, (n.d.). https://data-browser.hbsc.org/topics/eating-behaviours/. Data retrieved 8 February 2026.

67 Gautam, N., Dessie, G., Rahman, M. M., & Khanam, R. (2023). Socioeconomic status and health behavior in children and adolescents: A systematic literature review. *Frontiers in Public Health*, *11*, Article 1228632. https://doi.org/10.3389/fpubh.2023.1228632

68 Badura et al., *A focus on adolescent social contexts in Europe, central Asia and Canada.*

69 European Commission. (n.d.). European Child Guarantee, https://employment-social-affairs.ec.europa.eu/policies-and-activities/social-protection-social-inclusion/addressing-poverty-and-supporting-social-inclusion/investing-children/european-child-guarantee_en. Accessed14 March 2026.

70 Council Recommendation (EU) 2021/1004 of 14 June 2021 Establishing a European Child Guarantee, O.J. (L 223) 14 (EU). https://eur-lex.europa.eu/legal-content/EN/TXT/?uri=CELEX%3A32021H1004. Accessed 29 March 2026.

Technical appendix

Sources for the data in the figures and tables in the report are as follows:

All tables and figures

- The report covers 44 OECD and/or EU countries. The full country list and ISO-2 codes are provided at the end of this appendix.
- All charts show available data for all countries, irrespective of whether they are included in the league table.
- Where figures show averages across Report Card countries ('RC average'), these are unweighted means giving equal weight to each country.
- Values labelled as proportions range from 0 to 1 (e.g. 0.50 = 50 per cent). Values labelled as percentages range from 0 to 100.

Table 1: A league table of child well-being

- **Note:** A light blue background indicates a place in the top third of rankings, medium blue denotes the middle third and dark blue the bottom third. The rankings were produced as follows: (1) a z-score was calculated for each indicator (reversed where necessary so that a higher score represents a more positive outcome); (2) the mean of the two z-scores within each dimension was calculated; (3) the means for each dimension were converted to a z-score; and (4) the overall ranking is based on the mean of the z-scores for each dimension.
- **Note:** The league table includes 37 OECD/EU countries that had data of sufficient quality across all six indicators. Four countries with data on two dimensions are included at the bottom of the table but are not in the overall ranking (Australia, Belgium, Norway and the United States). Three countries — Cyprus, Israel and Luxembourg — are excluded due to missing data across several dimensions.
- **Note:** The six indicators are: child mortality rate (5–14 years), overweight prevalence (5–19 years), high life satisfaction (15 years), suicide rate (15–19 years), academic proficiency in maths and reading (15 years), and social skills — making friends easily (15 years).
- **Source:** See Box 1 in the main text.

Figure 1: Distribution of PISA mathematics test scores at 15 years old in three selected countries, 2022

- **Source:** PISA 2022 microdata

Figure 2: Income inequality (P80–P20 ratio), 2023 or most recent available data; child poverty rate, 2024 or most recent available data

Panel A

- Panel A shows the post-transfer P80-P20 ratio between a person at 20 per cent and 80 per cent of the equivalized income distribution
- **Source:** OECD Inequality Database <https://data-explorer.oecd.org/>, except Eurostat Database <https://ec.europa.eu/eurostat/databrowser/view/ilc_di11> (Cyprus and Malta), and data calculated for Uruguay by the UNICEF country office.

Panel B

- Child poverty is measured as the proportion of children (aged 0–17) living in households with equivalised disposable income below 60 per cent of the national median. The poverty gap measures the median shortfall of the poor from the poverty line, expressed as a percentage of the poverty line.

  For EU countries, data are from EU-SILC (Statistics on Income and Living Conditions). The income reference year is typically one year before the survey year (e.g. the 2023 survey reports on 2022 income). Exceptions are Ireland and the United Kingdom, where income is collected for the survey year itself.

  For non-EU countries, national sources are used: Canada (CIS, provided by Statistics Canada), Chile (CASEN), Costa Rica (ENAHO), Japan (CSLC), Korea (SHFLC), Mexico (LIS based on ENIGH), New Zealand (HES), Switzerland (SILC), Turkey (SILC), United States (LIS based on CPS), Uruguay (LIS based on ECH).

  Iceland and the United Kingdom will have updated data in the published version of the report.

  Income data refer to 2023 for 30 EU-SILC countries (where the income reference year is typically one year before the survey year), as well as for Canada, Colombia, Japan, Korea, the United Kingdom, and the United States. Exceptions: income data refer to 2024 for Chile, New Zealand, and Uruguay; to 2025 for Costa Rica; and to 2022 for Mexico. Australia and Israel do not have comparable poverty data. Full details of income reference years and data sources by country are provided in the Data Appendix spreadsheet (Ref year sources sheet).
- **Source:** Eurostat EU-SILC; OECD Income Distribution Database; national statistical offices.

Figure 3: Child mortality rate, 5 to 14 years old, 2024

- The indicator is the probability of dying between exact age 5 and exact age 15, expressed per 1,000 children aged 5. The 2023 estimates reflect the most recent data available from the United Nations Inter-agency Group for Child Mortality Estimation (UN IGME).
- **Source:** UN IGME, <https://childmortality.org/>. Indicator code: CME_MRY5T14.

Figure 4: Rate of overweight, 5 to 19 years old, 2022

- The proportion of children and adolescents aged 5–19 years with a body mass index (BMI) greater than 1 standard deviation above the WHO growth reference median. Values are the average of male and female age-standardised estimates.
- **Source:** NCD Risk Factor Collaboration (NCD-RisC), 2024 Lancet publication. Data downloaded from <https://ncdrisc.org/>.

Figure 5: Rate of child mortality, 5 to 14 years old, by income inequality and child poverty, 2024

- Each point represents one country. The x-axis of the two charts show the P80-P20 income ratio and the child poverty rate respectively from Figure 2. The y-axis is the child mortality rate from Figure 3.
- **Sources:** See Figures 2 and 3.

Figure 6: Rate of overweight, 5 to 19 years old, by income inequality and child poverty, 2022

- Each point represents one country. The x-axis of the two charts show the P80-P20 income ratio and the child poverty rate respectively from Figure 2. The y-axis is the overweight prevalence from Figure 4.
- **Sources:** See Figures 2 and 4.

Figure 7: Children rated by a parent/carer as in very good health by income quintile, European Union, 2024

- The percentage of children aged 1–15 in households with dependent children who report being in very good health, broken down by equivalised income quintile (Q1 = lowest, Q5 = highest). Data cover the 27 EU countries.
- **Source:** Eurostat, ilc_hch12. Year: 2024. Filter: VGOOD health status, households with dependent children (DCH), ages 1–15.

Figure 8: Suicide rate, 15 to 19 years old, 2023 or most recent year

- Suicide rate per 100,000 population aged 15–19 years. Values are 3-year averages using the most recent data available. The year ranges vary by country, from 2014–2016 (Norway) to 2021–2023 (14 countries). Two countries have non-consecutive years: Romania (2019, 2020, 2022) and Portugal (2018, 2019, 2022). New Zealand data (2019-21) are from the national government source rather than the WHO database.
- **Source:** WHO Mortality Database; New Zealand Ministry of Health, <https://tewhatuora.shinyapps.io/suicide-web-tool>.

Figure 9: High life satisfaction, 15 years old, 2022

- 'High life satisfaction' refers to the proportion of students aged 15 who scored higher than 5 on a scale of overall life satisfaction from 0 ('not at all satisfied') to 10 ('completely satisfied'). Data are available for 37 of the 44 Report Card countries. Seven countries do not have comparable PISA 2022 life satisfaction data: Australia, Belgium, Cyprus, Israel, Luxembourg, Norway and the United States.

  Canada values are sourced from the HBSC survey 2021/22 rather than PISA microdata.
- **Source:** PISA 2022 except HBSC 2021/22 (Canada).

Figure 10: High life satisfaction by socioeconomic group, 15-year-olds, 2022

- Survey-weighted proportion of 15-year-olds with high life satisfaction (score > 5 on the 0–10 scale), by within-country socio-economic status quintile. SES quintiles are based on the PISA index of economic, social and cultural status (ESCS). Data cover 34 countries from PISA 2022 microdata.

  Authors' analysis using PISA 2022 weighted microdata.
- **Source:** PISA 2022 microdata.

Figure 11: Social skills, 15 years old, 2022

- The proportion of students aged 15 who agreed or strongly agreed that they make friends easily at school. Data cover 42 of the 44 Report Card countries (Cyprus and Luxembourg are missing).
- **Source:** PISA 2022, Table II.B1.1.4.

Figure 12: Academic proficiency in mathematics and reading, 15 years old, 2022

- The percentage of 15-year-olds who are proficient in both mathematics and reading (at or above PISA Level 2), adjusted for all 15-year-olds in the population (using PISA coverage index 3). Level 2 is the baseline level of proficiency that PISA considers necessary for full participation in modern society. Data cover 43 of the 44 countries (Luxembourg missing).
- **Source:** PISA 2022, Table I.B1.4.45.

Figure 13: Social skills by income inequality and child poverty

- Each point represents one country. The x-axis of the two charts show the P80-P20 income ratio and the child poverty rate respectively from Figure 2. The y-axis is the rate of social skills from Figure 11.
- **Source:** See Figures 2 and 11.

Figure 14: Academic proficiency at 15 years old by income inequality and child poverty

- Each point represents one country. The x-axis of the two charts show the P80-P20 income ratio and the child poverty rate respectively from Figure 2. The y-axis is the academic proficiency rate from Figure 12.
- **Source:** See Figures 2 and 12.

Figure 15: Academic proficiency and social skills by socioeconomic group, by country, 2022

- Data for academic proficiency (Panel A) and social skills (Panel B) are the same definitions as for Figures 11 and 12. The measure of socioeconomic status used is the PISA index of economic, social and cultural status (ESCS). Quintiles are created for each country.
- **Source:** PISA 2022 database.

Figure 16: Academic proficiency by socioeconomic group, average across countries, 2022

- Data shown are the cross-country averages of the data in Figure 15, Panel A.
- **Source:** PISA 2022 database.

Figure 17: Averages and socioeconomic differences in academic proficiency, 2022

- Each point represents one country. The x-axis is the gap in proficiency between the first and fifth quintiles of ESCS (as in Figure 15, Panel A). The y-axis is the proportion of children with basic proficiency in mathematics and reading (as in Figure 12).
- **Sources:** See Figures 12 and 15, Panel A

Figure 19: Percentage of children aged 15 who missed meals due to lack of money, 2022

- The proportion of 15-year-old students who reported that they had missed a meal because there was not enough money to buy food (more than once in the past 30 days, based on PISA item ST258Q01JA). Data cover 31 of the 44 countries. Thirteen countries are missing from both sources: Australia, Austria, Belgium, Costa Rica, Germany, Greece, Israel, Italy, Japan, Luxembourg, Norway, Spain, and Sweden.

  Values for Cyprus and Uruguay are from the PISA compendia (Table I.B1.4.46) as these countries are not in the microdata file. All other values are from authors' analysis of PISA 2022 microdata.
- **Source:** PISA 2022 microdata (ST258Q01JA); PISA 2022 compendia Table I.B1.4.46 for CY and UY.

Figure 20: Neighbourhood quality by whether households with children are living in poverty, European Union, 2023

- The percentage of households with dependent children reporting neighbourhood problems, broken down by whether the household is below or above the 60 per cent of median income poverty threshold. Three types of neighbourhood problems are shown: noise from neighbours or the street, pollution or environmental problems, and crime, violence or vandalism. Data cover approximately 30 EU countries.
- **Source:** Eurostat, ilc_mddw01 (noise), ilc_mddw02 (pollution), ilc_mddw03 (crime/vandalism). Year: 2023. Households with dependent children, by income poverty status.

Figure 21: Socioeconomic segregation between schools, 15-year-olds, 2022

- The social inclusion index is the proportion of total variance in the PISA ESCS index that is within schools (rather than between schools). A higher value indicates that schools are more socially mixed. The segregation index is 1 minus the social inclusion index, representing the proportion of ESCS variance that is between schools. Data cover 42 of the 44 countries (Costa Rica and Luxembourg missing).
- **Source:** PISA 2022, Table I.B1.4.40.

Figure 22: Socioeconomic segregation between schools and socioeconomic gaps in academic proficiency, 15-year-olds, 2022

- Each point represents one country. The x-axis is the segregation index from Figure 24. The y-axis is the average of the mathematics and reading proficiency gap (Q5 minus Q1) from Figure 15. Countries with higher socio-economic segregation between schools tend to have larger SES gaps in proficiency.
- **Source:** PISA 2022 compendia (Tables I.B1.4.40) and calculation from PISA 2022 database.

Figure 23: Socioeconomic segregation between schools and levels of academic proficiency, 15-year-olds, 2022

- Each point represents one country. The x-axis is the segregation index from Figure 24. The y-axis is the average overall proficiency rate (maths and reading combined) from Figure 15.
- **Source:** PISA 2022 compendia (Table I.B1.4.40) and calculation from PISA 2022 database.

Figure 24: Differences in children's nutrition by family affluence, 11 to 15 years, 2021–2022

- The proportion of children aged 11–15 reporting various nutritional behaviours, by low and high Family Affluence Scale (FAS) groups. Values are the average of boys and girls. Five nutritional indicators are shown: daily fruit consumption, daily vegetable consumption, daily breakfast on weekdays, daily soft drink consumption, and daily sweets consumption. Data come from the Health Behaviour in School-aged Children (HBSC) 2021/22 survey.
- **Source:** HBSC 2021/22 survey.

Figure 25: Children doing frequent homework and paid work by family socioeconomic status, 15 years, 2022

Panel A

- Panel A shows the proportion of children who do homework on average for more than one hour per day PISA 2022 question ST296Q04J), in the lowest and highest quintiles of ESCS (see explanation for Figure 10).

Panel B

- Panel B shows the proportion of children who do paid work before or after school (PISA 2022 questions ST294Q04JA and ST295Q04JA), in the lowest and highest quintiles of ESCS (see explanation for Figure 10).
- **Sources:** PISA 2022 database

Country names and codes

ISO-2 Code	Country name
AU	Australia
AT	Austria
BE	Belgium
BG	Bulgaria
CA	Canada
CH	Switzerland
CL	Chile
CO	Colombia
CR	Costa Rica
CY	Cyprus
CZ	Czechia
DE	Germany
DK	Denmark
EE	Estonia
ES	Spain
FI	Finland
FR	France
GB	United Kingdom of Great Britain and Northern Ireland
GR	Greece
HR	Croatia
HU	Hungary
IE	Ireland
IL	Israel
IS	Iceland
IT	Italy
JP	Japan
KR	Republic of Korea
LT	Lithuania
LU	Luxembourg
LV	Latvia
ME	Mexico
MT	Malta
NL	Kingdom of the Netherlands
NO	Norway
NZ	New Zealand
PL	Poland

ISO-2 Code	Country name
PT	Portugal
RO	Romania
SE	Sweden
SI	Slovenia
SK	Slovakia
TR	Türkiye
US	United States of America
UY	Uruguay

Acknowledgements

Innocenti Report Card 20 was researched and written by Gwyther Rees, Eszter Timár, Crisna Cuchcatla Méndez, Maria Rosaria Centrone, Francesca Viola and Alessandro Carraro.

A group of external expert reviewers and UNICEF staff provided quality assurance and support.

External expert reviewers
The authors would like to thank the following peer reviewers for their valuable expert comments and suggestions:

- Aya Abe, Tokyo Metropolitan University, Japan
- Miles Corak, Haydeeliz Carrasco and Thomas Liess, The Graduate Center, City University of New York, United States
- Terje Andreas Eikemo and Ayeshat Ibitoye, Centre for Health Equity Analytics (CHAIN), Norwegian University of Science and Technology (NTNU), Norway
- Anne-Catherine Guio, Luxembourg Institute of Socio-Economic Research, Luxembourg
- Maggie Lau, Lingnan University, Hong Kong SAR
- Kate Pickett, University of York, United Kingdom
- Diego Sánchez-Ancochea, University of Oxford, United Kingdom

UNICEF review and expertise
The authors would like to acknowledge and thank the essential and valuable support of many staff in UNICEF National Committees and Country Offices throughout the process.

The following UNICEF staff members also provided expert input: Omar Abdi, Marta Arias, Anna Gabrielle Alejo, Terence Hamilton, Zeinab Hijazi, Lucia Hug, Nikita White and Jenn Yablonski.

At UNICEF Office of Strategy and Evidence – Innocenti the following colleagues contributed to this project: Patricia Arquero Caballero, Miguel Buontsolas Ferrer and Lara Stefanizzi (administrative support); Brian Keeley (communications); Kathleen Edison (design); Sahiba Minhas Turgesen (editorial); Cécile Aptel, Celine Little, Bo Viktor Nylund and Ramya Subrahmanian (overall guidance and support).

Child participation
The authors would like to extend particular thanks to the children in Chile, Colombia, Ireland, Italy, Spain and Switzerland who contributed their views and ideas on inequalities to this report, and the staff in National Committees and Country Offices who supported this process.

Editing: Tate & Clayburn
Publication layout: Alessandro Mannocchi
Cover photo: © UNICEF/UNI201082/Etges

About us

UNICEF, the United Nations agency for children, works to protect the rights of every child, everywhere, especially the most disadvantaged children and in the toughest places to reach. Across more than 190 countries and territories, we do whatever it takes to help children survive, thrive, and fulfil their potential.

UNICEF Office of Strategy and Evidence – Innocenti accelerates progress for children by working to ensure that policies and programming are informed by high-quality evidence. As the global custodian of child-related official statistics, it works closely with governments and partners to strengthen national statistical systems. Through world-leading data, research and foresight, it underpins UNICEF's global leadership on children's rights and serves as the organization's hub for setting strategy and monitoring programmes. With the active engagement of young people and other partners, it supports advocacy and dialogue aimed at improving the lives of children everywhere.

Published by
UNICEF Office of Strategy and Evidence – Innocenti
Via degli Alfani, 58
50121, Florence, Italy

Email: innocenti@unicef.org
Web: unicef.org/innocenti | data.unicef.org
Social media: @UNICEFInnocenti on Bluesky, Instagram, LinkedIn, and YouTube

Suggested citation
UNICEF Office of Strategy and Evidence – Innocenti, *Unequal chances: Children and economic inequality, Innocenti Report Card 20*, UNICEF Innocenti, Florence, May 2026.

for every child, **answers**

unicef

for every child