

Child Rights and Child Poverty in Developing Countries

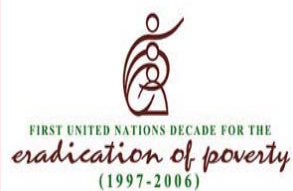
Summary Report to UNICEF

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1. Introduction

In recent years, UNICEF reports, such as *The State of the World's Children 2000*, continue to emphasise the grim truth that poverty denies the most basic rights of women and children – as set out in the Universal Declaration on Human Rights and, more elaborately, in the UN Convention on the Rights of the Child. Poverty damages survival and development. It can cause disability and early death. It can delay or even permanently obstruct children's inclusion and participation in society. We have learned, from widely-based research, that basic social services for children are a key element in ensuring the success of poverty reduction programmes. Another element is the level of family resources required for minimal development which explains why UNICEF has argued that "*poverty reduction begins with children*".

Some trends in the 1980s and 1990s have deepened public concern. Since 1987, the number of people in developing countries other than in East Asia and the Pacific, with less than \$1 a day, has increased by 12 million a year. In many countries, the extreme poor have been "*left further behind*". In addition, "*the evidence is compelling that the 1990s saw a widening in the gap between rich and poor countries as well as between rich and poor people within countries, both in terms of incomes and social outcomes.*"¹

The World Declaration and Plan of Action, adopted by the World Summit for Children, set forth a vision of a "*first call*" for children by establishing seven major and 20 supporting goals that were quantifiable and considered achievable by the year 2000. This optimism depended on favourable conditions including an early breakthrough in specifying numbers at risk in different countries and in causes of deprivation and non-fulfilment of rights that could lead directly to changes in policy.

This report pursues three related objectives. The first is to conceptualise further the notions of child poverty and child rights, identify their relationship and measure their dimensions. The second is to estimate the number of children at risk globally and by region, addressing the methodological problems of measuring both the extent and severity of child poverty, as well as the numbers without access to internationally agreed rights. The third objective is to review appropriate policies to reduce child (and overall) poverty and extend access to rights.

The definition of child poverty involves two related elements - conceptualisation and measurement. Should child poverty be defined independently or should it be defined in relation to the adults in the household? According to the Convention on the Rights of the Child (CRC), the answer is that it should be defined independently. The CRC gives children the rights to survive, develop, participate and be protected. Articles in the Convention as well as in the Universal Declaration are concerned with living standards and aspects of material and social deprivation. The concept of poverty can be defined in relation to these rights, so that estimates of child poverty may be constructed on the basis of access to a number of specific economic and social rights. Thus, direct and indirect indicators like percent of population below the national and international poverty lines, GDP per capita of the poorest 20%, infant and child mortality rates, low birth-weight rate, percent of one-year-olds fully immunised, percent of children not reaching education grade 5, daily per capita rate of calories intake, percent access to safe drinking water and sanitation and ante-natal

¹ UNICEF (2000), *Poverty Reduction Begins with Children*, New York, UNICEF, pp. 9, 17, and 45.

care received provide illustrations of the data that were examined in preparing this report.

2. Conceptualising Child Rights

Concern about the fulfilment of human rights has grown steadily since the Second World War. The Universal Declaration of Human Rights applies to everyone – whatever their age, however, only two of its articles include specific reference to children (education and social protection during childhood). The United Nations Convention on the Rights of the Child, adopted unanimously by the UN General Assembly in 1989, sought to remedy this omission. International agencies, governments and scientists have been slow to catch up with the implications of the Convention, although 191 governments ratified it in the ten years following adoption.

In 2001, discussion of child rights tends to deal with particular rights rather than rights representative of the Declaration or the Convention as a whole. Steps remain to be taken to bring different indicators together to permit measures to be taken of the numbers of children in different countries lacking access to a number of rights or to rights in general. UNICEF has decided, as an experiment, to examine indicators of development collected and published by international agencies such as the World Bank, UNICEF and UNDP, to find whether a ‘conventional’ international measure can be constructed and whether and why that measure falls short of what is desirable.

Measuring Child Rights

Graphic examples of non-fulfilment of individual child rights are often given in national and international reports, arousing anger and compassion. However, information on conditions in each country is rarely assembled in a form that can be easily generalised and overall severity compared. The fact that children may be in a worse plight than adults is seldom investigated systematically to discover the extent of that situation. A more distinctive approach on behalf of children is called for.

The collection of statistics has a long history. Efforts have been made repeatedly to standardise certain sets of information to allow generalisations to be made about conditions that vary widely across the world. International agencies produce reports, many on an annual basis, to improve the level of scientific and public knowledge.

There are three problems in looking for information on child rights. Conceptions made on the basis either of international agreement or on other grounds have not been operationalised in a potentially measurable form and sub-divisions of those rights have not been distinguished. In addition, much of the relevant information is indirect: it applies to the household as a whole or to adults, especially parents, in the families to which the children belong.

Two Practicable Courses of Action

How might these problems be brought under control? A preliminary step is to search the reports from the international agencies for useful indicators of conditions and then consider whether some of them can be re-assembled to give a more rounded picture of the fulfilment or non-fulfilment of child rights.

The Universal Declaration on Human Rights has 30 Articles affirming a wide range of rights – to life, liberty and security; freedom from torture and degrading treatment; non-discrimination; freedom from arbitrary arrest, detention or exile; equality before the law; freedom of movement; property ownership; freedom of thought, conscience and religion; equal access to public service; social security; work; reasonable limitation of working hours; just remuneration and social protection; education; standard of living adequate for health; special care and assistance in motherhood

and childhood; and free participation in cultural life. We decided to group the Articles of the Declaration into seven categories, with indicators of the relative satisfaction of those rights drawn from the statistical data collected by the international agencies. To these seven categories it was found possible to assign a total of 10 'direct' measures and 17 'indirect' measures of child rights (the latter applying to adults as well as children). The indicators themselves had to be re-cast to achieve consistency for purposes of comparison between countries and possible aggregation. The results for two countries, compared with data for high-income countries, are illustrated in Table 1.

Table 1: Indicators of Children's Human Rights (Direct and Indirect): High and Low Income Countries Compared

Human rights	Selected indicators	Kenya	India	All "high income" countries
Right to life [Article 3]	% infant mortality (per 100 live births)	7.5	6.9	0.6
	% under-five mortality (per 100 live births)	11.7	10.5	0.6
	% not expected to survive to age 40	30.6	15.8	3.0
	% HIV/Aids (15-49)	11.6	0.8	0.4
Right to non-discrimination [Articles 2 and 7]	Female literacy as % male rate	84	65	Not available
	Female primary age group enrolment as % male	105	86	100
	Female secondary age group enrolment as % male	89	68	100
Right to an adequate standard of living [Article 25]	Malnourished – Underweight children (under 5)	22	53	Not available
	% with less than \$1 per day per person	26	44	Not available
	% with less than \$2 per day per person	62	86	Not available
	% below national poverty line	42	35	Not available
	Calories per person per day as % high income countries	58	73	100
Right to social security and economic social and cultural rights [Article 22]	Grams protein per person per day as % high income countries	49	49	100
	% with no access to safe water	56	19	
	% with no access to health services	-	25	
	% with no access to sanitation	15	71	
	% with no access to immunisation (TB and measles)	6 (TB) 29 (measles)	21 (TB) 34 (measles)	- 11 (measles)
Right of equal access to public services [Article 21]	Number of people per doctor	6,700	2,100	400
	Number of people per nurse	4,400	-	-
	% GDP public expenditure on education	6.5	3.2	5.0
	% GDP spent on health	2.2	0.6	6.4
Right to education [Article 26]	% of relevant age groups not in primary ed.	35.0	22.8	0.5
	% ... not in secondary. Education	38.9	40.3	4.4
Right to participate in cultural life [Article 27]	% youths illiterate	6.7	29.1	Est. 2 or 3
	% no. people per telephone line	111	45	Less than 2
	% no of people per television	47	14	Less than 2

Sources: UNDP (2000), Human Development Report, New York and Oxford, Oxford University Press, Tables 1, 4, 9, 10, 11, 12, 16, 23, 28, 29; World Bank (2001), World Development Report 2000/2001: Attacking Poverty, New York, Oxford University Press, Tables 2, 4, 6, 7.

The table illustrates the wide variations that can be found. For example, although Kenya has an under-five mortality rate only slightly higher than India, the percentage of population not expected to survive to age 40 is twice as large. By contrast, Kenya spends a higher percentage of GDP than India on education and health and has a better record on access to sanitation and literacy.

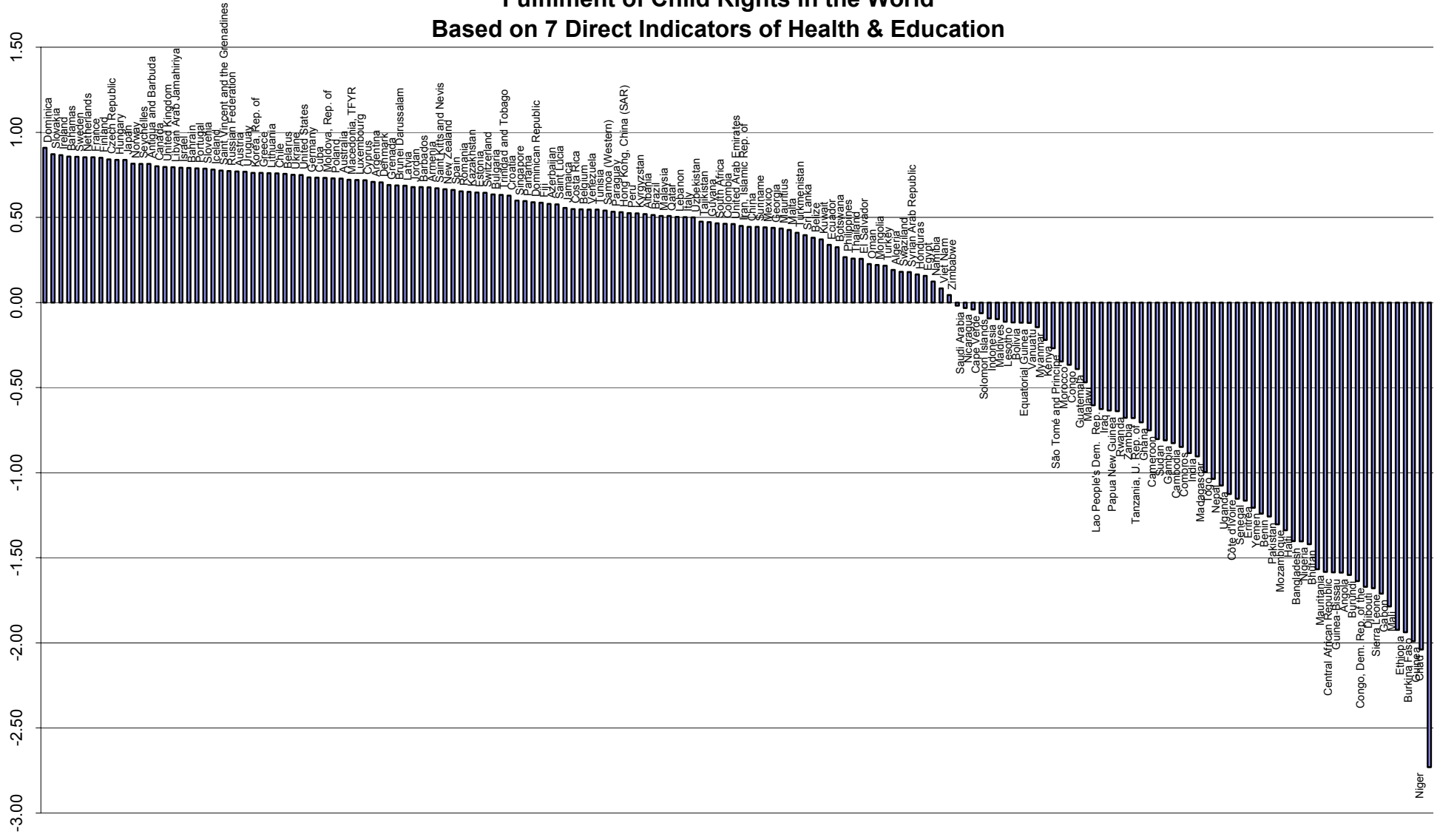
We decided to single out the 10 'direct' indicators of child rights among the 27 direct and indirect indicators listed in Table 1 for examination as possible components of a single index. Following investigation, we decided that one of these (immunisation against measles) posed particular difficulties of interpretation and so was excluded. Infant and under-five mortality in each country were found to be highly correlated so we decided to include only under-five mortality in the index. In addition, primary school and secondary school enrolment were also found to be highly correlated, so they were combine into a single indicator.

We then aggregated the seven resulting individual indicators so that countries and regions could be compared overall in terms of the fulfilment or non-fulfilment of as many as possible of the principal Articles of the Universal Declaration. Within each region, countries were ranked on a continuum standardised by comparable fulfilment of child rights – very much above average, above average, average, below average, and very much below average. An illustration for Sub-Saharan Africa is given in Figure 1, which shows remarkable disparities. Countries which were very much below average for the region of 47 countries included Niger, Liberia, Chad, the Democratic Republic of the Congo, Ethiopia, Guinea, Nigeria, Somalia and Burkina Faso. Countries which were very much above average included the Seychelles, Mauritius, South Africa, Botswana, Swaziland, Namibia and Cape Verde.

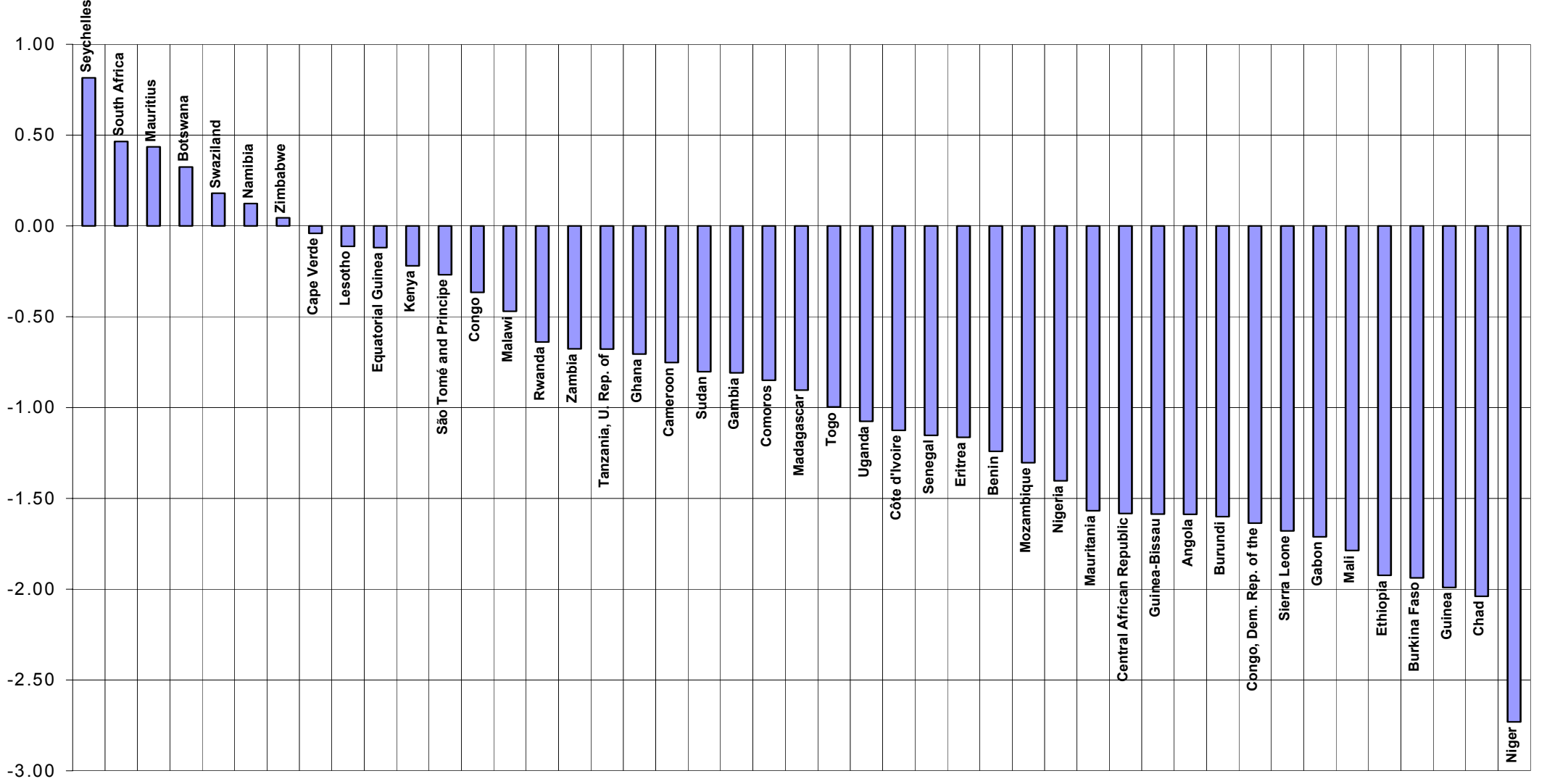
An example of the spread of results is given by looking at under-five mortality. In the countries very much below average, under-five mortality ranged from 16.5 to 28.0 per 100 live births whereas, in those countries that were very much above average, such mortality ranged from 1.8 to 9.0. Again, the percentage of youths estimated to be illiterate varied for the first group between 15.3 and 78.4 and for the second group between 6.5 and 12.6. We must emphasise that, had information been available for other child-centred indicators – like HIV/Aids, the results shown by the chart would have been different.

Our next step was to reproduce the results for other regions of the world and Figure 2 provides an illustration. In a subsequent report, we will set out the detailed findings with full commentary on the conclusions that may be drawn substantively and methodologically. Our belief is that, while the method of approach is necessarily limited because the information that is available for most countries is neither as extensive nor as reliable as scientists would wish, it brings new focus to the analysis of trends in human rights. The method generates great interest in the results for different countries at similar levels of development. It provokes ideas about the improvements that can be made in the comparative analysis of the situation within and between different regions of the world.

Fulfilment of Child Rights in the World Based on 7 Direct Indicators of Health & Education



SubSaharan Africa - Rankings based on 7 direct indicators of child health & education



The methodology will be discussed in detail in the final report. Data were initially analysed at a regional level² to see how countries within regions compared. We calculated the mean and standard deviation for each of the seven indicators and produced Z-scores $[(x-\text{mean})/\text{SD}]$ for each country. The Z-scores for each indicator show us how far a country is above or below the regional mean, providing a basis for comparison of 'performance'. The Z-scores for each country across the different indicators³ were then added together to produce a 'Total Z-score'. Since some countries did not provide data for all seven indicators, this total Z-score was divided by the number of indicators each country had provided data for, to produce a 'Final Score'⁴ which was used to rank the countries and represents the country's performance within its region over a set of seven direct indicators of progress on child rights.

These steps were then repeated, at world level, using a world mean and standard deviation to produce Z-scores for all countries. A final score for each country was produced and these were ranked to produce Figure 2.

Using the UN CRC

A second practicable course of action is to build on the UN Convention on the Rights of the Child. The shortcomings of present methods of assessing and monitoring rights are immediately relevant. Relatively little 'indicator' information can be added on a cross-national basis from what can be gleaned from the data discussed above which are relevant to the Universal Declaration of Human Rights. We decided to organise the rights listed in the Convention into 10 representative categories. The decision was based on an innovative report by the UNICEF Division of Evaluation, Policy and Planning in 1998⁵ in which Articles of the Convention were grouped into 15 categories. A number of possible indicators in each category were proposed although some of these were not available. A cluster of four general principles were considered to be the essential, over-arching, themes of the CRC which guide the realisation of all the rights of the child: the principle of non-discrimination (Article 2); the principle of the best interests of the child (Article 3); the principle of respect for the child's views and right to participate (Articles 12-15); and the principle of the child's right to survival and development (Article 6).

Whilst a wide range of information is desirable, it seems important to build on such information as is already available or might become available in the early future and yet also to insist on representing a wide selection of the Articles of the Convention. A list of 10 categories is set out in Table 2. Some data are available and other data, on the basis of country surveys, could be added soon. Because of the swift recent development of country demographic and health surveys and anti-poverty surveys, there is a reasonable prospect of adding to the number of countries with a minimal range of information about child rights. We are conducting research from a number

² Regions were those defined by UNICEF. These were South Asia, East Asia, Sub-Saharan Africa, Middle East and North Africa, Central and Eastern Europe/Commonwealth of Independent states/Baltic States, Latin America and Caribbean, and Industrialised Countries.

³ For two of the indicators (female primary and secondary enrolment as % male) we produced the Z-score by using $[(\text{mean}-X)/\text{standard deviation}]$ to ensure the results all flowed in the same direction - i.e. a higher percentage score for these indicators was considered a good, while high percentage scores for the other indicators (% not immunised, % malnourished etc.) were considered bad.

⁴ Had we divided the total Z-scores by 7, it would have been the equivalent of replacing the missing values by the regional averages.

⁵ Division of Evaluation, Policy and Planning (1998), *Indicators for Global Monitoring of Child Rights*, summary report of an international meeting sponsored by UNICEF 9-12 February 1998, New York, UNICEF.

of surveys and, after further consultation and experiment, the list in Table 2 may be modified and confirmed.

Table 2: How rights from Articles in the Convention on the Rights of the Child can be clustered, with possible indicators⁶

Rights Cluster	Examples of Possible Indicators
Rights of freedom of expression and thought and to exchange information and ideas [Articles 13 and 14]	
Right of access to information in the media and books to promote social and mental well-being [Articles 13 and 17]	Percentage of children and mothers with access to or possession of information mediums. Source: Demographic and Health Surveys (DHS).
Right to protective measures against violence, maltreatment, injury, exploitation, abuse, including sexual abuse, illicit drugs and deprivation [Articles 19, 20, 32, 33, 34 and 37]	Number of children economically active. Source: International Labour Office. ⁷
Rights in disablement of assistance for special needs and actively participate in community life [Article 23]	
Right to highest attainable standard of health and access to adequate nutritious foods, clean drinking water, pollution free environment and preventive and curative health care services [Article 24]	Percentage of children immunised; Percentage of untreated incidents of diarrhoea and the form of treatment received; Percentage of malnourished children. Sources: DHS and MICS
Right to benefit from social security, incl. Social insurance [Article 26]	Percentage of population protected by family benefits. Sources: ILO ⁸
Right to standard of living adequate for physical, mental, spiritual, moral and social development and material assistance and support programmes – particularly for nutrition, clothing and housing [Article 27]	
Right to free primary education and where appropriate free secondary education to enlarge access to education [Article 28]	Number of children between 7-18 years who have not received any primary or secondary education. Source: DHS Proportion of children aged 10-12 years reaching a specific level of learning achievement in literacy numeracy and life skills. Source: MICS
Right to recreational activities and full participation [Article 31]	
Right to measures promoting recovery and social integration following neglect, abuse, exploitation, suffering in armed conflict, torture or other degrading treatment. [Article 39]	Percentage of under eighteens in armed force. Source: Save the children database ⁹

What conclusions may be drawn from the method of approach?

- 1) Despite growing public discussion of rights, little attempt has been made to group available information so that the situation in different parts of the world may be strictly compared. If this were done, commentaries on shortcomings would be

⁶ The purpose of Table 2.1 is to demonstrate the diverse nature of the Convention and how rights can be clustered (with illustrations of indicators of compliance or fulfilment). Table 2.2 below develops this by specifying those rights which can be measured in relation to material and social deprivation and, hence, poverty.

⁷ Data is given for regions. Source: <http://www.ilo.org/public/english/standards/decl/download/global3/part1chapter2.pdf>

⁸ Data coverage of nations is incomplete.

⁹ Data coverage of nations is incomplete. Source: <http://www.rb.se:8082/www/childwar.nsf/HTML/Forsta?OpenDocument>

more robust and deficiencies in data collection clearly exposed. Cumulative assembly of information for different countries would also call attention to the severity of overall conditions in certain countries - an 'index' of access to rights would be constructed. One problem is unwillingness on the part of the governments of high-income countries to collect, or publish, certain kinds of information on a directly comparable basis about human rights in their own territories. This includes forms of discrimination, subjection to inhumane or degrading treatment, rights of asylum seekers, right to social security and to an adequate standard of living; and access to public services. A partial consequence of this is that access to rights, when selectively measured, is shown to be greater in high-income than in low income countries in all cases.

- 2) There are relatively few examples of 'direct' measures of fulfilment or non-fulfilment of particular child rights. Although our list may be incomplete, there are only 10 examples of direct measures in Table 1: infant mortality; child mortality; underweight children; female primary age-group and secondary age-group enrolments as percentages of the relevant male enrolments; percentage of relevant age-groups in primary and secondary education; percentage of youths illiterate and percentage with no access to immunisation (TB and measles). The other 17 measures are indirect – applying to adults as well as children.
- 3) There are few (if any) data about access to certain forms of child rights. They include subjection to cruel, degrading or inhuman treatment; subjection to arbitrary family interference and lack of social protection of family; special care and assistance in childhood; access to asylum free from persecution; social security and economic, social and cultural rights indispensable for dignity and free development of personality.
- 4) Data about access to different forms of rights is difficult to accumulate and therefore to generalise. This is partly a question of converting existing information into a form relevant to accumulation. Thus, some data are measures of positive access to rights - like access to educational enrolment, whereas other data are measures of negative access to rights - like population without access to safe water, health services and sanitation. In Table 1, an attempt has therefore been made to begin the process of transforming variables into comparable and reasonably consistent categories.

3. Measuring Child Poverty in the Developing World

There is currently no consistent estimate of the extent or severity of child poverty in developing countries. The World Bank has not produced any estimates of child poverty using its 'dollar a day' thresholds except for a few countries in Central and South America. UNICEF has estimated that approximately half of all those living below the World Bank's various 'poverty thresholds' are likely to be children (e.g. aged less than 18) but this is a global estimate produced using indirect methods and is not decomposable to region or country level. A different methodology is needed to estimate child poverty at region and country level.

What is poverty?

Social science research has shown that all cultures seem to have a concept and definition of poverty although these definitions often vary (Gordon and Spicker, 1999). A major problem with many previous attempts to measure poverty on a global scale is that there was no agreed definition of poverty. This situation changed at the World Summit on Social Development in Copenhagen (UN, 1995). Among the innovations agreed in the 1995 *Copenhagen Declaration and Programme of Action* was the preparation of national anti-poverty plans based on measures in all countries of 'absolute' and 'overall' poverty. The aim was to link (if not reconcile) the difference between First and Third World conceptions, allow more reliable comparisons to be made between countries and regions and make easier the identification of acceptable priorities for action. In developing anti-poverty strategies, the international agreement at Copenhagen was a breakthrough which resulted in the governments of 117 countries agreeing to the two definitions of absolute and overall poverty.

Absolute poverty is defined as "a condition characterised by severe deprivation of basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information. It depends not only on income but also on access to services."

Overall poverty takes various forms, including "lack of income and productive resources to ensure sustainable livelihoods; hunger and malnutrition; ill health; limited or lack of access to education and other basic services; increased morbidity and mortality from illness; homelessness and inadequate housing; unsafe environments and social discrimination and exclusion. It is also characterised by lack of participation in decision-making and in civil, social and cultural life..."

Previous measures of poverty by international organisations

Three international agencies – the International Fund for Agricultural Development (IFAD), United Nations Development Programme (UNDP) and the World Bank have produced estimates of world poverty. All three use very different approaches to measuring poverty and, unfortunately, none of them have attempted to measure the extent of child poverty.

International Fund For Agricultural Development

The IFAD is one of the world's foremost authorities on rural poverty and it has constructed four poverty indices which are designed to measure rural poverty and deprivation (Jazairy *et al*, 1995):

1. The **food security index** (FSI) - attempts to measure the composite food security situation of a country.
2. The **integrated poverty index** (IPI) - is an economic index which is calculated by combining the headcount measure of poverty with the income-gap ratio, income distribution below the poverty line, and the annual rate of growth of per capita GNP.
3. The **basic needs index** (BNI) - is designed to measure the social development of rural areas. It is composed of an education index and a health index.
4. The **relative welfare index** (RWI) – is the arithmetic average of the other three indices (FSI, IPI, BNI).

United Nations Development Programme

The UNDP has produced a large number of different indices that are designed to measure poverty, inequality and other developmental issues. The Human Development Index (HDI) is a composite index based on three indicators: longevity - as measured by life expectancy at birth; educational attainment - as measured by a combination of adult literacy (two thirds weight) and combined primary, secondary and tertiary enrolment ratios (one-third weight); and standard of living - as measured by real GDP per capita (PPP\$).

The 1997 Human Development Report defined poverty within the human development perspective and introduced the term 'human poverty', drawing heavily on Sen's 'capability' concept. While the HDI focuses on the average achievements of a country, the Human Poverty Index (HPI) focuses on the most deprived. The HPI is made up of five weighted components (UNDP, 1997):

1. The percent of people expected to die before age 40
2. The percent of adults who are illiterate
3. The percent of people with access to health services
4. The percent of people with access to safe water
5. The percent of children under five who are malnourished

Aspects of human poverty that are excluded from the index due to absence of data or measurement difficulties, are lack of political freedom, inability to participate in decision making, lack of personal security, inability to participate in the life of the community and threats to sustainability and intergenerational equity.

UNDP also gives information on 'income' measures of poverty in different countries, using World Bank data rather indiscriminately on \$1, \$2 or \$4 a day (and even \$14.4 a day in the case of the U.S.) and has begun to distinguish 'extreme' poverty and poverty (UNDP, 1998; 1999).

World Bank

The World Bank has produced the most influential measurement of World Poverty and devoted its annual reports in both 1990 and 2000 to poverty eradication issues. The World Bank produces a *"universal poverty line [which] is needed to permit cross-country comparison and aggregation"* (World Bank, 1990, p27). Poverty is defined as *"the inability to attain a minimal standard of living"* (*ibid*, p26). Despite acknowledgement of the difficulties of capturing the contribution to standards of living of public goods and common-property resources in any measure of poverty, the World Bank settled for a measure which is 'consumption-based' - and which comprises *"two elements: the expenditure necessary to buy a minimum standard of nutrition and other basic necessities and a further amount that varies from country to country, reflecting the cost of participating in the everyday life of society."* (World Bank, 1990, p26; our emphasis).

The first of these elements is *"relatively straightforward"* because it could be calculated by *"looking at the prices of the foods that make up the diets of the poor"* (*ibid*, pp26-27). However, the second element is *"far more subjective; in some countries indoor plumbing is a luxury, but in others it is a 'necessity'"* (*ibid*, p27). Surprisingly, for operational purposes, the second element was set aside. The first was assessed as PPP (Purchasing Power Parity) - \$370 per person per year at 1985 prices for all the poorest developing countries. Those with incomes per capita of less than \$370 were deemed 'poor', while those with less than \$275 per year were 'extremely poor'. This approximate \$1 of consumption per person per day poverty line was chosen from a World Bank study of minimum income thresholds used in the 10 'poorest' countries to assess eligibility for welfare provision (Ravallion *et al*, 1991).

The World Development Report on Poverty in 2000 used a similar methodology to revise the poverty line estimate to \$1.08 per person per day at 1993 Purchasing Power Parity (Chen and Ravallion, 2000).

No allowance was made by the World Bank in either 1990 or 2000 for the second 'participatory' element of its poverty definition. The logic of the Bank's own argument is not followed, the minimum value of the poverty line is underestimated and the number of poor in the world are therefore also underestimated.

There are particular strengths in what the World Bank's initial approach. The 1985 standard is simple to comprehend and apply. It does not depend on the arduous and continuous collection and compilation of data about types as well as amounts of resources, changing patterns of necessities and changing social construction of standards of living. However, there are weaknesses that are now becoming pronounced. Measures of the extent of poverty are often based on general statistics of national income or expenditure instead of survey data about individual and family conditions. Need is too narrowly interpreted as a lack of 'material' goods like food and fuel instead of a lack of capacity to fulfil social roles and relationships. What is claimed to be a 'global' poverty line turns out to be intended only for the poorest nations, with different measures (\$2 and \$4 a day) being used for two groups of next-to-poorest countries. It is not an international standard open to scientific investigation and verification.

The biggest problem is that the second part of the Bank's definition is not costed and added into the equation. Even the first part, surprisingly, has not been confirmed in follow-up studies. Variations in the sheer quantity of the diet required among populations with widely different work and other activity obligations and customs, as well as in the types of diet socially preferred or indeed available in local markets, and at what cost, are left unexplored. The type, number and amounts of necessities

other than food are not listed. These points apply in particular to children – who depend on a level of income (including income in kind) for growth, development, protection and social inclusion.

The level must therefore attract demanding scrutiny and justification. If the logic of the Bank's initial definition were to be consistently followed, the minimum value of the poverty line would necessarily be higher and the number of poor in the world much higher than currently estimated.

One recurring problem has been the lack of quantitative illustration of the poverty problems of different types of family or household. Information was collected about average consumption of calories or protein by males and females of different age, including children, but the distribution by income or occupational status or by reference to other features of standard of living, such as housing, conditions of work, environmental and sanitary facilities and access to health and education, has not comprised an essential part of the investigative strategy.

Our conclusion is that the World Bank's operational definition of a poverty line is not suitable for international comparison. It is therefore an unreliable basis for analysis of the nature of child poverty, causes of trends and the construction of effective anti-poverty policies. An alternative approach is available from the 1995 World Summit for Social Development – namely to build measures of 'absolute' and 'overall' poverty for purposes of consistent international comparison and analysis.

4. An International Poverty Line - the Need for a New Approach

As time goes on, social polarisation in many countries is making the construction of an international poverty line ever more necessary – because the poorest conditions in the world now apply conspicuously to some sections of population in middle income and even high income countries.

This structural 'bias' cannot be remedied by economic growth governed only by market considerations but by 'redistribution with growth'. According to such evidence, high priority in anti-poverty policies plainly has to be given to children, elderly and disabled people who cannot gain paid employment and those in the labour market whose earnings are insufficient to ensure a household income adequate for health, well-being and social viability.

Extreme Impoverishment: the Former Planned Economies - the Case of Kyrgyz

In the preparation of this report, the extreme impoverishment of children in one country was examined. The republics composing the former Soviet Union betray extreme cases of impoverishment - among both children and adults. If global market forces are producing a more unequal distribution of wealth within as well as between countries, as testified in an increasing number of agency reports, then extreme cases like these deserve as much attention as cases in Sub-Saharan Africa. Extremes can be the real test of theory as well as of policy amelioration.

This report shows that child poverty in the transitional economies should be given priority along with the developing regions in the elucidation of trends in world poverty and of causes and severity. Economic and social changes have involved social polarisation of a dramatic kind.

UNICEF was one of the first organisations to capture a sense of the depths of the social crisis that had so quickly developed.¹⁰ The four years 1989-1993 had *"aggravated the situation of children and particularly adolescents..... Child poverty rates have generally risen much faster than for any other group because of the rapid spread of unemployment and low-paying jobs, together with the less than proportional indexation of child allowances."*¹¹

On behalf of UNICEF, a special analysis of survey data from the Republic of Kyrgyzstan was carried out to distinguish poverty rates in households with and without children. The 1996 poverty line for Kyrgyz, according to the definition used by the National Statistical Committee, was \$1136 per capita and "severe poverty" was arbitrarily fixed at half this amount – namely \$568.

Table 3 shows that more households with children were in poverty than those without. Above average figures were registered for lone parents and families with three or more children. Families with one or two children had below-average poverty rates (though still higher than households without children). Altogether nearly 45% of households were in poverty (defined as half the mean household value).

Table 3: Kyrgyz - Poverty in different types of household (%)

Type of household	Households	Individuals in Households
<i>With children</i>		
1 adult, children	50.0	55.3
2 adults, 1-2 children	37.3	38.5
2 adults, 3+ children	70.6	71.2
3+ adults, 1-2 children	44.1	46.9
3+ adults, 3+ children	65.1	66.1
<i>No children</i>		
1 adult	21.4	21.4
2 adults	25.0	25.0
3+ adults	28.0	28.5
All types	44.6	52.4
Total number poor	869	4,708
Total number in sample	(1,947)	(8,988)

The extent of poverty was greater in urban than rural households – nearly 55% compared with 28%. However, the rate in rural households with two adults and three or more children was 77%.

Those experiencing severe poverty (less than one quarter of the mean household income) followed a corresponding pattern. The rate of severe poverty for rural households with two adults and three or more children was 35%.

¹⁰ UNICEF (1994), *Crisis in Mortality, Health and Nutrition: Central and Eastern Europe in Transition: Public Policy and Social Conditions*, Economies in Transition Studies, Regional Monitoring Report No. 2, Florence, UNICEF.

¹¹ *Ibid*, pp5 and 9.

Many social scientists¹² and even the World Bank¹³ have found that the problem of poverty in the region has become extreme and, in urgently investigating the origins and development of such an extreme case, important lessons can be learned for anti-poverty policies in general throughout the world – especially in reducing the poverty of children.

5. Problems in Measuring Child Poverty

In the pioneering research reported here, UNICEF is undertaking two approaches to child poverty. One is to examine existing data about incomes of households with and without children and account for the extent and severity of child deprivation, access to necessary services and the kind of policies that had improved conditions of children in other countries or in the previous history of particular countries. The second approach is to devise improvements to the national surveys introduced as a result of the 1995 World Summit on Social Development and the country studies issued by the international agencies and collect information directly about and also from children. This could pave the way for a renewed determination to restore the two-part treatment of the poverty measure originally put forward by the World Bank in 1990.

The aim of this research is to produce an assessment of the extent and nature of child poverty in developing countries at regional level, which is compatible with the definitions of poverty adopted by the governments of 117 countries at the World Summit on Social Development in Copenhagen. It would be preferable if this measurement could build on the work of one or more of the UN agencies that have measured world poverty in the past. Unfortunately, this does not appear to be possible. The index approach adopted by the IFAD and UNDP combines aggregated administrative statistics on different aspects of poverty but does not allow a quantitative estimate to be made of the numbers and proportions of children living in poverty.

By contrast, the World Bank's estimates of 'poverty' are based on household survey data which does make possible estimates at individual level. Unfortunately, the World Bank's method of measuring poverty by low per capita consumption expenditure is singularly unsuitable for measuring child poverty and does not conform with the definitions of poverty adopted at the Copenhagen Summit. For example, the definition of absolute poverty implies that a child is 'poor' if she suffers from severe educational deprivation. In accordance with a number of UN resolutions, this could be operationalised as her lack of receipt of primary education (see later discussion). There might be a number of reasons why a child does not receive primary education and low family income is often a very important factor. However, a lack of government investment in schools and infrastructure can also prevent children from being educated as can prejudice and discriminatory attitudes that consider that certain children are not 'worth' educating. Whichever of these reasons is true, either singularly or in combination, the end result will be the same in that the child will suffer from severe educational deprivation.

Therefore, there is a need to look beyond the World Bank's narrow focus on per capita consumption expenditure and at both the effects of low family income on

¹² Examples are given in Gordon D. and Townsend P. (eds.) (2000), *Breadline Europe: The Measurement of Poverty*, Bristol, Policy Press.

¹³ "In the countries of Europe and Central Asia in transition to market economies, the number of people living on less than \$1 a day [between 1987 and 1998] rose more than twenty fold." (World Bank, 2001, p3).

children and the effects of inadequate service provision for children. It is a lack of investment in good quality education, health and other public services in many parts of the World that is as significant a cause of child poverty as low family incomes.

Absolute Poverty

In this research, we will use the definition of absolute poverty agreed at the World Summit to produce estimates of the amount of child poverty in developing countries. The concept of absolute poverty was a strongly contested concept of poverty until the World Summit agreement.

There are effectively five sources of statistical indicators available on a global scale that could be used to operationalise the World Summit definition of poverty.

1) Surveys carried out by National Statistical Offices (NSO) – A wide range of social and economic surveys are carried out by NSO's in every country.

2) National Census – Decennial population and housing Censuses have been carried out in most countries of the world during the 20th Century. The UN Economic and Social Council stressed that **Population and housing censuses** “are one of the primary sources of data needed for effective development planning and the monitoring of population issues and socio-economic and environmental trends, policies and programmes aimed at the improvement of living standards....”

3) Living Standards Measurement Study -The LSMS Program is an initiative of the World Bank to obtain high quality household and community survey data from developing countries. The data from this programme are used by the World Bank (in combination with other regional sources) to estimate global income poverty.

World Bank staff have access to data from a large number of household surveys (often in the form of paper tables) for their consumption poverty estimates, however, the very restricted access to LSMS survey data available to researchers means that other data sources must be used to assess the extent of child poverty in developing countries.

4) Demographic and Health Surveys - Since 1984, the Demographic and Health Surveys (DHS) program has assisted countries in conducting national surveys on fertility, family planning, and maternal and child health. The DHS are nationally representative household surveys with sample sizes of about 5,000 households.

The women's questionnaire contains information on the following topics:

- Background characteristics (age, education, religion, etc.)
- Reproductive history
- Contraceptive knowledge and use
- Maternity and breastfeeding
- Immunization of children
- Diarrhoea, fever and cough in children
- Height and weight of children
- Marriage
- Fertility preferences
- Husband's background
- Respondent's work status

The household and children's sections of the DHS questionnaire cover a wide range of topics that are relevant to the measurement of child poverty - such as; water availability, housing characteristics, household size and composition, household durables and sanitation facilities, children's education, measures of child malnutrition, access to information, etc. The broad focus of the DHS data, their extensive and up-to-date world coverage and the ease of access to survey data make the DHS the

best single source of information for estimating the extent of child poverty in the developing world. A major advantage of the DHS is their cluster sampling methodology. As many as 3,000 to 9,000 women of childbearing age were interviewed in each survey (average 5,400).

5) Multiple Indicator Cluster Surveys (MICS) – These household surveys are specifically designed to help countries accurately assess progress for children in relation to the *World Summit for Children* goals (New York, 1990) - which many countries have carried out, or are carrying out, with UNICEF's assistance and advice.

The MICS surveys will undoubtedly provide an rich resource for future measurement of child poverty in developing countries (Minujin, 1999). The end-decade MICS surveys currently underway in many countries have been developed specifically to obtain the data for 63 of the 75 end-decade indicators. Similarly, the World Health Surveys may in future provide additional valuable information on children.

Operational measures of Absolute Poverty

The two concepts of poverty and deprivation are tightly linked but there is general agreement that the concept of deprivation covers the various conditions, independent of income, experienced by people who are poor, while the concept of poverty refers to the lack of income and other resources which makes those conditions inescapable or at least highly likely (Townsend, 1987).

Deprivation can therefore be conceptualised as a continuum which ranges from no deprivation through mild, moderate and severe deprivation to extreme deprivation. In order to measure absolute poverty amongst children, it is necessary to define the threshold measures of severe deprivation of basic human need for:

- | | |
|--------------------------|-----------------------|
| 1. food | 5. shelter |
| 2. safe drinking water | 6. education |
| 3. sanitation facilities | 7. information |
| 4. health | 8. access to services |

In this research the threshold measures for severe deprivation will, as far as practicable, conform to internationally agreed standards and conventions. Theoretically, we will define 'severe deprivation of basic human need' as those circumstances that are highly likely to have serious adverse consequences for the health, wellbeing and development of children. Severe deprivations are related to 'poor' developmental outcomes both long and short term. Criteria for evaluating causality from epidemiological and social science data have been described by Bradford-Hill (1965). Table 4 shows the operational definitions of deprivation for the criteria in the World Summit definition of absolute poverty.

Table 4: Operational definitions of deprivation among children

Deprivation	Mild	Moderate	Severe	Extreme
Food	Bland diet of poor nutritional value	Going hungry on occasion	Malnutrition	Starvation
Safe drinking water	Not having enough water on occasion due to lack of sufficient money	No access to water in dwelling but communal piped water available within 200 meters	Long walk to water source (more than 200 meters) which is occasionally polluted	No access to water
Sanitation facilities	Having to share facilities with another household	Sanitation facilities outside dwelling	No sanitation facilities in or near dwelling	No access to sanitation facilities
Health	Facilities near by but occasional lack of access due to insufficient money	Inadequate facilities near by (e.g. less than 1 hour travel)	Health facilities more than 1 hours travel away. No immunisation against diseases	No access to health facilities
Shelter	Dwelling in poor repair. More than 1 person per room	Few facilities in dwelling, lack of heating, struct. problems. 3+ per room	No facilities, non-perm. Bldg, no privacy, no flooring, one or two rooms. 5+ per room	Roofless – no shelter
Education	Inadequate teaching due to lack of resources	Unable to attend secondary but can attend primary education	Unable to attend primary or secondary education	Prevented from learning due to persecution/prejudice
Information	Can't afford newspapers or books	No television but can afford a radio	No access to radio, television or books or newspapers	Access to information prevented (govt etc)

Basic Social Service deprivation

Basic Social Service deprivation is currently an under-researched area. Much research in this field has been undertaken as part of the sustainability agenda of the UN. For example, the Department for International Development (DFID) in the UK has used the following definition of 'basic infrastructure' for sustainability (DFID, 1998).

“Basic infrastructure includes the provision of adequate water; sanitation (including human and solid waste disposal and drainage); clean and efficient energy; adequate and secure shelter and public buildings; plus the essential information that enables people to utilize these services effectively. In addition, access is required for services available on a less local basis and mobility through safe, affordable transport (including roads, tracks and means of transport) will enable poor people to participate in the economic, cultural and political institutions of society. Basic infrastructure provision relates to facilities that directly impact on the sustainable livelihoods and opportunities of people within their communities.”

Goals agreed for selected BSS indicators at UN conferences

The task group identified a range of available indicators of access to basic social services that are consistent with the agreements achieved at recent UN conferences. Six key areas were identified by the Task Force as:

1. population, with special emphasis on reproductive health and family planning services
2. primary health care
3. nutrition
4. basic education
5. drinking water and sanitation
6. shelter

There are twelve indicators used to measure these six key areas:

1) Percentage of population with access to health services - The percentage of the population that can reach appropriate local health services by the local means of transport in no more than one hour.

2) Family planning - The percentage currently using contraception, both traditional and modern methods, among currently married women of reproductive age, including, where possible, those in consensual unions.

3) Underweight prevalence among preschool children - The percentage of children under five years of age who have a weight that is more than two standard deviations below the median weight-for-age of the standard NCHS reference population.

4) Maternal mortality ratio - The number of deaths of women occurring over a year while pregnant, or within 42 days of termination of pregnancy, irrespective of the cause of death, per 100,000 live births in that year.

5) Infant mortality rate - The probability of dying before age 1 per 1,000 newborns.

6) Under-five mortality rate - The probability of dying before age 5 per 1,000 newborns.

7) Life expectancy at birth - The average number of years that a newborn could expect to live, if he or she were to pass through life subject to the age-specific mortality rates of a given period.

8) School enrolment ratio - The total enrolment, regardless of age, in primary and secondary education as a proportion of the population of primary- and secondary- school age according to national regulations.

9) Adult illiteracy rate - The proportion of the population who are illiterate, expressed as a percentage of the population aged 15 years or above. A person is illiterate who cannot, with understanding, both read and write a short simple statement on everyday life.

10) Percentage of population with access to sanitation - The percentage of population with access to a sanitary facility for human excreta disposal in the dwelling or located within a convenient distance from the user's dwelling

11) Percentage of population with access to safe water - The percentage of population with access to an adequate amount of safe drinking water located within a convenient distance from the user's dwelling.

12) Floor area per person - The median floor area of a unit divided by the average household size. This measures the adequacy of living space in dwellings. A low value for the indicator is a sign of overcrowding.

Operational measures of Basic Social Service deprivation for children

The UN Task Group indicators discussed above are not all directly applicable to children. For example, some are only of relevance to adults e.g. contraception, adult illiteracy and maternal mortality and some are also aggregate population measures which are not applicable at the individual level e.g. life expectancy and mortality rates. However, the remaining indicators can be used as operational measures of basic social service deprivation as could other measures which could include access to power, fuel and transport.

6. Conclusion

1. Child poverty. Methods of measuring poverty by different international agencies have been reviewed and none is found to be satisfactory. Social scientific advances during the 1990s - including advances in survey methodology in developing countries, international agreements on the definition of poverty and the use of the World Wide Web for household survey distribution - have made possible the measurement of the extent and nature of child poverty at world region level. In this report we have outlined plans and methods of operationalising the measurement of 'absolute' child poverty (drawing on the 1995 World Summit agreement in Copenhagen), primarily using Demographic and Health Survey Data which is available for 68 countries.

2. Social polarisation. Inequalities in living standards have been growing fast between and within countries.¹⁴ By examining in depth conditions in one country, this report also demonstrates that child poverty in the transitional economies should be given priority along with Sub-Saharan Africa in the elucidation of trends in world poverty and of causes and severity.

3. Child rights according to the Universal Declaration. A major feature of the report is the development of an index of child rights, based upon the Universal Declaration and drawing on data made available by the international agencies. This allows all countries to be compared in terms of their progress towards the satisfaction of rights. There are big disparities between 'achiever' and 'straggler' countries. The findings for the 47 countries in one region, Sub-Saharan Africa, have been given to illustrate this sharply.

4. Child rights according to the UN CRC. The construction of a more accurate and representative index than that based on the Universal Declaration, founded on the Articles of the UN CRC, is described and recommended for exploration. Further work by the research team on this index is actively proceeding.

¹⁴ *"The average income in the richest 20 countries is 37 times the average in the poorest 20 – a gap that has doubled in the past 40 years."* World Bank (2001), *Attacking Poverty*, World Development Report 2000-2001, Washington D.C., World Bank (p3).

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