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**Causes of Health Inequalities and Its Educational Consequences**

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## Summary

Origin-related educational inequalities are now well documented, but are still poorly understood in terms of the underlying mechanisms. To explain the social and ethnic inequalities in educational success, empirical educational research is increasingly focusing on early childhood, with particular interest being given to the compensatory role of the early attendance of day care centers. Comparatively few research papers are currently available on the inequality relevance of pregnancy and (premature) childbirth as well as of the regular attendance of preventive medical examinations for future educational opportunities. The dissertation therefore focuses on inequalities in early life between different social and ethnic groups and asks about their long-term educational impact.

All in all, three questions are examined theoretically and empirically. Firstly, it has to be clarified to what extent health differences exist between newborns of different social and ethnic origin and how these can be explained. Second, it is being examined why parents differ in their participation in health check-ups for children, depending on the level of formal education. Finally, thirdly, it is being investigated whether educational inequalities at the threshold of school enrollment, primary education (primary grades) and secondary education (educational opportunity) can be explained by pregnancy-related factors and early childhood health differences.

In the theoretical part of the thesis, the effects of initial disadvantages for later educational attainment are considered based on the life cycle theory, linking older and newer inequality sociological perspectives on health and education. In the empirical part of the thesis, which consists of three main chapters, the research questions are answered with the help of regression analyses based on survey data (German Socio-economic Panel, Child and Youth Health Survey). The findings show health-related differences even among newborns depending on social and ethnic origin, with the greater likelihood of premature birth among migrants being fully explained by social background of the family and lifestyle during pregnancy. With regard to the second question, it can be seen that parental preventive action is also socially structured to the detriment of children from socially less privileged (migrant) families. The presumption that the differences in preventive action can be explained by different levels of social capital is not confirmed; even after accounting for controls, the origin specific prevention differences persist.

With regard to the third and central question of the consequences of early health inequalities, the analyses show that early disadvantages favor the deferral of school attendance, low primary grades

in German language (but not in mathematics) as well as unfavorable educational positions in secondary education. Children from lower social classes as well as children from a migrant background are particularly disadvantaged, with important gradations depending on ethnicity. Children from ethnic German families (Spätaussiedler) are more successful in school compared to Turkish children. Multivariate analyses show that pregnancy-related variables (smoking, premature birth, postnatal health), but less so postnatal factors (formal childcare and prevention services) mediate differences in school success between immigrant and non-immigrant children. Also, social class has a relatively strong explanatory power, while family language is only of marginal importance. Finally, by simultaneously examining pre- and post-natal conditions, ethnic differences in education can be fully explained, while the influence of social origin on educational success persists. Overall, the findings of the present work contribute to a broader understanding of origin-related differences at the onset of life, and support the central biographical assumption that initial disadvantages have longer-term implications for educational attainment.