



ETHIOPIAN CHILDREN'S VOICES AND VIEWS ON URBAN CHILD POVERTY

July 2019



POLICY STUDIES
INSTITUTE (PSI)



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Acronyms

| | |
|---------------|--|
| ADLI | agricultural-development led industrialization |
| AfDB | African Development Bank Group |
| AIDS | acquired immunodeficiency syndrome |
| ANC | antenatal care |
| CAGR | compound annual growth rate |
| CCC | community care coalition |
| CSA | Central Statistical Agency (Ethiopia) |
| CSG | Child Support Grant (Republic of South Africa) |
| CSO | civil society organisation |
| CT | cash transfer |
| DFID | Department for International Development (United Kingdom) |
| DSD | Department of Social Development (Republic of South Africa) |
| ECSU | Ethiopian Civil Service University |
| EDHS | Ethiopian Demographic and Health Survey |
| EDRI | Ethiopian Development Research Institute |
| FGD | focus group discussion |
| GBV | gender-based violence |
| GFDRR | Global Facility for Disaster Reduction and Recovery |
| GTP | Growth and Transformation Plan |
| GTZ | German Technical Cooperation Agency |
| HCE | Household Consumption-Expenditure Survey (Ethiopia) |
| HIV | human immunodeficiency virus |
| IDI | in-depth interview |
| IEC | information, education and communication |
| IHDP | Integrated Housing Development Programme |
| ILO | International Labour Organization |
| KII | key informant interview |
| MENA | Middle East and North Africa region |
| MDGs | Millennium Development Goals |
| MODA | multiple overlapping deprivation analysis (UNICEF) |
| MoLSA | Ministry of Labour and Social Affairs (Ethiopia) |
| MoWCA | Ministry of Women, Children and Youth Affairs (Ethiopia) |
| MoYSC | Ministry of Youth, Sports and Culture (Ethiopia) |
| MUDHCo | Ministry of Urban Development, Housing and Construction (Ethiopia) |

| | |
|-------------------|--|
| MVC | most vulnerable children |
| NGO | non-governmental organisation |
| NPC | National Planning Commission (Ethiopia) |
| NRERC | National Research Ethics Review Committee (Ethiopia) |
| NSPP | National Social Protection Policy (Ethiopia) |
| ODI | Overseas Development Institute |
| OPM | Oxford Policy Management |
| PASDEP | Plan for Accelerated and Sustained Development to End Poverty |
| PRSP | poverty reduction strategy paper |
| PSNP | Productive Safety Net Programme |
| SASSA | South African Social Security Agency |
| SDGs | Sustainable Development Goals |
| SDPRP | Sustainable Development and Poverty Reduction Programme |
| SNNPR | Southern Nations, Nationalities, and Peoples' Region |
| SP | social protection |
| SPESI | Social Policy and Evidence for Social Inclusion (United Nations Children's Fund, Ethiopia) |
| SSA | sub-Saharan Africa |
| UCT | unconditional cash transfer programme |
| UN DESA | United Nations Department of Economic and Social Affairs |
| UNESCO | United Nations Educational, Scientific and Cultural Organization |
| UNDP | United Nations Development Programme |
| UN-Habitat | United Nations Human Settlements Programme |
| UNICEF | United Nations Children's Fund |
| UPSNP | Urban Productive Safety Net Programme (Ethiopia) |
| WHO | World Health Organization |
| WMS | Welfare Monitoring Survey (Ethiopia) |
| WPP | World Population Prospects |

Executive summary

Ethiopia is urbanising fast. Growth rates of urban populations have been rising rapidly over the past 30 years, and urbanisation is now considered a priority in the second Growth and Transformation Plan (GTP) of the Ethiopian Government for the years 2015-2020. Two out of five Ethiopians will be living in urban areas by 2050 (UN DESA projections, 2018), and the rate of urbanisation¹ is expected to average 4.4 per cent until 2030, only dropping to around 3.4 per cent after 2030 and until 2050. This average 4.4 per cent urbanisation rate makes Ethiopia one of the most quickly urbanising countries in the world, preceded only by seven other countries in Sub-Saharan Africa.²

The Ethiopian Central Statistical Agency (CSA) cites several factors contributing to urban population growth: natural growth, internal rural-to-urban migration (due to limited basic services and economic opportunities in rural areas), and other factors relating to the emergence of new cities and the expansion of old ones. Challenges in identifying the role, significance and relevance of different drivers translate into difficulties in planning and managing urbanisation. Nonetheless, it is clear that rural-to-urban migration is one of the most important driving forces of urbanisation, spurred by the seemingly better social services and living conditions in cities. While one in every ten rural-to-urban migrants move in search of economic opportunities in urban areas (CSA, UNICEF, and OPM, 2015), most migrants move due to push factors including environmental degradation, lower agricultural productivity, inadequate social services and land shortages in rural areas. Only 5 per cent of migrants move with their entire family (World Bank, 2015a), and many children are living without their mothers in urban centres (6 per cent in Addis Ababa alone). Recent findings from UNICEF's Multiple Overlapping Deprivation Analysis (MODA) applied to Ethiopian data suggest that 42 per cent of all urban children are deprived in three or more of six dimensions and, even though child poverty remains predominantly a rural phenomenon, inequality prevails in urban areas.

Owing to limitations in existing data, a thorough assessment of the impact of urbanisation on child poverty in Ethiopia is an arduous exercise. While available secondary quantitative data provide useful information to describe the extent and possible characteristics of urban child poverty, important gaps still remain in the understanding of urban children's complex experiences of poverty, the factors associated with this poverty, and its consequences. Conventional multi-topic household surveys used to assess household poverty also fail, in most cases, to depict the full extent and nuances of the poverty facing children—including children qualified as the most vulnerable (migrant children, street children, orphans and children with disabilities). Qualitative research is particularly suited to help fill these gaps, as well as evidence gaps on stigma, discrimination, social exclusion, physical safety, violence (in the household and/or the community), and the psychological and emotional turmoil that often affect children. Such subtle information is necessary to complement quantitative assessments and to tailor policies to reduce urban child poverty more effectively.

1. The projected average rate of change of the urban population size.

2. These seven countries have the following urbanisation rates over the period 2015-2030: Burundi (5.4 per cent), Uganda (5.4 per cent), Tanzania (4.9 per cent), Burkina Faso (4.7 per cent), Niger (4.7 per cent), Mali (4.6 per cent) and Malawi (4.4 per cent).

New qualitative evidence on children's experiences of poverty in urban settings of Ethiopia is thus provided in this study that focused on two sites – Kombolcha city (Amhara region) and the Kolfe Keranio sub-city of Addis Ababa. The study draws on information gathered from focus group discussions (FGDs) and in-depth interviews (IDIs) with children aged 10-14 and adolescents from 15-17. Child and adolescent views and voices are complemented by those from adults, including FGDs with parents/guardians, teachers, community and religious leaders, and a series of key informant interviews (KIIs) with government officials and representatives from NGOs at local, national, and regional levels. The study offers a comprehensive picture of child poverty in Ethiopia, also drawing from children's own perceptions of poverty, its causes and consequences, and the impact of urbanisation on their daily lives. Qualitative findings are compared and contrasted with innovative analysis of the Welfare Monitoring Surveys that took place twice, once in 2011 and once in 2016 (WMS, 2011, 2016). Only urban households with children aged 17 years or younger were included in this work. Furthermore, a principal component analysis guided the formulation of wealth quintiles (based on the distribution of urban assets across urban dwellers), and highlighted significant changes in living conditions for the poorest households that occurred between the years 2011 and 2016. The study concludes with a discussion of policy implications based on these research findings.

Urbanisation and urban child poverty

Children living in urban poverty are exposed to unique vulnerabilities, including lack of secure housing and the threat of eviction, overcrowding, exposure to toxic pollutants and the risk of road traffic injuries, poor infrastructure and public services, and high rates of crime and violence within the community (and the household).

The 22.3 million people living in urban areas of Ethiopia in 2018 amount to 20.8 per cent of the overall population. This proportion is expected to approach 27 per cent by 2030 and more than 39 per cent by 2050 (UNDESA, 2018). The Central Statistical Agency (CSA) estimates that children younger than 10 years represented 20 per cent of the overall urban population in 2018. Adolescents (aged 10 to 19 years) and youth (aged 15 to 24 years) reached 21.2 per cent and 23.7 per cent respectively. Whereas Addis Ababa remains the largest city, attracting a large absolute number of internal migrants and increasing by a CAGR of 2.4 per cent per year, the populations of secondary cities have also increased with generally higher rates of growth, averaging 5 per cent a year between 2014 and 2017.³ (see Figure 2 in main text).

Four out of five urban dwellers live in informal settlements (World Vision International, 2016), and one in four youth are currently unemployed (CSA, 2018). Urban unemployment predominantly affects women and girls, with one in three of them jobless. If employed, young girls in urban areas usually work as domestic servants to non-relatives, which keeps them out of school (see Figure 4 in main text).

3. This is the case for Mekele (Tigray Region), Hawassa (Southern Nations, Nationalities, and Peoples' Region), Bahir Dar (Amhara Region), Gambella (Gambella Region), Assayita (Afar Region) and Assosa (Benishangul-Gumuz Region).

Although there is rather extensive literature on urban poverty in general, research on urbanisation in Ethiopia and its potential effect on the urban poor is still limited in scope, even more so when it comes to research on urban child poverty. However, there is evidence of increasing attention to children's issues and child poverty in the evolution of national strategies and child-focused policies. Nonetheless, the second Growth and Transformation Plan (GTP-II) covering the years 2015-2020 continues to consider children, along with youth and women, as simply a crosscutting issue instead of an important topic in its own right. The current study highlights the urgent need for the upcoming GTP-III to clearly mention child poverty as a separate topic deserving its own attention. Further, specific recommendations for poor children living in urban areas should also be made in GTP-III. Moreover, given the rapid and accelerating trend of urbanisation, in which urban child poverty seems engrained, addressing urban child poverty should become a common denominator of the GTP process. This also implies undertaking a child rights-based approach to programming (in urban settings in particular) by bringing children's voices, views and unique experiences of poverty into the policy and programme process.



Urban poverty as viewed and voiced by poor children: Key findings from qualitative research

Our qualitative data collection and analysis shed light on children's understanding of poverty, its causes and consequences, and the impact that rapid urbanization is having on the life of children growing up in poverty in Kombolcha and Kolfe Keranio (Addis Ababa).

Definitions and experiences of poverty

Children in urban areas commonly describe living in poverty as having unfulfilled basic needs for food, shelter and clothing. This definition is homogenous across sites and gender and age groups, and is most often referred to by out-of-school children. Poor urban children in our study identified the poorest children in the community as the most vulnerable children (including orphans, street children, migrant children and children with disabilities), which was not the case in a previous comparable qualitative exercise undertaken under the Young Lives Programme.

Children discussed education deprivation at length, and they associated 'being poor' with 'being unable to attend school' because of indirect costs of schooling, such as transportation and uniforms. Boys commented that they are likely to be beaten by teachers if they fail to bring school materials. Girls are bullied and teased by classmates if they wear worn-out school uniforms. Welfare Monitoring Survey (WMS) data suggest that those urban children (aged 14 to 17 years) belonging to the poorest wealth quintile are most likely to have never been in school.

Children in Kolfe Keranio also debated disparities in education affecting migrant children, discussing the risks related to attending evening classes in this FGD: *'Migrant children working as housekeepers are usually exploited and exhausted, and they cannot attend school properly. Some of them decide to attend evening classes even when their employers disagree. Younger girls that attend evening classes are usually afraid of walking in the dark late at night for the risk of rape and physical harassment. We heard that strangers recently kidnapped a girl who was going to school late in the evening, and they took her kidneys. That girl was found dead shortly afterwards. We have also heard that strangers abduct young children and traffic them'* (Poverty Tree/FGD with in-school girls aged 10-14 years in Addis Ababa).

Poor housing conditions were also often mentioned as indicators for urban child poverty. Older boys in Kolfe Keranio depicted poor housing as tiny, rented houses that can barely accommodate all family members and that have leaking roofs when it rains. Children and adults alike lamented high and rising rents, a trend that threatens households' ability to pay and increases the risk of homelessness. WMS data point to deteriorating quality of walls and roofs and even greater overcrowding for the poorest households between 2011 and 2016.

Among the most vulnerable children, street life is extremely harsh, but exhibits a different impact by age and gender. Older children are more likely to become child labourers, while younger children

usually beg for food or collect food that has been thrown away. Girls are especially vulnerable to rape and broader sexual violence. All children experience violence, either from older children or from adults. Many decide to forego sleeping at night to remain vigilant and to try and protect themselves. Migrant children may be escaping rural poverty or family conflict, with girls running away from harmful practices (like child marriage) that are more prevalent in rural areas.

Determinants and consequences of child poverty

Children in Kombolcha and Kolfe Keranio enumerated similar determinants for child poverty, independently of their age, gender and school attendance. Unemployment and lack of reliable household income were often mentioned, with available jobs (as daily labourers) paying income that was meagre and insufficient to meet the households' basic needs. Younger children further related 'lack of income' with 'uneducated parents'; and older children and adults discussed 'laziness' and 'over-reliance on expected financial assistance'.

Family breakdown was also thoroughly discussed during the qualitative exercise as another leading determinant of urban child poverty, often due to parental divorce or death, unemployment or lack of household income. Alternatively, parents could become frustrated because of chronic poverty and turn to alcohol and/or drug abuse. This would then bring conflict into the household and lead to family disintegration. Addiction to drugs and alcohol could also spur violence against children in the household, as explained by younger children in Kolfe Keranio: *'When a father becomes an addict, his character may change, and he may start punishing his children for no reason. The children may then flee the family roof to escape from the abuser'* (Poverty Tree/FGD with in-school boys aged 10-14 years in Addis Ababa).

Among the consequences of child poverty, FGD and KII participants mentioned a lack of school attendance and/or poor school performance, poor health and sanitation (at the household and community level), inability to access medical treatment (because of unaffordable costs) and social exclusion. They also reiterated the effects that street life has on children, and exposure to child labour exploitation. Younger children and migrant children are more likely to be engaged in hazardous manual labour because they are unaware of their rights, and they lack connection to social networks.

On the impact of urbanisation on child poverty

When discussing the consequences of urbanisation on their lives, participants in our qualitative study focused on environmental degradation, unplanned population growth, increased child labour and the dismantling of social capital. Urbanisation – in this case the excessively fast growth of urban areas – deepens the negative impact of child poverty on children's lives. While participants briefly mentioned some 'positive' effects of urbanisation (namely, greater availability of goods and better markets for small private businesses), the discussion mainly revolved around the perceived negative effect of urbanisation on children's lives.

Environmental degradation was debated most in Kolfe Keranio (Addis Ababa), where tanneries, textile factories and a large beer factory brought about environmental pollution, scarcity of clean water, deforestation and lack of green spaces where children can play safely. Lack of trees was further related to prevailing respiratory tract infections, which appear to be surging.

Respondents in Kombolcha associated the expansion of industrial parks (for food processing, textile and garments) with unplanned population growth, and subsequent inflation for food and rent. In many instances, unaffordable rent led to the spreading of illegal housing that could easily be dismantled and removed, further putting tenure security in danger.

WMS data suggest that 8.5 per cent of urban households (with children younger than 17 years) were keeping their children out of school in 2016 and sending them to work to add to family income. That was a significant increase of 1.6 percentage points from 2011.

A representative from a national NGO highlighted the interaction between urbanisation and increased child labour in Kombolcha: *'There are many children that come here from the countryside to work during the rainy season when schools are closed. Other children miss school altogether in order to work on the railway construction site nearby. Since the railway construction passes through rural areas, there are many boys who engage in daily labour from those areas. They usually collect and sell stones at the stone crusher plants'* [KII with a (national) NGO representative in Kombolcha].

Social fragility and the dismantling of social capital was a final remark on the discontent about urbanisation, with key respondents hinting that antagonism between newcomers and native residents may hamper any opportunity for local development.

Policy implications

This study sets out key policy implications based on the qualitative (and secondary quantitative) evidence gathered in the field that is situated within a broader assessment of existing policies and interventions to address child poverty in (urban) Ethiopia.

Reaching the most marginalized and most vulnerable urban children first

Within the context of the urbanisation of poverty, a key challenge for policy interventions is to reach the most marginalized children first. This includes out-of-school and/or working children, who are often street children, migrant children, trafficked children or child domestic workers, those affected by violence reinforced by social norms, orphans and children with disabilities. Numerous interviewees in our qualitative research identified the need to focus on such children, including orphans and children with disabilities because they are the poorest among poor children. This priority is in line with the 'leaving no one behind' commitment under the Sustainable Development Goals (SDGs), currently integrated within the GTP-II.



Various crucial dimensions of poverty (and child poverty) including social exclusion, domestic and school violence, juvenile justice and harmful child labour practices have all, so far, remained omitted from national poverty-reduction strategies. Policy initiatives tend to be one-size-fits-all, with few specific measures to ensure they are tailored to meet the differential needs of children, starting from different needs of urban (and rural) children. Moreover, children's views and experiences of poverty have largely been omitted in policy-making, implying that children are not considered competent in shaping their own interpretations of poverty. Instead, child-responsive urban planning should perceive the child both as a service receiver and a participant, whose rights to health, safety, citizenship, environment, and prosperity should be prioritised (UNICEF, 2018b).

Furthermore, the technical design and implementation of programmes is often a source of challenges. Again, this is because the specific needs and vulnerabilities of different groups of children are disregarded. This is evident in the consideration of children's needs and characteristics as a 'crosscutting' issue that leads them to be passed over and receive no specific attention in policy-making. Distinct and concerted efforts will be required, in the scope of policy interventions, to locate the most marginalised groups, acknowledge them as separate agents, and incorporate gender and age dimensions in programming.

Reducing barriers to access basic services for the urban poor, multisectoral programming and synergies between formal and informal community-based organisations

Interviewees in this research discussed the inability of poor households, and children within those households, to access basic services in urban areas because of a lack of infrastructure or unaffordable indirect costs. Under-financing and weak provision leave the poor unable to access services, and result in poor children being excluded.

Increased public spending and redistributive public finance (including progressive taxation) can reduce barriers to access basic services for the urban poor, together with multi-sectoral programming based on a clear definition of roles and responsibilities for all parties engaged. Poor children experience multiple vulnerabilities and suffer from multiple deprivations that need addressing through multi-sectoral responses. The Ethiopian government, international development partners and (international and local) non-governmental organisations (NGOs) and civil society organisations (CSOs) should then undertake a systems approach in programme planning and implementation. This approach would facilitate identification of poor urban children as beneficiaries, engage in effective targeting, and promote better service delivery bridging different sectors and areas of intervention.

Participants in qualitative fieldwork under this research further advocated for cooperation between the local government, non-governmental organisations (NGOs), and community care coalitions (CCCs). NGOs and CCCs can play a vital role in identifying the poorest children living in and outside household settings, and connecting them to existing government programmes that can provide support.

Addressing the negative impacts of urbanisation on child poverty, and expanding income support programmes

Notwithstanding the increased attention to urban deprivation under the national Growth and Transformation Plans (GTPs), GTP-III should clearly mention child poverty from a rights-based perspective, and propose ad-hoc recommendations to address urban child poverty. Social protection programmes targeting urban poverty should also adjust and adapt to the needs of the urban poor, and of urban poor children, and they should be tailored around those needs and separately acknowledge and address children's needs. Their guidelines should incorporate review and revision mechanisms based on lessons learnt and experienced failures (from similar contexts in other countries). This should especially hold for the first generation of urban safety net programmes, which are currently being introduced in Ethiopia and several other countries.

Moreover, actions that complement cash transfer programmes (including nutritional supplements, behavioural change training, programmes that address mental health or partner's violence or that encourage aspirations through increased social interactions) can strengthen the intended impact of social protection programmes. These actions can also address many emotional, relational and socio-psychological dimensions of poverty that are especially important to poor children.

Focusing on information, education and communication

After identification of potential beneficiaries, extensive communication and outreach should be tailored to the needs of the urban poor, and the needs of poor urban children in particular. Accordingly, messages reaching the urban poor of all ages with appropriate and trusted multi-media and community-based channels should be considered.

Equally important for information, education and communication (IEC) efforts is to contribute to changing social beliefs on poverty, and to empower the urban poor and poor urban children to take positive actions.

Addressing evidence gaps

This study concludes with a call for action to fill evidence gaps and to gather new qualitative and quantitative data on urban child poverty. Improvements in available data would allow a more comprehensive assessment of the drivers of child poverty in urban settings, and would inform ad-hoc policy interventions accordingly. Current evidence gaps include city-level population projections, disaggregated by gender and age groups, and information on the different roles played by the drivers of urbanisation, as well as information on whether children migrate alone or are accompanied by one or more adults.

Evidence on the living conditions of the most vulnerable children (MVC) is scant and insufficient to inform sound policy recommendations. To address this specific gap, it may be necessary to rely on atypical survey methodologies, given that children living in poverty, especially MVC, are often left out of traditional data collection methods.⁴ Data can be improved with the use of satellite and mobile-phone data. Sampling frames should also reflect the rapid changes that urban environments often experience. To this end, survey frequency matters.

Finally, existing datasets can also be further probed to ascertain whether social protection interventions have provided any sustainable escape from poverty traps, and whether they helped to break the vicious circle of chronic urban child poverty. If existing research highlighted any promising effect from certain interventions, a follow-up study may reveal whether those effects were just short-lived and how they could otherwise be sustained.

4. These methods are usually based on an existing population censuses that typically disregard informal settlements as well as sub-populations living outside household settings.

1. Introduction

1.1 Background

In Ethiopia, several Millennium Development Goals (MDGs) have been achieved: extreme poverty and hunger have been reduced by half and there have also been improvements in goals on infant mortality and education as measured by school enrolment (EDRI and UNICEF, 2017). Following progress on the MDGs, the country has thus embraced the Sustainable Development Goals (SDGs), integrating them into the second Growth and Transformation Plan (GTP-II) for 2015-2020 (see Box 1). Remarkably, GTP-I included children (along with gender) as a crosscutting issue and not an issue in its own right. GTP-II also considers children and youth (along with women's affairs) in the plan and has set objectives with indicators to be monitored. Nonetheless, this study stresses the importance for the GTP-III to clearly mention and address child poverty from a child rights-based perspective, and to set out separate recommendations for child poverty in urban areas.

According to findings from the Multidimensional Poverty Analysis report, in which UNICEF's Multiple Overlapping Deprivation Analysis (MODA) approach was adapted for Ethiopia, 88 per cent (36.2 million) of the country's child population aged 0-17 still experiences deprivations in three or more dimensions that include nutrition, health, protection, education, information, sanitation, water, and housing (CSA and UNICEF Ethiopia, 2018). Deprivation incidence remains significantly higher in rural areas, with 94 per cent of rural children versus 42 per cent of urban children being deprived in three or more dimensions (CSA and UNICEF Ethiopia, 2018). Nonetheless, inequality among children in urban areas prevails (CSA, UNICEF and OPM, 2015), with a Gini coefficient for rural areas of 0.265 and of around 0.338 for urban areas (CSA, UNICEF and OPM, 2015).

Urbanisation is recognised as an emerging priority in the GTP-II as the rate of change in urban population has been rapidly growing over the past 30 years. Ethiopia's annual urban population growth has been higher than the average for sub-Saharan Africa, and even if 20.8 per cent of the Ethiopian population currently lives in urban areas (in 2018), this percentage is set to increase to 26.8 by 2030 and 39.1 by 2050 (UN DESA, 2015). Further, the country's labour force doubled over the past two decades, and a very large youth bulge is foreseen to enter the labour market in the next twenty years. Many of these young people are predicted to move to cities for work.

While Addis Ababa remains the largest urban area and attracts significant numbers of internal migrants, other urban centres⁵ have also grown quickly (World Bank, 2015d). Semera, Hawassa, Mekele, Jigjiga and Hosanna registered an actual population growth rate greater than 6 per cent between 1994 and 2007, while nine other towns⁶ achieved rates between 4 and 6 per cent (MUDHCo and ECSU, 2015). Percentage change can hide the scale of population growth in absolute terms.

5. The Ethiopian urban planning law states that an urban centre should have a minimum population size of 2,000 inhabitants, half of whom should be engaged in non-agricultural activities. The Ministry of Urban Development and Housing distinguishes between small and large urban centres, depending on whether the population is above or below 20,000 people. The proportion of urban centres with less than 5,000 people is decreasing in Ethiopia (from around 79 per cent in 1984 to around 41 per cent in 2007), while that of large centres (particularly those with a population between 20,000 and 100,000) is on the rise (MUDHCo and ECSU, 2015).

6. Adama, Dilla, Gondar, Arba Minch, Shire Endaselassie, Shashamane, Asossa, Wolaita Sodo and Gambella.

Addis Ababa, followed by Mekele, Gondar, Adama, Hawassa, Jijjiga, Dire Dawa and Bahir Dar each saw their populations grow by more than 50,000 people in the same period.⁷

The Ethiopian Central Statistical Agency (CSA) enumerates four factors possibly explaining increases in urban populations: natural growth, migration, and factors related to the emergence of new towns and the expansion of old cities (CSA, 2013).⁸ The CSA (2013) takes it as almost impossible to separately measure the components in urbanisation that has occurred in recent years in order to project them separately into the future and ascertain which of them will play the leading role in years to come. In other words, it is difficult to isolate which drivers of urbanisation have prevailed, and which will continue to do so into the future.

What is clear is that rural to urban migration has played a critical role in Ethiopia's rapid urbanisation, spurred by the search for employment opportunities and better social services and living conditions in cities. Semera, Hosanna and Hawassa ranked among the urban centres where the proportion of migrants exceeded 60 per cent in 2007. Meanwhile, the proportion of migrants was still greater than 42 per cent for the majority of the 27 urban centres analysed in the 2015 States of the Ethiopian Cities Report (MUDHCo and ECSU, 2015). This suggests that urban poverty, including child poverty, could become increasingly important as both adults and children continue to migrate from rural to urban areas in search of new opportunities and to escape rural poverty (Fransen and Kuschminder, 2009). While cities are often portrayed as drivers of economic growth, the provision of basic services (such as education, health and nutrition, water and sanitation, and housing), which is critical to creating, exploiting and sustaining the economic potential of urbanisation, tend to be outpaced by growing needs of existing dwellers and newcomers, forcing vulnerable populations deeper into poverty. As more children move with their families or relatives to urban areas, they will face unique characteristics of urban poverty, including vulnerabilities from weak social connections, violence, environmental degradation, and traffic injuries. The programmes and infrastructure that are put in place will have an impact for decades to come, and they will influence the opportunities for children growing up in these urban centres.

In this context, UNICEF Ethiopia commissioned and sponsored this research entitled: 'Ethiopian children's voices and views on urban child poverty', whose central purpose is to gather children's perceptions and experiences of urban child poverty (as separate from adult poverty), and understand how poverty affects children's lives in urban areas in children's own words. This would help to assess the current situation on urban child poverty within the context of rapid urbanisation, and inform future policies and programmes to address unplanned city growth that can lead to increasing urban child poverty.

7. Addis Ababa grew by 653,660 people; Mekele 118,976; Gondar 94,795; Adama 92,370; Hawassa 87,970; Jijjiga 69,055; Dire Dawa 59,666; and, Bahir Dar 59,288.

8. Save the Children (2012) enumerates several causes of urbanisation including: population movement and migration (to escape poverty in search of better opportunities); human trafficking; fleeing conflict and persecution; natural growth in cities (when births outnumber deaths); policy changes and government reclassification of geographic distinctions.

Box 1: Summary of Ethiopia's Growth and Transformation Plans (GTP-I and GTP-II)

Key Points in Ethiopia's Growth and Transformation Plans (GTP)

GTP-I (2010/11 to 2014/15)

- Shift from emphasis on poverty reduction to growth promotion while still focused on agricultural-development led industrialisation (ADLI)
- Investment in the expansion of infrastructure (electricity, roads, telecom, etc.)
- Establishment of National Policy and Strategic Framework for Early Childhood Care and Education (2010) and National Nutrition Programme (2013) as multi-sector approaches to improve child well-being
- Recognition that children are especially vulnerable to natural and man-made disasters
- Inclusion of targets for children's affairs: care and support to vulnerable children, developing and strengthening community-centred care for children at risk, and reducing sexual assault, labour exploitation, child migration and human trafficking.

GTP-II (2015/16 to 2019/20)

- Recognition of urbanisation as an emerging priority
- Continued emphasis on economic transformation and moving from "access" to "quality"
- Focus on expanding early learning opportunities, improving school completion rates for vulnerable youth, and increasing school enrolment and participation rates for girls
- Inclusion of guidelines for the 2015 National Strategy for Newborn and Child Survival in Ethiopia to reduce under-five mortality, reduce inequalities, and eradicate preventable child deaths by 2035.

1.2 Research overview

Despite the growing significance of urbanisation and the need to understand its impact on vulnerable populations such as children, it is difficult to capture this phenomenon through official household surveys and census data since these data are often published at a rate that lags behind changes in urban populations. Reliable sampling frames for squatter settlements and unregistered dwellings, where many poor children live, are often lacking. In particular, some slum areas have highly mobile populations, making it difficult to keep track of detailed population changes that could inform the increasing demand for service delivery for children and adults. Further, granular data that can explain the impacts of unplanned urban growth on vulnerable populations, such as children of different ages and genders, is often missing. And even when this information is available, it does not capture the complexity of the experience of child poverty in rapidly growing urban centres, including causes and consequences.

Given the increasing relevance of urbanisation in the country's policies, this study seeks to gain a better understanding of this phenomenon and what it means for urban child poverty in Ethiopia through qualitative research. The study generates new evidence on children's own perceptions of poverty in two rapidly growing urban centres: Kombolcha and Addis Ababa (the Kolfe Keranio sub-city). Children living in urban poverty in these two cities expressed their views, voiced their concerns, and discussed what 'poverty' means for them, talked about the causes and consequences of the poverty they experience and the impact of rapid urbanisation on their lives and in the lives of other children around them.

This study also seeks to fill certain gaps in the literature on urban child poverty in Ethiopia. While there is a growing body of evidence on children and urban child poverty in developing countries in general (Linn, 2010; Bartlett, 2011; ActionAid, 2013; Rutstein et al., 2016; World Vision International, 2016) and on the unique challenges that rapid urbanisation creates for children and their households, significantly less literature has focused on urban children in Ethiopia specifically. Furthermore, there are available quantitative data on monetary poverty in Ethiopia disaggregated by urban and rural areas, and by the general population versus children (CSA, UNICEF, and OPM, 2015; UNDP Ethiopia, 2018). And there is consensus that children in Ethiopia are poorer than the country's population taken as a whole. Nonetheless, the majority of this research disregards poverty experienced by the most vulnerable children who are often difficult to capture by surveys⁹, such as orphan children, children that have migrated, or children who may be living in urban households as servants. Our primary qualitative data collection contributes to fill this gap, since it highlights how these groups of children live in poverty in the urban centres of Kombolcha and Addis Ababa.

Of the limited research on urban child poverty in Ethiopia, the two most notable studies are the 2012 Save the Children report called "Children Voices from Urban Africa," and the Young Lives cohort study that took place from 2002 to 2016. The Save the Children report was written after interviews and focus groups with more than 1,050 children, youth, and adults in seven different African urban centres, including Adama and Hawassa in Ethiopia.¹⁰ (Save the Children, 2012). The aim of the research was to contribute to existing quantitative research on urban child poverty by focusing on the perceptions and experiences of children living in urban poverty in these African cities. Qualitative data were primarily gathered on the daily experiences of children living in poverty and how they perceived local governance systems, child protection, health, livelihoods and education.¹¹ Gender was not a focus of the research, though it was used as a crosscutting theme across chapters.

9. The Young Lives longitudinal mixed-methods study (discussed more in the preceding pages) does not solely focus on vulnerable children, although researchers followed up with a group of orphans to see how their experience differed from children who lived with their parents but were also poor (Pankhurst et al., 2018).

10. The African urban centres were spread across Malawi (Blantyre, Ndirande Township), South Africa (Johannesburg, Gauteng Province, Turffontein Neighbourhood), Mali (Sikasso, Mamassoni Neighbourhood), Ethiopia (Adama, Neighbourhoods 6, 7, 10 and 12; Hawassa, Misrak Sub-city; Teso and Wukro Neighbourhoods), Tanzania (Shinyanga, Ngokolo Ward) and Zambia (Kalulushi, Chibuluma)

11. Although social welfare was not a particular research interest, it serves as a cross-cutting theme across chapters. Children's contact with police and law enforcement was only mentioned in the chapter on child protection; key informants said that most cases of rape and abuse are not reported to the police due to lack of evidence and family concern of stigma (Save the Children, 2012).

Furthermore, the experience of poverty for vulnerable children such as orphans and street children was only mentioned within the general findings relating to child protection (Save the Children, 2012). The research concluded by recommending the gathering of disaggregated socio-economic data in Adama and Hawassa, in order to better tailor programmes and interventions. Save the Children also suggested the programmatic need to ‘rebuild’ communities and social networks in urban areas in order to strengthen children protection, and the need to be more aware of how seasonal urban migration can play into discrimination and social exclusion. Our research is different in that we gather information on how children actually define urban poverty in Ethiopia, with special attention to how these definitions and indicators may differ based on gender and school attendance. We also take a step towards closing the gap noted by Save the Children of data on urban children disaggregated by socio-economic status by collecting qualitative data specific to children who are considered ‘the most vulnerable’, and that are therefore likely to belong to the poorest socio-economic groups in Kombolcha and Addis Ababa.

The Young Lives longitudinal mixed-methods study followed 3,000 children living in 20 sites across Addis Ababa and four other major regions in Ethiopia – Amhara, Oromia, the Southern Nations, Nationalities, and Peoples’ Region and Tigray (Pankhurst et al., 2018) with data collected regularly across the same households over a period of 15 years. The Young Lives study looked at poverty, health, education, and protection for children across multiple locations. Those four selected regions and the capital city account for 96 per cent of the national population, and they provide an overview of the state of children’s well-being across the country. However, there was not a specific focus on urban areas and on the consequences of urbanisation on child poverty. While gender was not a research lens, gender disparities in Ethiopia and its implications were discussed throughout the findings (Pankhurst et al., 2018). In regard to vulnerable children, Young Lives followed a group of orphans as they grew up without their parents, and conducted a separate qualitative study in 2009 to understand the longer term impacts of orphanhood (Pankhurst et al., 2018). The longitudinal study found that while there have been massive advances in reducing poverty and improving children’s access to health and schooling across Ethiopia, undernutrition still remains pervasive and education outcomes have fallen below expected targets. Education, as it stands now, fails to help youth successfully transition into a productive workforce (Pankhurst et al., 2018). In general, our research builds off this study by focusing on perceptions and experiences with special attention to implications of urban child poverty for the most vulnerable children living in two quickly urbanising centres in Ethiopia.

A final notable study is “Poverty, Youth and Rural-Urban Migration in Ethiopia” (Atnafu et al., 2014), a qualitative study conducted in Farta Woreda in the South Gondar zone and Amhara National Regional State in Ethiopia. Researchers interviewed migrant domestic and construction workers and discussed how youth use migration as a strategy for finding employment. While this study shines light on the effects of migration as it relates to urban poverty, its focus on youth and migration, rather than children and other components of urban poverty, sets it apart from our research.



To summarize, our research builds off the findings from the Save the Children (2012) and Young Lives (Pankhurst et al., 2018) investigations by exploring how children in urban centres in Ethiopia uniquely define, perceive, and experience urban poverty. We also gathered information from boys and girls separately (and from adults, including caregivers, teachers, religious and community leaders), and compare and contrast their views whenever feasible, making gender a lens through which we conducted our analysis, rather than a crosscutting theme. Moreover, we collected separate views from in-school and out-of-school children, and highlighted challenges and vulnerabilities experienced by the most marginalized poor children in urban settings – especially by street children. While past studies have not specifically focused on the most vulnerable children in urban Ethiopia, there is consensus that the poverty these children experience is different and unique from that experienced by other children that live in poverty without the same vulnerabilities. Our research contributes to identifying where services can perhaps intervene to address the unique challenges of the most vulnerable children.

The findings from this project seek to inform government policy on reducing child poverty in urban areas, particularly on planning service delivery and making rapidly growing cities fit for children. Investing early in children is a precondition to unlocking the intrinsic benefits of the demographic dividend, escaping intergenerational poverty and nourishing a skilled and healthy workforce that can lead the country's economic transformation. The research questions addressed by this report, as well as the chapters in which they are tackled are noted below (see Box 2).

Box 2: Research questions

Main research question:

1. What are the extent and depth of poverty among urban children in Ethiopia and what are the urbanisation trends? [Chapters 1 and 3, and throughout the report]

Sub-questions:

2. What are the main dynamics and underlying causes/determinants of urbanisation in Ethiopia as well as shifts in these underlying causes over time? What role do children have in this process? How does urbanisation possibly affect/relate to basic rights of children as well as child poverty in general? [Chapters 1 and 3]
3. To what extent are urban children poor in Ethiopia and what is the distribution of child poverty by region and by urban centre? [Chapters 3, 5 and 6]
4. What are the main factors correlating with urban child poverty in Ethiopia? [Chapters 5 and 6]
5. What programmes are currently being implemented by the Ethiopian government that have the potential to respond to urban child poverty? This also relates to the systems in place (be it child protection, social protection, education and health) and to what extent they address the needs of children in urban areas. [Chapter 3]
6. What are the policies, strategies and specific action plans and resources needed for government, international organisations and development partners to overcome the potential negative impact of urbanisation on children (on child poverty) to ensure that the benefits of growth are shared by children? [Chapter 7]
7. What are potential approaches to implementing effective interventions based on assessed needs and demands of the most vulnerable children in urban areas? [Chapters 3 and 7]
8. What are the remaining knowledge gaps related to urban child poverty that require further research? [Chapters 3 and 7]

1.3 Report structure

There are many ways of measuring child deprivation. In this study, we chose to focus on the multidimensional approach to child poverty. We present poor children's own views and voices on poverty in different sections that look at the various dimensions of child poverty and provide in-depth understanding on those dimensions.

We accomplish this by comparing the literature with our own primary qualitative research with Ethiopian children and by looking at child poverty through the lens of multiple deprivations, considering poverty as a multidimensional phenomenon (MODA, capability approach). Hence, in our discussion, we present findings from our focus group discussions (FGDs), in-depth interviews (IDIs) and key informant interviews (KIIs) as a way to explain deprivations that have been defined in other multidimensional poverty frameworks. We integrate our results with those from secondary data analysis of the Welfare Monitoring Survey 2011 and 2016 applied to Ethiopia's urban context.

After this introduction in Chapter 1, Chapter 2 introduces the conceptual framework underpinning child poverty, and sets out the definitions that guide the study. Chapter 3 presents the literature review on urban child poverty in general and on Ethiopia in particular (including current programmatic approaches to address urban child poverty). Chapter 4 provides details of the qualitative methodological approach used, sampling strategy and ethical considerations. Chapter 5 discusses poor urban children's perceptions of child poverty. This chapter presents children's (and adults') views gathered through FGDs, IDIs, and KIIs as well as data on child poverty generated through analysis of the 2011 and 2016 WMS (for urban households with children under 18 only). Chapter 6 analyses child poverty dynamics, and highlights causes and consequences of child poverty and the impact of urbanisation on child poverty as described by children and adults during qualitative fieldwork. Chapter 7 concludes, and formulates policy implications.

2. Conceptual framework

Key Messages

- Child poverty is multidimensional, including and social and emotional deprivations in addition to deprivations in material living conditions.
- Child poverty can have long-term impacts on children's development and future potential. Children are less able to change their situation than adults.
- We can think about poverty alleviation and overall human development as a two-pronged approach that addresses the multidimensional nature of poverty: enhancing human capabilities while also creating conditions for human development by focusing on improving the lives of people through more freedom and opportunities. (UNDP, 2015)

This chapter first introduces existing conceptual frameworks to analysing child poverty and then outlines a measurement framework recently applied to the quantitative assessment of child poverty in Ethiopia.

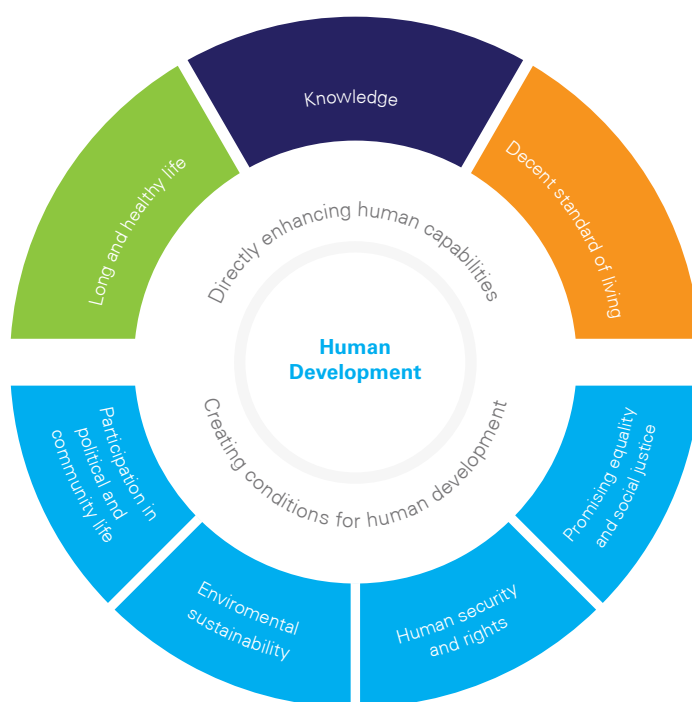
2.1 Conceptual frameworks to capture child poverty

We can critically engage with child poverty through two different lenses: first, child poverty as it relates to the rights of children; and, second, child poverty as not only monetary deprivation, but also the lack of fulfilment of basic needs and the lack of freedom to choose a life they feel is worth living. We will now discuss each lens, which will help to guide our discussion throughout the rest of this study.

The Convention on the Rights of the Child, ratified by the United Nations in 1989 and ratified by Ethiopia, sets out normative standards that have been used to guide the development of various definitions of multidimensional child poverty, referring to material, social, civil and political deprivations. The Convention includes the rights to: (1) survival and development (including nutrition, health care, shelter, water, education, leisure, and access to information); (2) protection (e.g. from violence and exploitation and rights to social security); and (3) participation (birth registration, the rights to being heard, among others). There are four "General Principles" that help to interpret all other articles and that play a fundamental role in understanding all the rights in the Convention: non-discrimination, the best interest of the child, the right to survival and development, and the right to be heard (UNICEF United Kingdom website). The 1995 Constitution of the Federal Democratic Republic of Ethiopia (CFDRE) contains several provisions granting children the rights to survival and development.

There is now a broad consensus that poverty is multidimensional, involving deprivation or lack of ‘freedom’ across different areas of life. Poverty is more than a lack of income or assets. In his 1999 book, *Development as Freedom*, Amartya Sen coined the term ‘capabilities framework,’ an alternative approach to poverty that claims ‘what is ultimately important is that people have the freedom or valuable opportunities (capabilities) to lead the kind of lives they want to lead, to do what they want to do and be the person they want to be’ (Robeyns, 2005, p. 95). This concept of poverty has since been adopted by academics and multilateral organisations (Gordon et al., 2003) and similar language has also been incorporated into the 2030 Sustainable Development Agenda. The Ethiopian government has signed onto the 2030 Sustainable Development Agenda, and incorporated it into the second Growth and Transformation Plan (CSA and UNICEF Ethiopia, 2018).

Figure 1: Dimensions of the Human Development Framework



Data source: United Nations Development Programme, 2015

Similarly, UNICEF’s *State of the World’s Children Report* (2005) adopted a broad, rights-based definition of child poverty that also considered the multidimensional nature of poverty: “Children living in poverty [are those who] experience deprivation of the material, spiritual and emotional resources needed to survive, develop and thrive, leaving them unable to enjoy their rights, achieve their full potential or participate as full and equal members of society”. The Report also highlights the important point that operationalising and evaluating goals that are not inherently quantitative can create challenges (UNICEF, 2005). This section discusses one possible approach to measuring multidimensional poverty that has been used to capture a variety of deprivations experienced by Ethiopian children living in urban poverty.

We can think about poverty alleviation and the overall human development framework as a two-pronged approach that addresses the multidimensional nature of poverty: enhancing human capabilities while also creating conditions for human development (i.e. political participation, environmental sustainability, promoting human rights and social justice) (UNDP, 2015) (see Figure 1). A policy or intervention focused on one aspect only will not be as successful without the others, as indicated by the circular diagram depicted in Figure 1. If a child is deprived in a certain dimension of poverty, we can think about that indicating a lack of capability as well as structural factors that are preventing her/him from overcoming that deprivation.

Thinking about poverty as a lack of freedom is especially important when referring to children's long-term well-being because child poverty can have long-lasting impacts on children's future potential. Children are inherently dependent on others and therefore may not be able to easily change their situation on their own. (Kurukulasuriya and Engilbertsdottir, 2012). Also, children living in poverty in urban settings encounter a unique set of challenges, deprivations, or lack of freedoms. As a framework for thinking about urban poverty, we can use World Vision International's model (including three separate components) to analyse what makes urban communities different: diversity (range of languages, religions, ethnicities and backgrounds), density (in population and stakeholders), and dynamic (constant change and migration) (World Vision International Australia, 2019). All these characteristics contribute to unique deprivations experienced by children in urban poverty: many children who live in urban slums in low-income countries – such as Ethiopia – are deprived of food, education, healthcare, infrastructure for sanitation and ventilation, natural light, and basic protections (more than a third of children are unregistered at birth) (Bartlett, 2011). We can then critically engage with what structural (political, social, economic, etc.) factors are enabling these deprivations within an urban context, as well as why children or households do not have the capability to overcome or address these deprivations.

2.2 Child poverty definitions and measurement in Ethiopia

There is now broad consensus on the multidimensional nature of poverty, as mentioned above. Indicators on consumption-based or monetary poverty alone are not considered to provide a holistic picture of the causes and consequences of poverty. While these monetary measures are still important and could offer a reference of whether household spending is sufficient to fulfil children's basic needs (Dunbar et al., 2013; Bargain et al., 2014), different deprivation indices have been developed as a compliment that goes beyond economic dimensions of poverty.

One example is the Multiple Overlapping Deprivation Analysis (MODA) formulated by UNICEF (Gordon et al., 2003; De Neubourg et al., 2012). This approach addresses shortcomings of more traditional measures of poverty by taking into account factors that may constrain access to services, including their availability and quality, not having information on services, discrimination and risk to accessing services, and cultural norms and traditions (CSA and UNICEF Ethiopia, 2018). This approach also examines single dimensions of poverty, like health and housing, that may not necessarily be reflected in monetary poverty data.



De Neubourg et al. (2012) shows how a longer list of indicators that was initially considered by the MODA approach, such as protection from exploitation, violence outside the household, access to social security, civil and political participation (such as birth registration and freedom of expression), among others, were eventually discarded due to data limitations.

Ethiopia has adopted and adapted the MODA approach to its context. In 2018, the country developed the first multidimensional child poverty measures and produced multidimensional child poverty estimates using the Ethiopian Demographic and Health Survey (EDHS) data sets of 2011 and 2016 (CSA and UNICEF Ethiopia, 2018).

The 2018 Child Poverty analysis applied to Ethiopia defines multidimensional child deprivations¹² in three to six age-specific dimensions: (1) physical development (stunting); (2) health (skilled birth assistance, antenatal care services, vaccinations, mother's awareness of oral rehydration salt); (3) nutrition; (4) education; (5) Health-related information; (6) information and participation; (7) water; (8) sanitation; and (9) housing. The corresponding indicators are age-group specific for children under 5 years of age and between 5 and 17 years. Some of the findings for the second age group are presented separately for the subgroups of 5-14 years and 5-17 years due to differences on inclusion and measurement for certain indicators¹³ (CSA and UNICEF Ethiopia, 2018).

In 2016, deprivation in housing and sanitation were the largest contributors to multidimensional child deprivation in Ethiopia for all children under the age of 18, and most children in Ethiopia faced multiple and overlapping deprivations (95 per cent of children were deprived of two to six basic needs and services) (CSA and UNICEF Ethiopia, 2018). Rural children were also more multidimensionally deprived than urban children. This finding is further elaborated in the following chapter.

12. For a detailed list of dimensions and indicators included in the Ethiopia 2018 MODA, please refer to Annex 4.

13. Illiteracy is measured for children 5 to 17 years; deprivation in health-related knowledge and deprivation in information and participation are measured at the household level for children aged 5 to 14 years and at the individual child level for children 15 to 17 years (CSA and UNICEF Ethiopia, 2018).

3. Urbanisation, urban child poverty and programmatic approaches to child poverty in Ethiopia

Key Messages

- Children living in urban poverty face vulnerabilities that vary based on their demographic profile (age, gender, disability, ethnicity, family income and socio-cultural context). (Save the Children, 2015).
- A large and growing percentage of the Ethiopian population live in urban areas. Most rural to urban migrants are single men.
- Deprivations of children in three or more dimensions are experienced by 88 percent of children in Ethiopia.
- The Government of Ethiopia's Growth and Transformation Plan II does not prioritize children, instead treating them as a cross-cutting issue that hence receives less direction attention.
- Multi-sectoral cooperation remains limited, while sectoral planning has increased.
- Children who are the most out of reach are often the most in need but remain excluded from interventions
- The upcoming GTP-III should imperatively focus on child poverty and formulate ad-hoc actions benefitting children living in urban areas.

This chapter is structured around three main sections. The first section, 'Urban Child Poverty', provides trends and characteristics of urbanisation and urban poverty in general, as well as how child poverty in urban settings differs from that in rural areas. A key takeaway here is the rapid growth rate of urbanisation around the world and consequent rising inequality within cities. Children living in urban poverty are especially vulnerable to violence, environmental threats and lack of social connections. Good governance and public service provision play a pivotal role in addressing these vulnerabilities. The second section, 'Urban Child Poverty in Ethiopia', discusses urbanisation trends in this country, and the implications they have for urban child poverty from both a monetary and multidimensional deprivation perspective. The third section, 'Programmatic Approaches to Child Poverty', outlines policies and programmes that have been introduced in Ethiopia that may help reduce urban child poverty, namely the Poverty Reduction Strategy Papers and the Growth and Transformation Policies, as well as the evolution of safety net programmes.

3.1 Urban child poverty

Sustainable Development Goal (SDG) 11 is devoted to making ‘cities and human settlements inclusive, safe, resilient, and sustainable,’ with many other SDGs linked to the urban perspective. The main argument is that without a focus on urban development and urban poverty, countries will struggle to achieve the SDG targets.

The United Nations estimates that the number of global urban residents increases by 60 million every year, and that two-thirds of the global population will be living in urban areas by 2050, with over half being children and adolescents (UN-Habitat 2010; Save the Children, 2012). Projections estimate that 94 per cent of urban growth will take place in least developed countries (Save the Children, 2012). Even though sub-Saharan Africa currently remains one of the least urbanized continents, it will be home to one billion urban dwellers by 2040 with the majority of them being young people (Save the Children, 2012).

Statistics on urban poverty are often misleading and can give the impression that children in urban areas are significantly better off than their rural counterparts – this is known as ‘the myth of the urban advantage.’ Average values for key indicators across urban areas may suggest better access to services and opportunities than for rural counterparts, but such averages often hide deep and entrenched inequality in urban settings (Bartlett, 2011; Save the Children, 2015). Nonetheless, as poverty has increasingly become an urban phenomenon, the narrative is slowly changing, and the ‘urban advantage’ is increasingly seen as an ‘urban paradox’ (GFDRR and World Bank, 2015b). Furthermore, data are often faulty because of the inherent challenges of data collection among people living in urban slums or informal settlements. This population comprises half of the urban dwellers in Africa today (Save the Children, 2012); this statistic is estimated to be 860 million across the world (World Vision International, 2016).

A UNICEF report entitled ‘Advantage or Paradox? The challenge for children and young people of growing up urban’ found that the ‘urban advantage’ would diminish when controlling for wealth (UNICEF, 2018a). In other words, observed urban advantages are in large part due to the fact that people have apparently easier access to public services in urban areas – but it is also due to the fact that wealth is much greater overall for urban households within a national context (in a sample of 88 countries, on average, 83 per cent of the richest population quintile lives in urban areas). When comparing the population in the national middle quintile that lives in urban areas to those in rural areas, the difference in indicators such as birth registration, immunization, access to a birth attendant, and mortality rates become insignificant between urban and rural areas (GFDRR and World Bank, 2015b). UNICEF also notes that whereas data across Ethiopia hint at less wealth inequality between rural and urban areas than in other countries, this is largely a reflection of equal consumption distribution in rural areas, and does not immediately reveal the great inequality in urban settings. For example, although primary school enrolment in rural areas of Ethiopia is much lower than urban primary school enrolment, boys and girls in rural Ethiopia have near parity in enrolment rates whereas in urban areas, boys are much more likely to be enrolled than girls (UNICEF, 2015).

3.1.1 Vulnerabilities that make urban poverty different from rural poverty

Children living in urban poverty are exposed to unique vulnerabilities that differ based on age, gender, disability, ethnicity, family income, and socio-cultural context (Save the Children, 2015). Such vulnerabilities include: living without secure housing and protection from eviction; limited resources due to overcrowding; exposure to toxins and pollutants, road traffic injuries, climate change and natural disasters¹⁴; poor infrastructure due to rapid urbanisation¹⁵ (i.e. informal settlements built on floodplains or hillsides); and high rates of crime and violence from the community, family members or the police (Bartlett, 2011; Save the Children, 2015; GFDRR and World Bank, 2015b). Violence can be a particular concern in slums or informal settlements where there is a lack of law enforcement. This is likely a large but undocumented burden on women and children living in urban poverty (Patel et al., 2017).

There are other key differences in the characteristics of poverty and vulnerabilities that children encounter in urban and rural settings pertaining to social networks and family ties, governance systems, political participation, and access to services. Whereas families in rural contexts may know their neighbours and feel comfortable asking for help or food when they are in need, families may not have those same familiar social connections in urban areas (Save the Children, 2015). A study by Save the Children and Tufts University on rural-to-urban migration in Uganda noted: 'Children in rural areas are surrounded by grandparents, cousins, co-wives of their mothers and close neighbours. Young children are rarely far from adults whom they know and trust, even when their parents are out searching for firewood or herding animals' (Save the Children, 2012). Urban settings could not be more different. Not only are migrants cut off from intergenerational family and community ties, but due to the very nature of urban areas as heterogeneous with people from different cultures and backgrounds, the trust and solidarity that can exist between community members in rural settings is absent (World Vision International, 2016). Furthermore, children living in urban poverty in Ethiopia are also at risk of female genital mutilation/cutting, child/early marriage and cut uvula, all of which are common practices (CSA, UNICEF, and OPM, 2015).

There are also significant differences between rural and urban governance that can impact the local dimensions of poverty. Health and social services in rural areas tend to be administered by national ministries, but services provided in urban areas are often administered by a mix of national ministries and local municipalities, creating complications due to unclear responsibilities, lack of coordination, bureaucracy, poorly funded and staffed local municipality offices and unequal service provision to the poorest (Save the Children, 2012). While tribal leaders and village elders are typically the norm in rural Africa and they tend to have the same political legitimacy as public authorities, urban areas are usually characterised by elected and appointed leadership (Save the Children, 2012). A Save the

14. Addis Ababa is already experiencing an increase in flash floods during the rainy season, and it is vulnerable to urban fire from unsafe cooking practices and earthquakes (Main Ethiopian Rift Valley) that have the potential to damage buildings and infrastructure, with larger implications for physical safety, economic growth and access to energy sources (EDRI and GGRI, 2015; World Bank and GFDRR, 2015a).

15. Even though almost all households in Addis Ababa have access to electricity, outages and interruptions are very frequent; and further strains and challenges are expected with continued population growth (World Bank and GFDRR, 2015a).

Children report on barriers faced by children in urban settings of Ethiopia, Zambia, and South Africa highlights the importance of good urban governance. While most African governments have initiated some sort of decentralization, this move has yet to effectively grant power to local municipalities – urban governments in theory have the power to provide certain services, but do not have the resources (Save the Children, 2012). Weak municipal governments are often not held accountable to residents, especially the poorest residents of a city, which contributes to challenges of lacking basic infrastructure and services (GFDRR and World Bank, 2015b). Furthermore, the urban poor are often not able to reap the benefits of regional economic growth as municipal authorities tend to focus their attention on areas of the cities that are flourishing socially and economically (World Vision International, 2016). The urban poor generally do not participate politically and their voices thus remain unheard. Micro-politics in slum areas may include gangs (that can be abusive or engage in extortion, but may also offer services and protection to affiliated groups). Parallel power structures can then occur leading to their social, political, and economic influence over the lives of residents (World Vision International, 2016).

While the quality of services may be higher in urban areas, urban families may not benefit if they do not have access to them, largely due to cost, distance, and time constraints (Save the Children, 2012). One example is that of health emergency responders who often face challenges reaching those in need due to traffic congestion that blocks mobility (GFDRR and World Bank, 2015a). Urban settings are also exposed to technological shocks (building collapse, chemical spills, cyber threats, explosions, industrial accidents, oil spills, radiation, pollution, system breakdowns), and socio-economic shocks (business discontinuity, corruption, demographic shifts, economic crisis, high unemployment, labour strikes, political and social conflicts, supply crises, terrorism, and war) more so than rural settings (World Bank and GFDRR, 2015). This further affects access and quality of services. As people – children especially – and businesses continue to concentrate in cities, they are likely to become increasingly dependent on and vulnerable to disruptions in infrastructure networks, communication systems and utility networks (GFDRR and World Bank, 2015b).

3.2 Urban child poverty in Ethiopia

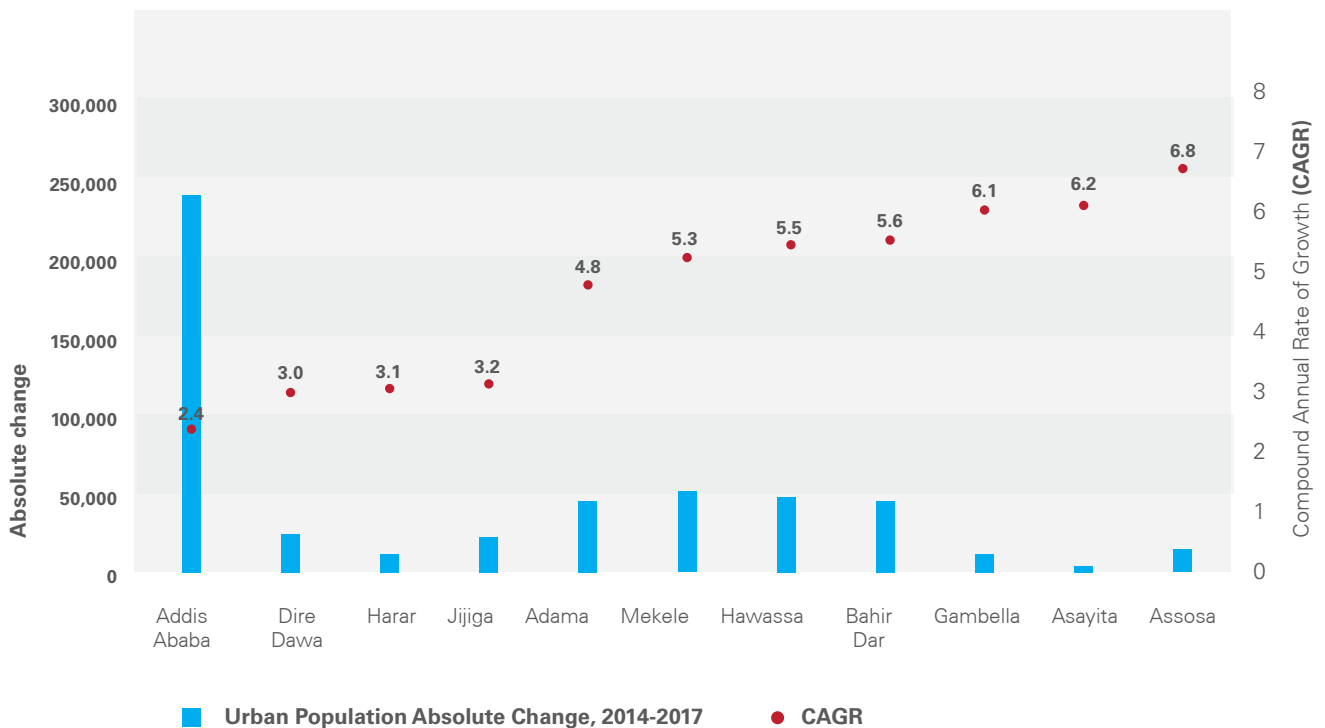
3.2.1 Urbanisation trends

Rapid urbanisation is becoming an area of increasing concern and attention in Ethiopia; in fact, the consequences of rapid urbanisation are considered a priority in Ethiopia's Growth and Transformation Plan II (2015-2020) (NPC, 2016). Out of Ethiopia's population of 107.5 million people in 2018, 20.8 per cent were living in urban areas, a proportion projected to reach 26.9 per cent by 2030 and 39.1 per cent by 2050 (UN DESA data). Out of Ethiopia's total urban population, four out of five people live in slum areas (World Vision International, 2016).

3 | Urbanisation, urban child poverty and programmatic approaches to child poverty in Ethiopia

Absolute change in urban population between 2014 and 2017 peaked in Mekele (Tigray Region) +51,225 inhabitants); Hawassa (SNNPR) +49,723; Bahir Dar (Amhara Region) +47,330, Adama (Oromia Region) +46,949; and, staggeringly, in Addis Ababa with 239,000 new residents, which represents almost 80,000 new residents per year. But this is only one side of the overall picture. In cities where absolute changes have been more nuanced, relative changes occurred at a faster rate. The population of Assosa (Benishangul-Gumuz Region), Asayita (Afar Region) and Gambella (Gambella Region), for instance, all grew by more than 6 per cent in just three years (see Figure 2). Assosa grew by close to 7 per cent.

Figure 2: Urban population growth in major Ethiopian cities, 2014-2017



Data source: 'Population Projection of Ethiopia for All Regions at Wereda Level from 2014-2017', Federal Democratic Republic of Ethiopia, Central Statistical Agency (2013).

The Compound Annual Growth Rates (CAGRs) of urban populations in major cities for 2014-2017 were, in fact, greater than CAGRs of total regional population growth (i.e. urban plus rural) for all regions.

Table 1: Compound annual growth rates (CAGR) – Comparison of major cities and regions

| Major city | 2014-17 CAGR of population for major cities (per cent) | Region | 2014-17 regional CAGR of total population (urban plus rural; per cent) |
|-------------|--|-------------------|--|
| Mekele | 5.3 | Tigray | 1.9 |
| Asayita | 6.2 | Afar | 2.6 |
| Bahir Dar | 5.6 | Amhara | 1.8 |
| Adama | 4.8 | Oromia | 2.6 |
| Jigjiga | 3.2 | Somali | 2.7 |
| Assosa | 6.8 | Benishangul-Gumuz | 3.0 |
| Hawassa | 5.5 | SNNPR | 2.4 |
| Harar | 3.1 | Harari | 2.9 |
| Gambella | 6.1 | Gambella | 3.3 |
| Addis Ababa | 2.4 | Addis Ababa | 2.4 |
| Dire Dawa | 3.0 | Dire Dawa | 3.0 |

Data source: 'Population Projection of Ethiopia for All Regions at Woreda Level from 2014-2017', Federal Democratic Republic of Ethiopia, Central Statistical Agency (2013).

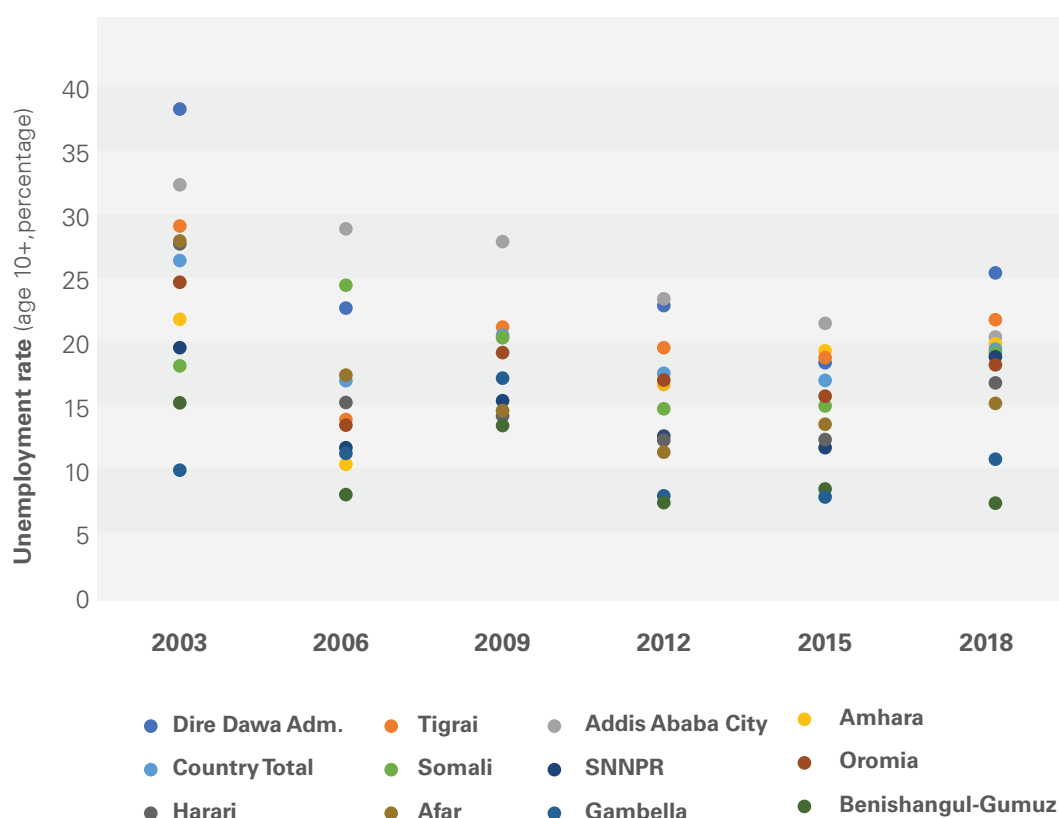
The Ethiopian Central Statistics Agency (CSA) identifies several major factors for population growth in urban areas: natural growth, migration, and factors related to the emergence of small new towns and the expansion of old cities. With population projections into 2037, the CSA also predicts that it is likely for the tempo of urbanisation to increase into the future (CSA, 2013). Migration from rural to urban areas is one of the driving causes of urbanisation, and one in every ten rural-to-urban migrants move for economic purposes (i.e. to escape rural poverty and look for economic opportunities in urban areas) (CSA, UNICEF and OPM, 2015). Only 5 per cent of migrants move with their entire families and the rest migrate on their own with the average age of a migrant being between 23 and 26 years (World Bank, 2015a). Studies show that those who migrate to urban areas also tend to be more educated and from wealthier backgrounds than other rural residents who do not migrate (World Bank, 2015a). Still, rural-to-urban migration is a risky investment with low short-term results, greater exposure to exploitation, more physically demanding work, and a decline in social connections (Atnafu et al., 2014). Many migrants live in poverty in the city, especially when they first settle there, and have a much lower rate of asset ownership than their non-migrant counterparts. Additionally, many children are living without their mothers in urban centres (6 per cent in Addis Ababa alone), also due to the fact that orphans are often sent to urban areas to live with better-off relatives (CSA, UNICEF and OPM, 2015).

There is limited evidence on the effects of urban poverty for Ethiopian adolescents specifically (aged 10 to 19 years), or the age group that our study specifically focuses on (10 to 17 years). Age disaggregated data suggest that adolescents aged 15-19 years are much more likely to be economically active in rural settings (80 per cent in rural areas versus 42 per cent in urban areas). While the difference between girls and boys in rural areas is non-existent, urban boys are much more likely to be economically active than urban girls (UNICEF, 2015).

3.2.2 Characteristics of urban child poverty

A total of 32.4 per cent of children in Ethiopia are monetarily poor while 88 per cent (as previously mentioned) are multidimensionally poor¹⁶ (UNICEF 2016; CSA, UNICEF and OPM, 2015). Significantly more children are multidimensionally poor than monetarily poor in both urban and rural areas, suggesting that access to financial resources does not guarantee access to basic goods, services, and rights (CSA and UNICEF Ethiopia, 2018). Perhaps unsurprisingly, the same CSA, UNICEF and OPM (2015) report referenced above also found that most aspects of poor child wellbeing (i.e. health outcomes, school completion and housing quality) are strongly correlated with monetary poverty (CSA, UNICEF and OPM, 2015).

Figure 3: Unemployment rates for urban populations aged 10+ by region (2003-2018)



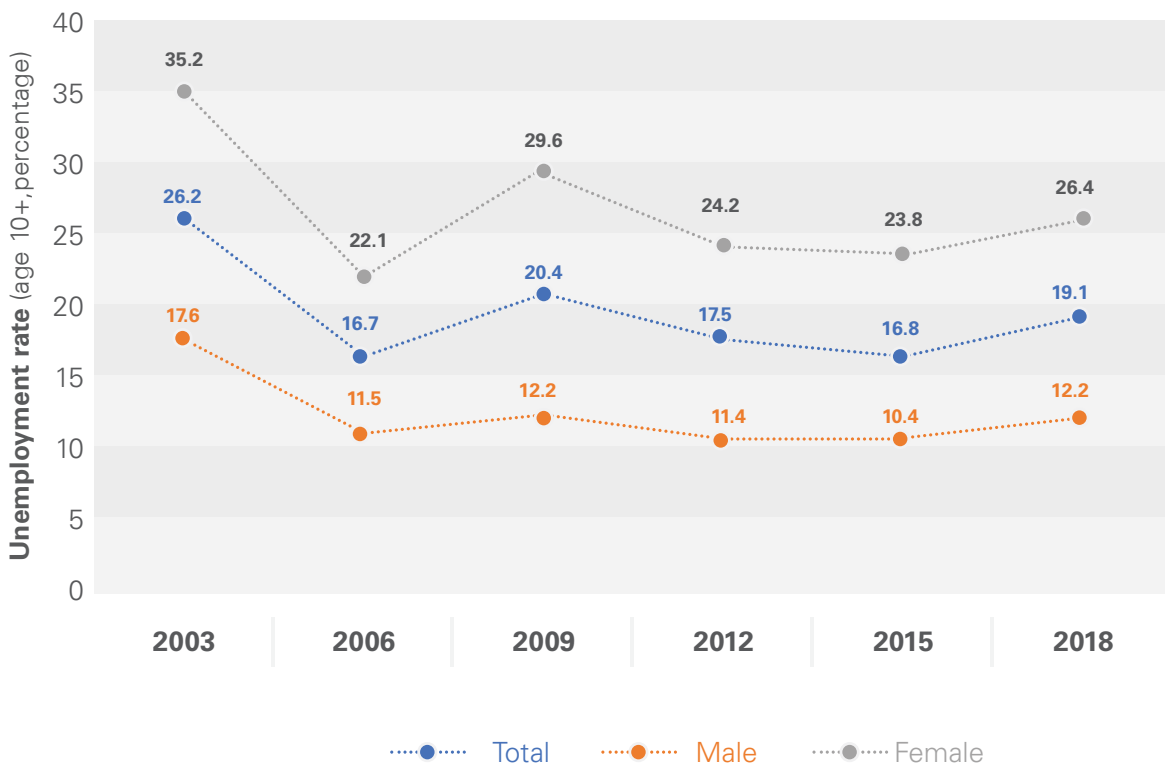
Data source: CSA Urban Employment Unemployment Survey, various years

16. Measures of monetary poverty are taken from a 2015 analysis of child poverty in Ethiopia by the CSA, UNICEF, and Oxford Policy Management that used the HCE/WMS 2011 datasets. The HCE survey covered both urban and rural areas for a total of 10,368 households over 864 Enumeration Areas.

CSA data also confirm high unemployment rates in urban areas of Ethiopia, especially affecting young people. In 2018, urban unemployment was 19.1 per cent for those aged 10+, but rates are notably higher among youth (aged between 15 and 24) at 25.3 per cent (CSA, 2018). The distribution of unemployment across urban centres in 2003 ranged from 9.8 per cent in Gambella Region to 38 per cent in Dire Dawa City Administration. That same distribution became less disperse in 2018, going from 7.2 per cent in Benishangul-Gumuz to 25.3 per cent in Dire Dawa City Administration (see Figure 3).

CSA data also suggest that urban unemployment prevails among women and girls, with female urban unemployment (26.4 per cent for girls and women aged 10+ years) at 2.2 times that of male urban unemployment (12.2 per cent) in 2018 (see Figure 4). Between 2013 and 2018, the gap between the two unemployment rates dropped by more than 10 percentage points (p.p.) in Addis Ababa City (-17.4 p.p.), Afar Region (-16.9 p.p.), Benishangul-Gumuz Region (-16.6 p.p.), Dire Dawa City Administration (-14.1 p.p.), Harari Region (-13 p.p.) and Tigray Region (-10.7 p.p.), but it increased in Amhara Region (+1.5 p.p.) and Somali Region (+4.7 p.p.). In 2018, one in four youth aged 15-24 living in the most urbanized regions of Ethiopia¹⁷ were unemployed. The corresponding ratio for boys was 1:6 and for girls 1:3.

Figure 4: Urban unemployment rate by gender (2003-2018)



Data source: CSA Urban Employment Unemployment Survey, various years

17. Oromia Region with 5.4 million people living in urban areas, Amhara Region with 3.6 million urban dwellers and SNNPR with 3.0 million urban residents.

The association between education attainment and urban unemployment is striking, with 55.9 per cent of all those unemployed in 2018 either being illiterate (11.9 per cent) or having only completed primary education (grades 1-8; 31.8 per cent) or not having completed secondary education (12.2 per cent). Worryingly, those that completed secondary education also seem to struggle to find jobs, with 20.5 per cent of them unemployed in 2018. The same applies, though to a lesser extent (as expected), to those that have a diploma (7.2 per cent unemployed in 2018) or a degree (6.6 per cent).

Those with low levels of education are often engaged in informal income-generating activities or self-employment because they cannot afford to spend time looking for a wage job in the formal labour market (World Bank, 2015a). As rates of waged employment increase, so does the number of individuals looking for work, resulting in high competition for a limited number of jobs and high rates of unemployment: Those with limited education and skills then opt for self-employment because the cost of being unemployed while seeking waged employment is much higher than the expected benefit (World Bank, 2015a). Relatedly, young girls in urban areas of Ethiopia are often employed as domestic servants to non-related, wealthier households, which is increasingly keeping them out of school (World Bank, 2015a; UNICEF, 2015).¹⁸ Among the poorest, households with elderly members, widows, and households with elderly or female heads are much more likely to be poor if they live in urban areas compared to rural areas (World Bank, 2015a).¹⁹

When it comes to health and urban child poverty, HIV remains a unique concern for adolescents and youth: HIV rates for boys and girls between the ages of 15 and 24 mirror patterns in the general population, with HIV more prevalent in urban areas (0.6 per cent) than rural areas (0.2 per cent) and with girls effected more than boys (0.9 per cent versus 0.6 per cent) (UNICEF, 2015).

A 2017 study by the research group GAGE (Gender and Adolescents: Global Evidence) specifically explored barriers that adolescent girls are facing in urbanising contexts in Ethiopia, Burkina Faso, Kenya, Bangladesh, and India (Chant et al., 2017). The study found that adolescent girls in urban contexts (for all countries, including Ethiopia) struggle with menstrual hygiene management in slum contexts, experience 'early sexual debut' (voluntary or forced), have greater exposure to sexually transmitted infections than their rural counterparts, face poor mental health, have higher likelihood of being sexually assaulted or trafficked than their rural counterparts, are more likely to drop out of school as they get older (because of the need to support their family, forced marriage, or lack of protection from violence), and are more vulnerable to environmental hazards than girls living in rural areas. And while they seem to have increased access to paid work compared to adolescent girls in rural settings, they are also uniquely vulnerable to exploitation in the workplace (Chant et al., 2017).

18. The World Bank also found that school enrolment for children who work as domestic servants was 20 per cent compared to 65 per cent of all children in 2011 (World Bank, 2015a).

19. In Ethiopia, as in other countries of sub-Saharan African, urban wealth disparity is more significant than in other regions of the world (23 per cent difference between richest and poorest urban quintiles in African countries, compared to 17 per cent in Asian countries) (GFDRR and World Bank, 2015ba). Addressing urban poverty will take more than encouraging employment. Increasing safety nets for those who cannot work or do not participate in the labour workforce (children, elderly, disabled, women) is also necessary.

3.2.3 Child poverty by the numbers

In this section, we present current estimates on child poverty using both monetary and multidimensional measures in Ethiopia focusing on urban poverty.²⁰ The information on monetary and multidimensional poverty referenced below considers rural/urban breakdowns for the whole country focusing on child poverty when data are available.

Monetary child poverty

While poverty is still a pressing challenge in Ethiopia, monetary poverty has declined fast in recent years. The poverty rate dropped by 22 percentage points for the entire population between 2000 and 2016 – from 45.5 per cent to 23.5 per cent (UNDP Ethiopia, 2018; CSA, UNICEF and OPM, 2015). Monetary poverty remains predominately a rural phenomenon, though urban and rural poverty are decreasing at similar rates. The urban poverty headcount dropped from 36.9 per cent in 2000 to 14.8 per cent in 2016, whereas the rural poverty headcount moved from 45.4 per cent to 25.6 per cent (UNDP Ethiopia, 2018).

Looking at children between 0 and 17 years, a 2015 report by the CSA, UNICEF and OPM finds that monetary child poverty in Ethiopia is greater in rural (32.8 per cent) than in urban areas (29.6 per cent), and stands at 32.4 per cent overall. Nonetheless, inequality that specifically affects children is especially stark in urban settings.

Multidimensional child poverty

Of the country's child population aged 0-17 years, 88 per cent (36.2 million people) appears to experience deprivations in three or more dimensions among nutrition, health, protection, education, information, sanitation, water and housing (CSA and UNICEF Ethiopia, 2018). Available data point to a decline over time in children's deprivation in multiple dimensions, albeit by an insignificant amount (CSA and UNICEF Ethiopia, 2018).

The 2018 UNICEF multidimensional poverty report for Ethiopia shows that some of the strongest contributors to high rates of multidimensional child poverty include: education attainment of adult household members (56 percent of children whose household head has completed secondary or higher education are multidimensionally poor, versus 91 per cent of children whose household head has completed no education or only primary school); father's working status²¹; gender based violence (GBV)²²; and a child's living arrangements²³ (CSA and UNICEF Ethiopia, 2018). Overall, deprivation in housing and sanitation were the largest contributors to multidimensional child deprivation in Ethiopia in 2016.

20. The 2018 MODA report for Ethiopia (CSA and UNICEF Ethiopia, 2018) only has data on multidimensional poverty at this stage, but is currently researching the overlap between monetary and multidimensional poverty using 2011 and 2016 HCE/WMS data. Estimates are not currently available.

21. The Multidimensional Child Deprivation (MCD) rate is highest among children whose father works in agriculture (93 per cent) or is employed as an unskilled manual labourer (82 per cent).

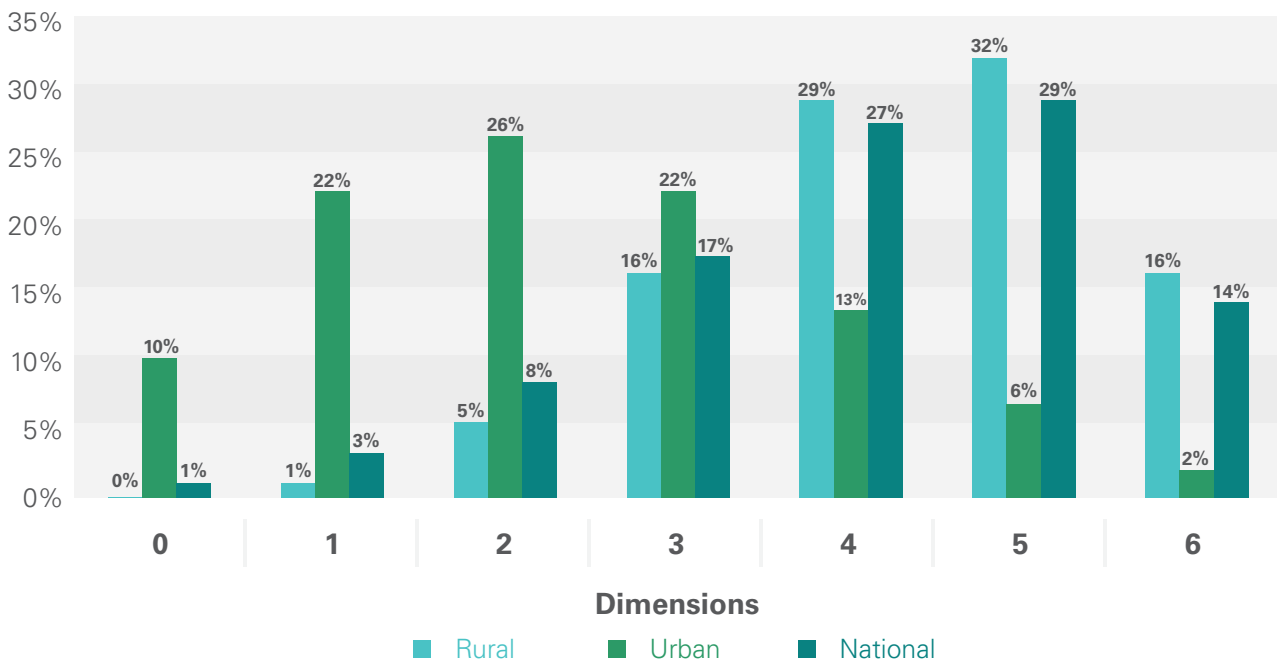
22. The MCD rate is 95 per cent among children who live in households where GBV is justified compared to 85 per cent where it is not.

23. Living without parents or being an orphan increases the probability of a child being multidimensionally poor.

In parallel to monetary poverty, multidimensional poverty in Ethiopia is also primarily a rural phenomenon. The percentage of multidimensionally deprived children in rural areas (94 per cent) is more than double that in urban areas (42 per cent) (CSA and UNICEF Ethiopia, 2018). Disaggregated deprivation data by children’s area of residence shows that a significantly larger share of children in rural areas are deprived of their basic needs and rights compared to their counterparts residing in urban areas across age categories used for the MODA analysis. While the majority of children under 18 years in rural settings are deprived in four or five dimensions, the bulk of children living in urban poverty are deprived in three indicators (CSA and UNICEF Ethiopia, 2018) (see Figure 5).

The Young Lives longitudinal study on child poverty in Ethiopia also used the MODA framework to analyse child well-being between 2002 and 2013 (Pankhurst et al., 2017). For their cohort, they similarly found significant reductions in child poverty and deprivation in all dimensions. Deprivation in health went down from 48.0 per cent in 2002 to 17.1 per cent in 2006, while deprivation in education declined from 23.3 per cent in 2009 to 5.4 per cent in 2013. Deprivations in access to safe drinking water fell from 53.4 per cent in 2002 to 11.1 per cent in 2009; deprivation in access to improved sanitation decreased from 62.0 to 22.6 per cent over the same period. The Young Lives analysis also found that rural children are on average more deprived than urban children (EDRI and UNICEF, 2017), which is concurrent with the 2018 UNICEF multidimensional poverty report for Ethiopia.

Figure 5: Deprivation count and distribution by area of residence, for children under 18 years



Data Source: UNICEF Multidimensional Poverty Report for Ethiopia, 2016

While there seems to be a growing body of literature on urbanisation and poverty in Africa from governments and international organisations (Lall et al., 2017²⁴; United Nations Economic Commission for Africa, 2017²⁵; White et al, 2017²⁶; Saghir, 2018²⁷; Homman and Lall, 2019²⁸), there does not seem to be a parallel rise in academic literature. Research on the programmatic interventions that have been proven effective to address the challenges of urban child poverty is one significant gap. Furthermore, although the literature on urban poverty in general is relatively large, research on today's rapid urbanisation in Ethiopia and its potential impact on the urban poor is still limited, even more so when it comes to urban child poverty. The bulk of existing research on Ethiopian monetary and multidimensional poverty is rooted in quantitative research; qualitative research on the determinants and consequences of urban poverty is lacking. This study helps address such a gap. We conclude this chapter by presenting changes in programmatic approaches to addressing child poverty in Ethiopia, including the Urban Productive Safety Net Project (UPSNP).

3.3 Programmatic approaches to child poverty

A number of policies and programmes have been introduced in Ethiopia that may help reduce urban child poverty. However, they are rarely for urban children in particular and are generally insufficient to eliminate urban child poverty.

Below, we first discuss the broad development strategy of the government through the poverty reduction strategy papers followed by the Growth and Transformation Plans and how they have led to child-specific programmes and policies. Then we look at the evolution of social protection through the rural and urban productive safety net programmes. (Annex 3 further elaborates the experience of cash transfer programmes in other contexts.)

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24. Report from the World Bank and DFID highlighting economic trends (industry and workforce development, capital land valuation) and infrastructure investment in Africa's cities.
 25. In addition to providing overall trends on urbanisation and industrialisation in Africa for economic transformation, this report emphasises the importance of spatial considerations when developing urban polices (different cities should be developed to match different needs of industries),
 26. This World Bank report is based on eight studies from 2015 to 2017 focusing on 'greening' African cities and environmental ecosystem development: a desk-based study on regional trends in the natural environment in African cities, case studies on Durban, Kampala, and Dar es Salaam, valuation of urban natural capital and ecosystem services, and a toolkit for policymakers focusing on environmental urban concerns.
 27. A white paper from the Centre for Strategic and International Studies on economic trends and implications for the urbanisation of countries in Sub-Saharan Africa.
 28. A World Bank report providing a road map for liveable and productive cities in sub-Saharan Africa, The report recommends policies that power land markets to drive economic growth, strengthening urban regulation to make market-driven investment possible and financing public assets and infrastructure investments to promote efficiency and connectivity.

3.3.1 Wider national strategy on poverty reduction

The development of institutions and policies relating to children and youth prior to the establishment in 1995 of the Federal Democratic Republic of Ethiopia (FDRE) was limited. After this date, however, children's issues began to be included in new legislation. Ethiopia has since had four guiding policy documents, which have contributed to clearer policies focusing on children. In an effort to reduce poverty and achieve growth, the country has been implementing a series of poverty-focused development strategies since the beginning of the 2000s. Chronologically, they have included:

- Two poverty reduction strategy papers (PRSPs) describing short-term poverty-reduction strategies:
 - The Sustainable Development and Poverty Reduction Programme (SDPRP, 2001-02 to 2005-06) and
 - The Plan for Accelerated and Sustained Development to End Poverty (PASDEP, 2005-06 to 2009-10).
- Two Growth and Transformation Plans (GTP) with the explicit aim of promoting economic growth:
 - GTP-I (2010-11 to 2014-15), and
 - GTP-II (2015-16 to 2019-20.)

In general, there has been a considerable transition in policy focus from the SDPRP to the PASDEP and now to the GTPs, as discussed below. In terms of economic growth, the SDPRP and PASDEP focused on agricultural-development led industrialisation (ADLI). For instance, the SDPRP paid inadequate attention to urban areas, the non-agricultural sector, the demand side of production, and markets (Jones et al., 2005). Both the SDPRP and PASDEP have taken their strategic pillars from the 2000-2015 Millennium Development Goals (MDGs), and they have focused on growth through rural development and private sector development in agriculture, on expanding education, improving health and HIV/AIDS response, and attaining food security. In terms of sectoral coverage, the PASDEP is more comprehensive than the SDPRP, encompasses sectors neglected in the SDPRP, including small and medium-enterprise development and job creation, urban development and construction. Nonetheless, the PASDEP continued to primarily focus on the ADLI strategy, and industry and services were given secondary importance. Moreover, neither strategy substantially addressed rural-to-urban migration.

ADLI continued to be the key element under GTP-I, but efforts were also made to create favourable conditions for industry. The policy provided the background for investment in the expansion of infrastructure (such as electricity, roads, railway lines, and telecom), in addition to previous efforts aimed at rural and human capital development. Moreover, the GTP emphasised the need for a free-market economic system. This is in contrast with the current political economy of the Government of Ethiopia, which is that of a developmental state espousing state-led economic planning.

Certain issues have been raised with regard to the adoption of these strategies. NGO engagement with the PRSP process was relatively superficial, and the real negotiations occurred between the Ministry of Finance and Economic Development, key sector ministries and the donor community, which wielded considerable power. Even though the government claimed that the PRSPs and GTPs would be formulated with the active participation of the population with given roles, evidence suggests that this did not take place (Jones et al., 2008; Haile, 2015). Generally, across the PRSPs and GTP-I, stakeholders and NGOs could only comment on draft strategies, and their influence on the drafting process was negligible. While the PASDEP aimed to improve consultations over the SDPRP with planned regional meetings, these related primarily to reviewing ADLI performance, and were mostly clustered at the implementation stage. Furthermore, in practice, the 2005 elections disrupted the consultation process by polarizing government-civil society relations during the process of formulation (Haile, 2015). For the GTP-I, consultative meetings with private sector participants, civil society organisations, higher education institutions and development partners were held. However, yet again, the consultations sought comments on a draft, and did not provide a forum to rethink the structural design of the poverty-reduction strategy.

3.3.2 Child-focused strategies and their limitations

Increasing attention to children's issues and child poverty has been evident over the evolution of these strategies. The SDPRP had a focus on reducing child malnutrition and increasing primary school enrolment in accordance with the Millennium Development Goals. There was an emphasis on increasing educational access and coverage as well as promoting equity and increasing access in pastoralist regions. Beyond sectoral policies on education and health, the SDPRP made no specific mention of children. The PASDEP had more emphasis on children's issues²⁸, with a strengthening of the role of education and health in national development, and notably changed focus from service access to service quality. The PASDEP also had a much clearer focus on children, and recognised the importance of tackling poverty in a holistic and child-sensitive manner.

A content analysis of the SDPRP found that children were mentioned primarily in relation to malnutrition, child mortality and morbidity (hence the importance of health service provision) and education. Youth or young people were cited in the context of HIV/AIDS awareness and educational opportunities. Therefore, the dominant discourse related to these groups was one of investing in human capital to produce productive citizens and meet the MDGs (Jones et al., 2005).

29. The PASDEP included a page on children's needs.

The SDPRP referred to the need to protect specific groups of vulnerable children: street children, orphans, and the victims of sexual violence and harmful traditional practices. Despite this, dimensions of poverty related to exclusion, exploitation and discrimination were hardly considered. Issues such as domestic and school violence, juvenile justice, harmful child labour and a children's right to have a voice and to be heard in their communities were disregarded. Similarly, little attention was given to the diverse experiences of rural and urban child poverty, migrant children, children from different regions/ethnic groups, children with disabilities, child-headed households, adolescent mothers, children of different ages, and children in conflict with the law or in penal institutions. Policy initiatives thus tended to be one-size-fits-all, with few ad-hoc measures to tailor them to the differential needs of children (Jones et al., 2005).

Because of the absence of a clear framework for analysing childhood poverty, the SDPRP's approach was narrowly sectoral, and did not try to introduce sequencing and synergies between sectoral policies (Jones et al., 2005). This weakness was further exacerbated by an omission of any reference to institutional mechanisms to address children's priorities – such as state agencies that could coordinate child-sensitive policy interventions, and monitor associated budgets, or legislative reforms that could translate international commitments into administrative practice (ibid.).

Following the PASDER, and in addition to sectoral programmes, several ministries formulated a range of strategies and action plans relevant to children's wellbeing and protection. For instance, the National Plan of Action for Ethiopian Children, approved by the Ministry of Labour and Social Affairs (MoLSA) in 2004 aimed to promote children's welfare through improved school participation, child health and HIV/AIDS interventions, and actions to protect children from exploitation, abuse and violence. The Plan also sought to improve the situation of children in difficult circumstances, such as orphans and children affected by conflict, and to protect children from harmful traditional practices. In 2006, MoLSA developed the National Action Plan on Sexual Abuse and Exploitation of Children in Ethiopia to promote protection of victims, rehabilitation and reintegration and monitoring of interventions. In 2009, MoLSA produced the National Employment Policy and Strategy, calling for a balance between allowing older children to work under fair and decent conditions (in order to generate income to meet their basic needs) and supporting them on schooling and skills development. For its part, the Ministry of Youth, Sports and Culture (MoYSC) approved a National Youth Policy in 2004 aimed at enhancing the professional competence, skills and ethics of youth, and enabling them to meaningfully participate in and benefit from a democratic system and accelerated development. The Ministry of Women's Affairs (MoWA) produced the National Action Plan for Gender Equality in 2006 focusing on women's and girls' economic empowerment, education and training, health and HIV status, reproductive rights, the reduction of violence against women and girls and protection of their human rights.

Implementation and coordination have been a challenge, however. For instance, during the PRSPs, a report by the African Child Policy Forum (n.d.) concluded that effective implementation of strategies and policies relevant to child welfare demand closer and stronger coordination both horizontally (i.e. across government executive bodies and non-state actors at a given level of administration) and vertically (i.e. across government executive bodies at the different levels of administration) among different stakeholders, and it stated that the existing levels were 'at best loose and at worse non-existent' (African Child Policy Forum, n.d.).

During the second decade of the new millennium, further policies relating to children have been developed. In institutional terms, there has been an increasing awareness of children and youth issues. Important amendments have involved the establishment of ministries that include children and youth in their designation and mandates. Children's affairs were initially delegated to MoLSA, which established a National Committee on the Rights of the Child in 1994. A major institutional boost to child-focused policies was the inclusion in 2010 of children and youth under the Ministry of Women's Affairs to form an integrated Ministry of Women, Children and Youth Affairs (MoWCYA), with a Directorate of Child Rights Promotion and Protection. MoLSA remained responsible for child labour, child trafficking, and children with disabilities with oversight and coordination of multi-sectoral social protection measures. In 2016, ministerial reorganisations resulted in the establishment of a Ministry of Youth and Sports (MoYS) and of Ministry of Women and Children's Affairs (MoWCA). Children received more attention within the new MoWCA, which revised the 2011 Draft National Children's Policy approved by the Ethiopian Parliament in April 2017. One of the major objectives of the National Children's Policy is the creation of a conducive environment for the promotion and protection of children's rights and welfare. There are also sections focusing on children in difficult circumstances, which promote alternative domestic care arrangements and aim to protect children from abuse, trafficking, child labour and harmful traditional practices.

The GTP-I identified two areas of cross-cutting issues for children's wellbeing: (i) early childhood, with an integrated approach leading to a National Policy and Strategic Framework for Early Childhood Care and Education in 2010, and (ii) the importance of a multisectoral approach to tackle malnutrition, through the 2013 National Nutrition Programme involving nine ministries including the Ministries of Health, Education, Finance, Economic Development, Agriculture, Trade and Industry, as well as Women, Children and Youth Affairs and Labour and Social Affairs. The plan also integrated children's issues with gender. Targets relating to children included mainstreaming children's affairs, providing care and support to vulnerable children, developing and strengthening community-centred care for children at risk, and reducing sexual assault, labour exploitation, child migration and human trafficking.

GTP-II sets objectives (and monitoring indicators) on children and youth (along with women's affairs). The current plan continues promoting the transition in service delivery from 'access' to 'quality'. When it comes to education, the plan's emphasis has been on the quality of education and effective learning, with a focus on expanding and promoting early learning, improving completion rates (especially among disadvantaged groups), and boosting secondary and higher education. GTP-II still considers children, alongside women and youth, as a cross-cutting issue. Protecting children from harmful traditional practices and increasing girls' participation at all levels of education are also highlighted. Sectoral programmes follow the GTP-II guidelines, with programmes on education and health considered crucial for children. Nonetheless, neither GTP-I nor GTP-II paid specific attention to child poverty concerns, nor to child poverty in urban areas.

Sectoral legislation and planning concerning children and youth has also received increasing prominence through specific additional plans and policies. Some of these are targeted in terms of age, such as the 2015/16-2019/20 National Strategy for Newborn and Child Survival and the 2007-2015 National Adolescent and Youth Reproductive Health Strategy. Likewise, important policies relating to child protection have been introduced; namely, the 2016-2020 National Action Plan on the Elimination of the Worst Forms of Child Labour and the 2012 National Social Protection Policy and subsequent 2014-2019 National Social Protection Strategy. Yet, examples of cross-sectoral cooperation remain fairly limited in scope and number, though notable exceptions include an integrated approach to the 2010-2015 National Policy and Strategic Framework for Early Childhood Care and Education and a multisectoral approach to the 2013-2015 National Nutrition Programme. The National Children's Policy 2017 followed by an Implementation Strategy and a Youth Development and Change Strategy and its accompanying Package suggests that crosscutting policies on children and youth are finally coming of age in Ethiopia. The National Children's Policy refers to various kinds of children living in challenging circumstances, and those at risk of abuse. The Youth Strategy refers to young people living in various contexts. Yet, the broader issues of (urban) child poverty, protection from shocks, and urban/rural/regional inequalities affecting children will require greater emphasis to ensure equitable implementation of programmes.

3.3.3 Urban social protection and Urban Productive Safety Net Programme

Ethiopia has a strong record of reducing extreme poverty in recent years; however, the main drivers of this progress have been in rural areas: from agricultural growth to the provision of basic services, and social safety nets. An economically productive urban transformation is necessary for Ethiopia to reach middle-income status, sustainably escape from poverty traps, and improve shared prosperity. Poverty in large cities has been falling more slowly than in rural areas and smaller urban centres (World Bank, 2015c), and it is mainly in large cities that the absolute number of residents has increased the most.

The Productive Safety Net Programme (PSNP) was exclusively focused on rural areas. Urban-focused social protection support programmes have been inadequate, fragmented and less systematic (World Bank, 2015c). The Government of Ethiopia (GoE) has implemented several poverty-focused measures to tackle the increasing level of vulnerability in urban areas. GoE's support to urban households is largely provided in the form of subsidies for energy, wheat, and housing (World Bank, 2015c). These programmes absorb about 20 per cent of social protection spending, yet the value of these subsidies remains much lower than that of direct transfers made in the PSNP, and there is also considerable leakage as urban programmes failed to target the most vulnerable groups (World Bank, 2015c). NGOs are also implementing programmes to address the specific needs of vulnerable groups, but these are often of smaller size and scale (World Bank, 2015c), and sometimes have relatively short project duration. Traditional social support mechanisms, such as Iddirs, have been providing support for the poorest communities in certain localities. Nonetheless, given the high number of poor and vulnerable in many urban areas, existing support coverage is insufficient.

Recently, the GoE has shown a strong commitment to Social Protection to sustain economic growth while protecting the social and economic rights of its citizens. This is reflected in the National Social Protection Policy (NSPP), which was approved by the Council of Ministers in November 2014. The NSPP has identified 'productive safety nets' and 'livelihood support and employment generation' as two important pillars, along with access to basic services, social insurance, and addressing abuse, violence and exploitation.

The NSPP commits the government to move beyond the fragmented and partial provision of social protection, and to establish an integrated and comprehensive systems approach instead. The NSPP puts strong emphasis on the need to expand livelihood interventions and social safety nets in rural areas and to initiate the same in urban areas in a more effectively targeted and coordinated manner. The Urban Food Security and Job Creation Strategy, as part of the implementation of the NSPP, was approved by the GoE in May 2015, and it aims to reduce poverty and vulnerability among the urban poor. The Urban Productive Safety Net Project (UPSNP)³⁰ is the first instrument of the government to implement this strategy.

The GoE developed a 10-year UPSNP as an element of the Urban Food Security and Job Creation Strategy to support over 4.7 million urban poor over a long-term period through a gradual roll-out plan of different phases starting with big cities (with populations above 100,000 people). The first five-year phase targets 11 major cities: Addis Ababa and one city from each region and aims to reach 604,000 beneficiaries³¹ (World Bank, 2015c). Given the large size and relatively high poverty rates prevailing in Addis Ababa, about three-quarters of the beneficiaries will be from this city.

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30. UPSNP and PSNP remain independent, and the UPSNP has quite different approaches and stakeholders than the PSNP. For instance, the UPSNP is only funded by the government, the World Bank and UNICEF. Graduation components are also different. Given the focus on this study on urban child poverty, we have provided limited references to the PSNP, which fully focused on rural areas.

31. The poorest 12 per cent and about 55 per cent of people living below the poverty line in these cities.

The first phase of the UPSNP, currently underway (2016-20), focuses on establishing basic safety net building blocks, including predictable transfers through public works, livelihood interventions, and capacity building. This responds to the GoE's request for immediate safety net support for the urban poor. The UPSNP is grounded in the unique challenges that shape and perpetuate urban poverty. In particular, the approach underpinning the UPSNP acknowledges that urban poverty is highly complex, dynamic, and has its own unique features. As with the PSNP, continuous income support will be delivered to the elderly and the disabled living in households with no working-age members, children in street situations and the homeless. Support will also take the form of access to shelter and healthcare, counselling and, whenever possible, family reunification. Income support and training to increase changes for employability will be offered to those in low-quality employment. In the long run, it is expected that the proposed UPSNP and the rural PSNP would allow the GoE to gradually develop a safety net at the national level.

4. Methodology

This chapter sets out the research questions and describes the methodology used – a mix of desk-based research, innovative secondary quantitative data analysis and primary qualitative data collection and investigation.

4.1 Mixed methods

To answer the questions mentioned in Chapter 1, this research relied on secondary literature review and a combination of analysis of secondary quantitative data (particularly the 2011 and 2016 Welfare Monitoring Survey, WMS), and new qualitative evidence gathered in Kolfe Keranio (Addis Ababa) and Kombolcha.

Desk-based review

An initial desk-based review was undertaken to summarise existing evidence on urbanisation trends and urban child poverty in Ethiopia and highlight evidence gaps. The review also covered evidence on existing policies and programmes addressing urban child poverty to inform implications set out in Chapter 7.

Secondary literature review and quantitative data analysis

An initial literature review and data scoping exercise revealed the paucity of data on child poverty in urban centres of Ethiopia, and the lack of up-to-date population projections at city level. Both were clear indicators of a research gap and further justification for the research conducted under this study. Given that the WMS is the most comprehensive source of trend socio-economic data available at city level, and a new wave of recent data were available, this study presents new analysis of this dataset to compare child poverty trends between 2011 and 2016. The analysis only focuses on households with children under 17 years of age. A limitation of this data analysis has been unavailable information on poor children living outside household settings or in slums and informal settlements as well as migrant children.

Primary qualitative data collection and investigation

Qualitative research gathered new evidence on the experience of child deprivations in two fast growing urban centres – Kolfe Keranio in Addis Ababa and Kombolcha in Amhara region (Annex 1 provides more details on site selection). In each of the two cities, ten focus group discussions (FGDs) and eight in-depth interviews (IDIs) were conducted to gather children’s perceptions of poverty as well as its causes and consequences, with complementing views from adults. FGDs and IDIs were disaggregated by gender and age for two age groups (10 to 14 years and 15 to 17 years), in order

to gather gender dynamics and differentiate the challenges faced by poor children and poor young people at different stages of the lifecycle. Separate FGDs were carried out with in-school and out-of-school poor children. While the research, qualitative in nature, is not meant to be representative for the different groups, it allowed the collection of information not currently available on children's experiences of poverty in urban settings.

In addition, ten key informant interviews (KIIs) were undertaken with representatives of national and local government and with NGOs working on urban child poverty issues. Respondents were probed on the level and depth of child poverty in their communities, on how unplanned urban growth is affecting children and the extent to which current interventions are tackling urban child poverty.

4.2 Ethical considerations

Research permits

Ethical clearance was applied for with the National Research Ethics Review Committee (NRERC) at the Ethiopian Ministry of Science and Technology, and full approval was received. Research proposal, tools, consent/assent forms and information sheets were also submitted to the ODI's Ethics Committee. The Committee was satisfied that the ethical considerations of working with children were duly taken into account.

Informed consent and assent

Given that the target population for the qualitative research is under 18 years of age, informed consent from a parent or guardian was sought. In addition, the research team also sought assent from the children themselves. Both guardians and parents of respondents and respondents themselves were made well aware of what they would be participating in and the purpose of the research.

Consent and assent forms included instructions to facilitators. Statements were read in respondents' first language both before and after interviews and facilitators confirmed that guardians/parents understood and gave consent verbally, and/or by signing or providing a thumbprint on the consent form. All information provided by respondents during the discussion was anonymous and confidential. Respondents could choose not to answer certain questions, and they could terminate the interview at any point with no obligations.

During the research training phase, trainers reviewed and stressed the importance of ethical guidelines and principles, including the National Research Ethics Review Committee's Guidelines (as well as ODI's own ethical policies that are in line with these). Facilitators were reminded to triangulate understanding of both the purpose of the research, terms of conduct, and use of data, and to have respondents' parents/guardians and then respondents reiterate these back to the facilitation team. All conversations during the focus group discussions and in-depth interviews were recorded and permission was sought for this through the informed consent and assent processes.

Causing no harm

Throughout the interviews, research facilitators did their utmost to ensure they caused no harm. Respondents might feel a sense of exposure to untrusted interviewers, as well as discomfort in disclosing their concerns about their own poverty or sense of inequality to peers and others. To address this, facilitators were selected based on their experience of child-friendly participatory approaches.

Although research facilitators had prior experience of conducting qualitative research with children, a specific training session was dedicated to reviewing safeguarding procedures. This included definitions of safe spaces, and codes of conduct of rights violations if disclosed. Participants were briefed on their responsibilities regarding referral mechanisms and we also included the possibility of referrals in the consent forms for parents and caregivers.

Data management, storage and ensuring confidentiality

All information provided by participants was anonymous and confidential. Research facilitators provided codes to individual focus group discussions and no names were recorded or written on transcripts. For key informants, a list of participants was held in a separate file, and these respondents were informed that their views would be recorded, and that their views might be traceable based on their statements - although their names would not be recorded (unless they wished so).

Retrieved data were consolidated and held by researchers in Ethiopia from the Policy Studies Institute (PSI) and the Overseas Development Institute (ODI). Data were coded and analysed with the ATLAS.ti software. Those holding this information confirmed their total commitment to data confidentiality and non-distribution.

5. Perceptions on urban child poverty

Key Messages

- Children in our FGDs perceive poverty in a multidimensional sense, loosely confirming the UNICEF MODA approach.
- Urban children in our FGDs define poverty as unmet basic needs for food, shelter and clothing. This definition is homogenous across sites, age groups and gender and it is mostly used by out-of-school children.
- Interviewees noted that poor health, food and nutrition were indicators of child poverty. WMS data did show that access to food in urban areas is improving even for the poorest wealth quintiles. Unknowns remain the quality of food as well as the intra-household distribution of food.
- Gender discrepancies in school attendance were noted by younger girls (Kombolcha) and older children of both genders (Kofe Keraniyo). Boys are said to be given priority in education. Risks for girls of attending evening classes were noted (Kofe Keraniyo).
- Poverty affects school attendance directly, diminishing when children need to work to support family income and when transportation and uniform costs are too high to bear.
- Housing quality (in terms of walls, roofs, flooring, number of persons to a room and access to electricity and to sanitation) appears to have worsened overall according to WMS data for the poorest residents in Ethiopia from 2011 to 2016 (WMS data, see chapter for specific details).
- The most vulnerable children, orphans, street children, children with disabilities and children that migrated from rural to urban areas, are an emblem of poverty at its deepest level. Their difficulties are known by other children we interviewed and there is a consensus on the very difficult life conditions of these children.
- Children interviewed (Kofe Keraniyo FGDs) understand the effect of constrained basic needs on psychological well-being of other children including extreme stress, low self-esteem and even suicidal thoughts from shame and mockery.
- Discrimination, social stigma and social exclusion are notable exceptions to the MODA framework that were mentioned by children and adults in our research. In the other direction, MODA elements left out by respondents included illiteracy, the 'information and participation' dimensions, as well as very specific health-related dimensions, as interviewees focused primarily on a shortage of food.



This chapter explores how children living in urban settings of Ethiopia experience poverty. The chapter heavily draws from focus group discussions (FGDs) and in-depth interviews (IDIs) with children aged 10-17 in Kombolcha and Kolfe Keranio (Addis Ababa). Where relevant, the chapter highlights differences in children's views based on age (10 to 14-year-olds and 15 to 17-year-olds), gender, location and school attendance. Views from children are complemented by those from adults (parents/guardians, teachers and community leaders) that took part in separate FGDs as well as KIIs at national and local level.

Primary qualitative data are also incorporated with analysis of secondary quantitative data from the 2011 and 2016 Welfare Monitoring Survey (WMS),³² especially looking at living conditions of poor households with children younger than 17 years. The secondary data analysis covers all major urban centres; that is, all administrative capitals (Mekele in the Tigray region; Adama, Oromiya; Bahir Dar, Amhara; Awassa, SNNPR; Assosa, Benishangul-Gumuz; Asayta, Afar; Gambella in Gambella Region; Jijjiga, Somali), Addis Ababa, Harari and Dire Dawa. The analysis also included 'other urban centres', which are secondary cities in each region and cities or towns with a population of 1,000 or more and whose inhabitants are primarily engaged in non-agricultural income-generating activities.³³

32. Note that in order to code the different cities and sub-cities, the 2011 Household Consumption and Expenditure Survey (HCE) by the Central Statistical Agency (CSA) of the Ministry of Finance and Economic Development, was merged with the 2011 Welfare Monitoring Survey. Likewise, the 2015/16 HCE was merged with the 2016 WMS. The CSA conducted HCE surveys (that disaggregate data at city and sub-city level) and WMS in the same sites each year, and data were collected from the same households.

33. The list includes: Gonder, Dessie and Debre Berhan in Amhara; Debre Zeit, Jimma, Nekemte and Shashemene in Oromiya; Hoseana, Dilla Town, Arba Minch and Sodo in SNNPR in addition to other urban areas in all regions of Ethiopia.

Limitations of the quantitative investigation from the WMS surveys are that they refer to households with children younger than 17 and to children living in those households only. The analysis is at the household, not individual, level and the investigation disregards poverty experienced by street children. In addition, WMS data do not capture vulnerabilities experienced by orphan children, or children that migrated from rural to urban areas, and who may be living in urban household as servants. Our primary qualitative data collection therefore represents a valuable contribution to filling this gap, as it strongly highlights how street children, orphans, children with disabilities and migrants are the most vulnerable among poor children living in urban areas of Ethiopia. The lack of quantitative data on their status warrants further ad-hoc investigation in order to accurately inform policy recommendations.

This chapter also briefly compares primary qualitative data and secondary quantitative data from the WMS survey to the UNICEF 2018 Multidimensional Child Deprivation findings for Ethiopia. As reported in Chapter 2, the MODA methodology considers indicators of child poverty at the individual and household levels, with dimensions and indicators used varying by age group. Understanding in which areas children are deprived provides a different perspective on poverty, acknowledging that poverty is more than a lack of income or assets.

Section 5.1 provides an overview of children's own definitions of poverty from children that participated in FGDs. Section 5.2 presents a comparison between our findings and WMS data. Section 5.3 discusses dimensions of urban child poverty that especially apply to the 'most vulnerable and marginalized children'. Section 5.4 outlines dimensions of child poverty that are important to children, but that are currently missing and/or do not map onto the MODA framework for measuring poverty through deprivations.

5.1 How children define poverty: Findings from our focus group discussions

Urban children in our FGDs define poverty as unmet basic needs for food, shelter and clothing. This definition is homogenous across sites, age groups and gender and it is mostly used by out-of-school children. This definition is also in line with research findings from a comparable qualitative exercise conducted under the Young Lives programme (EDRI and UNICEF, 2017). However, our research highlights the emphasis that urban children place on the most vulnerable children as an emblem of urban child poverty at its deepest level.

Children in Kombolcha describe a child in urban poverty as one who *'wears torn clothes. She suffers from hunger. Her physical wellbeing is poor, and her skin is itchy. She collects dumped food from the garbage. She does not have a home and lives on the street. She does not attend school as no one can fulfil her basic needs for school material'* (Poverty Tree/FGD with out-of-school boys aged 10-14 years in Kombolcha).



Children in Kolfe Keranio mentioned similar characteristics of child poverty. Girls aged 10-14 think that ‘unmet basic needs’ are an indicator of poverty for younger children more than older children, because the older cohort (particularly boys) can more easily engage in income-generating activities. They also mentioned that it is mostly street children who are vulnerable to hunger, lack clothes and shelter and experience health problems, and that girls living on the street face harsher living conditions than boys. Children that migrate from rural to urban areas are also at high risk of poverty if they cannot rely on any economic support. Orphans and children with disabilities were deemed the most vulnerable to extreme poverty, also because of the social stigma and discrimination they encounter (Poverty Tree/FGD with out-of-school girls aged 10-14 years in Addis Ababa).

Children in Kolfe Keranio stressed the psychological consequences that constrained basic needs exert on children, arguing that poor urban children suffer from low self-esteem because people disrespect them, and that they experience high levels of stress to the point of having suicidal thoughts (Poverty Tree/FGD with out-of-school girls aged 10-14 years in Addis Ababa). Throughout their descriptions, children and adults from both Kolfe Keranio and Kombolcha mentioned discrimination, stigma, social exclusion, and psychological stress as both defining factors and consequences of urban child poverty.

5.2 Children's perceptions of poverty and WMS Data: A Comparison

We now analyse specific dimensions of child poverty, distinguishing between 'child-level dimensions' and 'household-level dimensions'. In so doing, we compare and contrast children and adult views on how they perceive child poverty as collected through FGDs, IDIs and KIs alongside information gathered through the 2011 and 2016 WMS. As previously mentioned, the WMS analysis in this study refers to urban households with children younger than 17, and only to children living within those households.

5.2.1 Child-level dimensions

Poverty dimensions gathered under this sub-section are 'child level' because the indicators used to measure each dimension refer to the child as the unit of analysis. These dimensions are 'health, food and nutrition' and 'education.'

Poor health, food and nutrition

Adults in FGDs in Kombolcha noted that unbalanced nutrition and poor personal hygiene are indicators of child poverty. Women reported that poor children rarely eat three times a day, many eat only twice. They added that getting a balanced diet and good quality food is often inconceivable for poor children. In a separate focus group in Kombolcha, men suggested that poor physical appearance (i.e. including thin and malnourished bodies) is a strong predictor of child poverty [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. It is unclear whether adults in qualitative research referred specifically to children living within or outside of household settings.

WMS data show that access to food in urban areas is improving. We derived information on urban food availability by wealth quintiles using the 2011 and 2016 WMS. Interviewed households were asked to compare their living standards with respect to food in 2011 and 2016 to those of the previous year (i.e. 2010 and 2015). The percentage of households in the poorest quintile (quintile 1) that reported 'much worse' living standards dropped by 16.9 percentage points (p.p.) between 2011 and 2016.³⁴ Meanwhile, that of households in the richer quintiles (4 and 5) that mentioned 'better' living standards for food increased by 4 p.p.³⁵ The percentage of households belonging to the poorest wealth quintile and able to access three meals the previous day increased by 5.3 p.p. between 2011 and 2016.³⁶

34. From 22 per cent in 2011 to 5.1 per cent in 2016. The value of z (two-tailed hypothesis test) is 3.6308. The value of p is 0.00028. The change is significant at $p < 0.01$.

35. From 17.3 per cent in 2011 to 21.3 per cent in 2016. The value of z (two-tailed hypothesis test) is -2.7433. The value of p is 0.00614. The change is significant at $p < 0.01$.

36. From 60.3 per cent in 2011 to 65.6 per cent in 2016. The value of z (two-tailed hypothesis test) is -2.7202. The value of p is 0.00652. The change is significant at $p < 0.01$.

All these statistics point to improvements in the living conditions of the poorest urban households (with children younger than 17) with respect to food access between 2011 and 2016. Nonetheless, intra-household distribution of improved food access remains unclear. Also, greater access to food does not necessarily translate into better quality food. Remember that WMS data are household-based, and disregard poverty experienced by children that are not part of a household or those who may not be included in data collection at such households (such as servants or children with disabilities). The lack of quantitative data on the nutrition status of these children may explain apparent discrepancies between WMS and primary qualitative data. Such discrepancies warrant the need for further investigation in order to accurately inform policy recommendations.

Poor education

Education is a dimension of child poverty that was discussed at length both in Kombolcha and in Kolfe Keranio. Our qualitative analysis shows that urban children (both in the older and the younger cohort and in both locations) associate 'being poor' with 'being unable to attend school' because of unaffordable costs for school materials (pens and exercise books) and school uniforms. These are commonly known as 'indirect' costs of education. Children also observed that 'poor students' (and more so boys than girls) may be beaten by their teachers if they do not bring school material. If girls are wearing worn-out uniforms, they may instead be bullied and harassed by boys (Poverty Tree/FGD with girls aged 10-14 in-school in Kombolcha).

FGDs with teachers in Kombolcha and Kolfe Keranio confirmed children's views in that students from 'poor families' usually wear old school uniforms (begged from neighbours), and they would often come to class without exercise books and pencils. They also *'do not take breakfast before school, and they may feel sleepy and dizzy during classes. This affects their wellbeing, ability to learn and overall school performance'* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. This ties into remarks noted in the previous sub-section of lack of food and hunger being an indicator of child poverty.

Younger girls in Kombolcha and older children (male and female) in Kolfe Keranio discussed gender disparities related to school attendance. They seem to think that boys are usually given priority to education, whereas girls are more likely to experience absenteeism and drop out of school because they need to help with household chores, especially if their mother is engaged in income-generating activities outside the household (Poverty Tree/FGD with boys aged 15-17 in-school in Addis Ababa).

Children in Kolfe Keranio also debated disparities in education affecting migrant children. They lingered on the risks related to attending evening classes: *'Migrant children working as housekeepers are usually exploited and exhausted, and they cannot attend school properly. Some of them decide to attend evening classes even when their employers disagree. Younger girls that attend evening classes are usually afraid of walking in the dark late at night for the risk of rape and physical harassment. We heard that strangers recently kidnapped a girl who was going to school late in the evening, and they took her kidneys. That girl was found dead shortly afterwards. We have also heard that strangers abduct young children and traffic them'* (Poverty Tree/FGD with in-school girls aged 10-14 in Addis Ababa).

In comparison with qualitative data, WMS data focus more on ‘illiteracy’ and ‘inability to attend school’ (the latter echoes observations in our research). WMS data hint that urban children (aged 14 to 17) in the poorest quintiles are less likely to have ever attended school. In 2016, 2.5 urban children (belonging to quintiles 1 and 2) had never attended school for every 1 child in quintiles 4 and 5.³⁷ Among the reasons for lack of school attendance, 8.5 per cent of urban households in 2016 (6.9 per cent in 2011) suggested that their children needed to work to support family income. Another 63.8 per cent (in 2016 and 50.9 per cent in 2011) hinted that the family would not allow the child to go to school.³⁸ In regards to illiteracy – something not mentioned by children and adults in our qualitative interviews and FGDs – WMS data reveal that the percentage of illiterate children aged between 14 and 17 years and living in urban households remained unchanged at around 5.5 per cent between 2011 and 2016 (that of rural children of similar ages dropped by 5 p.p).³⁹ This percentage masks differences across wealth quintiles, with more illiterate urban children in 2016 in the first three quintiles (i.e. poorest, poorer and middle quintile).

5.2.2 Household-level dimensions

We consider the following dimensions, ‘housing’ and ‘water and sanitation’, to be at the household level because indicators to measure each dimension typically use the child’s household as the unit of analysis, rather than the child as an individual.

Housing

In FGDs in Kolfe Keranio, boys in the age group 15-17 years associated child poverty to a lack of proper shelter, saying that poor children live in rented houses that are too small to accommodate all family members, and have roofs that leak in the rain (Poverty Tree/FGD with out-of-school boys aged 15-17 in Addis Ababa). Adults (both in Kolfe Keranio and Kombolcha) also suggested that rent is unaffordable for urban dwellers, and this often puts the poor at risk of becoming homeless. If they cannot afford rent, they will then make shelters out of plastic and live on the street.

At first glance, WMS data point to a shift in the urban property market between 2011 and 2016 with more households in the poorest wealth quintile owning a property (the share of private owners in this quintile moved from 58.3 per cent in 2011 to 64.1 per cent in 2016⁴⁰). This may be partially explained by the surge in the construction and allocation of condominium housing under the Integrated Housing Development Programme (IHDP) in operation since 2006. The 2015 State of Ethiopian Cities Report mentions that more than 250,000 condominium units were built and distributed between 2006 and 2015 in 27 cities (MUDHCo and ECSU, 2015). That said, the report also highlights that the focus on

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³⁷. A similar ratio was found for 2011.

³⁸. The reasons behind such decision would grant further investigation.

³⁹. The value of z (two-tailed hypothesis test) is 2.663. The value of p is 0.00782. The result is significant at $p < 0.01$.

⁴⁰. The value of z (two-tailed hypothesis test) is -2.9135. The value of p is 0.00362. The change is significant at $p < 0.01$.

condominium housing coupled with limited supply for construction have resulted in the proliferation of informal housing. Moreover, the report recalls that owner-occupied housing tenure security is at risk if the owners do not have deeds (MUDHCo and ECSU, 2015). Most cities lack well-functioning systems for the issuing of deed titles and property ownership certificates, and the process of adjudication tends to be lengthy, and is marked by the need to thoroughly ascertain relevant evidence and screen all supporting documents. Keffa (2014) estimates that only 43 per cent of Addis Ababa residents that are home owners have a legal document certifying ownership. Qualitative research led to similar conclusions. Women in Kombolcha stated that rich people partnered with the government to construct high rise buildings in towns. Poor people were affected because they had to resettle, and they did not get any compensation in cash or kind. Moreover, the place where they resettled was very far from where they previously lived [Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Kombolcha]. A representative from a local NGO, also based in Kombolcha, reiterated that the distance between the school and the periphery, where evicted families were relocated, negatively affected schooling for children of those families. Nonetheless, a national government official (based in Addis Ababa) depicted a different scenario: 'In Addis Ababa, relocation of residents when an area is demolished is very common. Families that were forced to relocate would be given options of either moving to condominium houses or kebele-owned houses. Relocation is based on people's financial capacity. Families relocated from Arat Kilo were moved to Tafo area, for instance, which is comfortable for living, including better weather conditions. In Arat Kilo, children did not have playgrounds, and prostitution is rife there. Hence, relocation was good for children, because they can now grow in a child-friendly environment, free from exposure to prostitution and addiction.'

Analysis of WMS data also reveals characteristics of housing: namely, wall, roof and floor quality and overcrowding. The following statistics point to recent worsening in housing conditions for the poorest households. We describe each of them in turn.

Wall quality

Between 2011 and 2016, the quality of walls of the poorest households' units in urban areas appears to have worsened. The share of the poorest urban households living in dwellings with walls made of wood and mud increased from 70.3 per cent to 77.0 per cent⁴¹. This is 1.6 times the increase in non-durable walling experienced by the richest households (quintile 5) over the same period⁴². Of all urban households (with children) 17.9 per cent belonging to the richest quintile managed to afford walls of more durable material (i.e. blocks plastered with cement) in 2016 (16.8 per cent in 2011). For the poorest households, this percentage approached zero in both years.

41. The value of z (two-tailed hypothesis test) is -4.06. The value of p is < 0.00001. The change is significant at p < 0.01.

42. From 64.2 per cent in 2011 to 68.3 per cent in 2017 (+4.1 p.p.). The value of z is -4.5651. The value of p is < 0.00001. The change is significant at p < 0.01.

Roof quality

Most of the households with young children in urban areas of Ethiopia live in houses with corrugated iron sheet roofing. In 2016, this was the case for 54.0 per cent of the poorest households⁴³ and for 96.7 per cent of the richest households⁴⁴. Between 2011 and 2016, the poorest households suffered from a decline in the quality of their roofing with 33.2 per cent of them living in houses roofed with thatch (25.8 per cent in 2011)⁴⁵.

Flooring quality

There is a great disparity in flooring conditions for urban households between the first and fifth quintiles. Around 95.3 per cent of the poorest urban households (with young children) were living in housing units with earthen floors (mud and/or dung) in 2016⁴⁶. This share was 19.9 per cent for the richest households at that time⁴⁷. As mentioned by the 2015 State of Ethiopian Cities Report, earthen floors release a mixture of dust particles known to cause respiratory complications such as asthma. This is especially relevant given that all the poorest households in the considered WMS data have children aged 17 and younger.

Overcrowding

Overcrowding, an indicator of housing shortage, refers to the number of persons sharing one room. Findings from the analysis of WMS data point to greater overcrowding over time particularly for the poorest quintile, with 3.6 people per room in 2011⁴⁸ and 4.3 people⁴⁹ per room in 2016⁵⁰.

Access to electricity

The percentage of households in the poorest quintile able to access electricity dropped by 11 p.p. between 2011 and 2016⁵¹. The percentage of richest households accessing electricity remained constant (at around 99.6 per cent) over the same period. Interestingly, 3.1 per cent of the poorest households were using solar power in 2016. Of those poorest households that could access electricity, many still faced power cuts. Change across locations (and between 2011 and 2016) in the percentage of households (of any wealth quintile) that faced electricity power failure (lasting for at least one hour and for three times and more during the past week) suggest that electricity went missing more often in urban Oromiya and Amhara regions, as well as in Assosa (Benishangul Gumuz), 'other Afar urban' and 'other Tigray urban.'

43. The corresponding figure for 2011 was 58.1 percent. Though, change between 2011 and 2016 is not statistically significant.

44. The figure for 2011 was 97.8 percent. The value of z (two-tailed hypothesis test) is 4.2298. The value of p is < 0.00001. The change is significant at p < 0.01.

45. The value of z is -2.7709. The value of p is 0.0056. The change is significant at p < 0.01.

46. 94.9 percent in 2011 (no statistically significant change between 2011 and 2016).

47. 19.8 per cent in 2011 (no statistically significant change between 2011 and 2016).

48. 95 per cent confidence interval equal to [3.48, 3.65].

49. 95 per cent confidence interval equal to [4.15, 4.37].

50. The two-tailed p value for the t-test is less than 0.0001; hence the difference between 2011 and 2016 is considered to be highly statistically significant.

51. From 49.1 per cent in 2011 to 38.1 per cent in 2016. The value of z (two-tailed hypothesis test) is 4.4582. The value of p is < 0.00001. The result is significant at p < 0.01.

Water and Sanitation

A representative from the Kolfe Keranio Woreda Administration describes at length poor living conditions in slum areas, characterized by lack of access to safe drinking water and improved sanitation. Lack of public infrastructure is especially rampant in informal settlements around riverbanks bordering the Oromiya region [KII with a (regional/local) government official in Addis Ababa].

While children and adults in Kolfe Keranio and Kombolcha did not mention poor water quality and sanitation as indicators of child poverty, they did include them in descriptions of the consequences of poverty. More specifically, respondents talked about the health consequences of inadequate water and sanitation, such as fleas, infection, water-borne diseases, and stigma against children who are perceived to have health issues due to lack of clean water [Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha; Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha; Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Addis Ababa].

Conversely, WMS data highlight lack of access to clean water and poor sanitation practices affecting child poverty. For instance, WMS data show that one out of three of the poorest households (with children) living in urban areas did not have access to safe drinking water between 2011 and 2016. In the case of sanitation, WMS data reveal that more than a third of the poorest households (with children younger than 17) in urban areas were practicing open defecation (i.e. defecating in the field/forest) in 2016. This was a relative improvement from the 43.2 per cent figure in 2011⁵². Worryingly though, the percentage of the poorest households using unimproved sanitation⁵³ increased from 47.1 per cent in 2011 to 58.2 per cent⁵⁴ in 2016⁵⁵.

5.3 Child poverty dimensions specific to the most vulnerable children

Orphans

Children in Kombolcha and Kolfe Keranio FGDs think that orphans are very likely to become street children and/or child labourers because they need to provide for their own subsistence, and do not usually have a place to live. They also say that orphans raised by relatives do not get *'the same love and care that parents'* could offer (Poverty Tree/FGD with girls aged 10-14 in-school in Kombolcha) and that they are also more vulnerable to child labour and physical abuse by relatives (Poverty Tree/FGD with girls aged 10-14 in-school in Addis Ababa).

52. The value of z (two-tailed hypothesis test) is -2.8166. The value of p is 0.0048. The change between 2011 and 2016 is significant at $p < 0.01$.

53. Unimproved sanitation is defined as private or shared non-ventilated pit latrines and bucket toilets (WHO, 2017).

54. The value of z (two-tailed hypothesis test) is -5.4818. The value of p is < 0.00001 . The result is significant at $p < 0.05$.

55. The percentage of households using improved sanitation (i.e. private flush toilet, shared flush toilet, ventilated private pit latrine, and ventilated shared pit latrine (WHO, 2017) decreased from 9.3 per cent in 2011 to 4.6 per cent in 2016. This change is nonetheless statistically insignificant.

Another group of children in Kombolcha echoed the connection between orphanhood and household violence: *'If the child is a single orphan, when one of the parents remarries it is common for the child to face conflict with the step-parent. Because of conflict, orphan children leave the parental residence and engage in income generating activities and/or become street children. They usually drop out of school since no one provides for their basic needs. These children have no protection, and they are exposed to exploitation and the risks associated with street life'* (Poverty Tree/FGD with out-of-school boys aged 10-14 in Kombolcha).

Street Children

Poor younger children in Kombolcha listed a number of factors that may lead to street life: *'Children may become street children after becoming orphans. In most cases, if the father dies and he was the breadwinner of the household, no one will provide for the child and she will end up living on the street. Poverty is another leading factor that pushes children to street life. If a family cannot afford to provide for basic needs, children will start begging or collecting food from garbage'* (Poverty Tree/FGD with out-of-school boys aged 10-14 in Kombolcha). This suggests that some street children may be living on the street during day time, and spend the night at home.

Adults in Kombolcha confirmed that poor parents may become distressed, and they may encourage their children to beg or seek other means for survival; children would then experience dreadful living conditions. To supplement food from begging and food gathered from garbage, street children work as day labourers, offering to carry heavy loads for payment or selling salvage material (like empty plastic bottles) collected from the rubbish dump. However, locals tend to have low confidence in street children for fear of theft, and this hampers their job opportunities.

Street life affects boys and girls as well as younger and older children, but it does so differently. Respondents said that it is mainly older boys who engage in income-generating activities, while younger children beg for food or collect dumped food (known as 'Bule') from hotels. Older children also commonly steal money or valuable property from younger street children at night (Poverty Tree/FGD with out-of-school boys aged 10-14 in Kombolcha).

Street children are also very vulnerable to violence and often take extreme measures to protect themselves. Adults in Kombolcha hinted that when girls become street children, *'they face the risk of being raped and they are likely to become commercial sex workers'* (Poverty Tree/FGD with out-of-school boys aged 15-17 in Addis Ababa). Girls are raped on the street more often than boys. Some of the FGD participants in Kombolcha reported that they carry a knife to protect themselves from rape. For fear of being attacked or raped, children may also decide not to sleep at night or to take turns with friends, going to sleep late and waking up early. Sometimes street children sleep in cinemas or in the proximity of churches or construction sites during day time. These children lead erratic lives, none of them attend school and many of them become addicted to drugs: *'It is common for street children to chew kchat, smoke cigarettes, sip benzene and become drug addicts. Chewing kchat helps these children to stay awake for long hours during the night'*. (Poverty Tree/FGD with out-of-school boys aged 10-14 in Kombolcha).

Street children, and especially younger children, are also susceptible of being kidnapped to become child labourers or for the trafficking of organs. Boys aged 10-14 in Kombolcha argued that street children may be kidnapped and blinded for the purpose of begging.

Migrant children and children with disabilities

Migrant children – specifically rural-to-urban migrant children – face unique barriers when it comes to poverty. Rural-to-urban migration of farming families occurs when farmers are affected by climate change, drought, infertile small plots of land or conflict. After leaving their livelihood in rural areas, families with farming backgrounds are likely to fall further into poverty and end up living on the streets of urban centres [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha].

There are multiple reasons why children (and their families) may migrate. Some of the children that migrate alone from rural areas leave their households hoping to find a job in the city, and then support their families, but *'once in Addis Ababa, they feel lonely and stressed. They may struggle to find a job and feel hopeless and frustrated. They may then end up living on the street'* (Poverty Tree/FGD with out-of-school girls aged 10-14 years in Addis Ababa). However, some other children migrate when conflict arises between the child and the family or because of parental divorce and/or conflict with a stepparent (Poverty Tree/FGD with out-of-school boys aged 10-14 years in Kombolcha). Girls may even decide to leave rural areas to escape from harmful traditional practices like early marriage (Poverty Tree/FGD with out-of-school boys aged 15-17 in Addis Ababa).

Commission agents may also lure girls into the city with the promise of decent jobs. Not only are these girls deceived by the brokers, but they lack the social networks to find help; no one assists them or sympathizes with them (Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). Respondents also note an association between human trafficking, sex work, and girls moving to the city. One respondent said, *'most of the girls engaged in prostitution here in Addis Ababa are from outside Addis. These girls are exposed to the risk of contracting HIV'* (Poverty Tree/FGD with out-of-school boys aged 15-17 years in Addis Ababa). With respect to human trafficking, another respondent said: *'In the past, the family agreed with the child moving to Addis Ababa for work. Nowadays, it is human traffickers who bring the child to Addis while her family may be fully unaware. Migrant children as young as 12 years are engaged in weaving activities, and work for very long hours every day. No one protects them, and they suffer a lot. Their employer may allow her/his own children to attend school, but s/he may prohibit her/his 'servants' to learn. S/he would expect those servants to work more and more for her/his own benefit'* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Addis Ababa].

A FGD with adults in Kombolcha and an interview with a key respondent in Addis Ababa confirmed the recent expansion of child trafficking: *'The expansion of child trafficking, not only from rural to urban centres, but also from one town to another, indicates a high level of child poverty within many families. Female children are highly vulnerable because they are needed to work as housemaids and babysitters for urban households. Illegal brokers play a great role in searching for poor girls all around villages and schools (especially as they walk their way from home to school and back). Brokers*

facilitate the girls' route to other places...Child traffickers are well-known for bringing children from rural to urban areas. Children are hoping to improve their livelihood, and they end up being exploited and being paid meagre amounts of money, if any' [KII with a (regional/local) government official in Addis Ababa].

In general, migrant children and their families can rarely access financial assistance from social programmes because they lack social connections that would help them benefit from such programmes. This is further exacerbated by the fact that the Woreda administrations are also unaware of their existence [KII with a (regional/local) NGO representative in Addis Ababa].

A final note on children with disabilities. All children participating in the FGDs agreed that children with disabilities are among the poorest children living in urban settings. Only children in Kolfe Keranio described the challenging living conditions faced by peers with disabilities: *'Community members despise these children. They think: "Why should we send them to school? What is the benefit of educating them?" Furthermore, there are no disability-friendly services in schools. Many children with disabilities spend their time begging along the streets'* (Poverty Tree/FGD with out-of-school girls aged 15-17 in Addis Ababa).

5.4 Comparison between definitions of child poverty voiced by poor urban children and MODA dimensions

In this brief section, we compare the approaches of measuring child poverty from FGDs and interviews to MODA dimensions and indicators. Our conceptual framework of measuring multidimensional poverty was laid out in Chapter 2. We then asked if multidimensional poverty measurement frameworks (like the MODA) map onto the definitions and experiences of poverty as expressed by children (and adults) living in urban poverty. We find that while there is some overlap between the dimensions in the MODA framework and the recurring themes mentioned both by children and adults in our FGDs and interviews, there are also notable differences and gaps between the two.

As reported in Chapter 2, the MODA methodology considers indicators of child poverty at the individual and household levels, with dimensions and indicators varying by age group. At the individual level, the MODA covers 'development,' 'health,' 'nutrition' and 'education', whereas at household level it focuses on 'health-related knowledge,' 'information,' 'water,' 'sanitation' and 'housing' (also refer to the table in Annex 4). Understanding which areas show deprivations for children provides a multidimensional perspective on poverty, acknowledging that poverty is more than a lack of income or assets.

Participants in our qualitative research also considered health, education, water, sanitation, and housing as aspects of child poverty; however, what they cited in those dimensions does not consistently align with the quantitative indicators used in the MODA framework applied to Ethiopia. For example, MODA measures nutrition through indicators of exclusive breastfeeding for children under 6 months, infant and young child feeding (IYCF) practices for children 6-23 months, underweight

and wasting for children under 5, and provision of vitamin A supplements during the last six months for children ages 7-59 months.⁵⁶ However, respondents in the qualitative exercise carried out under this research focused more on the lack of nutritious food in general, and on hunger for both younger and older children. Furthermore, respondents pointed to malnutrition and weak physical being, but they disregarded factors relating to the MODA dimensions of health-related knowledge (specifically diarrhoea treatment and HIV/AIDS).

Moreover, the MODA analysis applied to Ethiopia considers 'education' for children aged between 5 to 17 years,⁵⁷ and highlights 'school attendance' and 'illiteracy'. While illiteracy is not discussed by our respondents, absenteeism is mentioned as an indicator of poverty across age groups and locations – particularly for girls or for vulnerable groups like migrants. Respondents described lack of access to health care facilities and overcrowded living conditions in urban areas. Both indicators were excluded from the 2016 MODA study in Ethiopia. In the multidimensional poverty analysis, children are considered deprived in housing if their dwellings are built of natural, non-permanent material or if they are exposed to indoor pollution from the usage of solid fuels for cooking inside the house. Living in structures made out of non-permanent material is reflected both in the responses from our own research and in the MODA. While indoor pollution was not mentioned in our FGDs and interviews (but included in the MODA), secondary literature emphasizes this as a unique challenge to urban populations, adversely affecting the poor (Bartlett, 2011; Save the Children, 2015; GFDRR and World Bank, 2015b).

Respondents also overlooked the 'information and participation' dimensions of the MODA (i.e. household having a radio, mobile phones, and the ability to take part in community events or conversations).⁵⁸ Children and adults from both Kolfe Keranio and Kombolcha referenced discrimination, stigma, social exclusion, and psychological stress as defining factors and consequences of urban child poverty. None of these psychosocial markers are included within any dimension of the MODA framework.

56. Across Ethiopia, 73 per cent of children under five are deprived in nutrition with insignificant differences between boys and girls. There is, again, an improvement from 2011 when the deprivation rate was 76 per cent, but not as drastic as the other indicators mentioned above (CSA and UNICEF Ethiopia, 2018)

57. The education dimension is measured through three indicators: school attendance for children of official school-going age (7-17 years); grade-for-age that captures delays in schooling (9-17 years), and literacy (15-17 years). Children under 7 years are non-deprived in education since compulsory education starts at age 7 in Ethiopia. Primary school-age children (7-14 years) are deprived in education if they are not attending school or if they are attending school with two or more years of delay. Secondary school-age children ages 15-17 years are deprived in education if they are not attending school, if they are attending school with three or more years of delay, or if they are illiterate (CSA and UNICEF Ethiopia, 2018). The MODA analysis found that 50 per cent of children between 5 and 17 years old across Ethiopia were deprived in education in 2016; this is a drop from 56 per cent in 2011. The deprivation rate in education is higher for secondary school students than primary school students age 7 to 14 years (66 per cent and 53 per cent, respectively) (CSA and UNICEF Ethiopia, 2018).

58. The CSA and UNICEF report (2018) finds that 69 per cent of children ages 5-17 in Ethiopia were deprived of health-related knowledge or lived in households deprived of health-related knowledge in 2016, showing no change since 2011. For the dimension of information and participation, 66 per cent of children age 5-17 years were deprived in information and participation in 2016, showing a slight decrease from 70 per cent in 2011 (CSA and UNICEF, 2018).

6. Urban child poverty dynamics and the impact of urbanisation on child poverty

Key Messages

- Children across our study proposed similar causes of child poverty independent of their age. Leading causes ranged from dependency on aid to 'laziness', unemployment lack of education and family planning and drug and alcohol addiction. Children were also aware of problems of debt and lack of savings, population growth and migration from rural to urban areas.
- Consequences of child poverty are seen in the same way by adults and children of different ages, genders and geographic locations. The main include: poor school performance or dropping out; lack of clean water and inability to access medical treatment.
- Consequences of street life were thoroughly discussed by children including low psychological health, commercial sex and prostitution, criminality and drug addiction. Child labour, including that associated with migration, was also mentioned.
- Children mention environmental degradation population growth (due to migration), increased child labour and decreased social capital when asked how they experience urbanization.
- Positive impacts of urbanization include new businesses and the availability of different goods, a new youth centre and opportunities for jobs and shelter, especially for out-of-school children.
- The negative aspects of urbanization dominated discussions.

Having explored how urban children experience poverty, who they perceive are the poorest children and how they live, section 6.1 delves into the determinants and section 6.2 the consequences of child poverty as viewed through the eyes of poor children living in two rapidly urbanizing areas of Ethiopia. The chapter concludes by analysing the impact of urbanisation on child poverty (section 6.3) as perceived by children themselves. The narrative mainly draws from qualitative evidence gathered under this study. Secondary literature and quantitative data supplement qualitative findings where relevant.

6.1 Determinants of urban child poverty

Children in Kombolcha and Kolfe Keranio enumerate similar causes for child poverty, independently of their age, gender and school attendance (see Box 3).

Box 3: Main determinants of urban child poverty for poor urban children

- Lack of sufficient income and diversified income sources, accompanied by high inflation, stagnant monetary income and falling real income
- Lack of job opportunities/lack of sustainable source of income with available jobs mainly as daily laborers and temporary positions that pay minimum wage
- Parents and adults' lack of motivation and poor work ethic
- Lack of savings awareness
- Going into debt and inability to pay debts
- Parents' addiction to kchat (a local stimulant), smoking cigarettes and/or drinking alcohol.
- Lack of family planning or large family size
- Family breakdown due to divorce, death (mainly because of HIV/AIDS) or separation, imprisonment of parents, loss of business and prolonged poverty
- Health problems of family members and related stigma by community members
- Lack of sufficient education and illiteracy of parents
- Migration from rural to urban areas

Qualitative data collection under this research project show findings in line with those from previous analysis conducted for the Young Lives programme (EDRI and UNICEF, 2017), which highlighted weak work ethic, lack of work opportunities, poor financial management and having a large family as main causes of child poverty in urban areas. Nonetheless, our results also stress the important role played by family breakdown that could lead to orphanhood, child migration from rural to urban areas, and life on the streets. The following discussion narrows the focus to those causes of urban child poverty that emerged as leading reasons for children of various age groups in both locations.

Dependency on financial assistance, 'laziness', lack of jobs and uneducated parents

Older children in Kolfe Keranio and adults in Kombolcha said that even though a poor person could work, *'set up small initiatives and provide for her/himself,' 's/he would expect money from others and depend on others for help'* [Poverty Tree/FGD with in-school girls aged 15-17 in Addis Ababa; Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Kombolcha].

Adults in Kombolcha added that 'lazy parents' do not work and do not instil work ethic into their children, despite government's efforts to motivate youth, and start cooperatives for youth employment and income-generating activities [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha].

Dependency on financial assistance and laziness are not the only reasons for adults and youth not to work. Our respondents also extensively discussed lack of available jobs for parents/family members. Younger children in Kombolcha concluded that unemployment (because of lack of jobs) is in fact one of the main causes of urban child poverty. Children aged 10-14 associated lack of employment to the lack of an acquaintance that could act as a trusted reference: *'Better-off households do not employ servants without references because they do not trust poor people. They assume the poor may loot their properties, and they are very cautious when it comes to employing them. Some private employers may even ask to see an ID card before employment, but the poor do not usually hold IDs. Many of them were not even registered at birth'* (Poverty Tree/FGD with out-of-school boys aged 10-14 years in Kombolcha). These children also note that lack of working capital and/or of a place to start a business are additional crucial obstacles that may limit poor households' engagement in productive activities (Poverty Tree/FGD with out-of-school boys aged 10-14 in Kombolcha).

Younger girls in Kombolcha related 'lack of income' to 'uneducated parents,' whether this means they cannot find a job at all, or whether they do have a job but are paid very little. They also believe that if parents ran their own private business, *'they would do so less efficiently than if they had some level of education.'* The girls also related children's education to parents' (lack of) education, suggesting, *'If a father is uneducated, he is not interested in sending his daughter to school since he does not know the value of education...the majority of the street children are from uneducated families.'* These girls also observed that if children are not educated they are likely to engage in child labour, with girls being employed in hotels, restaurants and cafés, while boys engage in poorly paid daily labour (Poverty Tree/FGD with in-school girls aged 10-14 years in Kombolcha).

Large family size

Adults in Kombolcha argued that parental lack of education, limited access to permanent and well-paid jobs, and meagre household income are exacerbated when family size is large. They hinted that the larger the family, the less income and food can go to children, let alone having any money left for savings [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Addis Ababa]. A key respondent from the local government in Kombolcha emphasized that more has to be done with regard to family planning: *'It is unfortunately common to see families having children beyond their economic capacity. Some people may decide not to use family planning because of religious issues. We need to build awareness and promote changes in attitude towards family planning.'*

Girls aged 15-17 years in Kolfe Keranio also echoed such belief: *'Having a large family size is one of the most important causes of child poverty. If there are too many children in the household, parents will be unable to meet all their needs, especially if parents are low-wage earners. Younger children are the most affected by large family size, because they are fully dependent on their parents for survival.'* (Poverty Tree/FGD with out-of-school girls aged 15-17 in Addis Ababa).

UNICEF supports responsible planning of family size, and especially birth spacing. The UNICEF position is that family planning should be an integral part of maternal and child health services, aimed at improving the likelihood of child survival, the overall wellbeing and quality of life of the child, of the mother and of the whole family (UNICEF, 'The Progress of Nations', 1995).

Family breakdown and addiction to kchat, smoking, and alcohol

Boys and adults in Kombolcha and Kolfe Keranio pointed to 'family breakdown' as another leading cause of urban child poverty. They observed that this breakdown can happen for a number of reasons: *'Parental divorce or death of one or both parents may lead to lifelong poverty for children. When the child becomes an orphan, s/he is very likely to start street life with all its consequences'* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. They further suggested that when youth and adults do not have an income to meet their dependents' needs, they become frustrated and turn to smoking cigarettes, drinking, or chewing kchat (a local stimulant), sometimes becoming addicted. This can create conflict between husband and wife, and lead to divorce – especially if the husband is the primary breadwinner and still cannot meet his family's needs. Family breakdown creates a cycle of poverty and further hurts household economics. As was noted in an FGD with adults, *'mothers do not usually earn (sufficient) income, and they are (fully) dependent on their husbands; divorce is bound to negatively affect the economy of the household'* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. This also hints at possible discrimination against women in the labour market, and the need to publicly invest in women's economic empowerment.

Family members' addiction to alcohol and drugs can not only lead to family breakdown, but also to violence against children in the household. Younger children in Kolfe Keranio formulated this argument: *'Apart from causing child poverty, addiction can also explain violence against children. When a father becomes an addict, his character may change, and he may start punishing his children for no reason. The children may then flee the family roof to escape from the abuser'* (Poverty Tree/FGD with in-school boys aged 10-14 in Addis Ababa).

6.2 Consequences of urban child poverty

According to the literature on the consequences of (urban) child poverty, children raised in poverty face increased risk of poor cognitive and educational outcomes, of exhibiting behavioural and emotional problems later in life, of having poor health and growing up to become poor adults (Moore et al., 2009, Brooks-Gunn and Duncan 1997; Evans and Kim, 2013).

After discussing the 'causes' of child poverty, participants in our FGDs, IDIs and KIIs in Kombolcha and Kolfe Keranio analysed its 'consequences' – that is the effect of economic deprivation and unmet basic needs on a child's life, and her/his present and future well-being. Analysis of the qualitative evidence suggests agreement on the main consequences across sites, child's gender and age groups.

More often, participants in FGDs, interviewees and key respondents cited:

- Dropping out of school and/or poor school performance
- Poor health and sanitation, inability to access medical treatment and social exclusion
- Street life and its consequences
- Exposure to child labour exploitation

These findings reflect those from previous work by Tafere (2012) under the Young Lives programme. Among the main consequences of urban child poverty, Tafere mentioned poor educational outcome and worse future life, behavioural problems, social exclusion and feeling of inferiority. Nonetheless, children in our FGDs also thoroughly discussed gendered consequences of child poverty in connection to life on the streets, and exposure to child labour (especially related to child migration).

The following sections investigate these perceived consequences in greater detail as described by and seen through the eyes of children, and complemented (when relevant) with views from adults.

Dropping out of school and/or poor school performance

Children (of any age and gender) in both sites associated poor children's lack of education at present with greater poverty later in life. Children in our FGDs speculated that poor children may be unable to receive an education because of unaffordable costs for school material (Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). If they were actually able to attend school, poor children may be excluded or insulted by other kids because of their worn uniforms. This may lead to negative psychological impact, and to poor children eventually dropping out of school.

Children in our FGDs further explained how lack of schooling could have a lasting effect on access to economic opportunities in the future. *'Children that drop out of school or remain illiterate may have very low chance to earn a decent income in the future. Educational disadvantages today will bear a long-lasting impact on children's and youth's future livelihood opportunities'* (Poverty Tree/FGD with in-school girls aged 10-14 in Addis Ababa).

Poor health, lack of sanitation and social exclusion

Girls aged 10-14 years compared the quality and variety of diets that poor and rich children can access. They recounted that while children from wealthy families eat good-quality and expensive food bought from the supermarket, poor children eat food discarded from hotels or received after begging. Furthermore, poor children tend to eat the same food day in and day out, food that is of little nutritional value, leaving them malnourished. When poor children get sick after eating spoiled food, they cannot seek medical treatment because they do not have the money to pay for it. Girls said, "Poor children know that the food they collect from garbage is rotten, but they have nothing else to eat" (Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). They also noted that it is usually boys who collect dumped food, and that younger children and girls are most at risk of suffering from lack of food in the household (Poverty Tree/FGD with in-school boys aged 15-17 in Addis Ababa).

Respondents also referred to lack of sanitation and clean water as consequences of child poverty, and the related health effects. *'Poor children are affected by fleas and their skin is itchy because they cannot afford to buy soap and keep clean. Poor children move around with no shoes. Their feet could be covered in cuts from blades and other sharp material on the street, which exposes them to wounds and infection'* (Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). Children who do not drink clean water are also at risk of water-borne diseases [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. Lack of sanitation could further result in social exclusion and discrimination by community members because of perceived health issues: *'It is common for rich families to prohibit their children from playing with poor kids. Rich families think that lack of sanitation among poor children could make their own children sick'* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Addis Ababa].

Consequences of street life

Children and adults agree that street life harshly affects both boys and girls, yet differently. Boys are more likely to become addicted to smoking kchat and engage in stealing. Girls may fall into prostitution. All street children experience physical and psychological violence.

Adults in Kombolcha commented on the poor mental health of street children, and how ‘coping mechanisms’ could even further worsen mental health: *‘When poor children compare their lives with that of peers from better-off families, they feel sad and their self-esteem is low. In order to cope with these uncomfortable feelings and find relief from stress, street children smoke cigarettes and chew kchat. However, such habits make them feel even more depressed and worthless’* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. Similarly, boys aged 15-17 years and girls aged 10-14 years in Kolfe Keranio reported that street boys smoke cigarettes and hashish, sniff glue (mastishi) or benzene to resist hunger and cold weather on the street or to keep awake at night for fear of being attacked (Poverty Tree/FGD with in-school boys aged 10-14 in Addis Ababa). They also note that older boys seem to engage in stealing more than younger boys because of their vulnerability to addiction and consequent need to fulfil that addiction (Poverty Tree/FGD with in-school boys aged 10-14 in Addis Ababa). Younger girls in Kombolcha reached similar conclusions, and they further associated addiction and stealing to social exclusion: *‘Poor boys use income generated via stealing for drinking and smoking. This undermines the way community members perceive poor children living on the street. Boys are more exposed to such problems than girls. Addiction among girls is less likely to occur. Older boys are more exposed to addiction than younger boys, and as such they are more prone to stealing’* (Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). To add another dimension, a key respondent from the local government in Kombolcha hinted that children’s exposure to drugs like kchat is a result of urbanisation, saying, *‘There are now kchat shops even around schools, and they expose children to this addiction. Nowadays, children start chewing kchat at a very early age’* [KII with a (regional/local) government official in Kombolcha].

While girls living on the street are less likely to experience addiction, they are particularly exposed to the threat of physical violence, harassment and bullying. One girl between 10 and 14 years of age in Kombolcha observed that *‘poor people are powerless,’* explaining: *‘When we beg around the church, there are some who really feel sympathetic towards us, but others insult us and tell us that we should work instead of begging. Even the police, who are supposed to guarantee overall peace and security, usually sides with rich people’* (Poverty Tree/FGD with out-of-school girls aged 10-14 years in Kombolcha). According to adults in Kombolcha, women who engage in commercial sex as a source of income generation are the *‘poorest among the poor in society.’* They argued that prostitution is the last option for women who are very poor, and that young girls living on the street are very vulnerable to turning to the commercial sex industry [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. A key respondent from the local government in Kombolcha echoed a similar sentiment, saying, *‘Girls working as sex workers are the most vulnerable in the society.’* The following story illustrated how young girls can enter into commercial sex work: *‘There was a group of girls, all younger than 18, who were prostituting nearby. They started being involved in prostitution after they left their families in rural areas. They were hoping to migrate to Arab countries, but their plan failed. Their families sold their property and their cattle to fund the cost for migration. Those families got into debt, and they are now expecting their girls to pay back the debt’* [KII with a (regional/local) government official in Kombolcha].



Child labour exploitation

Child labour, especially that associated with migration, was discussed in detail by children and adults both in Kombolcha and Kolfe Keranio. Boys aged 10-14 in Kombolcha depicted differences in child labour between gender and age groups. They reported that boys are more at risk of falling into hazardous manual labour while girls are mainly involved in domestic work (caring for babies, cooking food, baking injera, and washing clothes). They also said that younger children (because of lack of knowledge of their rights) and children who migrated from other areas (due to lack of social networks to whom they can report abuse) are most at risk of being subjected to hazardous working conditions (Poverty Tree/FGD with in-school boys aged 10-14 in Kombolcha). A key informant in the Kolfe Keranio local government added that younger working children are more likely to get unfair payment since their negotiation power is limited [KII with a (regional/local) government official in Addis Ababa]. Adults in Kombolcha said that migrant children (aged 14-18 years old), and especially those coming from rural areas to seek daily labour in the city, are most at risk of exploitation. *'Unscrupulous employers pay them very little and exploit their work. Children work over their capacity in order to get a piece of bread. When they cannot cope anymore with the difficult and exhausting labour, children may eventually decide to migrate elsewhere or join street life'* [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha].

In Kolfe Keranio, a large number of children migrated from rural areas to work in the local industrial zone. A key respondent from the local government described their working conditions: *'The majority of these children come from the Southern parts of the country. They are usually younger than 15. They carry large pieces of wood or wooden by-products for the factories. Though the number of girls is still small, there are also girls working as daily laborers in the industrial zone'* [KII with a (regional/local) government official in Addis Ababa]. Boys aged 10-14 confirmed these observations (even though they did not specifically refer to 'migrant children'), describing how, in the vicinity of a local industrial village that had textile and metal factories, you can see *'some girls carrying 20-liter jerrycans of water while others are hired to work in the metal factories. Those children do not usually get enough rest, and their labour is highly exploited'* (Poverty Tree/FGD with in-school boys aged 10-14 in Addis Ababa). A key respondent from the central government discussed migrant children's work in construction sites around Addis Ababa, saying that the majority of children are engaged in intensive manual labour. S/he noted that even though data are lacking, the general understanding is that it is primarily boys who are exploited on these sites while girls are more likely to work as housemaids [KII with a (national) government official in Addis Ababa]. As previously mentioned, housemaids are often not exempted from carrying out domestic chores for long hours and beyond their capacity (Poverty Tree/FGD with in-school girls aged 10-14 in Addis Ababa).

Results from the 2011 and 2016 Welfare Monitoring Survey (WMS) are indicative of the extent of child labour in urban households across Ethiopia. The 2011 WMS assumes that a child is a child labourer if s/he engaged in productive activity for at the least four hours in the last seven days. The 2015/6 WMS starts counting child labour from one hour of productive work in the previous seven days. Different definitions limit comparability across observations. According to WMS 2011 data, child labour prevalence in urban areas stood at 11.8 per cent that year; data from WMS 2016 hint instead to 12.7 per cent prevalence.⁵⁹

6.3 Impact of urbanisation on child poverty

How much did rapid urbanisation in Ethiopia translate into better living conditions for the poorest household dwellers, especially those with young children? Has urbanisation helped to reduce inequalities across wealth quintiles or deepened them?

Analysis from WMS data reveals a reduction in the share of the poorest urban households in the first quintile by 3.8 percentage points (p.p.) and that of households in the second quintile by 5.4 p.p. between 2011 and 2016. By contrast, the share of the richest households in urban settings rose by 12.9 p.p. – these are remarkable changes over a period of time as short as five years⁶⁰ (see Table 2).

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⁵⁹. Because of different definitions of 'child labour' for WMS 2011 and 2016, we could not conduct statistical tests to detect statistical significance of change across the two years.

⁶⁰. All changes reported in the table are statistically significant at the 1 per cent level.

Table 2: Distribution of urban households by wealth quintiles, 2011 and 2016

| Year | Wealth quintile (per cent) | | | | |
|-----------------|----------------------------|------|------|------|------|
| | 1 | 2 | 3 | 4 | 5 |
| 2011 | 9.6 | 15.6 | 22.1 | 26.2 | 26.5 |
| 2016 | 5.8 | 10.2 | 15.7 | 29.0 | 39.4 |
| Per cent change | 3.8 | 5.4 | -7.1 | 2.8 | 12.9 |

Data source: Authors' computations using WMS 2011 and 2016 data

The increase in the share of the very rich in the wealth distribution exceeded the fall in the percentage of poorest (or 'the poorest' plus 'the poorer'), allowing the Gini coefficient for urban areas⁶¹ to remain stagnant between 2011 (0.31) and 2016 (0.30).

Interestingly, it was mainly in secondary or smaller urban areas (or 'other urban settlements') that the poorest households with young children were able to move out of the bottom wealth quintile. And it was mostly in larger cities that the share of the richest households increased. Awassa, Mekele, Assosa and Addis Ababa all recorded an increase in the share of the richest households by 20 p.p. and more.⁶²

How do poor children experience urbanisation?

Children, adults and key respondents participating in the qualitative research under this study related urbanisation to:

- Environmental degradation,
- Population growth, mainly due to migration (resulting in high payments for rent and food, and overcrowded education and health services),
- Increase in child labour, and
- Dismantling of social capital.

We now analyse these impacts in detail, concluding with a brief enumeration of the positive consequences that urbanisation may yield in children's views. The time spent in discussing negative impacts and the relevance given to these impacts by children (and adults) greatly overshadowed any positive remarks on urbanisation.

61. The Gini coefficient provides a summary measure of changes in the wealth distribution.

62. For detailed changes at city level (and between 2011 and 2016) in the percentage of urban households belonging to the poorest and the richest wealth quintiles, as well as city-level changes in the Gini coefficient (between the two years), see Tables 1, 2 and 3 in Annex 2.

Environmental degradation

Environmental degradation induced by rapid urbanisation was thoroughly discussed in Kolfe Keranio, but only marginally cited by girls aged 15-17 years in Kombolcha. These girls argued that industries (tanneries and textile factories) and a large beer factory *'brought about climate change in their area'* (IDI with in-school girls aged 15-17 in Kombolcha). Adult women in Kolfe Keranio lamented the scarcity of clean water, with detrimental effects on the health of urban households and urban children especially: *'Some fifteen years ago, residents of this area could benefit from the presence of spring water. That spring is now polluted because of emissions from factories. People are suffering from lack of clean water. Poor people cannot afford to buy distilled water because that is too expensive'* [Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Addis Ababa].

Similarly, boys (aged 10-14 years) in Kolfe Keranio complained about the lack of green spaces nearby: *'In the last five years, the forest in the vicinity of this sub-city has been demolished for construction of factories and houses. Factories are responsible for air pollution, and it is reported that a growing body of forest has disappeared in Sor Amba and the nearby Bero and Filidoro areas in the Oromiya region. Deforestation has impacted on the wild life as well as on children. Children have lost their playgrounds, and they are now playing on the roads, which greatly exposes them to the risk of car accidents. Due to the absence of grass and trees, many houses are now covered in dust in the dry season of the year, and mud in the rainy season. Children are easily exposed to respiratory tract infections. Moreover, muddy roads are causing problems to children's personal hygiene'* (Poverty Tree/FGD with in-school boys aged 10-14 in Addis Ababa).

Population growth

While the effects of population growth were cited both in Kombolcha and Kolfe Keranio, it is mainly respondents in Kombolcha that analysed the causes of population increase.

According to FGDs with adults in Kombolcha, the population in town is increasing from time to time because of the expansion of industrial parks (for food processing, textile, garments) as well as for the ongoing construction of new roads and the railway. People are moving from the North of the country and even from Addis Ababa to get jobs in those factories [Poverty Tree/FGD with men (caregivers, teachers and community representatives) in Kombolcha]. Interviews with key informants from local and national NGOs confirmed this statement, and they added further details: *'The vast majority of immigrants are from rural areas. Those coming from other urban centres are graduates in search of better job opportunities. There is an ongoing railway construction project and there are also industrial parks in Kombolcha – these are pull factors and incentives to immigration'* [KII with a (regional/local) NGO representative in Kombolcha]. Views from a local NGO in Kolfe Keranio suggested that demand for manual labour from manufacturing industries (carpentry and metalwork) has attracted migrants to the area [KII with a (regional/local) NGO representative in Addis Ababa].

Respondents associated population growth with a surge in the living costs and especially higher payments for rent and food. Younger girls in Kombolcha observed that costs of living are higher because of the influx of immigrants: *'Population pressure is the leading factor for increasing living*

costs. While population is increasing, food supply is decreasing because of the reduction in farmland; hence living costs are skyrocketing' (Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). Relatedly, children and adults in both sites reported a drastic surge in rent payments because of population growth. Some informants noted that many poor families had to move to surrounding areas, because of their inability to pay rent (Poverty Tree/FGD with in-school girls aged 10-14 years in Kombolcha). Three different informants mentioned specific price changes for housing costs: *'If a family was renting a property for 200 Birr/month not long ago, that family would now need to pay at least 500 Birr/month for that same property. Many poor families have left the area and moved to the periphery'* (Poverty Tree/FGD with in-school girls aged 10-14 years in Kombolcha); *'A house that was rented for 700 Birr/month would now cost more than 1,500 Birr/month due to population pressure'* (Poverty Tree/FGD with out-of-school boys aged 15-17 years in Addis Ababa); *'A tiny house that hardly accommodates household furniture is now on the market for 2,000 Birr a month – this is double the renting price that was quoted not long ago'* (Poverty Tree/FGD with in-school boys aged 15-17 years in Addis Ababa). Poor households in Kolfe Keranio react to increases in the cost of rent in different ways. One of the participants during an FGD with adults mentioned that she heard of a lady who became a beggar in the community because she could not afford the high cost of rent [Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Addis Ababa].

Representatives from NGOs further analysed child poverty associated with population growth and urban migration. A representative for a national NGO said: *'What I observe in Addis Ababa generally and in Woreda 11 specifically is a high number of migrants. Most of them engage in daily labour, and their meagre income mainly goes to pay for rent. Because of this, they may only eat once or twice a day. Besides, overcrowded living conditions are a problem for children in the community'* [KII with a (national) NGO representative in Addis Ababa]. A representative from a local NGO added that poor people started to build illegal housing (locally known as *'Yechereka bet'*) due to overcrowding, but they could easily and quickly lose their property: *'This is likely to deepen household poverty, and it may cause and/or exacerbate social disorder'* [KII with a (regional/local) NGO representative in Addis Ababa].

Another effect of rapid, unplanned and poorly managed population growth is the reduction in the quality of education and health services. Children aged 10-14 years in Kombolcha and 15-17 in Kolfe Keranio talked about congested classrooms, with one child attending grade seven reporting that there were around 90 students in his classroom. While in the recent past there was one desk per student, at present three or four students need to share the same desk. It is not only desks that are missing from schools, but also textbooks and water (Poverty Tree/FGD with in-school boys aged 15-17 years in Addis Ababa; Poverty Tree/FGD with in-school girls aged 10-14 in Kombolcha). Students in Kombolcha recalled a time when they had to sit on the floor for lack of available space (ibid.). Early registration is usually needed to guarantee a place at school, and migrant children may not get enrolled if school places are quickly filled up by children from resident households (Poverty Tree/FGD with in-school girls aged 10-14 years in Addis Ababa). This was confirmed by a key respondent from a local NGO: *'Government schools usually accept students who can submit an accompanying letter from the kebele, and they give priority to residents. Migrant families are facing huge challenges in getting those letters for their own children'* [KII with a (regional/local) NGO representative in Addis Ababa].

Women in Kolfe Keranio also relate population pressure to increased costs of transport, which is forcing children to walk long distance to school and may in turn explain poor school performance. *'When travelling long distances, children that managed to reach the school on time would feel hungry, and they would struggle to concentrate in the class and learn. Children that arrived at school late may not be admitted, and they would miss all lessons for that day. This will have a cumulative effect on children's performance, and their ability to progress to the next level'* [Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Addis Ababa].

Overcrowding in urban areas not only affects supply (and quality) of primary and secondary education, but also that of other public services like pre-schools and health facilities. An informant in Kolfe Keranio said that there is a *'huge gap between supply and demand of public kindergarten services'* [KII with a (regional/local) NGO representative in Addis Ababa]. Another informant said something similar about the demand for health facilities not being met: *'Health facilities are always crowded and not enough in number. It is becoming the norm to see long queues of sick people waiting for treatment.'* (Poverty Tree/FGD with in-school boys aged 15-17 in Addis Ababa). Adults in Kombolcha requested government intervention to construct more public latrines due to the current shortage and the resulting increase in open defecation after population growth [Poverty Tree/FGD with women (caregivers, teachers and community representatives, in Kombolcha)].

Surge in child labour and the dismantling of social capital

Job opportunities accompanying urbanisation often appeal to poor families as a means to escape poverty, at least in the short run. WMS data suggest that 8.5 per cent of urban households in 2016 (6.9 per cent in 2011) would not send their children to school so that they could instead work and support the family income. Similarly, a representative from a national NGO highlighted the relationship between urbanisation and increase of child labour in Kombolcha: *'There are many children that come here from the countryside to work during the rainy season when schools are closed. Other children miss school altogether in order to work on the railway construction site nearby. Since the railway construction passes through rural areas, there are many boys who engage in daily labour from those areas. They usually collect and sell stones at the stone crusher plants'* [KII with a (national) NGO representative in Kombolcha].

Social fragility in urban congested areas was a final remark of the negative effects of urbanisation raised by a key informant (working for a national NGO). The network of social connections is vital to build a sense of belonging to a community, to foster communal spirit and, for the poorest households especially, to overcome shocks of various natures. One respondent argued that the very existence of social capital is jeopardised because of urbanisation, suggesting: *'Building of a communal spirit is challenging among those that are not related. Instead, antagonism between newcomers and native residents tends to prevail. People segregate themselves in two separate groups, and relationships between the two groups is rough. This will hamper any opportunity for local development.'* [KII with a (national) NGO representative in Addis Ababa].



Positive impacts of urbanisation

Children – more often younger children – shed some light on the positive impacts that urbanisation is bringing to their lives, although perceived negative effects of urbanisation greatly outnumbered any mention of positive consequences. Children in school observed that urbanisation led to the opening of new shops, and greater availability of goods. A youth centre recently started functioning in Kolfe Keranio, and children can study and play there (Poverty Tree/FGD with in-school boys aged 10-14 years in Addis Ababa).

Out-of-school children praised opportunities for jobs and provisional shelter prompted by urbanisation. One informant who works as a shoe-shiner says that population growth has improved the market for his business and the number of his daily clients has increased (IDI with out-of-school boys aged 10-14 years in Addis Ababa). Another informant also observes that construction sites *'have helped children find places where to sleep during the night, especially before the construction is completed'* (Poverty Tree/FGD with out-of-school girls aged 10-14 in Kombolcha).

7. Conclusions and policy implications

Key recommendations:

- Prioritize policies that will target the most marginalized urban children first—children, orphans, migrants and children with disabilities. One-size-fits-all policy initiatives, instead of targeting the most marginalized, tend to disregard them. Design and implementation of programmes poses special challenges. Distinct and concerted efforts will be required to locate the most marginalised groups.
- Focus on supply-side interventions and create synergies between formal and informal community-based organisations. As one respondent stated: ‘Child issues do not fall under the responsibility of one institution only, but are under the responsibility of all public institutions’.
- Clearly identify roles, and spread across multiple actors, in order for governance and financing to run smoothly. CSOs, NGOs, CCCs and Iddirs can play a key role in helping coordinate policies from the governmental level to the community. They can locate vulnerable families and children, guide residents to register for programmes and help them seek appropriate support when required.
- Address the challenges of urbanisation and adapt interventions to urban environments. National GTPs have increased their focus on urbanisation and urban areas, but specific attention to the consequences of rapid urbanisation on child poverty is still lacking. GTP-III should clearly mention child poverty, including urban poverty affecting migrant children, and propose separate and ad-hoc recommendations to address child poverty in urban areas.
- Focus on information, education and communication. Programmes should be accessible to the urban poor, and extensive communications and outreach should be tailored to urban communities.
- Fill evidence gaps. More systematic, ad-hoc and recurrent data collection would help fill gaps caused in part by the slow rate at which these data are published from official household surveys and censuses, which often lags behind changes in urban populations. Likewise, qualitative data maintain a key role in deepening the understanding of drivers of child poverty, on why policies are or are not working, and what causes their success or failure.

7.1 Conclusions

This study sought to gain a deeper understanding of urban child poverty and urbanisation in Ethiopia, focusing on two rapidly urbanising areas of the country: Kombolcha in the Debuw Wollo Zone of the Amhara Region and Kolfe Keranio sub-city in Addis Ababa. Primary qualitative data collection and investigation provided unique access to children's own perceptions and experiences of poverty, and shed light on the drivers and consequences of urban child poverty, and the impact of urbanisation on children's daily lives. Qualitative data were complemented by the analysis of the 2011 and 2016 Welfare Monitoring Surveys, with a focus on urban households with children younger than 17 years and data disaggregated by wealth quintile. The study provides a comprehensive picture of urban child poverty in Ethiopia, contributes to the understanding of why urbanisation is not working for child wellbeing, and makes recommendations on what should be done for urbanisation to become sensitive to children, especially for the poorest and most marginalized.

Chapter 2 presented the conceptual framework that guided discussion in the remainder of the study. The main message from this chapter is that child poverty is multidimensional: not only is poverty seen in material deprivations, but also in social and emotional deprivations. Children are less able than adults to make changes in their lives, and child poverty will have long-lasting consequences on their ability to become healthy and productive adults, and to meet their own expectations in the future.

Chapter 3 delved into a review of the literature on urban child poverty in general, literature specific to Ethiopia and the main policy and programmatic approaches to tackling urban child poverty in Ethiopia. A key takeaway from the chapter is that rapid and unplanned urbanisation and rising inequality (across and within households) make children especially vulnerable to violence, environmental degradation, and social fragility and disconnection. The review signals the pressing need for the GTP-III to clearly mention and address child poverty, and to set out separate recommendations for child poverty in urban areas.

Chapter 4 explored the methodology employed for qualitative data collection. Remarks were made on the desk-based review with literature background and validation throughout the report. Secondary quantitative data analysis accompanied qualitative data where relevant. The chapter concluded with an enumeration of the ethical considerations that were accounted for while gathering qualitative data with children and young people.

Chapter 5 discussed how children living in two rapidly urbanising areas of Ethiopia experience poverty. When pertinent, children's perceptions were complemented by those from adults (parents/guardians, teachers and community leaders). Urban children in our FGDs (both girls and boys aged between 10 and 17 years) associated child poverty to unmet basic needs for food, shelter and clothing. They suggested that poverty is especially harsh on the most vulnerable children: orphans, street children, migrant children and children with disabilities. Children and adults alike cited lack of food and a healthy diet and inability to attend school because of high indirect costs as the main features of urban child poverty. They also point to squatter settlements with no legal ownership rights, congested living conditions, and lack of access to safe drinking water and sanitation.

Chapter 6 presented the causes and consequences of child poverty, as viewed and voiced by children, and concluded with children's own perceptions of the impact of urbanisation on child poverty. Among the determinants of child poverty, children gave relevance not only to households' dependency on financial assistance or lack of work ethic, but also to a lack of decently paid jobs that uneducated parents (and/or parents lacking social and financial capital) could access. A large unplanned family and family breakdown (often relating to drug and/or alcohol addiction and abuse) were also mentioned as leading causes of child poverty and violence against children in the household. The consequences of urban child poverty explained by children strongly relate to its causes. Hence, dropping out of school and/or performing poorly at school, being malnourished or only able to access food with poor nutritional value and no variety, being exposed to child labour exploitation and living on the street repeatedly emerged as leading consequences of child deprivation. A surge in child labour was also cited among the effects of urbanisation, in association with the dismantling of social capital, unplanned and poorly managed population growth (and related rising costs for food and rent) and environmental degradation.

In this final chapter, we build on these findings and discuss their policy implications. Above all, the negative impact of urbanisation on child poverty should be acknowledged and addressed. Four areas may have an impact on both monetary and multidimensional child poverty in Ethiopia: (i) the prioritisation of the most marginalized urban children; (ii) supply-side interventions, multidimensional programming and the creation of synergies between formal and informal community-based organisations; (iii) expanding income support programmes; and (iv) focusing on information, education and communication. The chapter concludes by highlighting evidence gaps. Filling these gaps would help to improve the effectiveness of policy targeting child poverty in urban areas.

7.2 Policy implications and evidence gaps

The processes of urbanisation and development are closely related; however, Ethiopia, as with many other countries, has experienced the urbanisation of poverty, which has serious implications on child wellbeing. A number of policy recommendations emerge to address some of the crucial issues relating to urban child poverty in Ethiopia. This section highlights areas of concern and ways to address them, and draws on the experiences of existing policies and experiments in other contexts.

Prioritization of the most marginalised and most vulnerable poor urban children to reach them first

Considering the increasing prevalence of urban poverty, particularly in the context of Ethiopia's pervasive and persistent poverty, a key challenge is that policy interventions need to prioritize the most marginalised children so that they are reached first with interventions. This is also key to international development concerns and Ethiopia's ongoing efforts under the Sustainable Development Goals to leave no one behind. This includes targeting out-of-school and/or working children, who are often street children, migrant children, trafficked children or child domestic workers, and those affected by violence that can be reinforced by social norms. Numerous interviewees in our qualitative research identified the need to focus on such children, including orphans and children with disabilities because they are the poorest among poor children.

In principle, this has been long acknowledged in Ethiopia's national strategies on poverty reduction and growth promotion. For instance, even the first PRSP – the SDPRP – referred to the need to protect particular groups of vulnerable children. Nonetheless, various crucial dimensions of poverty and protection including social exclusion, domestic and school violence, juvenile justice, and harmful child labour practices have remained omitted from national policies and programmes, limiting the required attention of the GoE. Similarly, the diverse experiences of poverty of rural and urban children, children with disabilities, child-headed households, children from different ethnic groups, adolescent mothers, children of different ages, and children in conflict with the law or in penal institutions were not adequately taken into account. While the Government of Ethiopia has introduced a number of policies specific to different groups, policy initiatives have tended to be one-size-fits-all, with few specific measures to ensure they were tailored to meet the differential needs of children. Children of different ages and genders have different developmental needs, and they face different challenges when confronted with urban poverty. This should be reflected in policy interventions and programmatic approaches to child poverty. Existing systems need to be more preventive, promotive and responsive to (urban) children's needs, and especially to the needs of the most vulnerable children living in urban settings. To ensure child protection, it remains essential to create enabling environments for children living in urban poverty to learn how to protect themselves (including from gender-based violence), and to develop effective mechanisms for them to seek support when necessary (such as child protection case management services).

Children's perspectives and experiences of poverty have largely been neglected in policy-making. Children are rarely treated as subjects of poverty, and are not involved in the design and decision-making of poverty alleviation strategies. This implies a lack of recognition that children are competent in shaping their interpretation of poverty. It also undermines the potential effectiveness of meaningful interventions and priorities for action. Child-responsive urban planning should prioritise child development, and address child poverty from a child-rights perspective (UNICEF, 2018b). A child-responsive urban setting can be defined by a framework with five benefits: health, safety, citizenship, environment, and prosperity (that is, access to education and affordable urban services) (UNICEF, 2018b). Each of these benefits highlights the fact that a child is a receiver of a service, but also a participant whose rights should be prioritised (UNICEF, 2018b). Urban-planning systems can prevent undesirable outcomes, but child-responsive urban settings are designed from the perspective of children, especially those children who are considered the most disadvantaged (UNICEF, 2018b).

The technical design and implementation of programmes also pose special challenges. In this regard, there needs to be an assessment of challenges faced by policies aimed at specific groups of children to ensure their effectiveness. For instance, with regard to interventions relating to street children, a respondent stated: *'Though the Ministry office has been greatly facilitating rehabilitation and reunification, there are instances whereby the reintegrated children have come back to the capital more than five times.'* [KII with a (national) government official in Addis Ababa]. In terms of implementation, all aspects of child-focused services require consideration and proper resource deployment. For instance, while access to education has improved, challenges persist in establishing sufficient quality, as learning levels continue to fall short. Slower learning achievements have particularly affected children from the most disadvantaged groups, with gender gains stagnating

during post-primary education (Pankhurst et al., 2018). Facilitating the transition to the labour market requires greater emphasis on skill development. Gender and age dimensions also remain salient, as young women and girls are at greater risk in urban areas, and young people (girls especially) are very vulnerable to unemployment. There is a need for ensuring that a life cycle approach is integrated in existing and upcoming policies and programmes, so that specific needs of children, adolescents and youth of different ages and genders are effectively acknowledged and addressed.

In addition, the fluid expansion and contraction of poor urban informal settlements over time may challenge effective identification of the urban poor, especially of urban poor children. Even when prospective beneficiaries are identified on paper, reaching them and communicating with them about programmes available to them may not be straightforward. However, similar programmes in different contexts have sometimes made adjustments to targeting benefits in order to reach children with specific profiles. Therefore, distinct concerted efforts will be required to locate the most marginalised groups – for instance by identifying urban ‘poverty hotspots’ where people may live only at night and places that may not be reported or detailed on administrative maps (World Bank, 2015e).

Reducing barriers to access basic services for the urban poor, multisectoral programming and synergies between formal and informal community-based organisations

Provision of social services (public health, education, nutrition, clean water and sanitation, housing, social security) is often inadequate compared to demand. This is particularly the case in large cities where social services have made slower progress in Ethiopia. Provision of social services should be pro-poor and meet children’s needs. Interviewees in this research discussed the inability of poor households, and children in those households, to access basic services in urban areas. Lack of sanitation and clean water, inability to pay for medical treatment and cover indirect costs of schooling (for textbooks and uniforms) were often mentioned as consequences of child poverty. Under-financing and weak provision mean that the poor pay for low-quality services, and poor children are excluded from those services.

Redistributive public finance and increased public spending on social services affecting human capital accumulation are pivotal in reducing the direct and indirect costs of those services. Progressive tax systems are also needed to achieve equity in public finance. A further key challenge in service provision is that responsibilities and roles are often unclear and are spread across multiple actors. Policies and programmes are fragmented, administered by different agencies, with various application processes, eligibility criteria and delivery methods. This makes governance and financing especially complex in large metropolitan areas.⁶³ Ethiopia has had some success with multi-agency coordination, for example through its child nutrition policy, but the lessons from this need to be carefully addressed and institutionalised to ensure incentives and proper lines of control are in place

63. For example, when Familias in Acción was expanded to urban Colombia, it was operated through the federal government rather than local authorities in Bogotá. The limited coordination with the mayor’s office became a key constraint of the programme (World Bank, 2015e).

to guarantee cooperation. As one respondent in the qualitative fieldwork stated *‘Child issues do not fall under the responsibility of one institution only, but are under the responsibility of all public [and private] institutions. All concerned bodies should acknowledge their shared responsibility to reach children, and make children part of their own goals. All institutions should work together, with clear and well-defined roles, to solve children’s problems’* [KII with a (regional/local) government official in Kombolcha].

Multi-sectoral and integrated approaches to addressing child poverty can foster coordination and collaboration across government agencies, reinforce good governance and enhance the impact of public interventions. Children living in urban poverty likely suffer from multiple deprivations that need multi-sectoral responses. The Ethiopian government, international development partners and (international and local) NGOs and CSOs should then follow a systems approach in programme planning and implementation (UNICEF, End Child Poverty Coalition, 2017). The establishment of common approaches to beneficiary identification and service delivery would facilitate reaching children living in urban poverty, both within and outside household settings. The policy level would be in charge of guaranteeing overall policy coherence, and overseeing targeting of beneficiaries. The programme level would be the domain of social workers, connecting prospective beneficiaries to existing services. The administrative level would identify tools to be used across programmes [including, but not limited to: ‘beneficiary identification systems or management information systems, grievance and redress mechanisms, payment arrangements, monitoring and evaluation, and provider contracting’ (ibid.: p. 132)]. A systems approach can establish coherence within and beyond sectors. A good example of this was the ability of Ethiopia to achieve MDG4 three years ahead of the 2015 deadline. The GoE relied on a multi-sectoral policy platform that improved child health by integrating goals on child survival and decreasing stunting within macroeconomic interventions aimed at addressing poverty, boosting agricultural productivity and food security, as well as clean-water provision and improved sanitation coverage (Ruducha et al., 2017).

Similarly, there is a need to create synergies between formal and informal mechanisms already existing in urban areas. Each institution plays a key role in the system in order to enable progress. As one respondent in the fieldwork stated, *‘Every stakeholder should meet his/her responsibilities, starting from top government officials to the grass-roots community level’* [KII with a (regional/local) government official in Addis Ababa]. The government can build on the existing infrastructure of informal mechanisms – e.g. NGOs, religious and charitable trusts – in the absence of traditional social structures that may be missing in urban areas (that are still typically found in rural areas). For instance, a respondent in our fieldwork stated that when faced with a challenge and seeking help, *‘We did not ask government as yet. We requested the help of other NGOs instead. Non-governmental organisations should partner with the government to bring long-lasting solutions to the challenges faced by poor people’* [KII with a (regional/local) NGO representative in Kombolcha]. Another respondent commented, with regard to urban child poverty programmes in particular: *‘This approach has to be community-based because it creates safe spaces for resource mobilisation and for seeking solutions to any problem. So it is good to bring in community-based approaches and strengthen the existing ones’* [KII with a (regional/local) NGO representative in Kombolcha]. A young out-of-school girl participating in an FGD added that, ‘government has to link poor children with supporting NGOs’ (Poverty Tree/FGD with out-of-school girls aged 10-14 years in Addis Ababa).

Reaching the urban poor presents special challenges, including identifying, targeting, communicating with, and enrolling perspective beneficiaries into development programmes (World Bank, 2015e). Urban areas have an extensive coverage of Iddirs and community care coalitions (CCCs)⁶⁴, which are rooted in community networks. Such institutions can play a pivotal role in helping coordinate policies from the governmental level to the community level in terms of identifying vulnerable families and children.⁶⁵ They can also guide residents to register for programmes and help them seek appropriate support when required. This can especially help those people with special needs, such as orphans, street children, and other vulnerable groups to facilitate their inclusion in social protection policies. In addition, programmes should also be accessible geographically. For instance, if registration sites cannot be easily reached because of distance, poor public transport, safety, or other reasons, prospective beneficiaries will not be able to apply. In other cases, illiterate individuals who are unable to complete forms may simply not apply for benefits to which they are entitled. South Africa has addressed this concern for its Old Age and Child Support Grants through the use of local community committees that help prospective beneficiaries – such as elderly widows – with the application process. There is a need for such factors to be proactively identified and addressed in urban Ethiopia.

The government and local organisations can mutually serve as a system of checks and balances to avert corruption and funds mismanagement. As one adult taking part in an FGD in Kombolcha stressed, *'Government should account for the role of NGOs before starting supporting the community. Government should also monitor NGO support to the community, and the beneficiaries should get what was initially intended for them'* [Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Kombolcha]. Another woman in the same FGD said, *'Corruption related to job opportunities existed in this town. Community should report such cases to the government. Police should also play its role to this end'* [Poverty Tree/FGD with women (caregivers, teachers and community representatives) in Kombolcha].

64. Ethiopia has had some success with community care coalitions (CCCs). Different from traditional support, this is a multisectoral platform comprised of community leaders and representatives, mandated by the government to identify vulnerable people within their community, facilitate their access to services, and ensure basic follow-up. Coalitions integrated formal, informal and local civil society organisations unlike traditional support networks focusing on members and their contributions (Senbeta, 2016; Save the Children, 2013). CCCs include heads of churches, volunteers, the government, businesses, NGOs and community-based organisations providing material and financial support locally. According to the National Social Protection Policy of Ethiopia (2014), CCCs shall be strengthened and expanded to play a significant role in the implementation of productive and social safety net programmes. The main child protection services that have been provided by CCCs to vulnerable children are nutrition, health and education, aimed at supporting children and their families. Major challenges that affected the functioning of a coalition are frequent turnover of the council chairs, low awareness, and low initiative of members (Bureau of Labour and Social Affairs, 2010).

65. This is done by the community in rural areas in the case of the PSNP.

Box 4: Collaboration between the government and Iddirs

Iddirs are an indigenous informal insurance scheme popular among urban dwellers in Ethiopia. Various types exist including professional Iddirs, youth Iddirs or ethnic Iddirs.

The relationship between the government and civil organisations has changed drastically over time with varying political contexts. The beginning of the 1970s saw a new stage in the relationship between Iddirs and the state. Some city administrations – in Addis Ababa, Akaki and Nazareth – included Iddirs in community issues such as crime prevention or sanitation (Pankhurst, 2000). Although it is argued that Iddirs were used by the imperial regime to “maintain status quo rather than to promote development” (Pankhurst, 2000:46), there was a willingness to partner with them.

The 1974 revolution that led to the Derg regime was followed by a marginalization of the Iddirs, whose leaders were seen as a threat to the head of state, Mengistu (Dercon, 2005). Conflicts of interest between the Iddirs and the new structures that the revolutionary government sought to put in place became evident (Pankhurst, 2000). Voluntary associations were considered subversive entities and, during this time, Iddirs (that meanwhile became very active associations in urban contexts) focused mainly on burial activities. Yet, they continued to spread through Ethiopia, their membership grew and different types of Iddirs kept emerging.

The fall of the Derg regime in 1991, and its replacement by the Ethiopian Peoples’ Revolutionary Democratic Front (EPRDF) government has renewed attention for Iddirs. Government as well as NGOs view these associations as possible development agents (Pankhurst, 2000). Dercon (2005), for instance, evokes Ministry of Health anti-HIV/AIDS campaigns done with Iddirs, and the willingness to involve them on other development activities (such as those in rural areas). Dercon adds that a certain number of Iddirs also involved themselves on development activities. However, such an attempt to improve the collaboration between the state and CSOs suffered a setback after the 2005 elections and the programme was abandoned.

More recently, the Charities and Societies Proclamation 2009 established a new legal framework that was quite restrictive for associations. Yet, this framework would not apply for organisations like Iddirs, which would find it difficult to fulfil the required obligations. Meanwhile, Iddirs became more and more encouraged to be registered with Kebele and Woreda, which suggests attempts to control their activities.

Source: Léonard, 2013.

Addressing the negative impacts of urbanisation on child poverty, and expanding income-support programmes

In the context of Ethiopia's ongoing urban transition, it is important that interventions meant to address urban poverty in general, and urban child poverty in particular, should aim to pre-empt some of the challenges of urbanisation to the extent possible. Children participating in this research highlighted the challenges of living in urban areas, including high dependence on household income for food and direct and indirect costs of health and education, and high and rising costs for rent. A call for action must be heard to ensure that all urban children can complete at least basic education, return to school if they have dropped out, be equipped with hard and soft skills (including financial literacy) needed to find decent jobs when they come of age, learn a trade to earn their livelihood and be able to explore entrepreneurship opportunities as they grow up.

While there has been an increase in attention to urban deprivation with the inclusion of industry and other sectors relevant to urban areas within national GTP-I and GTP-II, and even if Ethiopia has already extended the PSNP to urban areas, GTP-III should explicitly mention child poverty, including poverty affecting children that migrate from rural to urban areas, and propose separate and specific recommendations to address child poverty in urban settings. Given the rapid pace of urbanisation and its accelerating trend, and the fact that urban child poverty is seemingly embedded in such a process, addressing urban child poverty should in fact become an integral part of the GTP process.

There is growing interest in the role that safety nets can play in urban areas, including the emergence of a first generation of urban programmes. At least a dozen countries are undergoing an iterative process of experimentation of programmes to urban areas, but as the first generation of urban security net programmes has been rolled out, their initial performance has had less of an impact than expected. This underscores the importance of learning and ensuring operational flexibility to adjust design and processes. While this is something that has been acknowledged (World Bank, 2015e), programme guidelines should incorporate review and revision mechanisms to institutionalise this reflective and reactive process.

Urban interventions must be adapted to consider the distinct features and issues faced by towns and cities, and by poor children living in those settings. For instance, urban areas often have different working patterns than rural ones. Therefore, policies should empower the working poor – both underemployed populations as well as the self-employed, who are often engaged in precarious work – to access work under social security programmes such as the Urban Productive Safety Net Programme (UPSNP). This way, the improved income generation is likely to help families support children and also address child poverty. It is important to note that cash given to a household does not necessarily benefit children living in that household. As such, monitoring and evaluation play an important role to ensure that children themselves get targeted as beneficiaries.

A final point related to experimentation and the revision of programmes targeting the urban poor is the growing evidence on expanded benefits of cash transfer programmes through direct complementary programming. Complementary actions (including nutritional supplements, behavioural change training, enhanced aspirations, programmes that address mental health or partner's violence) may

help achieve greater and more consistent impact of social protection programmes, and/or strengthen the intended impact of such programmes. This emerges more clearly for savings, investment and production, but also health and nutrition programmes (Bastagli et al., 2016). These complementary actions may help address many emotional, relational and socio-psychological dimensions of poverty, which are especially relevant for children, as highlighted by this research.

Focusing on information, education and communication

A final point relating to previous recommendations is the need for greater information, education and communication around the policies being implemented. After targeted populations have been identified, several conditions must be met to ensure programme take-up by prospective beneficiaries, including those of urban poor children. A key lesson from existing evidence is the need for extensive communication and outreach tailored to urban communities. Television and radio are useful – but are evidently ineffective if the poor lack access to TVs and radios. For instance, Brazil relied on a range of informal information dissemination mechanisms, such as local associations, loudspeakers, and churches (World Bank, 2015e).

Information, education and communication should contribute to changing social perceptions and beliefs, and empower the urban poor and poor urban children to take positive action. During the qualitative fieldwork under this research, one respondent mentioned, *'Government needs to work more on the perception of the people. Young people need to have bright perceptions for a better future. Poverty is mindset-related. Anyone should convince him/herself they are capable to cope with poverty, and able to exit poverty'* [KII with a (regional/local) NGO representative in Kombolcha].

Addressing evidence gaps

Owing to limitations in the existing evidence, our assessment of the impacts of urbanisation on child poverty in Ethiopia is tentative, relying on qualitative evidence, and/or quantitative data for limited dimensions of child poverty. Further research, including gathering new quantitative data of poor neighbourhoods and the most vulnerable children in rapidly growing urban centres is therefore needed to ascertain the impact of urbanisation on child poverty.

Improvements in data would allow a more comprehensive assessment of what is driving urbanisation and how it is impacting on child poverty to inform policy in this area. These include:

- Providing city-level population projections to understand and anticipate, to the extent possible, varying trends for urban centres in the country and for different age groups and genders.
- Capturing information on the drivers of urbanisation. At the moment, existing data do not allow for disaggregation of different factors affecting urbanisation such as rural-to-urban migration, changes of definitions in administrative boundaries and natural population growth (which would require different policy responses). Further, when it comes to rural-to-urban migration, it would be helpful to understand the extent to which children migrate alone or are accompanied by parents and/or guardians.

- Providing accessible information disaggregated for marginalised urban groups such as those living in informal settlements and the most vulnerable children. Evidence on the living conditions of poor and most vulnerable children in different cities is currently not readily available.⁶⁶ Having this information readily available would help to monitor the extent to which outcomes for these vulnerable groups has improved or worsened with increasing urban population growth and the expansion of cities. Information should also be disaggregated by gender and age groups, and it should not disregard urban poverty experienced by children under school age.
- Ensuring that sampling frames are reflective of new settlements in rapidly changing urban environments. Survey-sampling frames are often based on census data. Given rapid urban population growth, the latter may be quickly out of date. Adjusting these frames (e.g. by using satellite imaging) in inter-censal periods, and making them reflective of urban population changes, is critical to guaranteeing that data collection does not miss new informal settlements and areas of recent unplanned growth. Finally, to disaggregate information for some MVCs (e.g. street children) would also require undertaking surveys for specific populations living outside traditional household settings.

When it comes to data gathered as part of the evaluation of social protection interventions and of ad-hoc programmes to address poverty, more work can be done on using existing data to ascertain whether those programmes and interventions alleviated urban and child poverty, and whether they effectively addressed extreme poverty. Many studies on the effect of cash transfers focus on outcomes relating to multidimensional poverty (improvements in human capital accumulation, for instance), but often fail to measure the effect of those transfers on poverty alleviation, chronic poverty and the provision of sustainable escapes from poverty traps. They also disregard child poverty.

If certain interventions have been shown in any existing research to have promising effects, it would be advisable to confirm such findings. Follow-up studies may also reveal whether effects of such interventions on household consumption, childhood poverty and similar outcomes were sustained or merely short-lived.

⁶⁶. Living conditions need to be estimated using the survey data for the indicators available, but even then the data will remain incomplete since it is not possible to identify many MVCs living outside household settings or living in household settings but somehow excluded from surveys. This may be the case for orphans living in wealthy households as domestic labourers, who are unable to access the same services and opportunities as family members. Similarly, it may be the case for children with disabilities that may get excluded from typical household surveys for various reasons (including stigma and discrimination).

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Annex 1. Site selection and respondent sampling

The qualitative research was undertaken in two fast growing urban centres, which are areas of high child poverty incidence.

Site 1

One of the two sites was to be Addis Ababa, as set out in the terms of reference for this project, as this city has experienced significant population growth that is projected to continue. With almost 3 million people and 21 per cent of the urban population of the country, Ethiopia's capital city is the largest in the country and one of the fastest-growing cities in the region (AfDB, 2014). Yet, despite the political clout of the capital, the city is struggling to provide basic services and infrastructure for a growing population with consequences for urban child poverty. Taking sanitation as just one example, coverage is low, even by sub-Saharan Africa standards, with a municipal sewerage system serving only 10 per cent of the city's population (World Bank, 2015d).

We used data from the Welfare Monitoring Survey (WMS) 2011 in order to decide where in Addis Ababa to focus our research. This work aimed to identify the poorest parts of the city where child poverty is likely to be more prevalent, and the areas where at least one third of the population is in the relevant age group (5 to 19 years of age for the WMS and for our purposes). Although child poverty indicators were not readily available, we looked at data on education, health, access to water and sanitation, housing conditions and living standards for different areas of the city.⁶⁷ Data analysis pointed to Kolfe Keranio, Nefas Silk Lafto, Akaki Kality and (possibly) Lideta sub-cities as the areas of Addis Ababa where child poverty may prevail, with Kolfe Keranio the preferred location for the research. Ideally, we would have also considered recent population growth, particularly due to internal migration, to different parts of the city, but this information is not available at sub-city level.

Site 2

In order to choose the second site for the qualitative research, we sought to identify other urban centres that are projected to grow fast and where child poverty incidence is high. Unfortunately, this information was not available at city level. Starting with urban population projections, data from the CSA (actual values for 2007 and projections for 2012-2037) only allowed the computation of compound growth rates at regional level. The regions of Amhara (with 3.06 percent) and Tigray (with 2.65 percent) are expected to experience the highest rate of change for 2007-2037, followed by Benishangul-Gumuz (2.60 percent) and Afar (2.49 percent), under what the CSA labels a 'slow-urbanisation scenario'. If a fast urbanisation scenario were considered instead, the ranking would see Amhara and Afar (3.75 percent) followed by Benishangul-Gumuz (3.70 percent) and Tigray (3.22 percent) as the fastest growing regions (data available on request).

67. In particular, we looked at low net enrolment ratio (indicator for education), distance (greater than 1 km) to the nearest hospital (indicator for health), access to public tap/shared drinking water in the dry season (indicator for access to water), use of shared (instead of private) toilet (indicator for access to sanitation), electricity/kerosene/candle wax (indicator for access to electricity), and poor construction material of walls and floors in the dwelling unit (indicators for housing conditions). In addition, we also considered information on living standards, as the 2011 WMS informs on whether households would be capable of raising 200 Birr within a week's time for all contingencies, and how those households assessed any change in their living standards with respect to food over a five-year period.

Based on this information, we shortlisted the capital cities of the Ahmara region (Bahir Dar) or the Tigray region (Mekele) as these are among the five largest cities in the country with potential to become regional growth centres (NPC, 2016; Ethiopia’s New Economic Climate Partnership, 2015) and likely to pull internal migrants (other cities in regions closer to neighbouring countries are likely to have more distinct experiences related to international migration and refugees). We then used the same indicators employed for the selection of sub-cities in Addis Ababa, drawing on the WMS 2011. This allowed us to identify which of the two cities appeared to have higher levels of deprivation on a wide range of multidimensional indicators linked to child poverty (we also checked the age profile of the two cities). Based on these two criteria—projected fast population growth and poverty incidence—Bahir Dar appeared as a strong candidate for the second site of our qualitative work (data available on request).

In addition, we considered a third criterion to make our selection, that is, whether the cities had seen recent industrialisation. This is closely related to urbanisation and may be an indication of urban population growth driven by internal migration. As trend data on employment by sector is not available at city level, we looked at whether industrial parks had been set up in the cities in the last five years as part of the government’s industrialisation strategy. While work on an industrial park (garments) was completed in Mekele, there is one planned but not yet completed in Bahir Dar. Further, this criterion led us to consider another city in one of our two regions selected for fast growth, Kombolcha. Unfortunately, poverty-related data for Kombolcha was very limited in comparison to the other two candidates, Mekele and Bahir Dar. The three indicators considered suggested that Kombolcha performs worse than Mekele on youth unemployment and physicians per person, but better on education. This led us to Kombolcha as a site that fits all three criteria.

To identify the specific sites within Kombolcha for fieldwork, we consulted key informants, such as local government officials in the different sites, experts in the Central Statistical Agency of Ethiopia, academics, NGOs and international organisation representatives working in the cities selected.

Respondent sampling

Once sites were identified, mobilisation of respondents was conducted primarily through the lowest government administrative units (local chairpersons), community leaders or NGOs working in the community. Pre-mobilisation discussions were conducted with these gatekeepers to ensure that religious, school and working interests of respondents were taken into account. Schools would be the entry-point for finding school-going children and adolescents to participate. Non-school-going children and adults were identified by a local chairperson/community mobiliser. In short, the inclusion criteria to be part of the FGDs and IDIs included:

- Poor children 10-14 and 15-17 living in the two selected sites: girls and boys, in and out of school.
- Parents of poor children (one for children 10-14, one for children 15-17), teachers (one for primary and one for secondary school) and community leaders (including religious leaders) working in the poorest areas of the cities selected.

Annex 2. Additional tables from the analysis of WMS 2011 and 2016 data

Annex Table 1. City-level change in the percentage of urban households belonging to the poorest wealth quintile, 2011-2016

| Change 2011-2016 (Percentage) | Location |
|-------------------------------|------------------------|
| -13.8 | Other Gambella urban |
| -12.4 | Other Afar urban |
| -11.3 | Jigjga |
| -10.6 | Gambella |
| -10.5 | Other Somali urban |
| -5.7 | Dire Dawa urban |
| -4.6 | Other Amhara urban |
| -4.0 | Other Oromiya urban |
| -4.0 | Other Tigray urban |
| -3.6 | Other SNNPR urban |
| -3.3 | Assosa |
| -2.2 | Harari urban |
| -2.0 | Mekele |
| -2.0 | Awassa |
| -1.6 | Asayta town |
| -0.8 | Addis Ababa |
| 0.6 | Bahir Dar |
| 0.7 | Adama |
| 7.7 | Other Benshangul urban |

Annex Table 2. Change (at city level) in the percentage of households belonging to the richest wealth quintile, 2011-2016

| Change 2011-2016 (Percentage) | Location |
|--|-------------------------|
| | Location |
| 28.6 | Awassa |
| 26.9 | Mekele |
| 22.7 | Assosa |
| 21.2 | Addis Ababa |
| 19.7 | Harari urban |
| 19.1 | Other Tigray urban |
| 17.2 | Adama |
| 16.3 | Other SNNPR urban |
| 16.0 | Other Amhara urban |
| 15.9 | Other Afar urban |
| 15.1 | Dire Dawa urban |
| 14.4 | Other Oromiya urban |
| 9.2 | Gambella |
| 7.0 | Other Benishangul urban |
| 6.7 | Other Gambella urban |
| 4.3 | Bahir Dar |
| -0.0 | Other Somali urban |
| -3.0 | Jigjiga |
| -3.1 | Asayta town |

Annex Table 3. Change of the Gini coefficient at city level, 2011-2016

| Location | Change in Gini coefficient |
|------------------------|----------------------------|
| Jigjga | -0.12 |
| Awassa | -0.11 |
| Other Somali urban | -0.09 |
| Mekele | -0.08 |
| Gambella | -0.07 |
| Addis Ababa | -0.06 |
| Other Afar urban | -0.05 |
| Other Gambella urban | -0.05 |
| Dire Dawa urban | -0.04 |
| Other Amhara urban | -0.04 |
| Adama | -0.03 |
| Asayta town | -0.03 |
| Harari urban | -0.03 |
| Other Tigray urban | -0.03 |
| Other Oromiya urban | -0.02 |
| Assosa | -0.02 |
| Other SNNPR urban | -0.01 |
| Bahir Dar | 0.01 |
| Other Benshangul urban | 0.08 |

Annex 3. Wider experiences of cash transfers

Cash transfers have come to prominence on the global policy agenda and have been increasingly adopted by low- and middle-income countries as central elements of their poverty reduction and social protection strategies (Barrientos, 2013; DFID, 2011; Hanlon et al., 2010; Honorati et al., 2015; ILO, 2014). Increasingly, social protection is conceptualised as a set of public actions that address poverty, vulnerability and risk throughout the lifecycle. There are some 130 low- and middle-income countries that have at least one non-contributory unconditional cash transfer programme (UCT) including poverty-targeted transfers and old-age social pensions (Bastagli et al., 2016). The growth in programme adoption has been especially high in Africa, where 40 countries out of 48 in sub-Saharan Africa now have a UCT, double the 2010 total. Similarly, as cited in Honorati et al., 2015, 63 countries have at least one conditional cash-transfer programme (CCT), up from two countries in 1997 and 27 countries in 2008. Of these, 14 are in low-income countries, 22 lower middle-income countries, 21 in upper middle-income countries and six are in high-income countries. The highest number of countries with CCTs are in Latin America (22) and Africa (18), followed by East Asia and the Pacific (7), Europe and Central Asia (7), MENA (5) and South Asia (4) (Honorati et al., 2015).

Yet, the level of income transferred varies widely in different contexts. In middle-income countries such as Mexico, the transfer contributes approximately 25 per cent of monthly household income (Oportunidades, 2007, cited in Holmes and Slater, 2007). In South Africa, up to US\$75 is transferred to households a month through the pension scheme and up to US\$30 a month for the child grant (Barrientos and DeJong, 2006; Samson et al., 2006). In low-income countries such as Malawi and Zambia, approximately US\$12-15 a month is transferred (DFID, 2005; Schubert, 2006).

Numerous other factors influence the potential impact of cash transfer programmes. While drawing on just four studies, the evidence relating to timing and frequency of transfers suggests that these features can have an important impact (Bastagli et al., 2016). For instance, in the case of education, with school fees typically due at specific times of the year, tailoring the timing of transfers so that households have sufficient funds available to pay school fees may help in maximising the impact of a cash transfer on educational outcomes. Similarly, based on nine studies of complementary interventions, Bastagli et al. (2016) also report that supplementing cash transfers with grants, products or appropriate training (such as on hygiene, nutrition, importance of schooling; agricultural extension, business development), strengthens the intended impacts of the programme in many cases. This is seen most clearly for savings, investment and production, and health and nutrition (as discussed, for instance, through supply-side interventions).

There is a wide body of evidence on the impacts of cash transfer programmes globally on various elements of economic and multidimensional wellbeing.

Monetary poverty: Bastagli et al. (2016) conducted a systematic review of the impact of cash transfer programmes drawing on over 200 studies and found a comparatively large evidence base linking cash transfers to reductions in monetary poverty. The evidence consistently shows an increase in total expenditure and food expenditure and a reduction in poverty measures. Findings on total household expenditure are clear in 35 studies, with 26 of these demonstrating at least one

significant impact and 25 finding an increase in total expenditure. Among the 31 studies reporting impacts on household food expenditure, 25 show at least one statistically significant effect, with 23 of these being an increase. A study by UNICEF (2009) in West and Central Africa also found cash transfers have a direct impact on monetary poverty due to the increase in household income that the transfers provide. Thus, cash transfers have helped accelerate progress on the reduction of income poverty and hunger. The impact on children is particularly important, both because monetary poverty affects more children than adults (owing to higher fertility rates in the lower income deciles) and because of the crucial importance of improved nutrition for child survival.

Child poverty: The evidence shows that cash transfers can have positive impacts on reducing children's poverty when the transfers are either targeted directly at children or indirectly affect children by raising household income. Devereux et al. (2005) reviewed a number of cash transfer programmes in Southern Africa (including cash for work, direct cash transfer and pension schemes) and found that vulnerable children were able to benefit from cash transfers even if they were not targeted directly. In this and other evaluations, as in Zambia (MCDSS and GTZ, 2005), cash transfers to households in a number of programmes across Southern Africa were found to be spent mostly on food, clothes and seeds, as well as on meeting the costs of services like education and health. Pension schemes have also shown a positive impact in reducing child poverty rates, especially in Southern Africa, where the high levels of AIDS-related mortality have left huge numbers of children in the care of grandparents. Pensions are often shared among family members and so contribute to overall income. In South Africa, the most common motivation for pension sharing outside the household is to help with the education costs of relatives living elsewhere (Barrientos et al., 2003). Devereux et al. (2005) found that Lesotho's universal social pension allowed older people as well as the children living with them to increase their food consumption. The relative regularity and predictability of pension income made it possible for pensioners to purchase more expensive and nutritious food such as meat – for themselves and their dependents.

Savings, investment and production: Impacts on savings, livestock ownership and/or purchase, as well as use and/or purchase of agricultural inputs, are consistent in their direction of effect, with almost all statistically significant findings highlighting positive effects of cash transfers, though these are not universal to all programmes or to all types of livestock and inputs. This is an important finding as cash transfers programmes do not often focus explicitly on enhancing productive impacts. Yet even small cash transfers can make it possible for poor families to invest in assets and purchase inputs (Farrington et al., 2007). In the Kalomo cash transfer scheme in Zambia, although the amount of money transferred is small, 29 per cent of transferred income was invested either in purchases of livestock, farming inputs or informal businesses (MCDSS and GTZ, 2005). Similarly, an assessment of Malawi's Social Cash Transfer found that beneficiary households generated an additional 0.69 Kwacha through productive activity for every Kwacha transferred; the multiplier was generated through increased incomes, and there was an increase in both the share of households with livestock and the total number of animals owned after three years (The Malawi Cash Transfer Evaluation Team, 2017).

Human capital development: Cash transfers enable poor families to invest in children and thereby contribute to human capital development. Contingent on the availability of adequate social services, cash transfers can enable poor families to overcome financial barriers to access basic social services, with the result that school enrolment increases and dropout rates fall, and more children from poor households use health services (UNICEF, 2009). Several evaluations of CCTs in Latin America provide powerful evidence of this (Rawlings and Rubio, 2005). They show that cash transfers improve education levels, especially for girls, and improve vaccination rates and the health status of children, in addition to improving nutrition. However, it is unclear whether the observed improvements result from the cash, the conditions placed on beneficiaries or both together (Rawlings and Rubio, 2005; Barrientos and DeJong, 2006). Evidence from South Africa's Child Support Grant, which is unconditional, has shown positive impacts from cash alone, although there is concern that the amount paid is inadequate to cover the costs of childcare (Samson et al., 2006).

- Bastagli et al. (2016) report that the available evidence highlights a clear link between the receipt of cash transfers and increased school attendance (with statistically significant effects in 13 out of 20 studies). Davis and Handa (2014), while summarising findings from evidence on government-run cash transfer programmes from nine SSA countries, conclude that CT programmes have had strong and consistent impacts on school enrolment, most clearly among secondary age children who face the largest financial barriers to schooling. These impacts on secondary level enrolment range from 5 to 10 percentage points in Ghana, Kenya, Lesotho, Malawi, South Africa and Zambia. Evidence on other education indicators suggests that cash transfers also reduce repetition rates (Ghana, Kenya), increase school attendance (Ghana, Malawi, Lesotho) and facilitate finishing secondary school (Tanzania). Less evidence and a less clear-cut pattern of impact is found for learning outcomes and cognitive development outcomes.
- Cash transfer programmes have also been found to improve food security, although once again this depends on how the programmes are implemented. For instance, Tiwari et al. (2016) in a study on the impacts of government-run cash transfer programmes on food security and nutritional outcomes in four sub-Saharan countries – Ghana, Kenya, Lesotho, Zambia⁶⁸ - highlight the importance of robust programme design and implementation to achieve the intended results. They find that a larger, regular and predictable transfer increases the quantity and quality of food and reduces the prevalence of food insecurity, whereas a smaller, lumpy and irregular transfer does not impact on food expenditures.
- Evidence of the impacts of cash transfers across use of health services and anthropometric measures was largely consistent in terms of direction of effect, showing improvements in both indicators (Bastagli et al., 2016). The available evidence highlights how, while the cash transfers reviewed have played an important role in increasing the use of health services, changes in design or implementation features, including complementary actions, may be required to achieve more consistent impacts on child anthropometric measures. This is reflected in the greater proportion of significant results relating to health-service use compared with anthropometric measures.

68. Ghana's Livelihood Empowerment Against Poverty, Kenya's Cash Transfer for Orphans and Vulnerable Children, Lesotho's Child Grants Programme and Zambia's Child Grant model of the Social Cash Transfer programme.

Gender: Compared with other outcomes examined in the review (Bastagli et al., 2016), there is a strong evidence base on the effects of cash transfers for women and girls in education, employment and empowerment. The studies reviewed show a clear improvement in girls' education indicators associated with receipt of cash transfers. On the whole, they highlight an increase in school attendance, with weaker but still positive effects for girls in cognitive development and test scores associated with cash transfer receipt. With respect to work, the available evidence mostly reports that cash transfers lead to a reduction in labour force participation and work intensity for girls.

South Africa's Child Support Grants

Although it has more developed economic and social infrastructure than its neighbours, South Africa is also affected by widespread poverty, a high incidence of people living with HIV/AIDS, high unemployment and large-scale labour migration. When democracy came to South Africa in 1994, children were suffering from years of disadvantage—the legacy of apartheid. Although the government had sufficient funds to finance a national welfare programme, the existing state system was inadequate and reinforced strict racial divides. Particularly since the end of apartheid in 1994, significant strides in developing a comprehensive social security system have been made (Committee of Inquiry into a Comprehensive System of Social Security for South Africa, 2002; Lund, 2002; van der Berg, 2002).

The main cash transfer supporting children living in poverty is the South African Child Support Grant (CSG), which was introduced in 1998, an important instrument of social protection and the largest cash-transfer programme in Africa, reaching over 10 million children each month (Zembe-Mkabile et al., 2015). This grant provides an important opportunity to further understand how a cash transfer of its kind works in a developing country context. The introduction of a means-tested child support grant provides a rare example of a cash transfer focused primarily on children, and reflecting a commitment to the universal rights of children.

The launch of the CSG in 1998 got off to a slow start, reaching only 22,000 children in its first year. Concern about the slow uptake soon reached the government. In 2000, the South African Cabinet convened a committee to explore the needed reforms to the social security system. Children's eligibility for the CSG was determined by age, household income, and residency status (they had to be citizens, permanent residents, or refugees). At first, only children under seven years old could apply, but the age cut-off gradually increased, contributing to the program's massive expansion. In addition, children only qualified if they lived in poverty. Over time the government has revised the income threshold to determine who qualifies for the grant. In addition, initially, grant receipt was conditional on meeting health requirements, which in practice meant possession of a Road to Health card — a record of a child's immunization and

growth rate. However, it soon became clear that those conditions penalized eligible children who lacked the card, leading the CSG to eliminate the condition.

A wealth of evidence shows that CSG receipt is good for children's health and welfare: children who received the grant had improved nutrition, more schooling, and lower labour-force participation rates, and were more likely to possess formal identity documents (see Glassman and Temin, 2016). The earlier children receive the grant, the more it helps. A large impact assessment conducted by the DSD, SASSA and UNICEF (2012) concluded that early receipt of the CSG helped keep children healthy. Receipt before age two provides the most durable benefits and height-for-age scores, though receiving the grant during adolescence also seems to help. The most basic lesson of the CSG is that government-provided cash transfers can improve health. This is possible even when health goals are not explicit, benefits are not conditional, and the transfer income is shared among household members (Glassman and Temin, 2016). Cash transfers can improve health directly by helping to pay for services, transport, and medicine; and indirectly by reducing poverty and influencing the social determinants of health.

Children who were enrolled in the CSG at birth completed significantly more grades of schooling than children who were enrolled at age six, and achieved higher scores on a maths test (DSD, SASSA and UNICEF, 2012). Impacts for girls were particularly significant, with early receipt of the CSG increasing girls' grade attainment by a quarter of a grade, compared to those receiving the grant only at age six (DSD, SASSA and UNICEF, 2012). The impact largely resulted from early receipt of the CSG, reducing delays in girls entering school by 27 per cent, with girls enrolling early obtaining higher scores on maths and reading tests. For children whose mothers have less than eight grades of schooling, the impacts were even greater, with early enrolment in the CSG raising grade attainment by 10.2 per cent. The CSG appears to play a compensatory role for children with less educated mothers, narrowing the schooling gap between children whose mothers have less education and those who have more.

The CSG is clearly a crucial source of income for poor families. Eligible children who are not in receipt of this grant have no cushion against the worst effects of poverty and destitution. However, even as the CSG contributes to childhood poverty alleviation in South Africa, it is by no means a magic bullet.

Despite CSG's widespread coverage, the most vulnerable children are still falling through the cracks (Glassman and Temin, 2016). Caregivers for eligible children must provide SASSA with documentation to conduct the eligibility tests when apply for CSG. A national survey

revealed this prevented more than one in four caregivers of eligible children from applying in 2008. The largest number and proportion of excluded eligible children live in formal urban areas, and eligible babies and adolescents are excluded more often than children of other ages. Education level, employment, refugee status, and the presence of a mother also influence enrolment (SASSA and UNICEF, 2013).

As such, it makes more sense to align expectations of the CSG's performance with the original intention with which it was established, that is, as one of a basket of poverty alleviation strategies targeting poor children (Lund, 2007). Viewed with this lens, the CSG is playing an important role in the lives of many poor children and their families in South Africa but the 'basket' needs to be filled and sectoral strategies need to be better synergised in order to lift children out of poverty and subsequently improve child health and education outcomes (Zembe-Mkabile et al., 2015).

Annex 4. Dimensions included in Ethiopia's 2016 Child Poverty analysis

| Dimension | Indicator | Threshold values | Under 5 | 5-14 years | 5-17 years |
|-----------------------|--|---|--------------|------------|------------|
| 1. Development | Stunting | Child's height-for-age is below -2SD from reference population | √ | | |
| 2. Health | Skilled birth assistance | Unskilled birth attendance | 0-11 months | | |
| | Adequacy of Antenatal Care (ANC) services | Mother has had less than 4 ANC visits during pregnancy or 4+ ANC visits were performed by an unskilled health professional | 0-11 months | | |
| | Vaccination | Incomplete vaccination | √ | | |
| | Mother's knowledge on oral rehydration salt for treatment of diarrhoea | Mother does not have knowledge | 12-59 months | | |
| 3. Nutrition | Exclusive breastfeeding | Child is not exclusively breastfed | 0-5 months | | |
| | Infant and Young Child Feeding (IYCF) practices | Child is not fed a minimum acceptable diet (MAD) | 6-23 months | | |
| | Wasting | Child's weight-for-height is below -2SD from the reference population | √ | | |
| | Underweight | Child's weight-for-age is below -2SD from the reference age | √ | | |
| | Vitamin A supplement | Child has not received a vitamin A supplement during the last 6 months | 7-59 months | | |
| 4. Education | School attendance | Child is not attending school | | 7-14 years | √ |
| | Grade-for-age | Child of primary school age (9-14 years) is attending school with two or more years of delay; child of secondary school age (15-17 years) is attending school with three or more years of delay | | √ | √ |
| | Illiteracy | Child cannot read a full sentence | | | √ |

Annexes

Annex 3. Wider experiences of cash transfers

| Dimension | Indicator | Threshold values | Under 5 | 5-14 years | 5-17 years |
|---|--|---|---------|------------|------------|
| 5. Health-related knowledge | Knowledge on diarrhoea treatment | Child lives in a household where no adolescent or adult female knows about oral rehydration salts for treatment of diarrhoea | | √ | |
| | Knowledge about HIV/AIDS | Child age 5-14 years lives in a household where none of the adolescent or adult members has knowledge about HIV/AIDS transmission and prevention; child age 15-17 years does not have knowledge on HIV/AIDS transmission and prevention | | √ | √ |
| 6. Information and participation | Information devices | No information device (TV, radio, phone, or mobile phone) available in the household | | √ | √ |
| | Participation in community events or conversations | Child age 5-14 years lives in a household in which none of the adolescent or adult family members have heard any family planning messages in the last few months through participation in community events or conversations | | √ | √ |
| 7. Water | Water source | Household uses an unimproved water source | √ | √ | √ |
| 8. Sanitation | Toilet type | Household has access to an unimproved toilet type | √ | √ | √ |
| 9. Housing | Housing material | Floor, exterior walls or roof of the dwelling where the child resides are made of natural, non-permanent material | √ | √ | √ |
| | Indoor pollution | Child is exposed to indoor pollution from usage of solid cooking fuels for cooking inside the house with no separate kitchen | √ | √ | √ |

Source: *Multidimensional Poverty Analysis for Ethiopia (CSA and UNICEF Ethiopia, 2018)*



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