Child Poverty in Cambodia

Summary Report

Ministry of Planning

SPRI

SOCIAL POLICY RESEARCH INSTITUTE

unicef

for every child

Author:
Julia Karpati, Liên Boon & Chris de Neubourg
EPRI- Economic Policy Research Institute/SPRI- Social Policy Research Institute

Design:
Graphic Roots Co.,Ltd.

Editor:
Naomi Lindt

Technical review team:
- H.E. Theng Pagnathun, RGC Delegate in Charge of General Department of Planning, Director General, General Department of Planning, Ministry of Planning
- H.E. Poch Sovanndy, Deputy Director general of General Department of Planning, Ministry of Planning
- Maki Kato, Chief of Social Policy UNICEF
- Chea Vibol, Social Policy Specialist UNICEF

1. Introduction

With its adoption of the Convention on the Rights of the Child and the Sustainable Development Goals (SDGs), Cambodia has demonstrated its commitment to realizing the rights of children. Effectively tackling child poverty is essential to fulfilling these rights, as poverty can harm children in a myriad of ways, impacting their access to school, clean water and sanitation, and proper nutrition, to name but a few deprivations.

In line with the global development agenda and its recognition of child poverty as a unique condition with its own set of considerations, the Cambodian Government recognizes that child poverty analysis is an important tool for evaluating the impact of its poverty agenda. Using a child lens to assess the challenges of poverty reduction offers key insight into the nature of poverty in Cambodia – who the poor are, why their poverty persists, and how poverty is intergenerationally transmitted. Understanding the current context of child poverty and establishing baselines to assess progress is indispensable to achieving the 2030 SDG targets.

This document presents key results of the Child Poverty in Cambodia study, which examines monetary and multidimensional poverty among children aged 0 to 17. A child is considered to be monetarily poor when the child lives in a household where total household consumption per adult equivalent is below the national monetary poverty line. A child is defined as multidimensionally poor if he/she is deprived in several dimensions of his/her well-being according to a defined threshold of poverty severity.

Analysis was conducted using 2014 government data: the Cambodia Socio-Economic Survey (CSES) for monetary poverty and the Cambodia Demographic and Health Survey (CDHS) for the multidimensional component.

Studying child poverty in Cambodia through both the multidimensional and monetary perspective supports a more precise measurement and a better understanding of the situation of children in Cambodia. Where the monetary poverty measurement focuses on assessing the average financial means children's households have available, multidimensional poverty measurement determines whether children's basic needs are being met independent of income. The separate analysis of these two concepts of poverty allow for a more complete picture of the reality of Cambodian children, and for the identification of the most vulnerable subgroups of children that require specialized policy and programming.

2. Monetary child poverty: Key findings

Table 1 shows the results of the monetary poverty analysis for Cambodian children broken down by geographic zones. Geographic comparisons of monetary child poverty help identify priority geographic zones for targeting development programmes to poor areas.

Table 1: Overall monetary poverty for children aged 0-17 in Cambodia, at the zone levels

Sub-national level	Poverty headcount ratio (%)	Poverty gap	Squared poverty gap (Poverty severity)	Distribution of the poor children across zones (% poverty 'share' of headcount index)	Distribution of the population (%)
Plain	15.5	2.9	0.9	42.8	44.1
Tonle Sap Lake	15.7	3.0	0.9	34.4	35.1
Coastal	15.5	2.6	0.6	7.2	7.4
Plateau and Mountainous	18.7	3.7	1.1	15.7	13.4
Total	**16.0**	**3.0**	**0.9**	**100.0**	**100.0**

Table 2 presents the overall poverty indices for children aged 0-17 in Cambodia by sex and age group. Male and female children do not show strong differences between their poverty headcount and rank equally in terms of overall poverty severity. On the other hand, a higher poverty headcount rate is observed for young children aged 0-4 at 17 per cent, compared to their older peers (16.2 per cent for children aged 5-14 and 13.9 per cent for adolescents aged 15-17.)

Table 2: Overall monetary poverty for children aged 0-17 in Cambodia, by sex and age group

	Poverty headcount ratio (%)	Poverty gap	Squared poverty gap (poverty severity)	Distribution of the poor children by sex and age group (% poverty 'share' of headcount index)	Distribution of the population (%)
Sex					
Male	16.3	3.1	0.9	52.2	51.2
Female	15.7	3.0	0.9	47.8	48.8
Age group					
0-4 years	17.0	3.2	0.9	30.9	29.1
5-14 years	16.2	3.1	0.9	53.6	53.0
15-17 years	13.9	2.6	0.8	15.5	17.9
Total	**16.0**	**3.0**	**0.9**	**100.0**	**100.0**

Table 3 presents information on the poverty measures by household composition characteristics for Cambodia in 2014. It clearly shows that the larger the household size, the more likely it is that the child in the household is poor. Futhermore, as the number of children in the household increases, the more likely it is that the child is poor.

Table 3: Poverty headcount ratio of children aged 0-17 years by demographic composition

	Poverty headcount rate of children aged 0-17 years	Distribution of the poor children aged 0-17 years	Distribution of the child population aged 0-17 years
Number of children aged 0-4 years in the household			
0 children	12.5	38.0	48.7
1	16.8	41.3	39.3
2	26.0	17.4	10.8
3 or more children	41.7	3.2	1.2
Total	**97**	**99.9**	**100**
Household size			
1	0.0	0.0	0.0
2	3.4	0.2	1.0
3	4.3	2.3	8.6
4	8.2	11.8	23.0
5	12.7	19.9	25.1
6	19.3	23.1	19.2
7 or more	29.8	42.7	23.0
Total	**16.0**	**100.0**	**100.0**

Table 4 contrasts poverty headcount rate based on the current official line and the poverty rates for alternative poverty lines(s) that are up to 20 per cent above and 20 per cent below the official line. The data reveals that monetary child poverty in Cambodia is highly sensitive to the choice of the poverty line. It is likely that a large portion of the population is concentrated around the poverty line and highly vulnerable to falling in and out of poverty. This result highlights the need for more in-depth analysis of multidimensional poverty for children.

Table 4: Sensitivity of poverty measures to the choice of poverty line

	Poverty rate		Poverty gap		Severity	
	Poverty headcount rate (%)	Change from actual (%)	Poverty gap	Change from actual (%)	Squared poverty gap	Change from actual (%)
Actual poverty line	16.0	0.0	3.0	0.0	0.9	0.0
+5%	19.5	21.5	3.7	23.0	1.1	25.7
+10%	22.7	41.6	4.5	49.0	1.4	55.4
+20%	30.1	87.5	6.4	108.8	2.0	127.1
-5%	13.3	-17.2	2.4	-20.0	0.7	-22.1
-10%	10.9	-31.8	1.9	-37.4	0.5	-40.7
-20%	6.4	-59.9	1.1	-64.6	0.3	-68.5

3. Multidimensional child poverty

Methodology

The multidimensional approach to poverty used in this study is based on the Multiple Overlapping Deprivation Analysis (MODA) methodology, developed by UNICEF to provide a framework in which child poverty and deprivation can be measured, quantified and identified. The methodology concentrates on the measurement of child deprivation and is comprised of the following key elements:

1. It takes the child rather than the household as unit of analysis;
2. It emphasizes the use of individual-level data when possible so that any differences across gender, ages or within households may be observed;
3. It makes use of the life-cycle approach, changing indicators according to the changing needs of children at different life stages;
4. It broadens the scope of sector-based approaches through overlapping deprivation analysis;
5. It includes the prevalence and the depth of deprivation for each child, revealing the most vulnerable children with a higher number of deprivations at the same time; and
6. It generates profiles in terms of the geographical and socio-economic characteristics of the (multiply) deprived, allowing for better targeted, more effective policy responses and interventions.

Deprivations were defined by eight broad categories – nutrition, health, early childhood development, education, water, sanitation, housing and information. Up to six dimensions were selected for each age category (0-4 years, 5-14 years, 15-17 years) based on relevance and data availability.

The majority of children in Cambodia face multiple deprivations, with most experiencing two or three deprivations at a time (Figure 1). Significant differences in deprivations exist between rural and urban areas.

Key Finding

Figure 1: Deprivation distribution at the national level and by area of residence for children aged 0-17 years

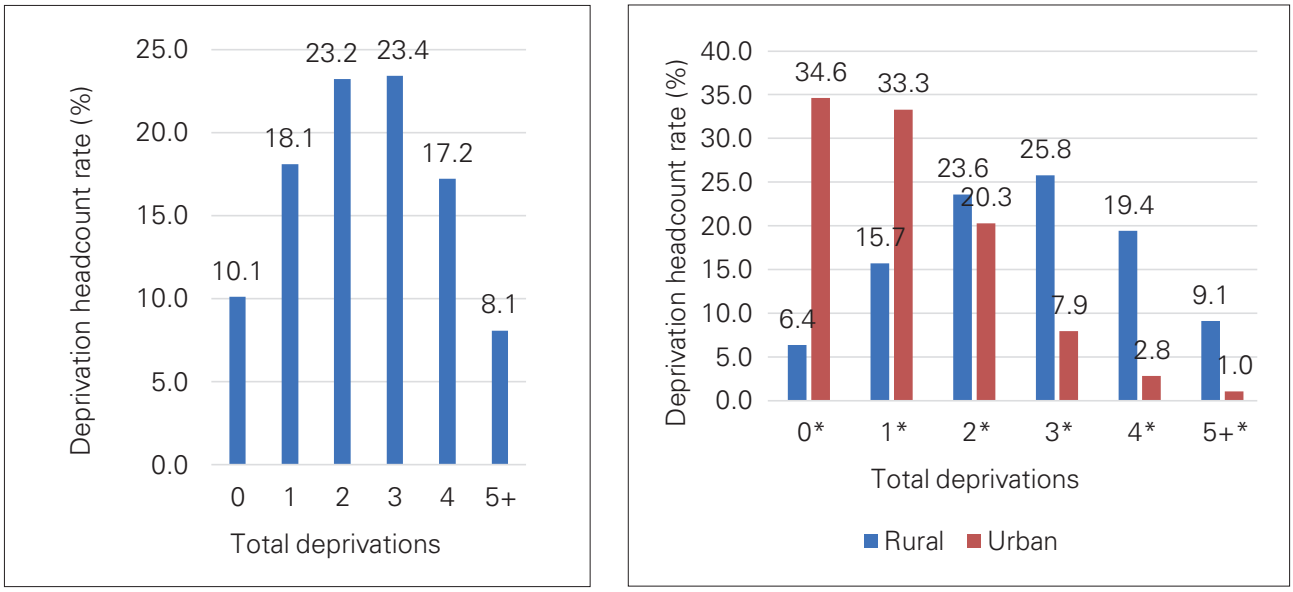
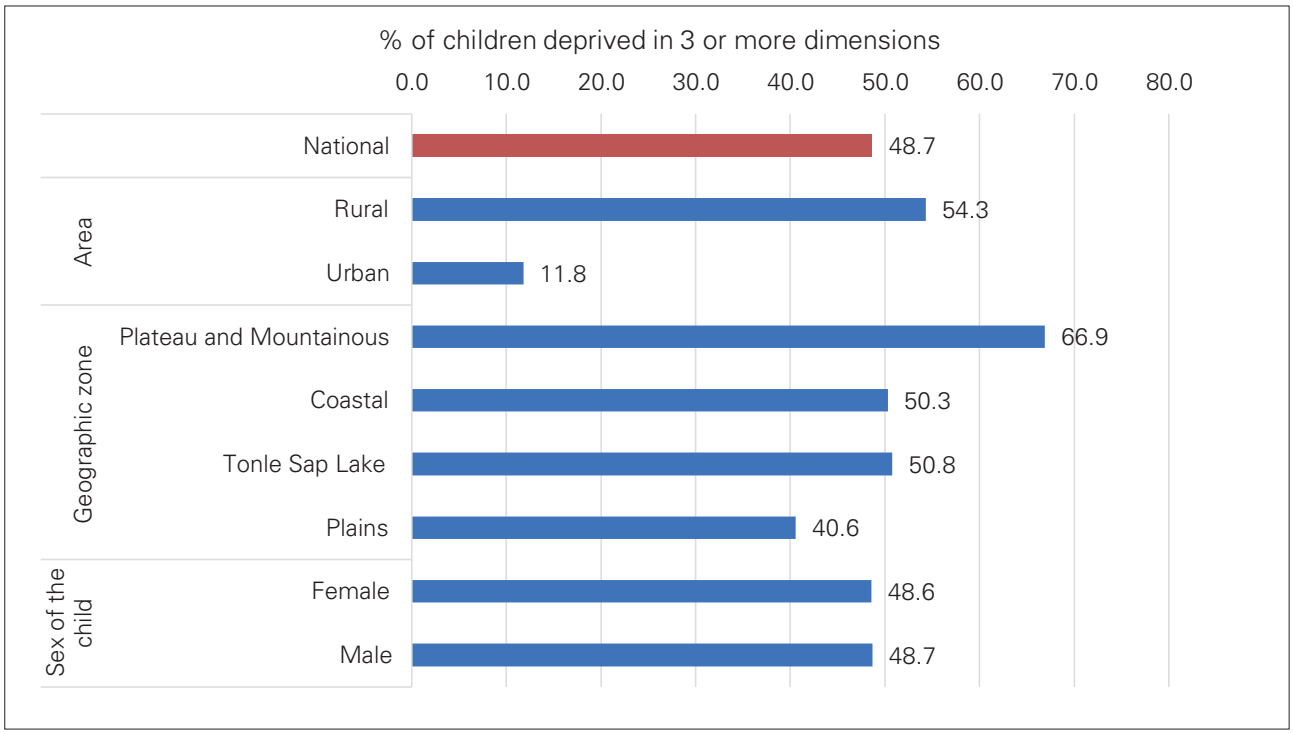


Figure 2 confirms that most children in Cambodia experience multiple deprivations and demonstrates the role of geography, urban versus rural settings, and sex of the child. While in urban areas only 11.8 per cent of children are deprived in at least three dimensions simultaneously, the rate is as high as 54.3 per cent in rural areas. Children in the Plateau and Mountainous Zones are the most deprived at 66.9 per cent. No disparity by sex of the child was observed.

Figure 2: Multidimensional deprivation headcount (deprived in at least three dimensions simultaneously) by national level, area of residence, geographic zone and sex of the child for children aged 0-17 years



The following sections further analyze deprivations of children in three different age groups: 0-4, 5-14 and 15-17.

3.1 Children aged 0-4 years

Highlights

- In this group, 57 per cent of children are multidimensionally poor, facing on average 3.9 deprivations of a total six dimensions.
- Children living in rural areas and across northeastern Cambodia tend to have the highest deprivation headcount rates in all dimensions and are more likely to experience multiple deprivations at a time.
- The primary areas of concern for Cambodian children in this age category are in the early childhood development (ECD) and nutrition dimensions. Eight of 10 children do not attend an early childhood education or preschool programme, whereas 47.4 per cent of children are not fed according to the requirements for infant and young child feeding practices.
- The combination of nutrition, ECD and housing shows the highest overlap for children aged 0-4. Around 18 per cent of children are deprived in all three dimensions, while only 13 per cent do not experience deprivation in any of the three dimensions analyzed.
- At the national level, the sanitation and housing dimensions contribute the most, by 21.7 per cent and 21.3 per cent, respectively, to the multidimensional headcount ratio adjusted for intensity of deprivation (M0). In rural areas, similar results can be observed, whereas in urban areas the housing and ECD dimensions play the most important roles.

Single deprivation analysis

Six dimensions were assessed for children aged 0-4 based on relevance and data availability: health, nutrition, ECD, water, sanitation and housing.

The results show high rates of deprivation in nearly all indicators for children aged 0-4 years in Cambodia (Figure 3). Notably, eight of 10 children in this age group are not attending an early childhood education or preschool programme (81.8 per cent). At the dimension level, the highest rates of deprivation tend to be observed for children aged 0-4 years compared to other age groups, especially in the ECD dimension, with 71.1 per cent of children deprived (Figure 4). Furthermore, 47.4 per cent of children this age are deprived in the nutrition dimension. This could mean severe consequences for physical and likely cognitive development for a large percentage of the youngest children in Cambodia, which are core requirements for the development of human capital.

Most household-level indicators show similar deprivation headcount rates across all three age groups. Around five in 10 children do not have access to improved toilet facilities and at least one in seven live in households with unimproved floor, roof and/or wall materials. These environmental conditions are the foundations underlying the fulfilment of other dimensions of child well-being and indicate low standards of living for affected households. For example, even if children are adequately fed, the high rates of inadequate handwashing, sanitation facilities and solid cooking fuel use still expose these children to environmental harms that are hazardous to their health and well-being.

Figure 3: Deprivation headcount rate (%) by indicators and dimension, children aged 0-4 years

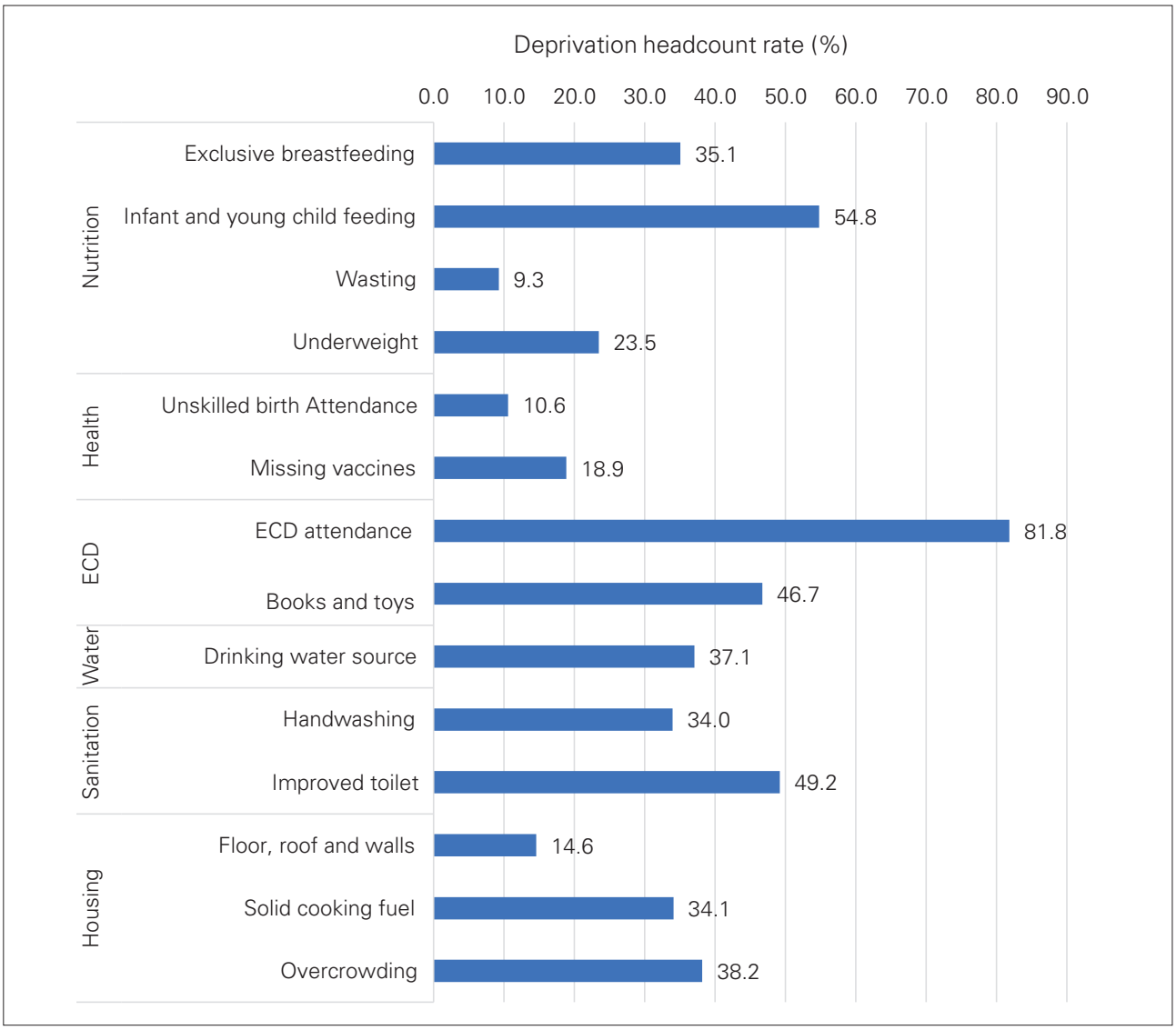
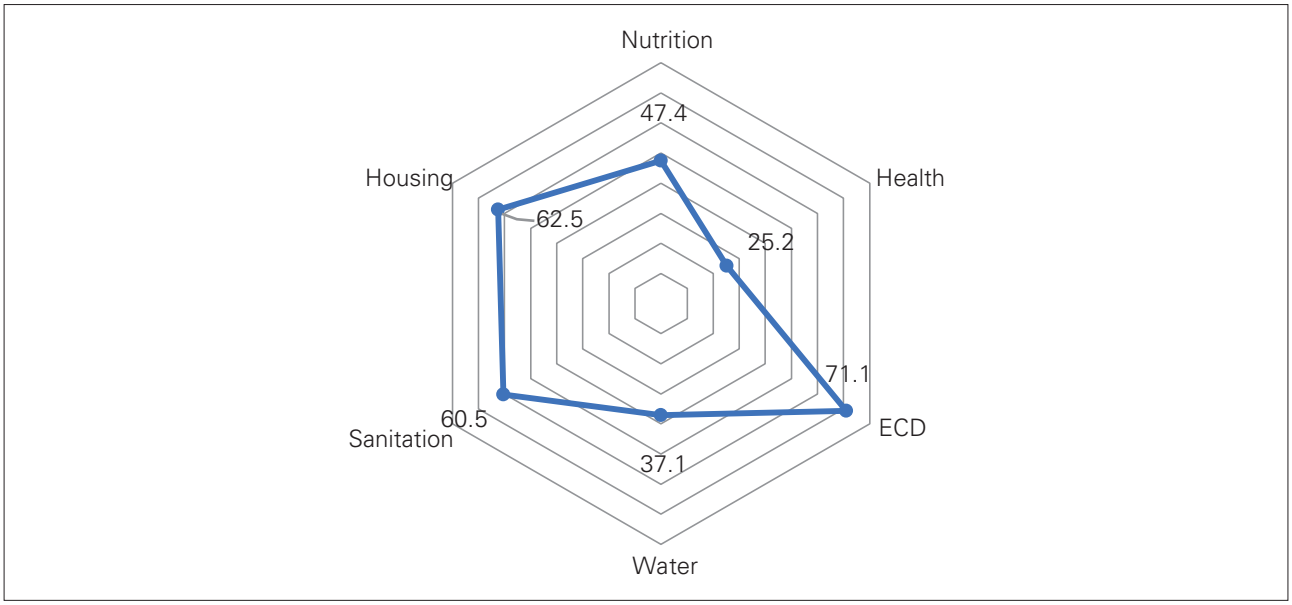


Figure 4: Deprivation headcount rate (%) by dimensions, children aged 0-4 years



Multiple deprivation analysis

Figure 5 shows the overall picture of multidimensional poverty among children aged 0-4 years; figures 6 and 7 break down the data geographically by area and region. Most of these children suffer from multidimensional poverty. The deprivation distribution for children living in rural areas peaks at three deprivations (25.3 per cent), and 63 per cent of children in rural areas are deprived in three or more dimensions at the same time, while the majority of children living in urban areas are deprived in one or no dimensions (**Figure 6**). Children in northeastern Cambodia experience significantly higher rates of deprivation intensity than those children living in southern or western Cambodia (**Figure 7**).

Figure 5: Deprivation distribution at the national level for children aged 0-4 years

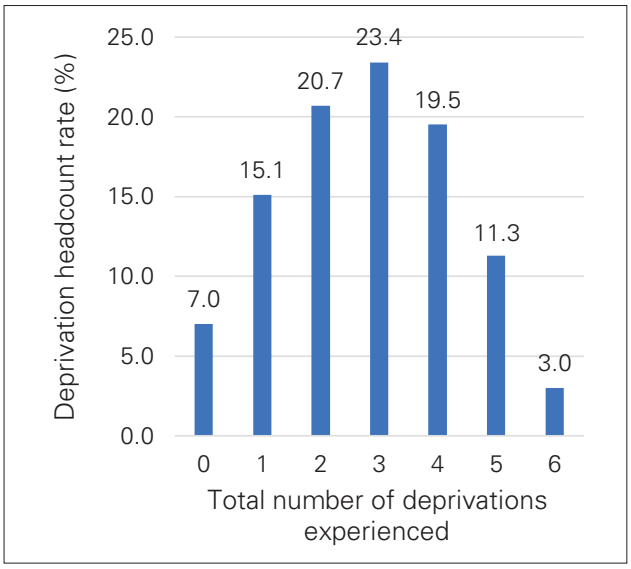


Figure 6: Deprivation distribution by area for children aged 0-4 years

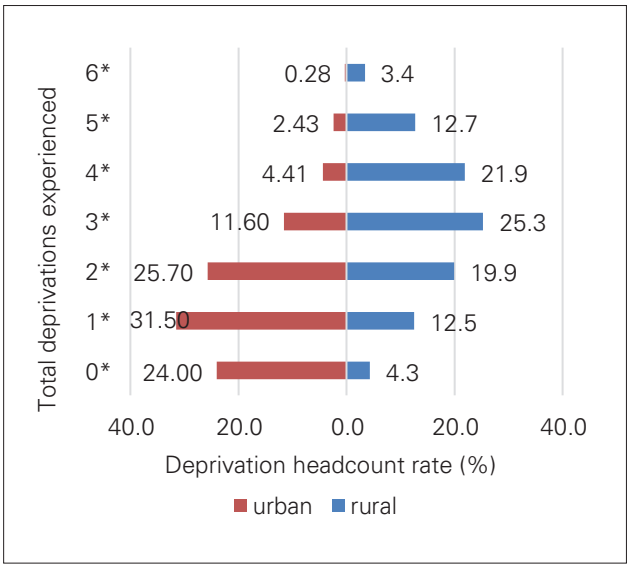
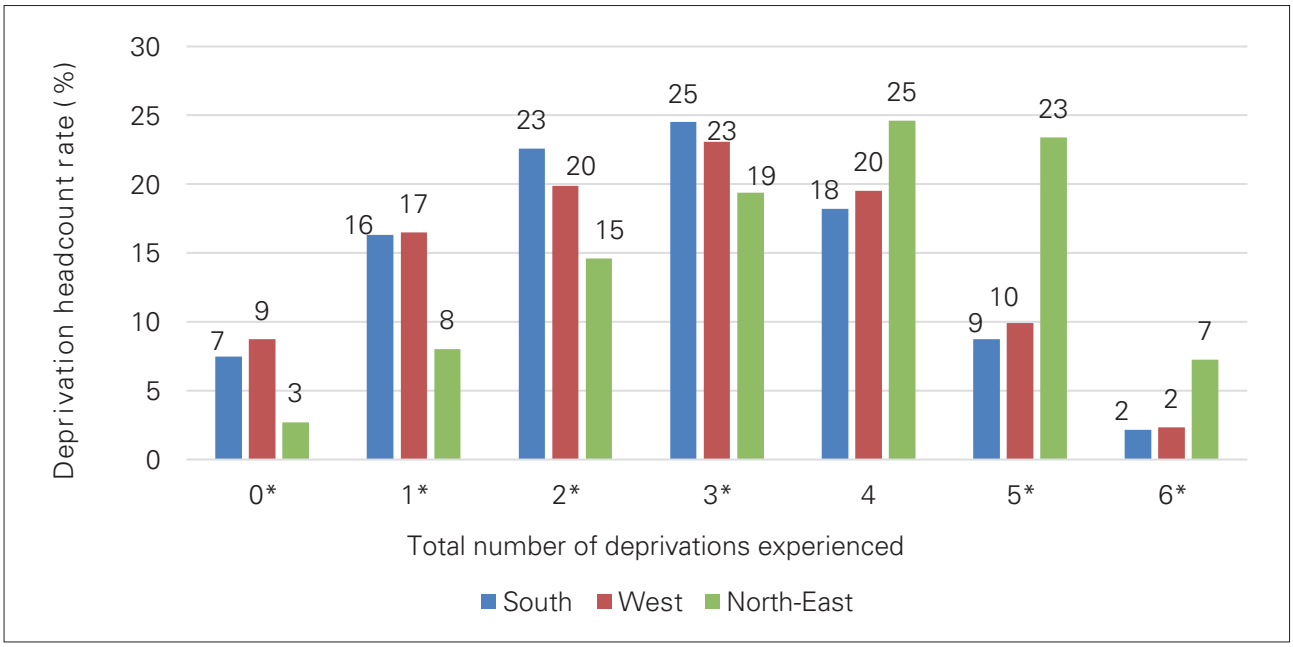


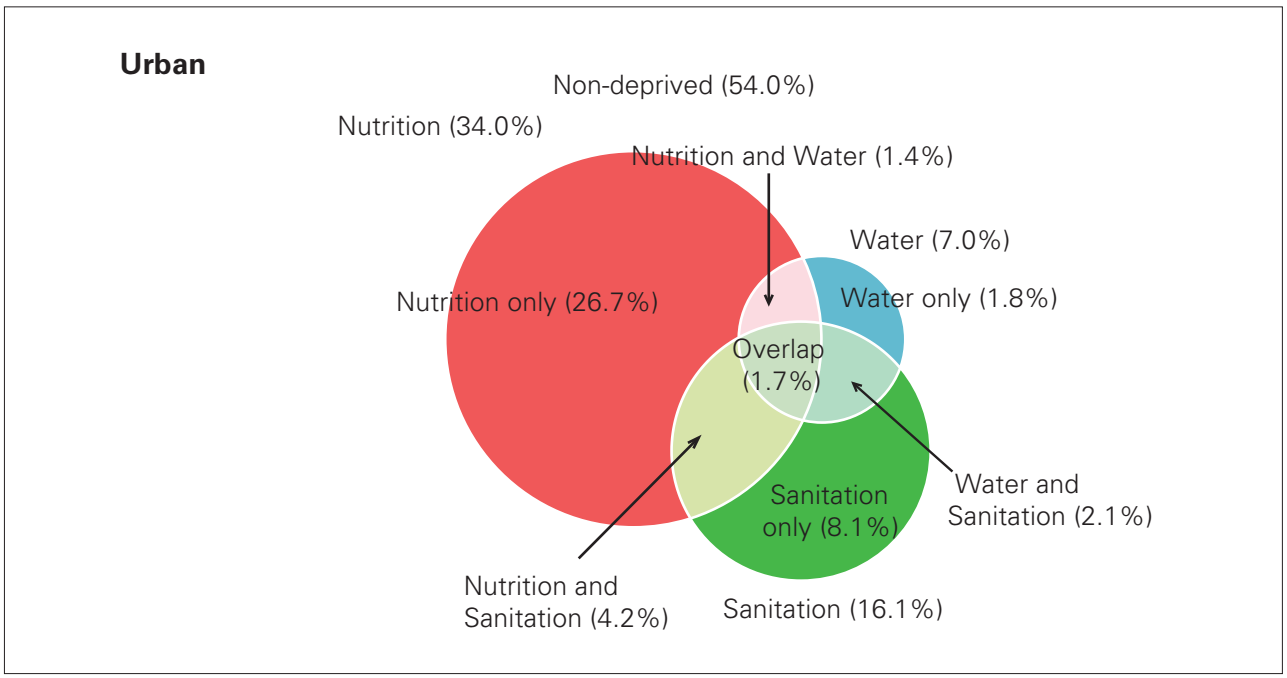
Figure 7: Deprivation distribution by region, children aged 0-4 years



** An asterisk (*) denotes that differences between the deprivation rates of subcategories are statistically significant at the level of p<0.05.*

Figures 8 and 9 present data on deprivation overlaps in nutrition, water and sanitation for rural versus urban and stunted versus non-stunted populations. Compared to rural areas, there is a higher headcount of children deprived in nutrition in urban areas and a lower headcount of children deprived in water and sanitation. The overlap between these dimensions is very high in rural areas (11.8 per cent deprived in all three dimensions), whereas they are more uniquely experienced in urban areas (1.7 per cent).

Figure 8: Three-way deprivation overlap for the combination of nutrition, water and sanitation dimensions for children aged 0-4 years, by area



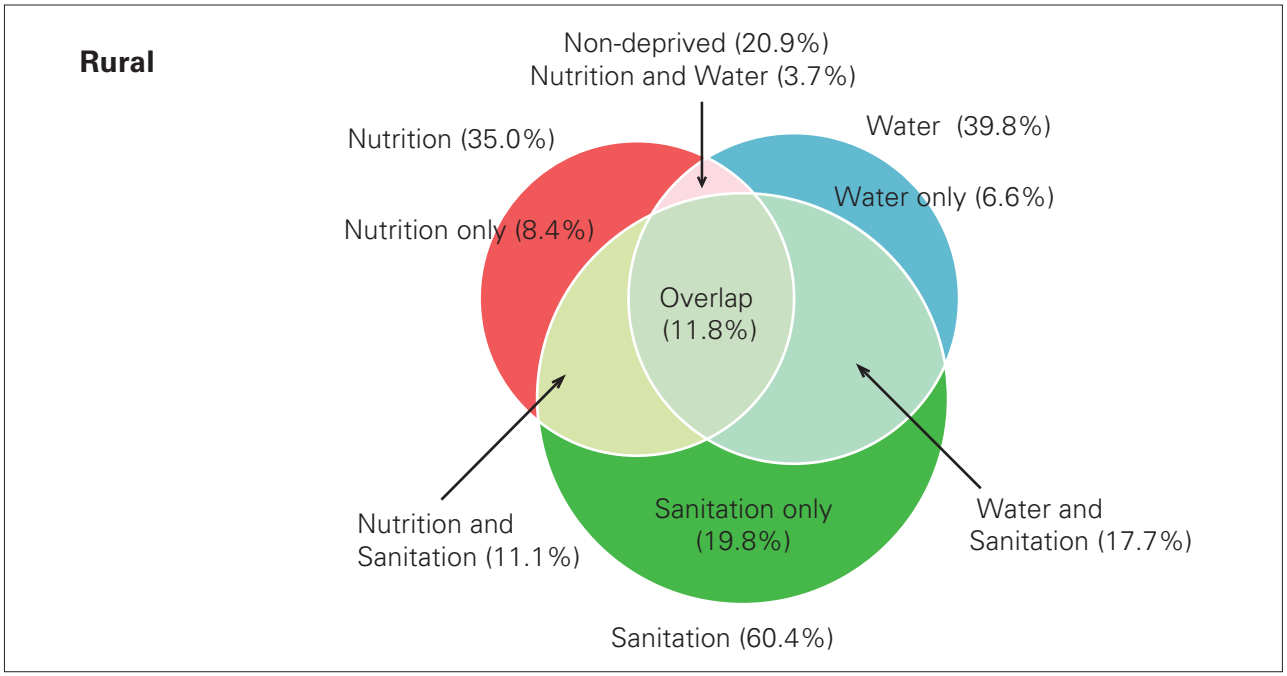
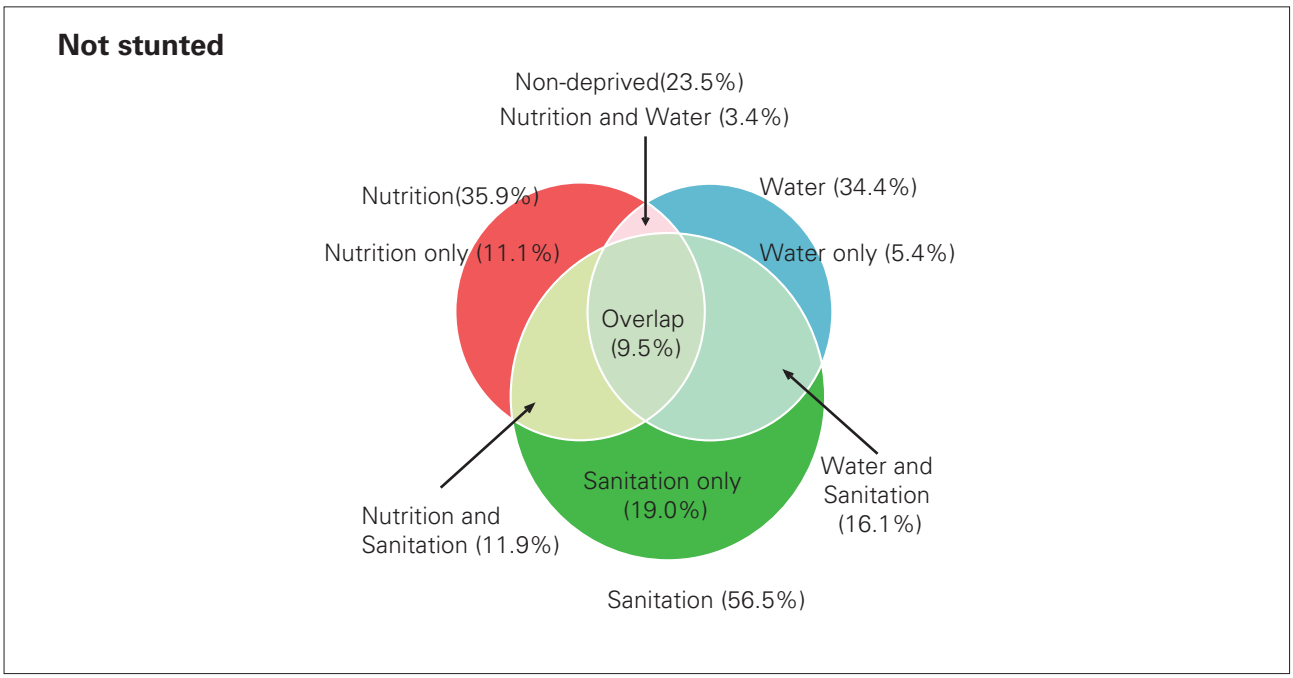
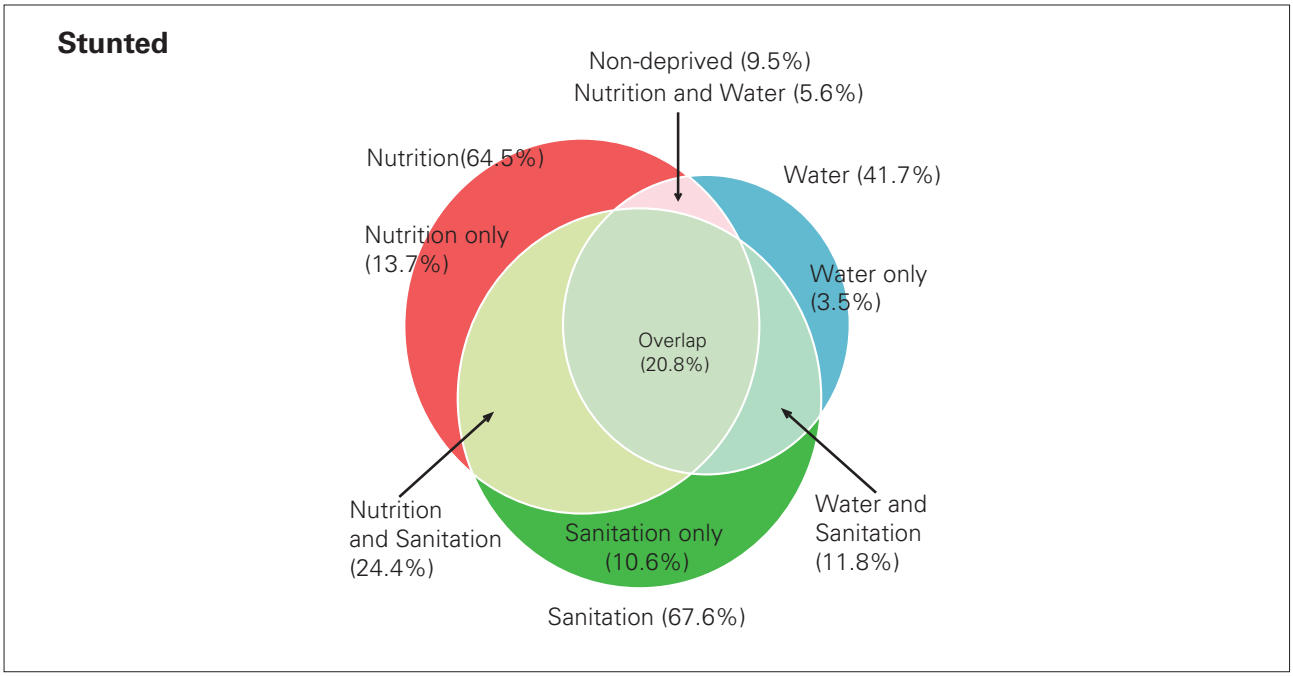


Figure 9 shows that both the headcount of children deprived in nutrition, water and sanitation dimensions, as well as the extent to which these deprivations are experienced together, is greater for stunted children than non-stunted children. These figures support the need to consider interventions beyond only nutrition-focused dimensions to alleviate child stunting.

Figure 9: Three-way deprivation overlap for the combination of water, sanitation and nutrition dimensions for children aged 0-4 years, by stunting status





3.2 Children aged 5-14 years

Highlights

- 44.2 per cent of children in this age group are multidimensionally poor, facing on average 3.6 out of five deprivations.
- Children living in rural areas and the Plateau and Mountainous zones are doing worst. For example, 57.8 per cent of children living in Plateau and Mountainous zones are deprived in all five dimensions analyzed.
- Around half of Cambodian children aged 5-14 years do not have access to improved toilet facilities, while 47 per cent of children are living in overcrowded households with more than four people per sleeping room. Additionally, primary school attainment needs attention, with 44.6 per cent of children beyond primary school age (12-14 years) not completing the six grades of primary school education.
- An inter-sectoral approach is especially needed for the high overlap between housing and sanitation.
- Across all levels (national, rural and urban), housing and sanitation have the largest impact on the multidimensional headcount ratio adjusted for intensity of deprivation (M_0).

Single deprivation analysis

Five dimensions were assessed for children aged 5-14 based on relevance and data availability: education, water, sanitation, housing and information.

Figures 10 and 11 show high rates of deprivation in many indicators for children aged 5-14 in Cambodia. Children in this age group experience the highest deprivation headcount rate in the household-level housing dimension, driven by the high rates of deprivation in the overcrowding indicator (47.0 per cent) and solid cooking fuel use (34.4 per cent). Almost half of children aged 5-14 do not have access to an improved toilet facility (49.7 per cent). Moreover, 61.6 per cent do not have access to safe and improved sanitation conditions at the dimension level, which is similar to the deprivation rate for children aged 15-17. Just under half of children in this group (42.5 per cent) lack adequate media exposure.

For children aged 5-14, 22.5 per cent are deprived in the education dimension, likely primarily driven by the high rate of incomplete primary education among children beyond primary school age (ages 12, 13, 14 years) and by the 16.8 per cent of children in this age group who are two or more years behind in school. This is troubling given that even if basic school attendance is high, a disproportionate fraction of children does not complete primary schooling in the correct amount of time. This suggests weaknesses in the quality of Cambodian schools that keep children from progressing to higher levels at the suitable rate for their age or living conditions that keep children from finishing school such as low family income, a school/labour trade-off or late school enrolment. Underperformance in the education indicators may also be linked to inadequate integrated ECD, such as a lack of adequate feeding in early childhood leading to more difficulties in learning as these children enter school. Deprivation rates in household-level indicators in the housing, sanitation and water dimensions are similarly high to those in other age groups.

Figure 10: Deprivation headcount rate (%) by indicators, children aged 5-14 years

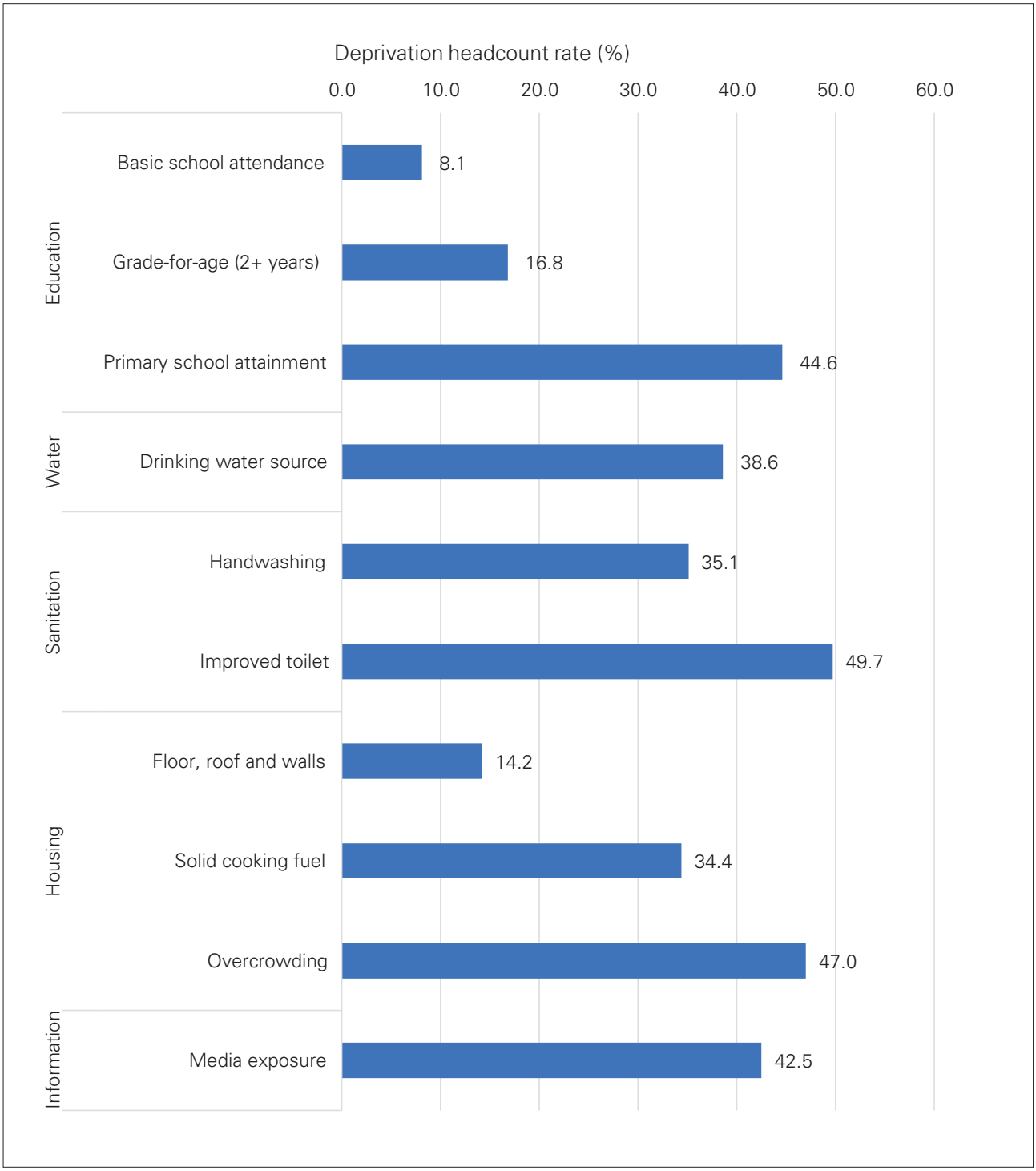
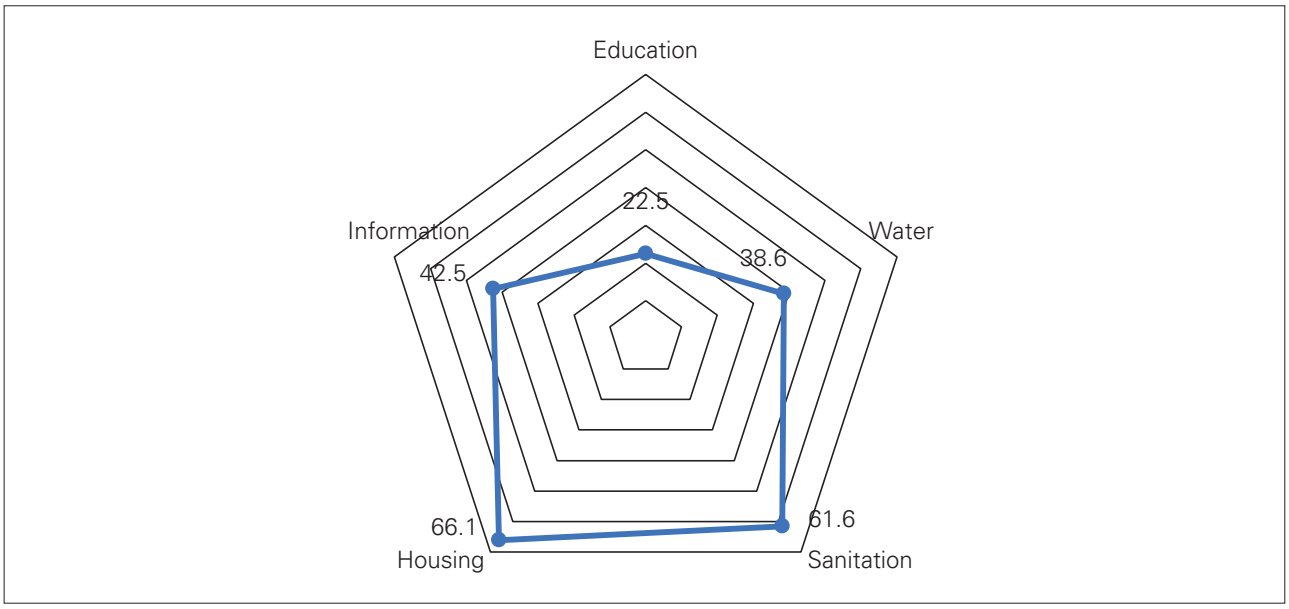


Figure 11: Deprivation headcount rate (%) by dimensions, children aged 5-14 years



Multiple deprivation analysis

Figure 12 shows the overall picture of multidimensional poverty among children aged 5-14 years; figures 13 and 14 break down the data geographically by area and geographical zone. The majority of children in this group suffer from multiple deprivations. Half of all Cambodian children of this age suffer from two to three dimensions at a time. The differences between urban and rural populations are quite pronounced and vary by geographical zone.

Figure 12: Deprivation distribution at the Cambodia level for children aged 5-14 years

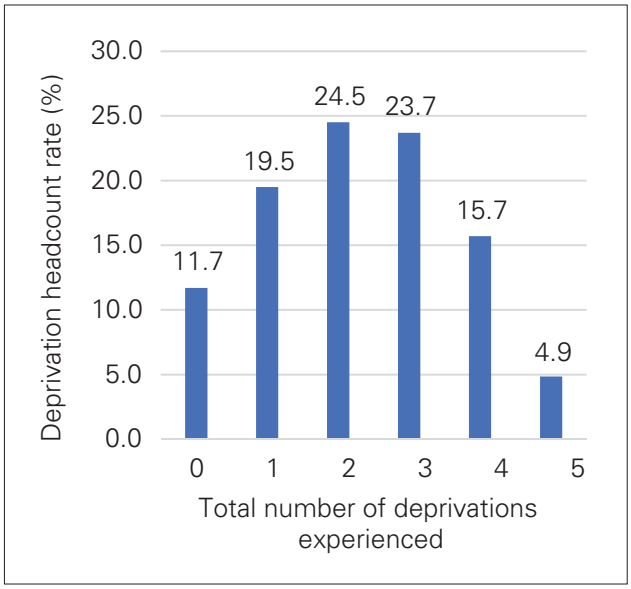
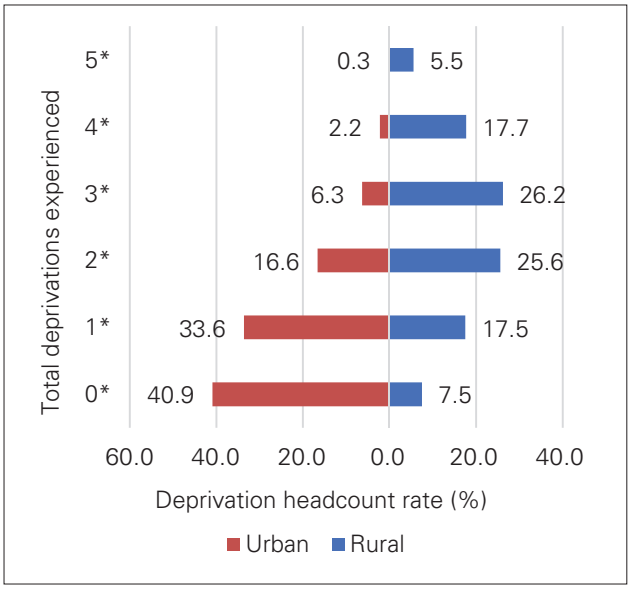
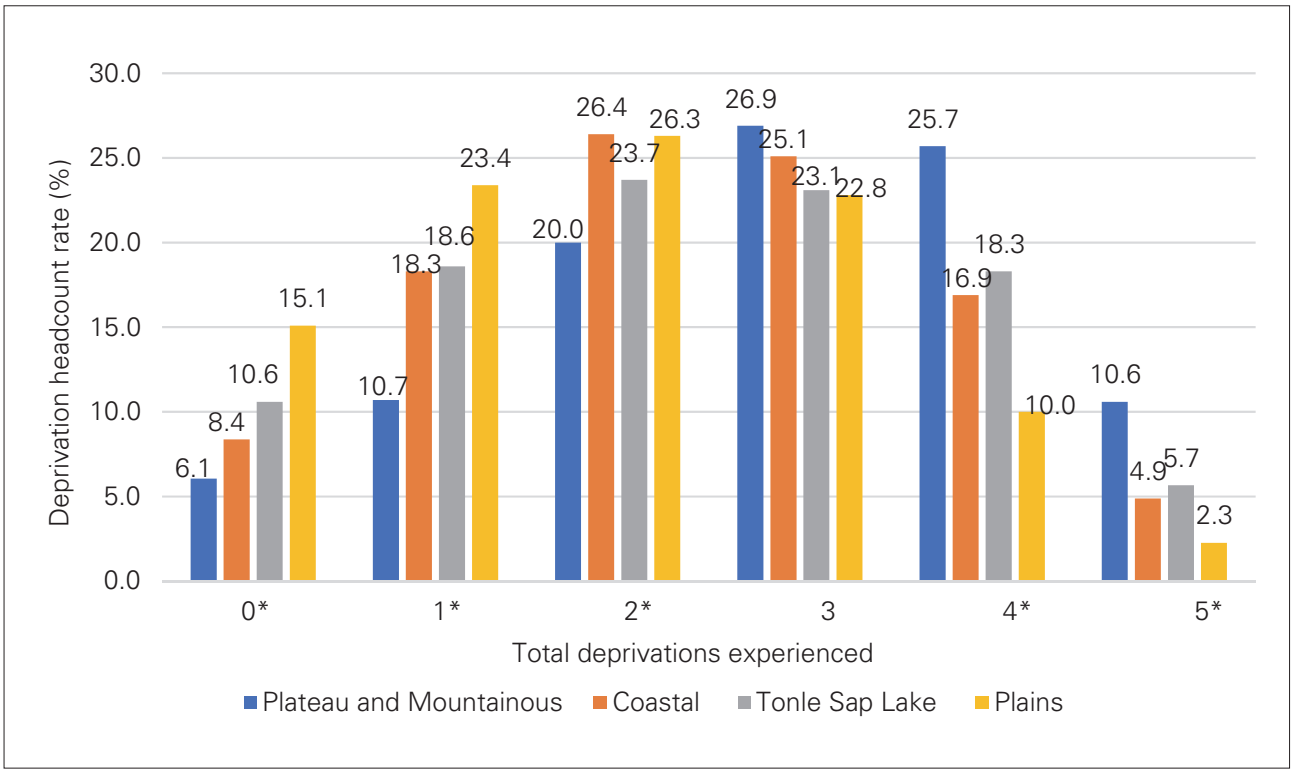


Figure 13: Deprivation distribution by area for children aged 5-14 years



* *An asterisk (*) denotes that differences between the deprivation rates of subcategories are statistically significant at the level of p<0.05*

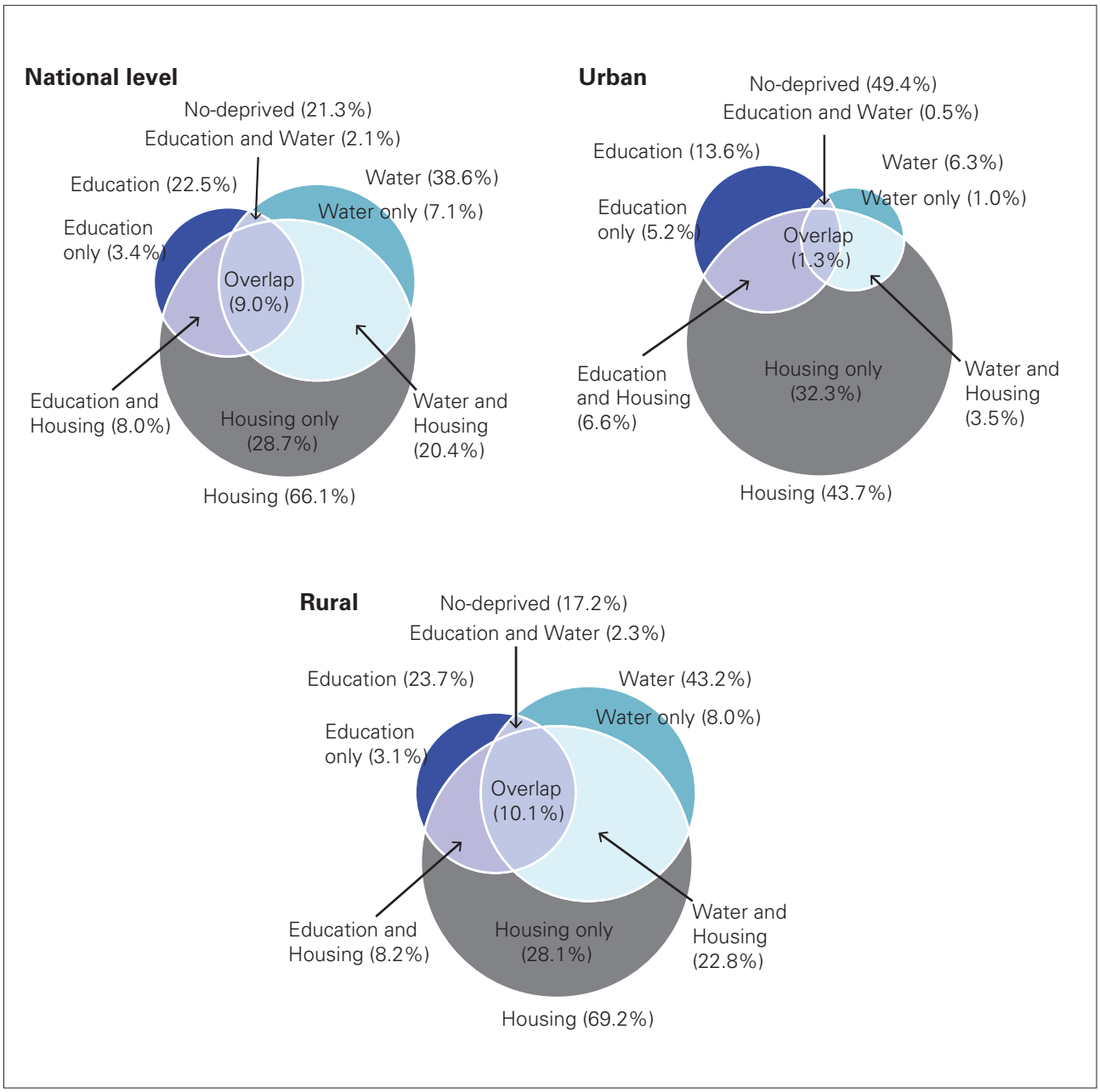
Figure 14: Deprivation distribution by geographical zone for children aged 5-14 years



* *An asterisk (*) denotes that differences between the deprivation rates of subcategories are statistically significant at the level of p<0.05.*

Figure 15 examines the extent to which education, water and housing deprivations impact Cambodian children aged 5-14 at national, urban and rural levels. It shows that national results are very strongly driven by rural-level results. In the combination of education, water and housing, there is a much larger overlap of deprivation in all three dimensions compared to in urban areas.

Figure 15: Three-way deprivation overlap for the combination of education, water and housing dimensions for children aged 5-14 years at the national level and by area



3.3 Children aged 15-17 years

Highlights

- Deprivation headcount rates for children aged 15-17 years in Cambodia are the highest in the education and housing dimensions. Close to 60 per cent of children in this age group are two or more years behind at school, while approximately 43 per cent of 15-year-olds are not attending school at all. Moreover, more than four of 10 children are living in overcrowded households with more than four people per sleeping room.
- Half of the children in this age group are multidimensionally poor, experiencing on average 3.7 deprivations.
- The combination of education, sanitation and housing has the largest overlap (32 per cent) of all possible combinations of three dimensions for children aged 15-17.
- In urban areas, the dimension water is less relevant compared to rural areas. However, education and housing are both contributing most to the adjusted multidimensional deprivation headcount (M0) at the national, urban and rural level.

Single deprivation analysis

Five dimensions were assessed for children aged 15-17 based on relevance and data availability: education, water, sanitation, housing and information.

Figure 16 shows high rates of deprivation in nearly all indicators for children aged 15-17 in Cambodia. Strikingly, the rate of deprivation in the education dimension is disproportionately high and unsuitably so for the effective development of human capital. Figure 17 shows that 65.8 per cent of Cambodian children aged 15-17 are deprived in the education dimension, with nearly 60 per cent of children being two or more years behind in school, 43.2 per cent being of basic school age but not attending basic school, and nearly one in three children being beyond primary school age but having not completed primary school. Substantially more children aged 15-17 are deprived in the education dimension compared to children aged 5-14 (65.8 per cent vs. 22.5 per cent) as seen in the previous section. These results suggest a high rate of school attrition – children beyond primary school age either drop out of school early or do not complete primary school.

Figure 16: Deprivation headcount rate (%) by indicators, children aged 15-17 years

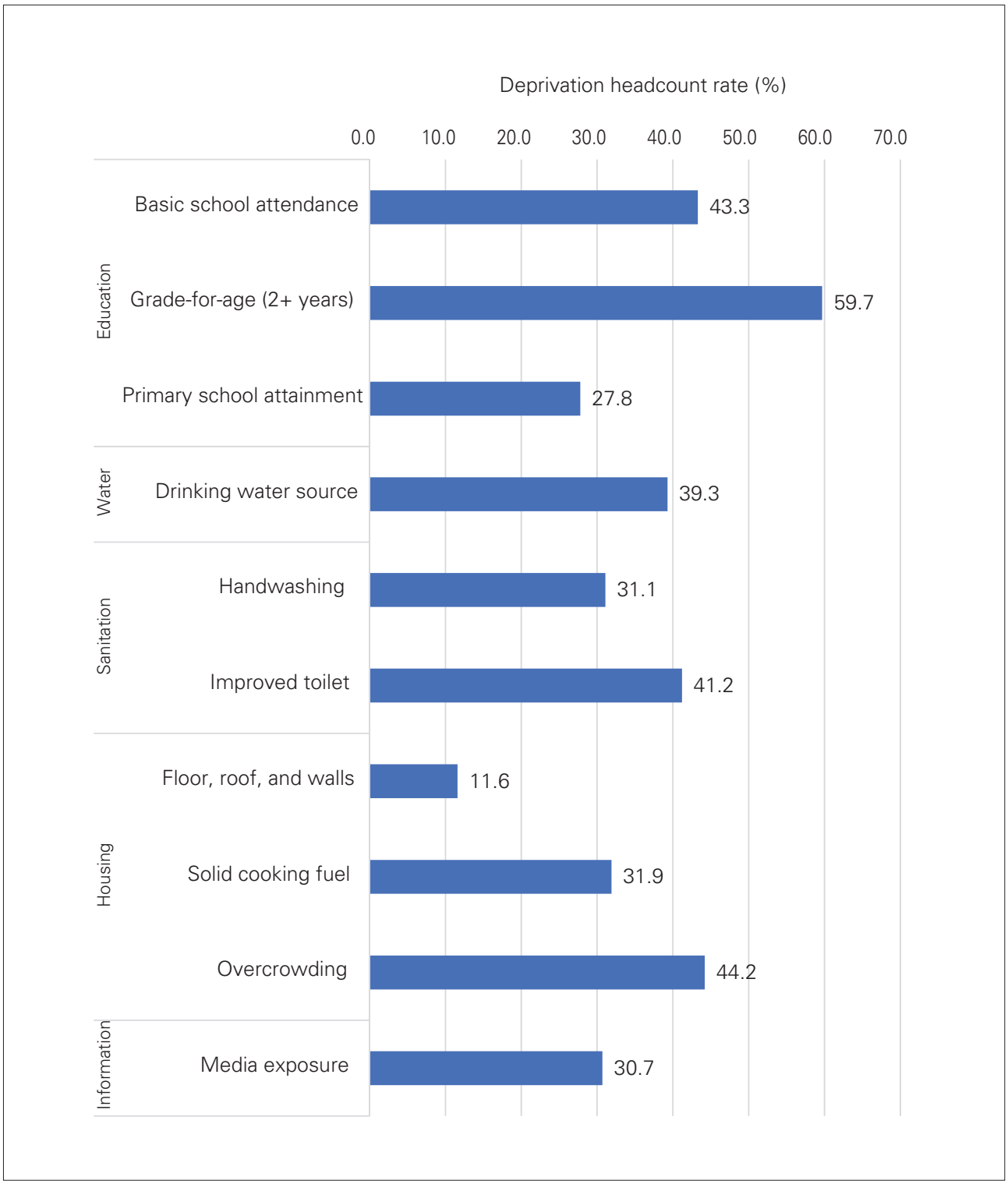
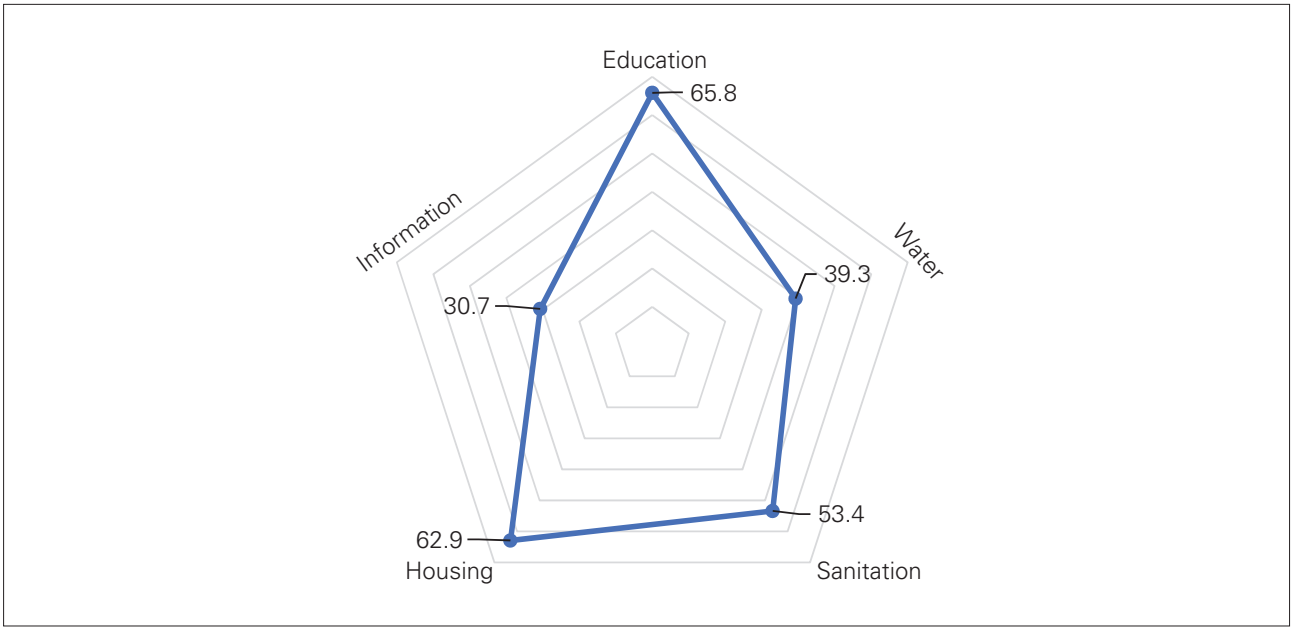


Figure 17: Deprivation headcount rate (%) by dimensions, children aged 15-17 years



Multiple deprivation analysis

Figure 18 shows the overall picture of multidimensional poverty among children aged 15-17, demonstrating that the majority suffer from multidimensional deprivations. Only one in 10 children has no deprivations. Children living in rural areas are far more likely than urban children to have multiple deprivations (**Figure 19**). The deprivation distribution of children living in rural areas peaks at three deprivations while the majority of children living in urban areas are deprived in one or no dimensions. **Figure 20** shows a higher chance of multiple deprivations for those living in Plateau and Mountainous zones compared to those in Plain zones.

Figure 18: Deprivation distribution at the national level for children aged 15-17 years

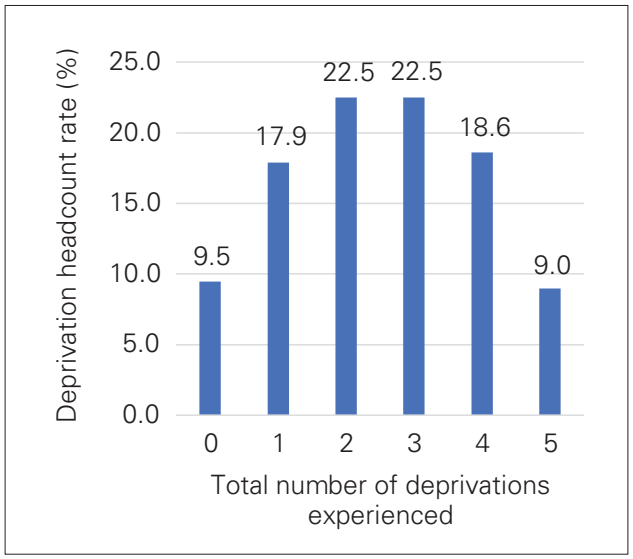
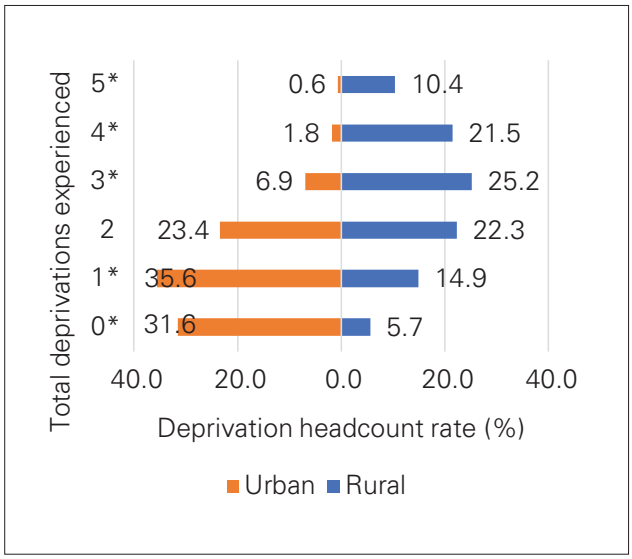
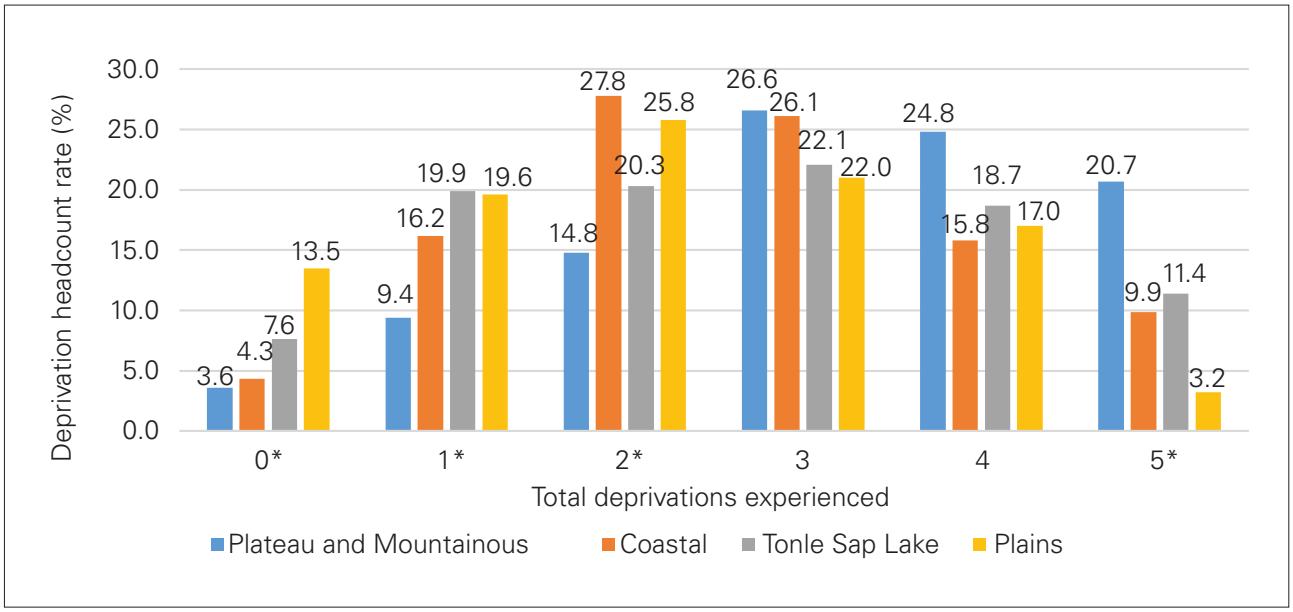


Figure 19: Deprivation distribution at the Cambodia level for children aged 15-17 years, by area



* *An asterisk (*) denotes that differences between the deprivation rates of subcategories are statistically significant at the level of p<0.05*

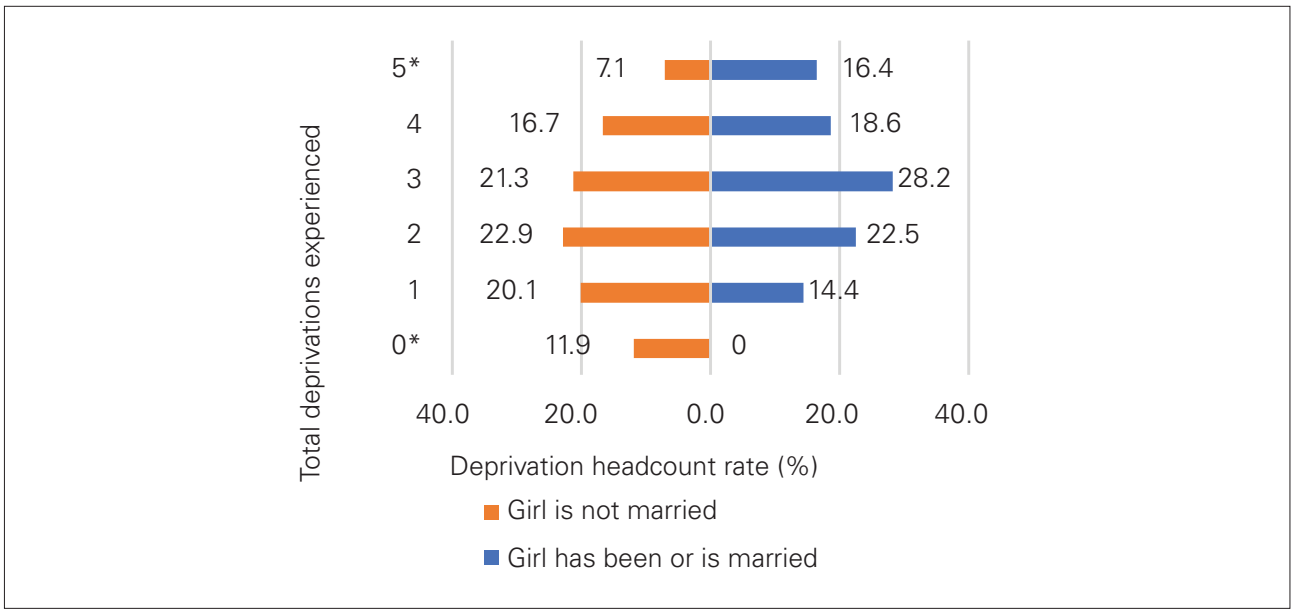
Figure 20: Deprivation distribution at the Cambodia level for children aged 15-17 years, by geographical zone



* *An asterisk (*) denotes that differences between the deprivation rates of subcategories are statistically significant at the level of p<0.05.*

Figure 21 shows the deprivation distribution of girls aged 15-17 according to marital status. Girls who are or have been married are all deprived in at least one dimension at a time, compared to 11.9 per cent of girls who have never been married who are deprived in zero dimensions.

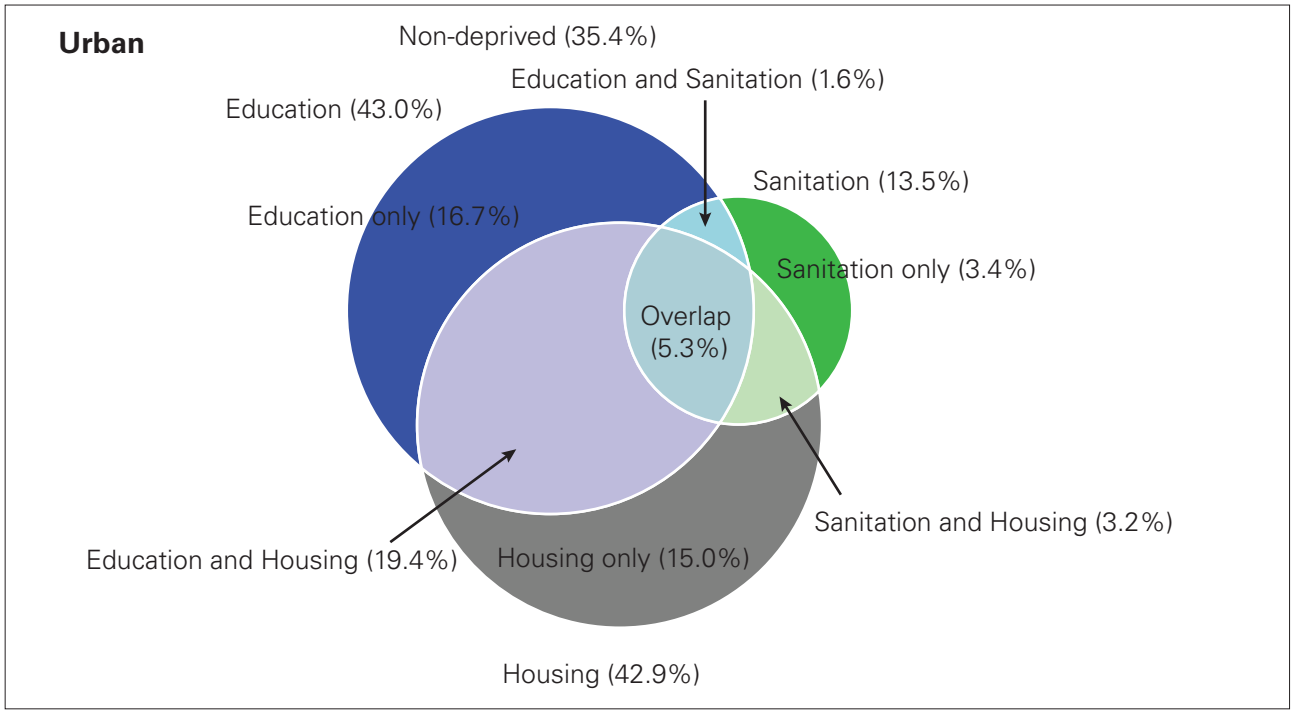
Figure 21: Deprivation distribution by girl's marital status for girls aged 15-17 years

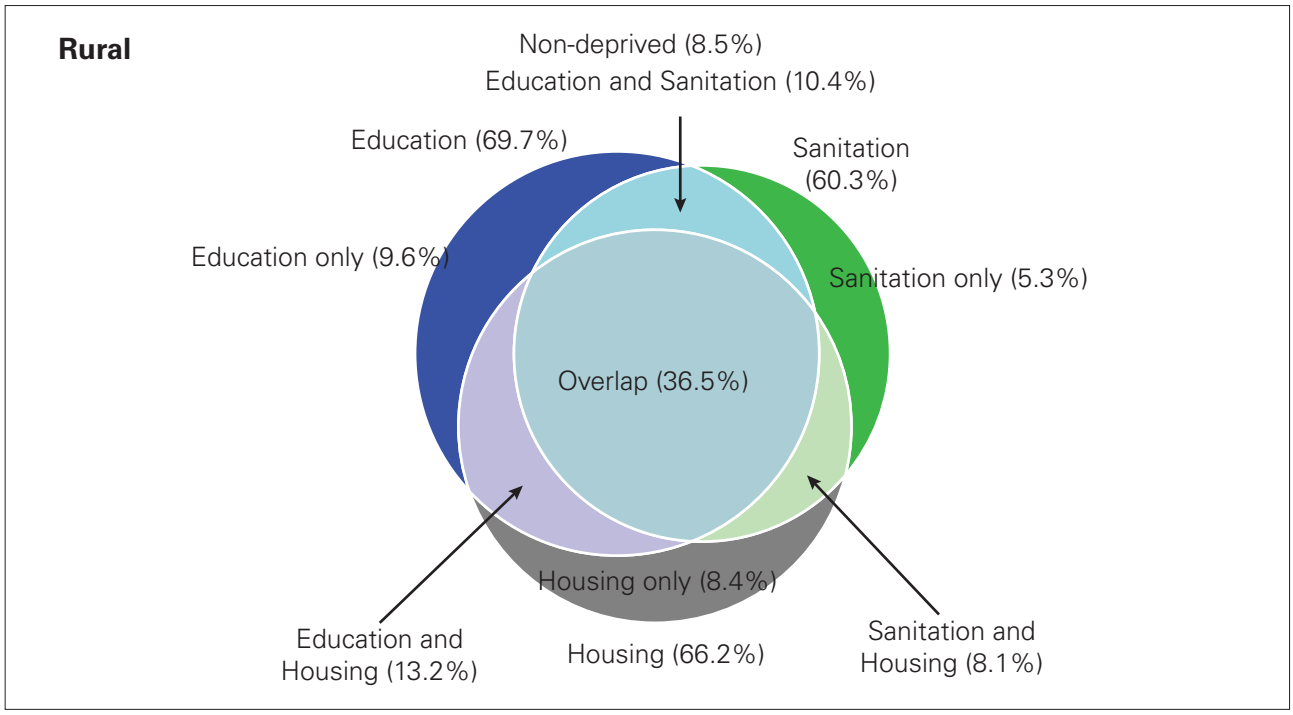


* *An asterisk (*) denotes that differences between the deprivation rates of subcategories are statistically significant at the level of p<0.05.*

Figure 22 presents the combination of education, sanitation and housing for children aged 15-17, considering urban versus rural settings. Multidimensional poverty is clearly a problem in rural areas – not only is the incidence of deprivation in each of these dimensions larger in rural areas, but more children deprived in any of these dimensions is likely to be deprived in at least one of the other two dimensions as well. Policies targeting deprivation in any of these dimensions must therefore be attuned to relevant inter-sectoral approaches.

Figure 22: Three-way deprivation overlap for the combination of education, sanitation and housing dimensions for children aged 15-17 years, by area





4. Conclusion

The results of the monetary and multidimensional poverty analyses demonstrate that to achieve the well-being of children in Cambodia, both forms of poverty must be addressed. This speaks to the achievement of both sub-goals of SDG 1.2 – halving, by 2030, the rate of both monetary poverty and poverty "in all its forms" for children, using national definitions (Table 5). Eliminating either monetary or multidimensional poverty alone is likely to leave behind a group of children who is poor according to both or either definition. Even if monetary poverty were eradicated by 2030, a significant proportion of children would still lack access to basic services and have unfulfilled needs essential to their growth and development and essential to the sustainable, long-term socio-economic development of Cambodia.

For children, a comprehensive national poverty reduction strategy should aim to make a difference in multiple sectors of a child's well-being, and at the same time. A child deprived in both nutrition and sanitation, even if they receive access to adequate sanitation, will still have significant developmental setbacks if their nutrition problem is not also addressed. These findings call for a better integrated, multisectoral approach to addressing the needs of children. Especially for certain subgroups, like children living in rural areas or children who are stunted, coordinated multisectoral strategies will be crucial to solving these overlapping deprivations. The profiling analyses presented, which identify the most vulnerable child subgroups, give some indication for how to design more effective targeting mechanisms.

Table 5: Reference rates for SDG 1.2.1 and SDG 1.2.2, for children

SDG	Category	SDG indicator	Poverty line	2015	2030
				Poverty rate	
				Baseline	Target
1.2.1	*Monetary poverty (national definition)*	% of children living below the national poverty line	National Cambodia poverty line = KHR 4,984/day	16.0%	8.0%
1.2.2	*Multidimensional poverty (national definition)*	% of children who are multidimensionally deprived according to national definitions	Deprivation in at least 3 dimensions of child well-being	48.7%	24.4%

Ministry of Planning

No. 386 Monivong Boulevard,
Phnom Penh, Cambodia

United Nations Children's Fund (UNICEF)

5th Floor, Exchange Square Bldg, no. 19&20,
Street 106, Phnom Penh, Cambodia