ARE POVERTY REDUCTION STRATEGY PAPERS IMPACTING CHILD POVERTY? A NICARAGUAN CASE STUDY

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Are Poverty Reduction Strategy Papers Impacting Child Poverty? A Nicaraguan Case Study
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Executive Summary

In 1999, the World Bank and International Monetary Fund began requiring low-income countries to develop national Poverty Reduction Strategies (PRSP) to receive debt relief and further concessional lending. However, despite five years of PRSP implementation, one question has yet to be adequately addressed: how have PRSPs impacted the reduction of child poverty? Children are disproportionately affected by poverty and as such, need their own analysis.

The Child Poverty Impact Assessment Team (CPIAT), commissioned by UNICEF and coordinated by the New School University’s Graduate Program in International Affairs, designed and piloted a methodology in Nicaragua, one of the first countries to implement the PRSP, to determine if child poverty has been reduced by PRSPs. In New York City, the team conducted research on the state of children in the country and designed a methodology using secondary data. CPIAT traveled to Managua, Nicaragua to conduct fieldwork and pilot the methodology in order to determine its impact on child poverty.

To develop this methodology, CPIAT employed a multi-dimensional approach relying on quantitative and qualitative methods. First, the team conducted a thorough collection of secondary data which included a literature review, a poverty-related expenditure budget analysis and a review of PRSP child indicator areas. Additionally, a stakeholder mapping was conducted. This entailed extensive research on the executors and implementers of PRSP policies, civil society working in related sectors and academics.

Secondly, primary data was gathered in the field to complement CPIAT’s secondary data collection. In Managua, the team interviewed over twenty key stakeholders who are directly involved with child poverty or have been directly or indirectly affected by the PRSP. Government officials, international organizations, non-governmental organizations, community members and individual researchers were all included in the pool of stakeholders. Due to limited exposure in the field, the primary qualitative data analysis is limited but provides a backdrop for the team’s research. Interviewees provided needed opinions on the PRSP process, filled gaps and provided indicator insight.

CPIAT’s analysis of the collected quantitative and qualitative research revealed that the Nicaraguan PRSP’s brought the poverty discourse to the forefront of the national agenda. However, the team also found that:

- Impoverished children are not a priority for the government and are sparsely included in the programs and policies of the PRSP
- Impact assessment is difficult because of the inconsistent, low-quality, reliable data and small window of time between PRSP creation and PRSP impact assessment
- PRSP child poverty indicators are lagging and not performing on target as planned
- There are competing national poverty and development strategies, causing confusion among stakeholders
- There was an increase in poverty-related expenditures but it is very difficult to establish direct causality because of the aforementioned factors
The team believes that the PRSP is not a comprehensive way to combat child poverty because of its lack of emphasis on children.

CPIAT has two key recommendations for policymakers. First, national priorities need to reflect stronger linkages between policies and children’s needs. The plight of children should be further taken into account, and considered a priority, especially in the creation and implementation of poverty reduction strategies.

Second, although attempts have been made to incorporate community input into the PRSP, there are significant gaps. Civil society and community voices need to truly be integrated into policy formation and should be used to evaluate poverty reduction strategies to highlight local needs in the national agenda.

CPIAT hopes that this study will be the first of many policy impact assessments to recognize the disproportionate impact poverty has on children. According to UNICEF, poverty reduction begins with children. CPIAT agrees and feels that all national poverty strategies must focus on children. The team hopes this impact assessment study can be of assistance to other impact assessment teams and encourages them to apply a holistic, multidimensional, integrated approach to measure policy impact on children.
Resumen Ejecutivo

En 1999, el Banco Mundial y el Fondo Monetario Internacional comenzaron a solicitar a los países de bajos ingresos que formularan Estrategias nacionales para la reducción de la pobreza (PRSP) para obtener alivio de la deuda y préstamos favorables. Sin embargo, cinco años después de la implantación de las PRSP, todavía hay una pregunta que no se ha contestado adecuadamente: ¿cómo han influido las PRSP en la reducción de la pobreza infantil? Los niños están desproporcionadamente afectados por la pobreza y, por consiguiente, necesitan su propio análisis.

El Equipo para la evaluación de las consecuencias de la pobreza infantil (CPIAT), encargado por UNICEF y coordinado por el New School University’s Graduate Program in International Affairs, concibió y puso a prueba una metodología en Nicaragua, uno de los primeros países en aplicar las PRSP, a fin de establecer si estas estrategias habían reducido la pobreza infantil. En Nueva York, el equipo llevó a cabo investigaciones sobre la situación de la infancia en el país y concibió una metodología utilizando datos secundarios. El CPIAT viajó a Managua, Nicaragua, para llevar a cabo trabajos de campo y poner a prueba la metodología a fin de determinar sus repercusiones sobre la pobreza infantil.

Para desarrollar esta metodología, CPIAT creó un enfoque multidimensional que depende de métodos cuantitativos y cualitativos. En primer lugar, el equipo realizó una recopilación completa de datos secundarios que incluían un análisis de la documentación sobre el tema, un análisis de los gastos presupuestarios en relación con la pobreza y un análisis de los apartados con indicadores infantiles en las PRSP. Además, se levantó un mapa sobre las partes interesadas. Esto exigió una amplia investigación sobre los encargados de la ejecución y la aplicación de las políticas de las PRSP, las organizaciones de la sociedad civil que desempeñan tareas en sectores relacionados y los círculos académicos.

En segundo lugar, se obtuvieron datos primarios sobre el terreno para complementar la recopilación de datos secundarios realizada por el CPIAT. En Managua, el equipo entrevistó a más de 20 partes interesadas que participan directamente en cuestiones relacionadas con la pobreza infantil o a quienes las PRSP les han afectado directa o indirectamente. En el grupo de partes interesadas se incluyó a funcionarios gubernamentales, organizaciones internacionales, organizaciones no gubernamentales, miembros de la comunidad e investigadores individuales. Debido a que la exposición sobre el terreno fue limitada, el análisis de los datos cualitativos primarios es también limitado, pero ofrece un telón de fondo para la investigación del equipo. Los entrevistados proporcionaron opiniones necesarias sobre el proceso de preparación de las PRSP, remediaron lagunas y ofrecieron aportes sobre los indicadores.

El análisis que realizó el CPIAT de las investigaciones cuantitativas y cualitativas recopiladas revela que las PRSP de Nicaragua colocaron el discurso sobre la pobreza en el centro mismo de los programas nacionales. Sin embargo, el equipo también concluyó que:
Los niños más pobres no son una prioridad para el gobierno y apenas están incluidos en los programas y políticas de las PRSP.

La evaluación de las repercusiones es difícil debido a que los datos son poco uniformes, de baja calidad y poco fiables, y al escaso tiempo transcurrido entre la creación de las PRSP y la evaluación de sus repercusiones.

Los indicadores sobre la pobreza infantil en las PRSP están retrasados y no cumplen con las metas tal como se planificó.

Hay estrategias nacionales sobre la pobreza y el desarrollo que compiten entre sí y causan confusión entre las partes interesadas.

Se produjo un aumento en los gastos relacionados con la pobreza, pero resulta difícil establecer directamente una causalidad debido a los factores antes mencionados.

El equipo considera que las PRSP no son un método amplio para combatir la pobreza infantil debido a que no hacen suficiente hincapié en la infancia.

El CPIAT tiene dos recomendaciones clave para los encargados de establecer políticas. En primer lugar, es necesario que las prioridades nacionales reflejen un vínculo más firme entre las políticas y las necesidades de la infancia. Es preciso tomar mucho más en cuenta la situación de los niños y considerarla como una prioridad, especialmente en la creación y aplicación de estrategias para la reducción de la pobreza.

En segundo lugar, aunque se han hecho intentos para incorporar los aportes de la comunidad en las PRSP, hay lagunas considerables. Es preciso integrar verdaderamente las voces de la sociedad civil y la comunidad en la formulación de políticas, y deben utilizarse para evaluar las estrategias de reducción de la pobreza a fin de reflejar las necesidades locales en el programa nacional.

El CPIAT espera que este estudio sea el primero de muchas evaluaciones sobre las consecuencias de las políticas destinadas a reconocer las repercusiones desproporcionadas de la pobreza sobre la infancia. Según UNICEF, la reducción de la pobreza comienza por la infancia. El CPIAT está de acuerdo y considera que todas las estrategias nacionales sobre la pobreza deben centrarse en la infancia. El equipo espera que este estudio sobre la evaluación de las repercusiones sirva de asistencia a otros equipos dedicados a evaluar repercusiones, y les alienta a que apliquen un enfoque holístico, multidimensional e integrado para medir las repercusiones de las políticas sobre la infancia.
Résumé analytique

En 1999, la Banque mondiale et le Fonds monétaire international ont commencé à exiger des pays à bas revenus qu’ils élaborent des Stratégies nationales de réduction de la pauvreté (DSRP) pour bénéficier d’un allègement de la dette et d’autres prêts concessionnels. Cela fait cinq ans que ces DSRP sont appliqués et pourtant on n’a pas encore cherché à répondre à une question en particulier : quel a été l’impact des DSRP sur la réduction de la pauvreté infantile ? Les enfants sont affectés par la pauvreté de manière disproportionnée, c’est pourquoi il convient de leur consacrer une analyse particulière.

L’Equipe d’évaluation de l’impact de la pauvreté sur les enfants (connue sous son acronyme anglais CPIAT), nommée par l’UNICEF et coordonnée par l’Institut supérieur des Affaires internationales de la New School University a mis sur pied une méthodologie qu’elle a testée au Nicaragua, l’un des premiers pays à mettre un DSRP en pratique, afin de déterminer si ceux-ci permettaient de réduire le niveau de pauvreté des enfants. A New York même, l’équipe a procédé à des études sur la situation des enfants nicaraguayens et a mis une méthodologie au point en se servant de sources secondaires. Puis elle s’est rendue à Managua (Nicaragua) pour faire du travail de terrain et tester la méthodologie afin de déterminer l’impact du DSRP sur la pauvreté infantile.

Pour mettre sa méthodologie sur pied, la CPIAT a adopté une approche pluridimensionnelle en s’appuyant sur des méthodes quantitatives et qualitatives. Tout d’abord, elle s’est livrée à une collecte systématique de données secondaires comprenant un survol de la documentation sur le sujet, une analyse budgétaire des dépenses relatives à la pauvreté et un examen des indicateurs des DSRP ayant trait à l’enfance. Elle a également procédé à un examen des parties prenantes. Cela impliquait des recherches approfondies sur les exécutants et les responsables de la mise en œuvre des politiques des DSRP et de la société civile travaillant dans des secteurs similaires ou dans le domaine universitaire.

Ensuite, les données primaires ont été récoltées sur place pour compléter les sources secondaires de la CPIAT. A Managua, l’équipe a interviewé plus de vingt parties prenantes clés qui sont directement impliquées dans la lutte contre la pauvreté infantile ou ont été directement ou indirectement affectés par le DSRP. L’ensemble des personnes interrogées comprenait des fonctionnaires gouvernementaux, des organisations internationales ou non gouvernementales, des membres de la communauté et des chercheurs. Etant donné le peu de familiarité de l’équipe avec le terrain, l’analyse qualitative primaire des données reste limitée, mais elle fournit un contexte à ses recherches. Les personnes interrogées ont fait des commentaires utiles sur le processus de DSRP, comblant des lacunes et permettant de mieux comprendre certains indicateurs.

L’analyse des données qualitatives et quantitatives recueillies par la CPIAT a révélé que les DSRP nicaraguayens ont permis de placer la question de la pauvreté en haut de l’ordre du jour national. Cependant, l’équipe a également conclu que :

- les enfants pauvres ne représentent pas une priorité pour le gouvernement et sont rarement inclus dans les programmes et politiques des DSRP
une évaluation de l’impact est difficile à cause de données insuffisantes et peu fiables, vu le peu de temps qui s’est écoulé entre l’élaboration du DSRP et l’évaluation de son impact
les indicateurs concernant la pauvreté des enfants du DSRP ont pris du retard et n’atteindront pas leurs objectifs
il y a un manque d’harmonisation entre différentes stratégies nationales de développement et de lutte contre la pauvreté, ce qui sème la confusion chez les parties prenantes
les dépenses liées à la pauvreté sont en augmentation, mais il est très difficile d’établir un rapport direct de cause à effet à cause des facteurs mentionnés ci-dessus.

L’équipe pense que le DSRP n’est pas un moyen intégré de lutter contre la pauvreté infantile, parce qu’il n’insiste pas assez sur les enfants.

La CPIAT a deux recommandations clés pour les décideurs politiques. Premièrement, les priorités nationales doivent refléter des liens plus solides entre les politiques et les besoins des enfants. Il faut tenir compte du sort de ceux-ci et en faire une priorité, surtout lors de l’élaboration et de la mise en œuvre de stratégies de réduction de la pauvreté. Deuxièmement, même si des tentatives ont été faites pour incorporer l’avis de la communauté dans le DSRP, des lacunes manifestes demeurent. La société civile et la communauté doivent être réellement entendues lors de l’élaboration de politiques et il faudrait s’appuyer sur elles pour évaluer les stratégies de réduction de la pauvreté afin de mettre en évidence les besoins locaux au sein de l’ordre du jour national.

La CPIAT espère que cette étude sera la première de nombreuses évaluations d’une politique donnée afin de mettre en évidence l’impact disproportionné de la pauvreté sur les enfants. Selon l’UNICEF, la réduction de la pauvreté commence avec les enfants. La CPIAT partage cet avis et estime que toutes les politiques nationales de lutte contre la pauvreté devraient se focaliser sur les enfants. L’équipe espère que cette étude d’évaluation de l’impact se révèlera utile pour d’autres équipes faisant un travail similaire et invite celles-ci à adopter une approche globale, pluridimensionnelle et intégrée pour mesurer l’impact d’une politique sur les enfants.
ARE POVERTY REDUCTION STRATEGY PAPERS
IMPACTING CHILD POVERTY? A NICARAGUAN CASE
STUDY

Introduction

In 2001, the government of Nicaragua submitted its national Poverty Reduction Strategy Paper (PRSP) to the World Bank and the International Monetary Fund for approval. The PRSP was a necessary step in receiving debt relief from the Highly Indebted Poor Country (HIPC) initiative and became the spark that ignited a national poverty discourse.

Nicaragua is one of the poorest countries in Latin America. According to the 2004 Human Development Report, Nicaragua’s human development index was among the lowest in the region. They have endured a host of political, and economic and environmental struggles during the last thirty years that have forced them to borrow heavily from international lending institutions. Excessive loans and political polarization have prevented the country from seriously focusing on a clearly designed national poverty reduction strategy until 2000, when the PRSP became a prerequisite for concessional assistance and debt relief. Nicaragua is one of eight low-income countries to first implement this strategy. Currently, seventy other countries are at different points in the PRSP process of design and implementation.

Upon development, the World Bank emphasized that each strategy must be country-driven, comprehensive and results-oriented. Country governments were encouraged to include the opinions and suggestions of civil society and other development partners. PRSPs focus mainly on long-term, macro-economic strategies to reduce poverty. Nicaragua’s PRSP is comprised of four pillars that set out to achieve this goal. Pillar one, broad-based economic growth and structural reform, focuses on programs and policies to increase overall sustainable economic growth. Pillar two, investment in human capital, looks to enhance productivity through increased funding and the expanded coverage and access to education and health programs. Pillar three, protection for vulnerable groups, concentrates on increasing assistance to areas affected by natural disasters, rural areas, children and the elderly. Lastly, pillar four, good governance, seeks to create a more trustworthy environment for investors, as well as create transparent institutions.

Since the implementation of the strategy in 2001, the Nicaraguan government has changed hands and a new national poverty strategy has been devised. In 2003, the government of Enrique Bolanos created the new National Development Plan and more recently, an updated version has been released that is more inclusive of the opinions of society, titled the Operational National Development Plan. This plan is an adaptation of the first providing an operational plan in which to increase overall economic growth. The addition of this new plan has caused confusion as to which one to prescribe to. Other participating low-income countries have begun to introduce the second generation of PRSPs as well.
The PRSPs developers and implementers define growth as an increase of overall economic wealth. However, child poverty cannot solely be determined by consumption and the increase of household income. Children are impoverished when they are deprived of basic needs and services and a stable, safe home in which to grow and develop. Often, these things are not determined by an increase in family income. Therefore, it becomes extremely difficult to determine how children are affected by a strategy that favors economic growth as the primary means of reducing poverty.

According to the State of the World’s Children 2005, there are one billion children worldwide living in poverty. Children are disproportionately affected by poverty, and their mental and physical growth is stunted because of this. In 2002, 42% of Nicaragua’s population was under fifteen years of age. Many of these children are living in conditions of poverty and are deprived of basic needs like healthcare, food and water. Yet, there are no specific, child-centered policies included in Nicaragua’s PRSP. Children are included in the overall framework of pillar three, vulnerable groups, but they are not distinctly pulled out and addressed. Therefore, Nicaragua’s lack of child centered policies has increasingly become a point of contention among civil society and critics. In fact, UNICEF reports that eight-five percent of PRSPs do not specifically address children in their poverty strategies.

The Nicaraguan government has signed the Convention on the Rights of the Child and has made various other attempts to incorporate children into the national poverty discourse. Yet the country has failed to translate these attempts into tangible policies that would have an effect on the overall state of children in the country. As a result, PRSP impact assessment on child poverty is arduous, because children are the indirect beneficiaries of PRSP policies. It is difficult to determine how general pro-poor policies and programs reach this sector of the population in Nicaragua’s PRSP.

In the most recent independent evaluations of the PRSPs by the IMF and the World Bank, there is an acknowledgment that half a decade since PRSPs were rolled out, a fundamental question has not been answered: Are PRSPs helping to reduce child poverty? This question can be tackled from different angles. One, which has already been carried out by many others, is to evaluate how participatory the preparation of the PRSP was.

A second, and complementary, line of work is related to the astonishing lack of clear evidence on the impact of PRSPs on poverty in general. First, in most countries PRSPs have been in place for only a few years; this is not a sufficient amount of time to establish any trends. Second, assessing the evolution of income poverty requires large household income and expenditure surveys. As these are expensive and time consuming to analyze, they are only conducted every several years. Again, insufficient time has elapsed to precisely evaluate the full impact of PRSPs.

However, some countries, including Nicaragua, started the PRSP process 4-5 years ago. Surely, there should be some indication of success or failure by now. Moreover, one of the premises of the PRSPs is the need for an integrated approach to poverty reduction that incorporates all the dimensions of poverty, not just income. Thus, for countries with the oldest PRSPs, trends can be analyzed according to non-income poverty indicators. These happen to be primarily child-centered indicators, such as education and health.
Ways in which to measure the PRSP’s impact on children are only recently being explored and developed. This report is our contribution to the effort.

**Conceptual Framework**

The following section outlines the conceptual framework that guided this study.

1) As per the Convention on the Rights of the Child, we use the *definition of a child* as any person 18 years old or younger.

2) Significant weaknesses have arisen when relying on income as the only measurement of poverty, especially when measuring child poverty within the overall scheme of poverty reduction strategies. Therefore, our use of *non-income indicators* was largely based on the weakness of income oriented indicators to measure child poverty. Children’s needs are unlike the needs of adults, and cannot simply be calculated by consumption. Household income levels do not account for distribution of wealth within the family and as such, child poverty cannot only be measured quantitatively. Equally as important, an increase in overall income does not automatically reduce child poverty or provide children with increased access to basic services.

3) The *human rights based approach* to measuring child poverty is one in which poverty is considered the denial of basic rights, duties and choices such as food, health, water, sanitation, healthcare, etc. The Convention on the Rights of the Child outlines the basic rights and freedoms that children deserve and require to live healthy, fulfilling lives. This study uses the human rights based approach as a guide to determining the affects of PRSPs on children.

4) This study utilizes UNICEF’s working *definition of child poverty* which states that “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” to guide the analysis. This definition affirms the complex nature of child poverty and as such, this study aims to assess PRSP impact on child poverty by using non-economic indicators.

5) In a way that practically operationalizes this definition, Child Poverty in the Developing World, a study commissioned by UNICEF and conducted by the University of Bristol and the London School of Economics, measures child poverty as the *severe deprivation of seven basic services*. The deprivation approach measures child poverty by focusing on children’s access to a set of basic services on the following areas: food, safe drinking water, sanitation facilities, health, shelter, education and information.

**Main Principles of the PRSP**

In 1996, the World Bank and the International Monetary Fund announced the Highly Indebted Poor Country (HIPC) initiative, a process aimed at easing the pressure of loan repayment on indebted countries. Initially, if a country wished to qualify for debt relief, they had to first follow a set of World Bank and IMF structural adjustment policies for a period of three years. Then in 1999, the World Bank and the International Monetary Fund announced a new prerequisite for HIPC debt relief. Countries that wish to qualify for this relief are required to develop a national Poverty Reduction Strategy (PRS), which would focus on government-led sustainable growth
and development. Upon successful completion of three years of structural adjustment, the participating country reaches “decision point,” and is required to create and implement a national PRS. After one year of satisfactory implementation, countries reach “completion point” and begin to receive debt relief. It is expected that debt relief will allow countries to direct portions of the national budget previously allocated to servicing debt to investment in social programs.

PRSPs provide an assessment and analysis of the implementing government’s current poverty reduction strategies. This extensive process assesses current national poverty priorities and designs pro-poor strategies so that the budget can be reallocated accordingly. Included in each PRSP are: (1) medium and long term goals for poverty reduction, structural reforms, sectoral strategies and action plans, (2) strategic policy and budget priorities, (3) associated domestic and external funding need and (4) performance indicators.

Nicaragua

According to UNICEF, Nicaragua is the third poorest country in Latin America. Poverty is pervasive and concentrated in coastal and rural areas. Inequality has created a rift in the population as well. In 2001, the poorest ten percent of the population had 1.2% of the nation’s wealth while the richest ten percent of the nation had 45%. By 2003, Nicaragua’s GNI was $730, and 48% of the country’s inhabitants were living below the national poverty line.

In the last 30 years, Nicaragua has faced many political, economic and environmental challenges to its development. High levels of inequality and poverty led to a successful revolution in 1979 by the Sandinistas against the nation’s elite. During the 1980’s, the Sandinistas fought a US sponsored Contra war that challenged their legitimacy. In 1990, the Nicaraguan public democratically voted out the Sandinista party in exchange for a US-backed center-right-wing party. The economic situation was bleak after the Sandinista party was voted out and was only made worse in 1998 when Hurricane Mitch ravaged the country killing 3,000 people and leaving thousands homeless. The hurricane upset the country’s already fragile economic balance and infrastructure. Equally as devastating, the country has been paralyzed by a coffee crisis because of Vietnam’s overproduction of coffee. Coffee prices have plummeted and farmers have been thrown into poverty. To alleviate these social and economic disasters, Nicaragua was forced to borrow excessively from international lending institutions and as a result, continues to struggle with “major macroeconomic problems, principally unsustainably large fiscal deficits and debt levels” These challenges have created a fragile, divided institutional capacity and have become a major impetus for the reduction of poverty in Nicaragua.

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1 2004 Human Development Report
Nicaragua: Timeline of Important Events

1979: FSLN Revolution, Somoza ousted from government
1980: Somoza Assassinated
1984: FSLNs Daniel Ortega elected president
1990: United States backed centre-right National Opposition Union defeats FSLN
1992: Earthquake leaves 16,000 people homeless
1994: Initial phase of IMF/WB backed structural adjustment policies
1996: Arnoldo Aleman elected president
1998: Hurricane Mitch kills 3,000 people

The aforementioned factors have severely curtailed country efforts at reducing poverty, but Nicaragua has continued to develop numerous national development and poverty strategies during the course of recent political history. In 1994, the country underwent an IMF and World Bank-backed initial phase of structural adjustment policies aimed at restructuring, liberalizing and privatizing the economy. In 1997, this period of IMF-backed adjustments segued into another national strategy that attempted to incorporate the institutional level in order to avoid corruption. The strategy lasted until 2000 and set out to reduce the public sector and advance previous efforts at privatizing state owned firms.

The third national poverty reduction strategy was engineered by the Arnoldo Aleman presidential administration in 2001. This strategy, called the Strengthened Poverty Reduction Strategy, distinctly focused on sustainable economic growth and poverty alleviation. The Nicaraguan SGPRSP consisted of four pillars: (1) Broad Based Economic Growth, (2) Investment in Human Capital, (3) Protection of Vulnerable Groups and (4) Governance. Emphasis was significantly placed on pillar number one. “The Nicaraguan PRSP assesses past policies and compares the current situation with the situation 30 years ago. There is particular emphasis on, the evolution of GDP per capita and external debt, the process of transition, the adjustments implemented during the 1990s, and an identification of constraints to economic growth. The document also describes ways in which these constraints might have become causes of poverty and low human capital development, and how vulnerable groups have been excluded.” (2001 JSA)

In Nicaragua, when a new political party’s administration comes into office, they often discontinue the policies and strategies of past presidencies. When Enrique Bolaños was elected into office in 2002, he began forging a new poverty reduction strategy. The Bolaños government based its 2003 budget plan on the existing PRS, but “simultaneously began revising it almost immediately upon entering office” (Evans and Driscoll 13). This new plan, called the Second Generation PRSP/National Development Plan (PND) focuses solely on economic growth and investment. Due to Nicaragua’s past problems with policy continuity, most Nicaraguans assume that after the Bolaños administration leaves office, this strategy will once again be ignored or replaced.
According to an independent study carried out by the Swedish International Development Cooperation Agency, Bolaños’ PND “shows a clear bias towards support to the enterprise sector rather than social welfare” and “argues that sustainability depends on GDP growth and on the growth of exports” (Guimarães et al. 3). In response to donor and civil society outcry about the applicability of the National Development Plan, the government created the Operational National Development Plan (OPND). The OPND aims to address the lack of pro-poor initiatives that the PND fails to recognize.

In 2004, the World Bank and the IMF agreed that Nicaragua had taken the necessary steps to secure 4.5 billion dollars in HIPC debt relief. They accomplished this by adhering to strict World Bank and IMF inspired macroeconomic policies and structural reforms. The creation of the Nicaraguan PRSP made this pursuit tenable. It is widely known that the PRSP’s relationship to the HIPC initiative has been the “underlying motivation [that] appears to have driven many subsequent processes and decisions, including the depth and scope of policy debate” (World Bank Independent Evaluation 5). The debt relief that Nicaragua received from HIPC should have been earmarked for poverty-related expenditures. However, only a portion of the funds released were used towards pro-poor policies.

**Child Poverty in Nicaragua and the SGPRS**

According to the UNDP’s Human Development Report, the total population of Nicaragua in 2004 was 5.3 million. In 2002, 41.9% of the population was under the age of 15.\(^3\) As a result, a very large sector of Nicaragua’s population is made up of socially and economically vulnerable children. For that reason, it is essential to examine the ways in which Nicaragua has chosen to deal with the issue of child poverty.

<table>
<thead>
<tr>
<th>The State of Children in Nicaragua(^1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Population under 18: 2.6 million</td>
</tr>
<tr>
<td>Population under 5: 814,000</td>
</tr>
<tr>
<td>Orphans (due to all causes): 150,000</td>
</tr>
<tr>
<td>% of under-fives who are severely or moderately underweight (1995-2003): 10%</td>
</tr>
<tr>
<td>% of under-fives who are severely or moderately suffering from stunting (1995-2003): 20%</td>
</tr>
<tr>
<td>% of infants with low birth-weight (1998-2003): 12%</td>
</tr>
<tr>
<td>Annual number of under-five deaths: 6,000</td>
</tr>
<tr>
<td>Under 5 mortality rate: 38 per 1,000</td>
</tr>
<tr>
<td>Infant mortality rate (under 1): 30 per 1,000</td>
</tr>
<tr>
<td>% of population using adequate sanitation facilities (2002): rural 51%, urban 78%</td>
</tr>
</tbody>
</table>

\(^3\) 2004 Human Development Report
The advancement of child rights in Nicaragua has advanced in theory and on paper but there has been little practical application or implementation of child-centered policy initiatives. Nicaragua has made various, incomplete efforts to include children and adolescents in their national strategies. These efforts include, but are not limited to, the creation of a national commission to eradicate child labor (CNEPTI), the National Commission for the Promotion and Defense of the Rights of Children, the signing of the Convention on the Rights of the Child and the Convention on the Worst Forms of Child Labor. Nicaragua has also devised a national policy of Integral Attention to Childhood and Adolescence and created the Children and Adolescent Code in 1989.

One of the main arguments waged against Nicaragua’s PRSP is its negligent discussion of the reduction of child poverty. In fact, the term “child poverty” was not even mentioned in Nicaragua’s Strengthened Growth and Poverty Reduction Strategy. Nicaragua’s PRSP treats children as a cross-cutting theme and they are included in broader strategies that are not child-centered. Marcus and Wilkinson point out that in the PRSP a child’s well-being “can be taken care of via ‘add-ons’ to mainstream policy, and the ways in which mainstream policy may lead to or entrench child poverty virtually ignored” (1).

Overall it has been a struggle to measure the impact of PRSPs on child poverty in Nicaragua.

The Nicaraguan PRSP uses multiple surveys to assess national poverty and measure indicators. These include the following: (1) Living Standards Measurement (2) Demographic and Health Surveys and (3) the Nicaragua Qualitative Poverty and Exclusion Study. These studies do not specifically focus on the situation of children; instead they focus on society as a whole and the family unit. Various studies have been conducted which examine more than one PRSP to find common themes. Generally, this method has only provided a basic overview of PRSP impact on child poverty. In the Marcus, Wilkinson and Marshall study, Nicaragua was included. However, the report failed to draw any specific conclusions. Another possible reason for the lack of PRSP impact assessment studies on children in Nicaragua might be due to the sheer lack of child-centered policies.

1. Methodology

1.1. How to measure PRSPS

Impact Assessment

The methodology is designed to provide a sequential guide to link SGPRS strategies to implementation and their effect on child poverty. To do so, combinations of qualitative and quantitative methods were used, based on the collection of primary and secondary data.

From the onset of the study, the team identified secondary data collection as the first step of our methodology (see Annex II for detailed information on data collection tools). Collecting secondary data helped us obtain information on the progress of the PRSP in Nicaragua, better understand the state of child poverty, analyze the best indicators to use for our analysis and conduct a policy and stakeholder mapping. Specifically, we will highlight how the stakeholder
and policy mapping can be used to identify inputs in the form of policies, programs, activities, SGPRS budget allocations and their impact in child poverty.

Policy Mapping

The Policy mapping was used by the team to identify policies, programs and activities undertaken by the PRSP which affected child poverty in Nicaragua. The policy mapping was conducted for four indicators: health, education, water and sanitation. Although it would be preferable to map all the programs and activities specific to each indicator area studied to better track the proposed strategies to implementation, the mapping for food, shelter and information indicators was not conducted due to time and data limitations. Below is an example of a policy matrix.

Policy Matrix

<table>
<thead>
<tr>
<th>Program</th>
<th>Objectives</th>
<th>Implementing Agency</th>
<th>Actions/Activities</th>
<th>Implementation areas</th>
<th>Allocated Budget</th>
<th>Current Spending</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laws</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Policies</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Once PRSP policies and programs geared towards children and/or families policies are identified, a matrix is developed outlining the policies and programs, which agency was designated for implementation, where the policy activities were carried out, how much funding was allocated, and whether the policy was being implemented or not. Policy identification and verification should be conducted early on in the impact assessment process. A further explanation is provided in the implementation section of this report.

Stakeholder Identification

The identification of government, civil society, and institutional PRSP stakeholders was conducted through the mapping method. This method was useful to identify the policies, programs and/or activities stakeholders executed in relation to the PRSP or child poverty in general. The stakeholder mapping also identified secondary stakeholders (the implementers of the PRSP) and the key stakeholders (the funding agencies/donors). Institutions, groups or individuals that had any levy over any aspect of the project were also identified. By doing so, the team linked key actors involved in child poverty reduction to the PRSP in Nicaragua.

Based on findings from the stakeholder mapping, a list of potential organizations to contact emerged. A set of questions for each study area was developed asking specific questions according to the type of work each group performed (for a full list of stakeholders and interview questions, refer to Annex IV). An in depth discussion on how the stakeholder analysis and subsequent interviews supported our impact assessment can be found under the qualitative data analysis.
Indicator analysis

Another aspect of our methodology included the analysis of indicators based on the seven areas selected according to the Basic Needs approach. Some of the indicators selected were also used on the SGPRS to measure progress. Additionally, the team also found data and information from local sources on the most culturally specific indicators to measure child poverty. Data collected from stakeholders through semi-structured interviews proved to be most useful in this area.

Through quantitative research, data was analyzed and collected from various local and international sources. Indicator trends were analyzed before and after the implementation of the PRSP enabling the examination of fluctuations of child poverty indicators from 1993 to 2004. Multiple sources were used to analyze information on the fluctuations of similar sets of indicators.

Budget Analysis

The purpose of conducting a budget analysis is two-fold:

1) The SGPRS specified budget allocations for certain policies and programs. Conducting a budget analysis would help cross reference the proposed activity, how much funding was allocated for implementation, and how much was spent to date.

2) Conducting a budget breakdown to explore shifts in the government’s budget priorities, with a particular focus on its social expenditures in areas such as education and health. Conducting this exercise revealed the expenditures specifically allotted for poverty reduction. This established the percentage of the total budgetary expenditure outlays for PRSP priorities, determining whether specific priorities within the framework have changed. The analysis also included a sector expenditure review. Examining expenditures by sector allowed for conducting a deeper analysis of the government’s budget priorities related to child poverty indicators. As information of this nature was not readily available, the sector expenditure review focused solely on the areas of education. As such, it served as a methodological example of an assessment tool which can be used to obtain detailed budget priority insights.

Overall, the examination of the budget provided an insight on the effects of HIPC debt relief on the national budget and the increase in poverty related expenditures.

Primary Data

The next step in our study, based on the mapping exercise, was to examine and select stakeholders to aid in the collection of primary data (See Annex III). These stakeholders were selected carefully so as to obtain feedback from an adequate sample representing a wide network of institutions.

2. Impact assessment

To understand the impact of the PRSP on child poverty, two questions need to be answered: 1) Have there been changes in child poverty since the implementation of the PRSP? and 2) Are
changes in child poverty the result of PRSP initiatives? For the first question, indicator trends are used, which illustrate positive and negative changes in child poverty. For the second question, PRSP programs, policies, and budget expenditures, taken from the PRSP mapping method discussed further in the following methodological section, provide a link by which to evaluate whether changes in child poverty are a result of PRSP initiatives. The analysis shows that child poverty reduction has not seen much success in Nicaragua since the implementation of the PRSP in 2001. This evaluation, explained in detail below, illustrates weak causational links between the PRSP document and implementation of policies/programs.

The following is a brief explanation of the indicator trends, separated by topic. Although the data are not sufficient or recent enough to assess, changes in all the dimensions of child poverty, from the indicators available after 2003, some changes are noted. The second section discusses the PRSP programs, goals, policies and budgetary allocations. This section compares the indicator trends and seeks to find correlation and causation between these indicators and the PRSP using the PRSP mapping method. The final section provides some possible reasons why the PRSP has been ineffective in the reduction of child poverty in Nicaragua.

2.1. The human rights approach to child poverty

The definition of child poverty used in this study is taken from a human-rights based approach. UNICEF, UNDP, Office Commissioner for Human Rights, Save the Children and many other international organizations have strongly advocated for a human rights-based approach to understanding poverty and development. This approach highlights the linkage between child poverty and human rights deprivations. It also brings forth human rights principles such as universality, non-discrimination, child participation and the empowerment of the poor.

The human rights approach recognizes not only rights but also duties, namely (1) the duty to respect which compels the duty bearer to respect and not violate human rights; (2) the duty to protect, which requires the duty bearer to act and take measures that oblige the third party to respect the rights and takes measures towards those that violate human rights, and (3) the duty to fulfill, which requires the appropriate adoption of the measures which will lead to the realization of human rights⁴. In pursuing the human rights approach, national governments have the duty not only to alleviate child poverty by directing attention, commitment and resources to children, but also to provide opportunities for children to express their view and voice their concerns.

Using the human-rights framework, UNICEF’s working definition of child poverty, presented in The State of the Worlds’ Children 2005, is:

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

This definition reinforces basic capabilities and elements of the human rights approach to child poverty. According to Office of the High Commissioner for Human Rights, poverty refers to the absence of a person’s human rights to a array of basic capabilities; “a poor person the one who is

⁴ Office of the High Commissioner for Human Rights, 2
deprived of basic capabilities.”  Examples of these capabilities are: Adequate Nutrition, Shelter, Basic Education, among others.

Under the human-rights approach, constitutive rights and are related to rights that help implement basic capabilities and are considered as instrumental rights. This approach integrates many areas of rights and offers a holistic understanding of child poverty that encompasses much more than income or consumption levels. For example, the right to work will help realize the right to food.

The human rights approach to poverty is operationalized through the study commissioned by UNICEF and conducted by the University of Bristol and the London School of Economics. In this study, child poverty was identified and measured by focusing on children’s access to the following measures (deprivations) of child poverty:

1. Access to food
2. Access to clean water
3. Access to sanitation facilities
4. Access to healthcare services
5. Access to shelter
6. Access to formal education
7. Access to information

Thus child poverty, or severe deprivation of basic needs, is considered the absence of any of the above measurements.

Our study uses the operational definition from the Bristol study to understand changes in child poverty. Child poverty is defined by the absence of the above human rights and measured through social indicators.

2.2. Trends in child poverty indicators

Overall, the trends for the chosen indicators show little or no progress in the reduction of child poverty in Nicaragua. The majority of the data is available up until 2001/2002. From 1998 to 2001/2002, indicators for child immunization, shelter, access to information and children who fall ill due to diarrhea, showed noticeable worsening. Education indicators showed improvement in this timeframe, as well as water and sanitation coverage.

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5 Ibid.
6 The Office of the High Commissioner for Human Rights also highlights that each country uses different measurement of capabilities according to the specific context.
7 Gordon, et al, 2003, pg. 7-8
8 The indicators used were: Health: child mortality rate, infant mortality rate, maternal mortality rate, immunization coverage; Education: percentage who complete primary schooling, primary school enrollment rates; Nutrition: chronic malnutrition; Water and Sanitation: percentage of national coverage, percentage of children who fall ill due to diarrhea; Shelter: percentage of homes with mud flooring or more than 5 people per room; Information: percentage of households with access to TV, radio, newspapers and books. Infant and maternal mortality rates are indicators of a child's well-being, while the other indicators are a measurement of child poverty.
Data available after 2003, and the most useful data for measuring impact of the PRSP since its 2001 implementation, is for water, sanitation, immunization and education. These indicators are especially important for children because immunization and diarrhea, largely caused by poor water and sanitation, are the leading causes of death for children in Nicaragua; education is a major component for building the capacities of children. It should be noted that there was also a visible drop in the amount of child and infant mortality from 1993 to 2003.

The following explains the trends in these indicators.

**Education**

In education, two indicators provided data after 2001, both showing positive changes. UNICEF data states that enrollment for males and females in primary schooling, from 1998 to 2002, is over 100%. Therefore, looking at the data for children attending primary school is a more accurate reflection the amount of children that are actually attending school.

For the percentage of children attending primary school (See chart below), UNICEF shows the percentage has averaged at around 77% until 2003, while the LSMS shows slight improvement from 85.7% to 87.9% for the period between 1998 and 2001/2002. Although the LSMS and UNICEF are credible in themselves, the instruments they used for measurement were possibly dissimilar. Therefore, valid comparisons cannot be made between the two agencies. What is notable however is the small change in the percentage of children attending primary school over the year.

![Percentage of Children Attending Primary School](chart.png)
The percentage of children that completed primary schooling increased, however based on the nature of the indicator, this progress is due to efforts in the past. World Bank data show improvement in the amount of children completing primary school from 69% to 74.7% in the period of 1998 to 2003. However, MECD claims that the percentage of children completing primary school in 2004 was only at 69.9%, substantially lower than World Bank estimates.

The World Bank evidence shows that the increase from 1993 to 1998 is 17%, while the increase from 1998 to 2003 is only 5%. Improvements in the percentage of children completing primary school has slowed since 1998 compared to the five year period prior.

**Immunization**

The available data after 2001 in the area of health was for immunizations and infant mortality.
Based on the available data, immunization coverage for measles (See above chart), polio and BCG have decreased. UNICEF data reveals an increase in immunization coverage for measles from 83% in 1998 to 99% in 2001. However, from 2001 to 2003, this number decreases by six percentage points down to 93% in 2003. INEC data shows a decrease from 96.3% to 95.5% from 1998 to 2001, and a drop again is shown by INEC data down to 93% by 2003. Similarly, data on polio immunizations show little or no improvement from 2001 to 2003.

Although infant, child and maternal mortality are not constitutive of child poverty per se, they are still a measurement of well being and do shed light on the state of children in Nicaragua. The results for infant mortality are positive since they show a decrease in the infant mortality rate over the years.

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Four different sources, UNICEF, the World Bank, the DHS and the INEC show that the infant mortality rate dropped from 40 to 31 per 1000 lives between 1998 and 2001, before the PRSP. A slowdown in this trend occurred between 2001 and 2003, as data shows slight decrease from 31 to 30 per 1000 lives, which is not as statistically significant. Of course, only two years elapsed, but there was almost a 10 point reduction (from 40 to 31) in the three years between 1998 and 2001 compared to only a one point reduction after the PRSP implementation.

From the indicators that show improvement, there is little evidence that links changes in these indicators to the PRSP. The Second SGPRS Progress Report from 2003 states that the majority of water and sanitation projects, as well as education initiatives, are “underway,” or partially implemented. There is no strong evidence to support that the PRSP had an impact on national expenditures or that PRSP programs were partially or totally funded. The challenge remains in attributing the social indicator improvements to the PRSP.

### 2.3. Changes in indicator trends and Nicaragua’s PRSP

To attribute the changes that occurred in the indicator trends to the PRSP, the available data was compared to the information accumulated through the PRSP matrix mapping. The policies and programs in the PRSP, along with the available budget information, were used to find links between child poverty and the PRSP. What was found was that certain PRSP programs did have tangible results, especially in infrastructure, but direct links for assessing impact remain a challenge.

The national budget is used to determine the possibility of the government to improve spending on areas which affect children directly, such as social spending. The government has made promises, in accordance with the IMF, to improve certain poverty conditions. However, if government spending is constrained by a weak macroeconomic situation, there are notable
alterations to this spending. The budget enables a comparison between what the governments said it would do and what was actually done in the form of budget expenditures and the implementation of programs.

**Health and Education**

For education, the objectives laid out in Nicaragua’s PRSP involve increasing coverage of education, including increasing net primary enrollment and reducing illiteracy, improving the quality of education, decentralizing schools by improving participation of families and communities and modernizing the sector in general. Similarly, the goals for the health sector stated in the PRSP involve a reduction in child and maternal mortality, access to reproductive health care services, reduced chronic malnutrition and the creation of national health plans.

The poverty expenditures for Pillar II, *Investment in Human Capital*, include health, education, nutrition and population. Poverty expenditures refer to expenditures aimed at reducing poverty and are only a part of total education spending. For example, poverty spending for education does not include expenditures for university.

For the execution of *current* expenditures in 2002, eighty-five percent of the total *current* expenditures went towards the investment in human capital (162.5 $US million), increasing to $172.4 million in 2003; the majority of this was used for health and education. The *current* spending for health and education was used to improve programs and extend coverage in the education and health sectors, mostly referring to salaries for the sectors. Thus, teacher and health clinic practitioners have seen an increase in income.  

Table 1: Poverty Spending by Pillars and Cross cutting Themes, US$ Millions

<table>
<thead>
<tr>
<th></th>
<th>2001 Expenditures</th>
<th>2002 Expenditures</th>
<th>2003 Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Current</td>
<td>Capital</td>
<td>Total</td>
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<tr>
<td>Total SGPRS</td>
<td>177.3</td>
<td>184.5</td>
<td>361.8</td>
</tr>
<tr>
<td>Pillars</td>
<td>170.4</td>
<td>152.6</td>
<td>323</td>
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<tr>
<td>Economic Growth</td>
<td>15.3</td>
<td>72.9</td>
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<td>Investment in Human Capital</td>
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<td>46.2</td>
<td>194.2</td>
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<td>86.9</td>
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<tr>
<td>Population</td>
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</tbody>
</table>

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10 Increases in budget allocation may be a result of local actions to increase living wage.
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<td>SGPRS Structure</td>
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<tr>
<td>Total SGPRS</td>
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<td>1.8</td>
</tr>
</tbody>
</table>

**Source:** Second SGPRS Progress Report

*2001-2002 exclude spending caused by hurricane Mitch and Special Programs and Support for Health, Education and Housing.

**IV PRGF review.

The capital spending refers to resources allocated towards the building, equipping and rehabilitation of education and health centers. For education, capital spending resulted in the construction of 815 classrooms in 2002 and an additional 380 in 2003. Overall we see an increase of ten million $US dollars for total expenditures (including current and capital) in the education sector from 2001 to 2002. However, from 2002 to 2003 there was only a total increase of one million $US dollars. From 2001 to 2002 there is an increase of about twenty million $US
dollars in the total expenditure for the health sector. From 2002 to 2003 there was an increase of about twelve million $US dollars.

The Second SGPRS Progress Report stated that the government spent thirteen $US million dollars in 2001 for renovation and construction of new health centers, including seven in the Atlantic Coast. The government supported 15 SILAIS around the country improving the access to health quality provided to patients. More personnel and community volunteers were trained. More equipment and rehabilitation of infrastructures were provided. In 2002, the government allocated another 13 million dollars for health centers.

Based on the available data, immunization coverage for measles, polio and BCG have decreased, meaning that the addition of health centers and budgets expenditures for health have not improved the amount of children with proper immunizations. Again, we see negative effects on child poverty reduction at the same time the PRSP programs are being implemented. The Second SGPRS Progress Report stated that based on the high expenditure in the health sector there were reductions in the infant and child mortality rate.

Overall, for health and education there does seem to be tangible results in the form of infrastructure. These improvements increase the access to health and education; however the effectiveness of such structures is uncertain. Many interviewees claimed that some of the schools are vacant and that there is no money for teachers. More time will allow a stronger impact to arise as to the usefulness of such infrastructure. Pick this important point up later, in the implementation section

The Second SGPRS Progress Report from 2003 also claims that there was a policy aimed at strengthening health care centers for children, which focused on immunization programs. However, if more money is being allocated for the health sector, why are fewer children being immunized? The percentage of children immunized from 1998 to 2002 actually decreased as seen in the below charts. Data in the near future will be better able to predict the impact of PRSP immunization programs.

**Water and Sanitation**

The LSMS reports that the percentage of water coverage and the percentage of sanitation coverage have increased; water coverage moved from 83.6% in 1998 to 84.2% in 2001 and sanitation also increased about 4 percentage points from 82.6% in 1993 to 86.2% in 2001. UNICEF estimates that in 2003 the national water coverage is actually less, at 81% and also the sanitation coverage too was less in 2003, at 66%.

The national budget does not specifically state the amount of money allocated to water and sanitation programs. It does state that it would cost $240.3 million dollars from 2001 to 2005 to increase the national coverage of access to water to 75.4% from 65.5%. However, it is not certain how much money actually went towards this goal.

In the PRSP, ENACAL is largely responsible for the setting new rates and subsidies for water, and implementing a comprehensive water and sanitation program. Their main focus, according to the Second SGPRS Progress Report, is in the areas in and around Managua, Jinotepe, Matagalpa and Nueva Guinea. INIFOM is responsible for improving systems for gathering,
transporting and treating solid wastes and building 2,000 septic tanks in 40 municipalities across the country. MINSA is working on educational programs to complement infrastructure for water and sanitation. As of the Second SGPRS Progress Report in 2003, all of the above mentioned programs are currently underway. It is not certain if the water and sanitation initiatives from the PRSP have had an effect on children in poverty, because the implementation is questionable.

Furthermore, disaggregated data was not available, which would allow more precise indication for impact assessment.

**Percentage of Water Coverage**

- 1993: 83.60%
- 1994: 84.20%
- 1995: 81%

[Diagram showing percentage of water coverage from 1993 to 2005]
Nutrition

Nutrition expenditures increased from .8 SUS million to over 9 SUS million from 2001 to 2004. MINSA was the executor for most of the PRSP nutrition programs including fostering education programs based on promoting behavioral changes in families and communities to promote hygiene, preventative health, and practices for caring for children among pregnant women and breastfeeding mothers. The Second SPGRS Progress Report stated that Phase I and Phase II of the Communal Health and Nutrition Program were completed and Phase III began in 2003. MINSA, at the community level, was also responsible for promoting healthy growth and development strategies for children, monitoring weight during pregnancy, support actions and develop social communication strategy for promoting breastfeeding. This program had a scheduled execution of April- December 2001, however by 2003, as reported by the Second SGPRS Progress Report; the program was “underway.”

Some aspects of malnourishment are the result of long term processes, usually many years of insufficient food. Unfortunately, data after 2001 is not available for chronic malnourishment. Therefore, policies from the PRSP, and the associated expenditures, cannot be evaluated.
2.4. Possible impact factors

In September of 2003, the government of Nicaragua proposed the National Development Plan as a way to increase national economic growth. During our interview sessions, it was clear that there was confusion regarding whether the government ministries are using the PRSP plan or the National Development Plan as a way of poverty reduction. Furthermore, allocated funds for PRSP programs and policies were not easily found and progress in terms of implementation for many PRSP initiatives is unknown.

The failure to meet the expected targets is partially due to the underachievement of projected economic growth (table 2). In 2003, economic growth was only half of what the PRSP had expected, with only 2.3% growth when the estimation was at 4.3%. Increasing population and slow GDP growth caused negative per capita real GDP growth between 2001 and 2003, substantially lower than SGPRS estimations (table 2).

Table 2: Nicaraguan Real GDP Growth Rate and Real Per Capita GDP Growth, 1996-2004

<table>
<thead>
<tr>
<th></th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Observed Real GDP Growth</td>
<td>6.3</td>
<td>4.0</td>
<td>3.7</td>
<td>7.0</td>
<td>4.2</td>
<td>3.0</td>
<td>1.0</td>
<td>2.3</td>
<td>3.7</td>
</tr>
<tr>
<td>SGPRS Estimated Real GDP Growth</td>
<td>6.3</td>
<td>4.0</td>
<td>3.7</td>
<td>7.0</td>
<td>4.3</td>
<td>3.0</td>
<td>3.7</td>
<td>4.5</td>
<td>5.0</td>
</tr>
<tr>
<td>Observed Real Per Capita Growth</td>
<td>1.3</td>
<td>-0.9</td>
<td>2.8</td>
<td>1.9</td>
<td>2.8</td>
<td>-1.6</td>
<td>-2.3</td>
<td>-0.2</td>
<td>1.5</td>
</tr>
<tr>
<td>SGPRS Estimated Real Per Capita GDP Growth</td>
<td>1.3</td>
<td>-0.9</td>
<td>2.8</td>
<td>1.9</td>
<td>2.8</td>
<td>0.4</td>
<td>1.1</td>
<td>1.9</td>
<td>2.4</td>
</tr>
</tbody>
</table>

Source: Second SGPRS Progress Report

The Second SGPRS Progress Report from 2003 stated that “9 out of 19 intermediate indicators have been fulfilled.” The inability to fulfill the intermediate indicators is possibly due to the limited national budget. Since the implementation of the SGPRS in August 2001, the national budget has allocated more funds toward poverty related expenditures. However, the limited budget has not sufficiently fulfilled the needs of the poor, especially in terms of children. Public spending has been affected directly by the stagnant economic situation in Nicaragua.

Nicaragua successfully reached the culmination point of Heavily Indebted Poor Countries on January 23rd, 2004; the PRSP was a requirement for the debt relief. Under the stipulations for the debt relief, Nicaragua was supposed to reallocate resources to poverty reduction programs; however, only a portion actually went to poverty related expenditures. The rest went towards the payment of internal debt. Although these resources were not all directed to poverty related expenditures, the fulfillment of internal debt may have prevented an increase in taxes or an increase in the percentage of GDP spent on debt relief, allowing other budgetary needs to remain intact. As a result, social service spending has remained relatively constant, about forty percent of the GDP. Nevertheless, funds were initially going towards poverty expenditures and became
reallocated to stabilize the macroeconomic situation. This may be another reason for the inability to successfully reach the PRSP targets.

A breakdown of the national budget shows increases in total spending from US$ million 1,128 in 2000 to US$ million 1,141.3 in 2004. Total poverty spending also rose from 457 in 2000 to $US million 488.2 in 2004, almost 43% of total spending.

Table 3: Nicaragua: NFPS Resources and HIPC Relief Additionality, 2000-2004

<table>
<thead>
<tr>
<th></th>
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<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Revenue</td>
<td>791.1</td>
<td>785.0</td>
<td>814.8</td>
<td>900.1</td>
<td>938.1</td>
<td>-6.1</td>
<td>132.6</td>
<td>126.5</td>
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<tr>
<td>Total Spending</td>
<td>1,128.0</td>
<td>1,284.7</td>
<td>1,157.9</td>
<td>1,175.4</td>
<td>1,141.3</td>
<td>156.7</td>
<td>77.4</td>
<td>234.1</td>
</tr>
<tr>
<td>Total Poverty Spending</td>
<td>457.0</td>
<td>455.3</td>
<td>409.1</td>
<td>450.0</td>
<td>488.2</td>
<td>-1.7</td>
<td>-54.9</td>
<td>-56.6</td>
</tr>
<tr>
<td>Domestic Resources</td>
<td>251.9</td>
<td>175.9</td>
<td>160.9</td>
<td>143.2</td>
<td>144.4</td>
<td>-76.1</td>
<td>-199.8</td>
<td>-275.9</td>
</tr>
<tr>
<td>External Resources</td>
<td>205.0</td>
<td>279.4</td>
<td>248.1</td>
<td>306.8</td>
<td>343.8</td>
<td>74.4</td>
<td>145.0</td>
<td>219.3</td>
</tr>
<tr>
<td>HIPC relief</td>
<td>--</td>
<td>63.3</td>
<td>70.8</td>
<td>100.9</td>
<td>125.5</td>
<td>63.3</td>
<td>171.7</td>
<td>235.0</td>
</tr>
<tr>
<td>Other</td>
<td>205.0</td>
<td>216.1</td>
<td>177.4</td>
<td>205.9</td>
<td>218.4</td>
<td>11.1</td>
<td>-26.7</td>
<td>-15.7</td>
</tr>
<tr>
<td>Adjusted Poverty Spending*</td>
<td>349.3</td>
<td>361.8</td>
<td>401.1</td>
<td>450.0</td>
<td>488.2</td>
<td>12.4</td>
<td>152.5</td>
<td>164.9</td>
</tr>
<tr>
<td>Domestic Resources</td>
<td>216.7</td>
<td>152.4</td>
<td>158.6</td>
<td>143.2</td>
<td>144.4</td>
<td>-64.3</td>
<td>-131.7</td>
<td>-196.0</td>
</tr>
<tr>
<td>External Resources</td>
<td>132.6</td>
<td>209.3</td>
<td>242.6</td>
<td>306.8</td>
<td>343.8</td>
<td>76.7</td>
<td>284.2</td>
<td>360.9</td>
</tr>
<tr>
<td>HIPC relief</td>
<td>--</td>
<td>63.3</td>
<td>70.8</td>
<td>100.9</td>
<td>125.5</td>
<td>63.3</td>
<td>171.7</td>
<td>235.0</td>
</tr>
<tr>
<td>Other</td>
<td>132.6</td>
<td>146.0</td>
<td>171.8</td>
<td>205.9</td>
<td>218.4</td>
<td>13.4</td>
<td>112.5</td>
<td>125.9</td>
</tr>
<tr>
<td>Mitich Poverty Spending</td>
<td>107.7</td>
<td>93.5</td>
<td>8.0</td>
<td>0.0</td>
<td>0.0</td>
<td>-14.1</td>
<td>-207.4</td>
<td>-221.5</td>
</tr>
<tr>
<td>Domestic Resources</td>
<td>35.2</td>
<td>23.4</td>
<td>2.3</td>
<td>0.0</td>
<td>0.0</td>
<td>-11.8</td>
<td>-68.1</td>
<td>-79.9</td>
</tr>
<tr>
<td>External Resources</td>
<td>72.5</td>
<td>70.1</td>
<td>5.7</td>
<td>0.0</td>
<td>0.0</td>
<td>-2.3</td>
<td>-139.2</td>
<td>-141.6</td>
</tr>
<tr>
<td>Global Balance b/g</td>
<td>-336.8</td>
<td>-499.7</td>
<td>-343.1</td>
<td>-275.3</td>
<td>-203.2</td>
<td>-162.9</td>
<td>55.3</td>
<td>-107.6</td>
</tr>
<tr>
<td>Financing</td>
<td>336.8</td>
<td>499.7</td>
<td>343.1</td>
<td>275.3</td>
<td>203.2</td>
<td>162.9</td>
<td>-55.3</td>
<td>107.6</td>
</tr>
<tr>
<td>Net Eternal Financing</td>
<td>333.2</td>
<td>305.7</td>
<td>368.9</td>
<td>426.2</td>
<td>605.8</td>
<td>-27.5</td>
<td>128.7</td>
<td>101.3</td>
</tr>
<tr>
<td>Net Internal Financing</td>
<td>-111.5</td>
<td>156.8</td>
<td>-41.7</td>
<td>-192.1</td>
<td>-419.2</td>
<td>268.3</td>
<td>-10.8</td>
<td>257.5</td>
</tr>
<tr>
<td>Revenue from Privatization</td>
<td>115.1</td>
<td>37.2</td>
<td>15.9</td>
<td>41.2</td>
<td>16.7</td>
<td>-78.0</td>
<td>-173.2</td>
<td>-251.2</td>
</tr>
</tbody>
</table>

Source: Second SGPRS Progress Report

Overall national and outside spending on poverty does provide evidence of increased priority on poverty related expenditures. However, the indicator trends do not show that the increased poverty related spending is making real improvements for children in poverty. Crucial variables for the success of improvements for children still need to be identified and examined.
As seen, there has been little reduction of child poverty since PRSP implementation in 2001, at least in terms of the dimensions for which there is area data. This may be a result of the inability to properly carry out programs and policies, the limited national budget, the poor macroeconomic environment and the fact that the PRSP may not be the country’s leading poverty plan.

3. Policy implementation

As previously noted, the purpose of the study is to assess the impact of PRSPs on reducing child poverty in Nicaragua. The previous section revealed how during the PRSP implementation time period, child poverty indicator trends decreased, remained constant or increased minimally. This section (1) maps key policies, programs and activities related to child poverty and well-being in Nicaragua and (2) examines the implementation status and highlight some of the obstacles involved in the implementation of PRSP programs. The implementation status is complemented by primary data collection from interviews with key stakeholders in Nicaragua.

Overall, the mapping and analysis of the PRSP policies/programs/activities/budget indicate that the PRSP process does not highlight issues around child poverty. The general policy framework of the Nicaraguan strategy tends to emphasize growth as the hallmark feature of poverty reduction. There is increased social sector expenditure geared towards the health, education, and water and sanitation sectors. However, fiscal policies and debt relief programs are allocated more financing and resources than poverty related expenditures. As this section along the recommendation emphasize, in order to reduce child poverty, it is crucial that the Nicaraguan PRSP focus on the development of healthcare, education, and other social services that directly impact child poverty. In addition, good governance, gender, decentralization and other social issues should be more highlight in the Nicaraguan PRSP.

3.1. Formulation of PRSPs

The first question to be examined in this impact assessment study is finding: Where are Children in the PRSP? In order to assess the impact of PRSP in child poverty reduction, it is important to analyze to what extent children are represented in the PRSPs. By examining the PRSP of Nicaragua, in the overall principles, categories, policies and programs one can immediately notice the marginal place children take in this process. Children are equated with marginal aspects of policy, rather than seen as an essential element of reducing poverty.

Children are not mentioned until the Second Pillar of Nicaragua’s PRSP, Investment in Human Capital. Subsequently, in the PRSP Third Pillar, children are referred to as a “vulnerable group,” along with ethnic groups, the handicapped and the disabled, and the elderly. Education for girls is emphasized under the Gender Inequality section, but there is no mention of street children, orphans or child laborers, which are all major problems children in Nicaragua face. Thus, the most vulnerable children are not referred to in the PRSP.

The Nicaraguan PRSP highlighted the following goals:

- Reduce Extreme Poverty
- Increase Access to Primary Education
• Reduce Maternal Mortality
• Reduce Infant and under 5 mortality
• Achieve universal access to reproductive healthcare services
• Sustainable Development
• Reduce Chronic Malnutrition
• Increase Access to Water and Sanitation
• Reduce Illiteracy Rates

Although these goals do not explicitly mention child poverty, they all can assist in the alleviation of child poverty or promotion of child well-being. One of the goals which is completely missing that directly affects children is the empowerment of women. Many development scholars have made a direct link between women’s empowerment and poverty alleviation. Given that women are mostly closed related to children, their empowerment can ultimately affect child poverty. Women are mentioned mostly in the cross-cutting themes section of the Nicaraguan PRSP under Social Equity. However, this section is very limited and does not provide any cohesive actions, indicators, or funding to promote gender equity.

3.2. Policies

Mapping Matrix

The first step of policy mapping consists in identifying PRSP policies and programs geared towards children and/or family. Further, we determined the implementation status nationwide, urban or rural, regionally or in specific municipalities or cities. A policy table was developed outlining the policies and programs, which agency was designated for implementation, where the policy activities were carried out, how much funding was allocated, and whether the policy was being implemented or not. The mapping matrix was designed for four of the deprivation indicators of child poverty: water and sanitation, education and health.

Policy Mapping

Water and Sanitation

<table>
<thead>
<tr>
<th>Program</th>
<th>Description</th>
<th>Implementing Tool/ Agency</th>
<th>Actions/ Activities</th>
<th>Implementation areas</th>
<th>Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Communication and community action strategy (2002)</td>
<td>Strategy to increase knowledge, attitudes and practices to improve capacity of households and communities to</td>
<td>MINSA (Ministry of Health)</td>
<td>Strategy for six SILAIS (expected to extend to all SILAIS in 03-04 depending on financing)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

11 Another goal that is not included is also the HIV/AIDS; this is often justified by the low prevalence of HIV/AIDS rate in Nicaragua on a regional scale. However, this shows the lack of preventive measures in the PRSP.
<table>
<thead>
<tr>
<th>Implementing Tool/ Agency</th>
<th>Actions/ Activities</th>
<th>Implementation areas</th>
<th>Budget $US M</th>
</tr>
</thead>
<tbody>
<tr>
<td>MAGFOR (Ministry of Agriculture and Forestry) and IDR (Rural Development Institute)</td>
<td>Central activities: sanitary and phyto sanitary services (as well as agricultural and forestry services)</td>
<td>Marginal urban zones and rural areas</td>
<td></td>
</tr>
<tr>
<td>ENACAL (Nicaraguan Water and Sewerage Company)</td>
<td>Program aimed to improve and extend water and sanitation systems</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Safety Net Program</td>
<td>- Expanded to 7 municipalities and served 13,170 families - More than three thousand households in 21 communities joined the program</td>
<td></td>
<td>$29.5</td>
</tr>
<tr>
<td>PAININ (Program for Integral Attention for Children and Adolescents)</td>
<td>Expanded from 33 to 65 municipalities in the country’s Autonomous Regions (?), reaching more than 50,000 children</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Laws**

<table>
<thead>
<tr>
<th>Description</th>
<th>Implementing Tool/ Agency</th>
<th>Actions/ Activities</th>
<th>Implementation areas</th>
<th>Budget $US M</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Health Law (relevant?)</td>
<td>To streamline resources, improve efficiency and equity, decrease transaction costs, and support the sustainability of the sector</td>
<td>-MINSA -Consulting firm (public/private?) -National Health Council (advisory body)</td>
<td>1997-2001 health policy will be evaluated</td>
<td></td>
</tr>
</tbody>
</table>

**Policies**

<table>
<thead>
<tr>
<th>Description</th>
<th>Implementing Tool/ Agency</th>
<th>Actions/ Activities</th>
<th>Implementation areas</th>
<th>Budget $US M</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Protection Policy (Pillar III: Protection of vulnerable groups)</td>
<td>National System for Social Protection “SOLIDARITY”: to connect, coordinate and complement programs and projects oriented towards protection of the most vulnerable</td>
<td>Government</td>
<td>-The plan has a Single Registry of Beneficiaries of the programs and projects that deliver direct benefits to the population -Studies</td>
<td></td>
</tr>
</tbody>
</table>
describing vulnerable groups and types of intervention were completed - Methodological base for common intervention constructed - Analysis of the program of public investment

| MIFAMILIA | Structured to administer the social protection policy and norms | Ministry of the Family | The ministry is developing policy and normative instruments for integrated attention for children under six (as well as people with disabilities and senior citizens) | $5.1 |

<table>
<thead>
<tr>
<th>Social Infrastructure*</th>
<th>Set new rates and revised subsidies</th>
<th>ENACAL</th>
<th>Scheduled execution for June 2001 - Currently underway</th>
<th>Extremely poor neighbourhoods</th>
</tr>
</thead>
<tbody>
<tr>
<td>Implement water and sanitation project</td>
<td>ENACAL</td>
<td>Scheduled execution for 2001 - Currently underway</td>
<td>Marginal sectors Managua</td>
<td></td>
</tr>
<tr>
<td>Implement comprehensive water and sanitation program plus training</td>
<td>-ENACALA/ FISE</td>
<td>-Underway</td>
<td>-Potable water in rural high-density areas</td>
<td></td>
</tr>
<tr>
<td></td>
<td>-ENACAL</td>
<td>-Underway</td>
<td>-Matagalpa and Jinotea</td>
<td></td>
</tr>
<tr>
<td></td>
<td>-ENACAL</td>
<td>-Done</td>
<td>-Nueva Guinea</td>
<td></td>
</tr>
<tr>
<td></td>
<td>-MINSA/ FISE</td>
<td>2000-2004 (pending, final FISE report)</td>
<td>-Partial transfers and training programs (latrines, training in preventive health, water chlorination)</td>
<td></td>
</tr>
<tr>
<td>Initiative</td>
<td>Objective</td>
<td>Implementer</td>
<td>Status</td>
<td>Municipalities</td>
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<tr>
<td>----------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>-------------</td>
<td>-------------------------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Improve systems for gathering, transporting and treating solid wastes</td>
<td></td>
<td>INIFOM</td>
<td>2001-2004 – currently underway</td>
<td>40 municipalities across the country</td>
</tr>
<tr>
<td>Build 2,000 septic tanks</td>
<td>To treat liquid waste dumped directly into surface waters, including the provision of the equipment and machinery necessary for the transport and final disposal of garbage, and 2,200 additional tanks in marginal urban zones of 25 municipalities</td>
<td>INIFOM</td>
<td>2001-2004 – currently underway</td>
<td></td>
</tr>
<tr>
<td>Nicaraguan Initiative for Care and Rehabilitation of the Environment</td>
<td>Program to provide information about sustainable water usage and associated costs</td>
<td>ENACAL</td>
<td>Underway</td>
<td></td>
</tr>
<tr>
<td>Improve capacity of households to care for their own health*</td>
<td></td>
<td>MINSA</td>
<td>2001-2003 – currently underway</td>
<td></td>
</tr>
<tr>
<td>Prevent and control epidemics through monitoring, control, basic sanitation and epidemiological investigation</td>
<td></td>
<td>MINSA</td>
<td>Under formulation</td>
<td></td>
</tr>
<tr>
<td>Design and disseminate educational, informational and communications campaigns to promote healthy lifestyles</td>
<td></td>
<td>MINSA</td>
<td>Under formulation</td>
<td></td>
</tr>
<tr>
<td>Support maternal mortality monitoring system</td>
<td></td>
<td>MINSA</td>
<td>2000-2003 – In process elaboration of monitoring manual for comprehensi ve primary care</td>
<td></td>
</tr>
</tbody>
</table>

*Policies in Pillars 1 and 2 are listed on the Progress Report Annex I
## Health

<table>
<thead>
<tr>
<th>Programs Description</th>
<th>Description</th>
<th>Implementing Agency</th>
<th>Actions/Activities</th>
<th>Implementation Areas</th>
<th>Budget/Financing</th>
</tr>
</thead>
<tbody>
<tr>
<td>SILAIS support</td>
<td>Support the 15 SILAIS to improve the quality of healthcare by providing medical equipment, inputs, rehabilitation of infrastructure, and training of staff and community volunteers</td>
<td>MINSA 2000-2002</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Network</td>
<td>Repair the primary network, equipment, furnishing, health centres and post.</td>
<td>MINSA/FISE 2000-2002</td>
<td></td>
<td></td>
<td>7 on the Atlantic coast</td>
</tr>
<tr>
<td>Comprehensive Health care system</td>
<td>Strengthen comprehensive healthcare system for children through the Strategic Plan for Comprehensive Attention to Disease Prevalent during infancy- AIEPI</td>
<td>MINSA 2002-2003</td>
<td>Provide vaccines, medicines and inputs for immunization program and for comprehensive attention to women and children (project began late 2003)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reproductive care services</td>
<td>Implement model for comprehensive reproductive health care services</td>
<td>MINSA 2001</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth reproductive health services</td>
<td>Support for organizing reproductive health services and work with adolescents in 40 municipalities</td>
<td>MINSA/PSS/FISE 2001-2003</td>
<td></td>
<td></td>
<td>40 municipalities</td>
</tr>
<tr>
<td>Laws</td>
<td>Description</td>
<td>Implementing Tool/ Agency</td>
<td>Actions/Activities</td>
<td>Implementation areas</td>
<td>Budget/Financing</td>
</tr>
<tr>
<td>General Health Law</td>
<td>Strengthen MINSA in its role of setting norms and financing and promoting a pluralistic offer of services</td>
<td>-MINSA - NA</td>
<td>Approved March 2002</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Policies</td>
<td>Description</td>
<td>Implementing Tool/ Agency</td>
<td>Actions/Activities</td>
<td>Implementation areas</td>
<td>Budget/Financing</td>
</tr>
<tr>
<td>National Health Plan</td>
<td>Design National Health Plan and basic packages of health services</td>
<td>MINSA</td>
<td>- In formulation 2001</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Education

<table>
<thead>
<tr>
<th>Program</th>
<th>Description</th>
<th>Implementing Agency</th>
<th>Implementation areas</th>
<th>Originally Scheduled execution</th>
<th>Status</th>
<th>Budget/Financing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vacation Pre-School Education</td>
<td></td>
<td>MECD</td>
<td></td>
<td></td>
<td>Dropped</td>
<td>IDB</td>
</tr>
<tr>
<td>Rehabilitate/Replace/Build over 6,000 classrooms</td>
<td></td>
<td>MECD, FISE, PRRAC</td>
<td>2000-2005</td>
<td>Underway</td>
<td>Underway</td>
<td>Sweden, Germany, KFW, USAID, CATIE, WB, IDB, OPEC, EU, Japan, Budget</td>
</tr>
<tr>
<td>Functional Literacy Program</td>
<td>Expand program</td>
<td>PAEBANIC, MECD</td>
<td>2001</td>
<td>Underway</td>
<td>Underway</td>
<td>Spain, under-neg: EU, partly financed</td>
</tr>
<tr>
<td>Build Homes for Teachers in Rural Areas</td>
<td></td>
<td>MECD, ASEN</td>
<td></td>
<td>Underway</td>
<td>Underway</td>
<td>EU, Korea, Budget</td>
</tr>
<tr>
<td>Situational Analysis</td>
<td>Coverage plan @ the municipal level and define strategies, financial requirements and develop physical facilities</td>
<td></td>
<td>2001-2002</td>
<td>Underway</td>
<td>Underway</td>
<td></td>
</tr>
</tbody>
</table>

From this matrix, it is evident that in the period of three years since PRSP implementation, few policies have been completed and most of the scheduled execution deadlines have not been fulfilled.

### Water and Sanitation

Many of the policies in the water and sanitation mapping matrix are underway. The only policy completed for social infrastructure was the implementation of water and sanitation programs plus the training in Nueva Guinea; the other rural areas were still underway. The policies in the water and sanitation area include mainly establishing infrastructure, correcting rates and training in sanitation and water system monitoring and evaluation. In this case all the projects were established for marginal sectors both in Managua and other rural areas. Polices designed specifically for children lacked.
**Education**

As noted in the impact assessment section, the progress report of the PRPS recognizes major success in the area of education as related to the increase in poverty spending during the 2001—2003. The second SGPRS Progress Report highlights that the increase in “the net rate of primary schooling from 81.1 to 84.7 percent from 2001 to 2002 based partly on the construction and rehabilitation of classrooms, adding 815 in 2002. As of June 2003, the government has been building classrooms at a similar rate, adding 380 or more. There has also been an increase in preschool enrollment by 7.0 and 3.0 percent for 2002 and 2003” (Second SGPRS Progress Report 10).

In the area of education the policies completed by 2004, were incentives given to 14,000 and 18,000 teachers. The purpose of this policy was to increase the salaries of teachers; therefore, they will perform better in the classroom lead to improving education quality. Having this policy completed one might think that the children are been positively affected; nonetheless we must acknowledge that this policy is not designed specifically for children. Other policies completed in this area were the generalization of primary school standards and modernization of tertiary education.

Throughout the policies there are programs for the teachers, infrastructure and parents. There are no policies that would grant scholarships to children to go to school. According to the qualitative interviews with parents, children and NGO representatives, we found out that although education is said to be free in Nicaragua, there are extra expenses that the parents have to cover in order to be able to send their children to school. School meals for children are also lacking in the policies. One might think that when education is being discussed at the national level, policies including children directly would appear, however in the case of the PRSP education also include children indirectly, through their teachers and parents. Poverty was one of the main reasons why children were not going to school. Moreover, children in poverty were also more likely to drop out than non-poor children. Children who were poor often abandoned school because it interfered with their job aimed at maintaining themselves and family. The Human Development Report in Nicaragua stated that 27.2% of the total household income is brought in by children and young adult workers.

Another barrier is the quality of education provided in schools. Lack of classroom space, well-trained teachers, school material, and poorly designed curricula deter children from attending school. Rural families are also reluctant to send their girls long distances to get to school. Given that Nicaraguan young population is growing, more resources and direct assistance have to be invested in the quality of education, enrollment and completion.

**Health**

According to the Second SGRPS:

In the health sector, the government was able to overcome the medical shortage crisis in the country’s healthcare centers, channeling US $13.0 million in 2002 and an additional US $ 13.0 million as of September 2003, surpassing the 2002 expenditure. This helped reduce the maternal mortality rate from 114 to 100 per 100,000 live births between 2001 and 2002, a 12.2 percent improvement. The mortality for rate for children under 5 also improved, dropping from 50 to 40
per thousand live births, a 20.0 percent improvement during 2002. The infant mortality rate improved from 40 to 31 per thousand live births, a 22.5 percent improvement during 2002. Access to reproductive healthcare services also improved going from 24.5 to 24.7 percent over 2001-2002 period.

As the mapping matrix reveals, none of the policies in the health sector were completed, however, they were advancing. Many of the policies included the construction and renovation of health centers, including rehabilitation of infrastructure and training of staff and volunteers. FONMAT and the Social Protection Safety Net designed and implemented programs for pregnant women and infants under one year old. In 2001, under MINSA, a program to strengthen comprehensive healthcare system for children was implemented. Under this policy immunization programs, medicines and attention to children and women health was emphasized. One perfect example is the SILAIS immunization program. Every year SILAIS holds its annual immunization campaign where children throughout Managua get free immunizations. Only in this area, we see direct attention to children and also programs for adolescents. There are also policies underway for the change in family sanitary behavior and habits. Under this policy, educational and informational campaigns were also designed.

3.3. Policy financing

Looking at the budget and the expenditure as associated with the policies related to child poverty illustrates the priorities of the government in ensuring that resources are directed towards child poverty policies. Overall national and autonomous spending does provide evidence of increased priority on poverty related expenditures.

The majority of HIPC interim resources have been used to finance other domestic priorities, including the internal debt, rather than poverty reducing programs as was planned in the enhanced HIPC initiative and its links with the PRSP. External resources have increased in their support of total poverty spending. Funds have ensured that spending on health, education and other prioritized areas has not decreased too much rather than representing an increase in spending in these areas. This indicates the government’s support of the NDP and the international community’s priority towards poverty spending. However, the fact that many policies remain unimplemented and those indicators trends have decreased shows that more resources have to be dedicated on implementing the policies related to child policies. Debt alleviation should add to public spending, not take the place of spending.
<table>
<thead>
<tr>
<th></th>
<th>2001 Expenditures</th>
<th>2002 Expenditures</th>
<th>2003** Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Current</td>
<td>Capital</td>
<td>Total</td>
</tr>
<tr>
<td>Total SGPRS</td>
<td>177.3</td>
<td>184.5</td>
<td>361.8</td>
</tr>
<tr>
<td>Pillars</td>
<td>170.4</td>
<td>152.6</td>
<td>323</td>
</tr>
<tr>
<td>Economic Growth</td>
<td>15.3</td>
<td>72.9</td>
<td>88.2</td>
</tr>
<tr>
<td>Investment in Human Capital</td>
<td>148</td>
<td>46.2</td>
<td>194.2</td>
</tr>
<tr>
<td>Education</td>
<td>61.1</td>
<td>41.6</td>
<td>102.7</td>
</tr>
<tr>
<td>Health</td>
<td>86.9</td>
<td>1.9</td>
<td>88.8</td>
</tr>
<tr>
<td>Population</td>
<td>1.8</td>
<td>1.8</td>
<td>0.1</td>
</tr>
<tr>
<td>Nutrition</td>
<td>0.8</td>
<td>0.8</td>
<td>2.8</td>
</tr>
<tr>
<td>Social Protection</td>
<td>5.9</td>
<td>32.7</td>
<td>38.6</td>
</tr>
<tr>
<td>Governance</td>
<td>1.2</td>
<td>0.9</td>
<td>2</td>
</tr>
<tr>
<td>Cross-cutting Themes</td>
<td>6.9</td>
<td>31.9</td>
<td>38.8</td>
</tr>
<tr>
<td>Environment</td>
<td>3.3</td>
<td>19.5</td>
<td>22.8</td>
</tr>
<tr>
<td>Decentralization</td>
<td>3.6</td>
<td>12.4</td>
<td>15.9</td>
</tr>
</tbody>
</table>

The Nicaraguan government deems economic growth as fundamental for poverty reduction. Focusing on economic growth rather than human development leaves untouched many aspects of childhood poverty. It highlights that “the government can speed up this process (decrease poverty) through more economic growth, an objective emphasized in the proposed NDP presented in September 2003” (SGPRS 10).

### 3.4. Intervening variables

**Governance**

Good governance is essential for both macro-economic stability and poverty reduction. According to Nicaragua's 2003 SGPRS Progress Report:

The government has also lacked emphasis in the transparency of the public administration and its open and decisive fight against corruption, commitments with the Nicaraguan population and the international community. State institutions have adopted measures for administering resources with increased transparency and accountability. Among other actions, the Government has gone further with investigations into acts of corruption; it has created an anti-corruption Fund with support from the international community; it has implemented the single account system for the Government. It has started the work of the office for transparency and public ethics and implemented the program for efficient and transparency in State contacts and procurements.

However, while good governance is essential for promoting economic growth, it has received very limited attention in the overall PRSP budget. Further, according to the Progress Report, indicators for governance programs are also lacking.
Decentralization

Decentralization of power and decision-making is important to remedy the efficiency of public institutions. Local and community based institutions are more equipped to target the poor, to enhance the sustainability of social protection and include relevant civil society groups into strategy dialogues.

Decentralization is mentioned in the Nicaraguan PRSP as very important in empowering and improving the quality of the local government. Decentralization can improve the quality of government and the representation of local business and citizen interests. And completion among provinces, cities and localities can spur the development of more effective policies and programs. However decentralization in the context of Nicaragua is also complicated due to the overall concern of passing difficult problems from the central government to the local level. In addition, more resources rather than responsibilities have to be transferred to the local level.

3.5. Cross-checking implementation results

One of the challenges was finding specific data on proposed policies and programs. While information on programs and activities are available in the SGPRS, information on the specific locations certain programs took place, the budget allocations to support these activities and actions to date was not always available. Progress on PRSP implementation is further complicated by poor evaluation mechanisms, data gathering and inter-sectoral cooperation. Considering the political complexities surrounding the implementation of PRSP, Progress Report updates on policy and program implementation should be cross-referenced with other sources whenever possible. Doing so will likely confirm implementation status of specific policies and or programs. Confirming the existence of these policies could increase the study’s ability to assess PRSP impact on child poverty.

The extent of the impact of the PRSP and associated policies/projects remains to be seen since many of the activities as the matrix table shows have not been implemented yet. Another challenge associated with identifying policies and programs that affect children is that, with the exception of health and education, some PRSP policies may benefit children but are not specifically earmarked for that specific group. Policies geared towards families and in most instances towards maternal care, are likely to affect children, however, this is not always the case. The reason behind it is that impact assessment on children as a distinct group is quite complex. Consequently, close attention must be paid to the policies and programs selected in order to ensure they guide the selection of indicators needed to measure progress.

Due to limited data in this area, it is important to complement this process with primary data collection methods such as stakeholder interviews.

12 The verification process, however, proved to be particularly difficult since there was limited information on policy progress. The best source to obtain implementation information on policies and programs was the Second SGPRS Progress Report. Even so, the document provided limited information on policy updates and spending to date. While PRSP progress reports are useful to look up policies, we were not able to properly assess progress based solely on this document. Therefore, it is necessary to obtain information on these policies from the executing agencies directly, review other reports available in the field and conduct site visits of the projects implemented.
Specific Programs

One of the programs found while collecting primary data was The Social Protection Network (Red de Protection Social). In the first two years of the PRSP very few programs have been implemented. One of these programs which are mentioned in the PRSP is: The Social Protection Network which aimed at improving the well-being of population who lived in extreme poverty and also promoting human capital including changing behaviors and attitudes of families. This project ran in two phases: Phase 1 from 2000 to 2002 (managed by FISE) and Phase 2 from 2002 to 2004 (managed by MIFAMILA). By interviewing key stakeholders and executive representatives of MIFAMILA and FISE, and brochures provided by them, we found that the first phase aimed at: institutional strengthening, education, health and food security.

In order to benefit financially, the PRSP placed conditionality on families to send their children to school and health centers in order to receive their vaccinations. In addition, parents had to commit to attend educational trainings about health, vaccinations, reproductive and sexual health, family hygiene, and child breast feeding. In return families would receive grants and a school pack. Financial incentives were also offered to teachers and materials. Additional grants were offered for food, vaccinations and vitamins. Overall these grants and packages were offered as a financial incentive geared towards supplementing the incomes of families on basic needs expenditure, increasing the care of children under five and reducing the primary education school drops.

Due to the success during the first phase, the RSP began the second phase with additional funding and expanded coverage (SGPRS 41). According to the representatives of the program from MiFamilia, this program has been very successful in reducing child poverty, however they emphasized that the resources were not sufficient to address the bleak situation of child poverty in Nicaragua.

Key Findings related to child policies in the PRSP

Low Participation of Child Poverty Advocates and Children

Some of the main reasons why PRSP policies do not emphasize child poverty are because they were designed without child participation and without childhood agency. Although PRSP highlights participation as one of the key operating principles, civil society organizations we interviewed expressed disappointment at the weak participatory approach of the PRSP. Ninety percent of the NGOs and community groups interviewed said that they were not involved in the development or execution of the SGPRS. Out of all the organizations interviewed, only two international organizations mentioned involvement during the PRSP formulation. However, they also highlighted that their involvement was more or less useless since their input was not taken into consideration at the final PRPS.

Although the national stakeholders participated actively in the consultation process, their participation in the strategy’s definition and elaboration was limited. The participation of the children’s advocates and children themselves is significant. Not only does it contribute to ensuring that PRSP include child-friendly policies, but it also leads to providing practical suggestions on activities that should be undertaken to reduce child poverty. Suggestions from
development practitioners and civil society in general that work with child poverty could be useful in tackling the main causes of child poverty in Nicaragua.

Lack of clarity among stakeholders on the implementation of the strategy

Another major finding of interest was the discrepancy between major stakeholders as to the effect the SGPRS on children and whether the PRSP is being implemented. Our qualitative interviews confirmed that there is no clear consensus on a national plan for child poverty reduction. It is assumed that a decrease in overall poverty will simultaneously decrease child poverty, however without a clear understanding of which plan is the leading strategy; it is difficult attribute impact to approach.

The interviews conducted with government ministries and civil society yielded differing opinions on the implementation of SGPRS. While the ministries and government institutions interviewed were identified as executors of the strategy, it was unclear whether the poverty reduction programs currently executed fell under the SGPRS or the National Development Plan. For instance, three out of the four SGPRS executing ministries expressed optimism about the impact of the strategy on the country. According to these ministries, positive impact can be seen on physical improvements, such as infrastructure development, access to health services, school enrollment, access to water and sanitation services and the construction of new schools. Additionally, the Ministry of Health mentioned that counseling and intervention programs have been successfully implemented, which have lead to early maternal intervention and education. However, even though the Ministries stated that these areas have been directly impacted by the SGPRS, it is important to note that we did not find clear evidence as to which projects were directly created or implemented as a result of the SGPRS.

Currently, SWAPS, or Sector-Wide Approaches, the National Development Plan (NDP) and the SGPRS are all being used as part of the nation’s poverty reduction strategy. FISE explained that the SGPRS transitioned into the National Development Plan because it was a stronger document. Similarly, the MECD Social Communications department introduced the National Development Plan as a “substitute,” and so it is unclear if FISE and MECD are currently working under SGPRS or the National Plan policies. A representative from UNICEF explained that after a new government is elected in the next elections, the NDP may change, and there is a possibility of another national plan.

The National Development Plan, proposed in September of 2003, places a greater emphasis on economic growth and the development of economic clusters. The SGPRS proposes more resources towards social capital investment (health, education, nutrition and population) and the SWAPS promote individual sectoral improvements. As a result of the confusion around using multiple approaches for poverty reduction, there is poor sectoral communication and commitment. An analysis of the national budget expenditures shows that the government is working towards the NDP, while the international community supports the SGPRS and SWAPS.

Child poverty, although a major concern for Nicaragua, is not a priority in the SGPRS

The majority of stakeholders interviewed felt the state of children in Nicaragua is bleak. Nicaragua has a large young population and much of the poor population is composed of children and adolescents. In 2002, forty-two percent of Nicaragua’s population was under
fifteen years of age (UNDP). Among the major issues of concern for children include illiteracy, child labor, teenage pregnancy, malnourishment and shelter. Similarly, immigration is an increasing concern since many families are separated because of the need to migrate to other countries to earn money. Children are left without the protection of their parents and are required to care for their siblings and support their family. Economic pressures also affect the familial structure and increases inter-family violence which also has damaging effects on child development. In addition, inadequate access to basic service delivery was identified as another major problem families confront, which directly impacts children.

Even though child poverty is a pressing problem, overwhelmingly, interviewees stated that children, as a specific group with specific needs, are not a priority for the government. SOYNICA argued that children, as a vulnerable group, are difficult to reach due to the complexity of their condition. The difficulties involved with child poverty reduction may largely be the reason that children are not at the forefront of the national agenda.

4. Conclusions and recommendations

Although the impact of PRSP’s on child poverty remains very limited, the findings have shed some light on a number of opportunities that should be considered to create stronger linkages between PRSP and child poverty reduction. The following recommendations reflect action items that policy makers can consider to improve the impact of poverty reduction strategies on children.

4.1. Poverty reduction begins with children

The PRSPs seek to decrease poverty levels in developing countries. Children represent a large part of the vulnerable population; therefore, PRSP attempts to reduce poverty should focus on specific child – centered policies. The Nicaraguan PRSP does not reflect a comprehensive plan to combat child poverty. PRSP programs, policies and budget highlight that economic growth remains the focus of the government and poverty secondary.

4.2. Clear monitoring and evaluation tools

Analyzing Nicaragua’s SGPRS it became evident that the strategies have inherent difficulties tied to formulation and implementation. Increased coherence in monitoring and evaluation systems that measure progress of PRSPs in general, and prioritize the development of mechanisms that enable direct impact assessment of child poverty levels are needed. PRSP policies and programs should be clearly outlined in order to differentiate initiatives undertaken under PRSP. There should be a clear understanding of the nation’s leading development strategy in order to align the work of all sectors and make practices more efficient.

Although there are improvements in some non-economic indicators and budgetary spending, it is difficult to assess whether children are reached proportionately within the familial unit. It is important to conduct specific studies and establish assessment mechanisms geared towards understanding the direct effect of PRSPs on children.
4.3. A multi-dimensional approach to child poverty

Although the Nicaraguan PRSP highlights that multi-dimensional nature of poverty, in reality it lacks policies that provide a coherent framework for various approaches. For example, Nicaraguan PRPS lacks policies on human rights approach to poverty. Building a PRSP that takes human rights into account could bring together diverse social actors to promote wider debate and empower the poor, rather than simply directing development efforts at poor people.

The perception of children and youth's social reality is fundamental for child poverty. Children themselves are able to recognize areas and policies that directly affect them. They need to feel holders of rights and not simply objects. Children and young people need more policies that recognize their needs and rights to survival, protection, development and participation - without discrimination. Children’s voice should be reflected in the development of these strategies so that policy recommendations accurately depict their needs and priorities.

4.4. Participatory and country-driven

Nicaraguan SGPRS presented an extensive participatory strategy, which claimed to include input from all stakeholders involved. However, this study revealed discontent at the lack of involvement of the community, especially with civil society organizations working with children.

Although there are attempts by the government of Nicaragua to make the PRSP an inclusive process, there are significant gaps that need to be addressed. It is important to increase community input in the development and evaluation of poverty reduction strategies in order to highlight local needs in national agendas. On a conceptual level, the most positive aspect of the SGPRS was the attempt to create a national strategy that addressed poverty reduction. This seems to reflect the need and willingness to develop comprehensive strategies that integrate needs and feedback from all society levels. Hence, it is basic to promote broad-based participation of the poor, of civil society organizations, of governmental institutions at national and sub-national levels and by the private sector at all operational stages to design, implement and monitor the PRSP process.

Finally, improving local capacity building of both civil society organizations and local government within the PRSP process are essential to ensure fuller participation and local execution in the management of project resources.
5. Annexes

5.1. Annex I: Desk Review

To begin to assess the impact of the PRSP on child poverty in Nicaragua, it is essential to understand the overall background, debates and context of child poverty and PRSP’s. The purpose of this review is to critically analyze the published body of knowledge on these subjects and provide a context for our methodology. Because of the vast body of work on these subjects, this desk review is not an exhaustive survey of child poverty and PRSPs. Instead, it includes relevant arguments that are deemed appropriate to our study.

This desk review is thematically structured as follows: Section One highlights the current debates surrounding the PRSP. Section Two examines the current scholarship and debates surrounding child poverty. Section Three discusses the role children have had in this poverty strategy.

Section 1

A review of the current literature on PRSPs suggests that an ongoing debate has ensued about the PRSP’s emphasis on growth. Typically, the development plans set forth by the PRSPs focus on economic growth as a way to alleviate poverty over investments in social capital. This has become a point of contention in the overall PRSP debate. The World Bank has challenged and emphasized the need for overall income increasing strategies.

Additionally, critics have challenged the ability of the PRSP to reduce poverty because of its connection to the HIPC initiative. An independent evaluation of the World Bank’s Poverty Reduction Strategy Initiative noted that “countries have focused more on completing documents, which give them access to resources, than on improving domestic processes” (OED 8). The UNDP affirms this belief:

In practice, there is a danger that the PRSP process, with analytical and

policy development support from the Bank and driven by the need to

qualify for debt relief finance on a specific timetable, […] by

giving the IFIs disproportionate influence over national poverty

reduction strategies, resulting in standardized strategies with

shallow roots in either national politics or civil society. Foster, et al. 8

Since the PRSP is a requirement for HIPC assistance, many have failed to take the strategy seriously as a government-led development initiative and poverty strategy. On the other hand, the World Bank has believes that “with HIPC debt relief, governments will have additional resources to strengthen their social programs, especially in primary education and primary
Several low-income countries have had a varied experience with poverty reduction public expenditure and budgetary issues. To combat this, the World Bank has promoted budgetary “good practices” that “track inputs for the policy actions identified in the PRSP, as well as to improve government accountability in general” (PRSPs: Good Practices). This is an attempt to answer critics that have disapproved of PRSP related budget allocations.

Driscoll and Evans contend that “the influence of the HIPC as a driver and shaper of PRS engagement is on the wane” (2). This is important to note because many countries that have created and implemented PRSPs have now begun to create second generation PRSPs. These second generation PRSPs are often documents that solely focus on the economic elements of the originals.

Section 2

For the purposes of this study, it is important to note the implications of PRSPs, both in theory and practice, on vulnerable groups within society. Specifically, PRSPs have a profound effect on children. Below, a discussion of child poverty will provide a framework for the historical background of both PRSPs and child poverty in Nicaragua.

Although there is no universal definition of a child, the Convention on the Rights of the Child defines all human beings under the age of 18 as children. It states that all children enjoy an “inherent right to life” and for a child to develop to his or her full capacity, children must “grow up in a family environment, in an atmosphere of happiness, love and understanding” (Preamble). Although this is a widely agreed upon definition, a review of the literature reveals that there is no uniform approach to measure child poverty and defining childhood. In Part I of a comprehensive study carried out by the Christian Children’s Fund on child poverty, they emphasize the importance of regional, cultural and gender differences when determining a child’s experience with poverty. It is important to keep in mind the complexities and varying international definitions of childhood. UNICEF’s working definition of child poverty says that “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” (18). This definition affirms the complex nature of child poverty and because of this complexity; it has been the focus of many studies to determine the specific effects poverty has on children.

Understanding child poverty is important because it not only affects the current generation, but future generations of children as well. In the State of the World’s Children 2005, UNICEF declares that childhood poverty “is a root cause of poverty in adulthood,” and “impoverished children often grow up to be impoverished parents who in turn bring up their own children in poverty”. In a comprehensive review of the cyclical nature of child poverty, Caroline Harper agrees and suggests that “children who have a good start in life should be at much less risk of being poor as adults and of initiating another cycle of poverty with their own children.” Because poverty disproportionately affects children, all poverty reduction strategies must focus on children to break the cycle. In many developing countries, children do not develop to their full
capacity because they are the first to feel diminished resource allocations, but are often the last to be recognized in poverty reduction strategies.

Most of the recent literature on child poverty agrees that an increase in overall income does not automatically reduce child poverty or provide children with increased access to basic services. In economist Mahbub Ul Haq’s book, *Reflections on Human Development*, he asserts that Gross National Product growth rates are not the only way of measuring poverty. Significant weaknesses have arisen when relying on income as the only measurement of poverty, especially when measuring child poverty within the overall scheme of poverty reduction strategies. Children’s needs are unlike the needs of adults, and therefore cannot simply be calculated by consumption. Household income levels do not account for distribution of wealth within the family and as such, child poverty cannot only be measured quantitatively. Anthropologist Arjun Appadurai has championed the use of qualitative measurements to determine the extent of child poverty. Appadurai notes that quantitative measures cannot possibly measure levels of social exclusion, security and discrimination; all alternative ways of measuring child poverty (Feeny and Boyd). These intangible aspects are often the features of poverty that most affect children. David Gordon props up this argument and recognizes that “child poverty is not just dependent on family income but also on the availability of infrastructure and services, such as health, education and water supply” (4). Again, overall income may increase at home, but if a child has never attended school, they will remain poor.

**Basic Unmet Needs Approach**

In response to these measurement difficulties, Child Poverty in the Developing World, a study commissioned by UNICEF and conducted by the University of Bristol and the London School of Economics, defines child poverty as the severe deprivation of seven basic services. These include food, clean water, sanitation, healthcare, shelter, education and information. The writers believe that to understand the way in which poverty affects children, one must determine the “effects of inadequate service provision on children” (qtd. In Gordon et al. 6). Lack of basic services affects the way in which children interact with the world and access profoundly influences the way they will develop and grow. When a child is deprived of one of these basic services, it is likely that they will also be deprived of two or three. When a child does not have access to water, sanitation or health services, the cycle of poverty continues. Chopra and Sanders review the affects of health deprivations on children. They reaffirm that “poor child health and nutritional status are stark reflections of and contributors to acute and chronic poverty and to the continuing cycle of poverty” (5).

If children are denied basic services, their chances of living productive, fulfilling lives are severely diminished. All seven basic services are not mutually exclusive. Deprivation of one area challenges a child’s ability to gain access to the other six. This is why investment and intervention into one deprivation area may benefit others. Interventions in health, water, sanitation, food, shelter and information affect a child’s well-being but also complement and reinforce each other (Gordon: 2003). For example, health influences a multitude of other development factors; sicknesses related to water and sanitation prevent children from attending school and receiving an education. If a child is too sick to attend school, they miss out on opportunities to increase their capabilities as citizens, and improve their options to learn livelihood skills, basic sanitation habits, and increase their chances of literacy.
Shelter is another illustration of Gordon et al’s theory of reinforcing deprivations. When a house has a dirt floor, dust and mud increase airborne diseases, and subsequently, problems develop in the lungs and infections occur on the skin. If a child lack access to healthcare to treat these problems and receive the immunizations that they need to prevent them from other illnesses related to other deprivations. If a child is sick and cannot receive healthcare, this exacerbates other mental and physical problems that he or she may have.

Shelter is another deprivation that affects school attendance. If a child has adequate shelter, it increases the chances that a child will attend school, as well as increases their academic performance because they have a place to study.

Malnourishment affects a child’s ability to learn and actively participate in school. Food deprivation provides a daily stress on children and stunts both their emotional and physical development.

Although information deprivation is more extensive in rural areas, it affects both urban and rural poverty intensively. Often, illiteracy is a main cause of information deprivation, but it is also caused from a lack of access to radio, television, telephone, newspapers and books. Children living in poverty have limited knowledge of social services that may be available to them. Information deprivation also limits a child’s ability to understand their rights as human beings.

Section 3
Children & PRSPs

Due to the recent development of the PRSP, there has been a modest amount of research conducted on the specific affects that PRSPs have had and may have on children in the future.

Generally, research has used the child rights perspective as a point of departure, focusing on child participation, policy impact, lack of inclusion and the creation of child-centered policies and programs.

Throughout this body of research, there is a general consensus among researchers that PRSPs do not fully prioritize children or make an effort to determine how market-oriented economic policies will affect their livelihoods. Most researchers agree that child-centered social programs must be included in the PRSP if child poverty is to be eradicated. These sentiments are reflected upon by Marcus et al, Harper, Robinson, Heidel, Mehrotra and Delamonica.

Robinson (2003) emphasizes, in particular, that PRSPs have a “broader strategic framework approach” and leave children out of its scope. She convincingly argues that to positively impact children, the PRSP must further recognize and support all groups of vulnerable children with specific focus on indigenous children, working children, poor children, girl children and HIV/AIDS orphans. PRSPs not only disregard the need for child-centered policy actions, but instead, place children in categories in which the policies created will not reach them. Thus, the development of specific, child focused investment strategies, programs and policies must be included in the PRSP to raise the livelihoods of impoverished children.

Concurrently, Marcus et al (2002) believes that the eradication of childhood poverty depends on the creation of specific child-centered policies that account for impoverished children. It is not
enough to streamline the issue and incorporate them into vulnerable groups. They have a different set of circumstances than the elderly and disabled.

PRSP resources must be re-prioritized and reallocated to child-focused programs and policies. Mehrotra and Delamonica (2002) acknowledge that increased spending is necessary on basic service provision and may be as influential to a child’s life as increased income and overall economic growth. Furthermore, under-funding of important programs is detrimental to a child’s survival and program creation only can go so far if it lacks financing.

Although researchers generally note that children are mentioned within PRSPs in relation to nutrition, education and access to health, they often focus on other ways in which they are ignored. In their study, Marcus and Wilkinson (2002) list child trafficking and sexual exploitation, early childhood development and child labor as extremely important issues which are ignored by most PRSPs. They claim that “children feature more prominently in poverty analysis than in policy action.” Therefore, many country governments stop short of fully integrating all aspects of children into development policy. It is not enough to simply recognize that child poverty is a problem, PRSPs and national governments must use this knowledge to impact their livelihoods. Concomitantly, Heidel (2004) claims PRSPs discuss education and health in relation to children but do not discuss how these factors are interconnected with other issues. He feels there is a total lack of analysis on a major issue affecting millions of children in the world, child labor. This example is a microcosm of the greater problem concerning children and PRSPs.

Participation is a topic that has received much attention in this policy debate. The inclusion of the voice of children and vulnerable groups in poverty reduction strategies is needed if they truly wish to work (Robinson, 2003). Similarly, Marcus et al agrees and recognizes that although there have been various public consultations regarding the PRSP process; they rarely involved children and youth. Their study of six full PRSPs and 17 interim PRSPs has shown that country experience varies. There has been little to no child participation in some countries while others have shown substantial efforts as including the voice of children with the creation of the strategy.

However, White (2002) challenges the notion of child participation in development policy. She believes child participation is oftentimes a form of tokenism. Children are imbedded within a broader social context and should not be segmented into categories that deny their role as part of a greater social structure. White looks to the child rights debate and feels although children were granted rights in the Convention on the Rights of the Child; these very rights are frequently exercised by others on behalf of the child. Therefore, although child participation may be helpful in theory, it is overshadowed by the creators of development policy. Harper (2002) concurs and states that “children’s participation is very important and can reveal a very different agenda, but needs to be taken up by adults and children together.” Furthermore, she feels although child participation is important in development policy, it receives an inordinate amount of focus by researchers and activists.

Taken together, this body of research argues that more action needs to be taken to increase the child’s presence in national poverty reduction strategies. Without programs and policies that specifically focus on children, they will become lost in broader development policy. It is not enough to simply recognize the plight of children. They must be recognized and included in all
development policy. Of the programs and polices included in the PRSP, there needs to be more money allocated to maintaining their goals.

It is evident after conducting a review of literature on children and PRSPs further analyses need to be conducted. The small amount of research which specifically focuses on the affects PRSPs have on children is problematic. It would be helpful if more studies conducted focused exclusively on aspects of child poverty and the PRSP. Heidel’s work on child labor serves as an example of this. Indeed, there is a plethora of research that has been conducted on child poverty and poverty reduction policy, yet more specific research is needed on the PRSP as an independent policy. Furthermore, children need to be pulled out, discussed and analyzed independently. Although many PRSPs consider children to be part of the “vulnerable group” category, they should not be included as such in independent studies.
5.2. Annex II: Methodological data collection

a) Data collection tools

The methodological approach was multi-dimensional, relying on a combination of qualitative and quantitative methods, based on a collection of primary and secondary data. Qualitative methods yielded deeper insights into local perception and effects of the PRSPs. The quantitative method was further enriched by the qualitative analysis. For example, the qualitative method enabled us not only to find the most culturally specific indicators, but also explain the story behind the trends and numbers of each indicator utilized.

A key component of the methodology is matching data from different sources via “triangulation.” By using the secondary and primary data, the team was able to triangulate the information and cross check different perspectives and data increasing the reliability of the results. Triangulation is the practice of crosschecking results among multiple sources and data. Triangulation is used to combine the strengths and to control for the limitations of both the quantitative and qualitative methods. Crosschecking information at every stage of our project allowed us to control for exaggerated perceptions and opinions.

Secondary Data

The secondary data takes the form of a comprehensive desk review, an in-depth mapping of the PRSP, non-economic indicator trends and a national budget breakdown. Primary data was mostly collected through qualitative interviews, focus groups and field observations. What follows is a discussion of the methods used to collect secondary and primary data.

Desk Review

The desk review provides a cohesive picture of the current scholarship on PRSPs and child poverty. A brief review of Nicaragua’s recent social, political and economic history is included, as well as the country’s experience with poverty reduction strategies.

This section of the study presents an overall picture of the current debates surrounding child poverty as well as the various ways in which it can be measured. Additionally, it explores PRSPs development, mandate and politics and the way they impact children directly and indirectly. Understanding the broader debates on child poverty and PRSPs helped structure and formulate the methodology. The Nicaraguan country profile provides a deepened contextual understanding of the challenges faced when attempting to reduce and address child poverty.

On the whole, the desk review provides a contextual backdrop for the study findings. Using a variety of sources ranging from local and international research scholarship has provided a greater understanding of the general framework of PRSP, the state of children in Nicaragua and challenges involved with impact assessment and child poverty reduction. Without research and examination of basic foundational works on these topics, the methodology would be largely misinformed and incomplete.
Indicator Areas

The selection of indicators to measure PRSP impact proved to be a challenge. The study’s terms of reference specified the use of non-income indicators to assess child poverty reduction. Preliminary discussions in this area focused on whether or not to assess non-traditional approaches of child poverty, especially the areas of participation and social exclusion. These approaches are particularly relevant since they invoke various approaches to the conceptual and operational definition of child poverty. After a thorough analysis of the most relevant indicators used to measure child poverty, and in consultation with the client, it was agreed to use the deprivation indicators from the study commissioned by UNICEF and conducted by the London School of Economics. The deprivation indicators measure child poverty by focusing on children’s access to a set of basic needs and services on the following areas: food, safe drinking water, sanitation facilities, health, shelter, education and information.

Impact of the PRSP through the indicator areas was analyzed by pursuing qualitative and quantitative research methods. Qualitative research allowed the team to focus on the most appropriate measurement of child poverty within the Nicaraguan context. For all the seven chosen indicators, our team was able to find data and information from local sources on the most culturally specific indicators. Data collected from stakeholders through semi-structured interviews and observations proved to be most useful in this area.

Through quantitative research our team analyzed data collected from various local and international sources, indicator trends were analyzed before and after the Nicaraguan SGPRS enabling the examination of fluctuations of child poverty indicators from 1993, 1998, 2001/2002, 2003 and 2004. Due to unavailability and variation of data, multiple sources were used to analyze information on the fluctuations of similar sets of indicators.

Stakeholder Mapping

The identification of government, civil society, and institutional PRSP stakeholders was conducted through the mapping method. This method was useful to identify the policies, programs and/ or activities they executed in relation to the PRSP or child poverty in general. The stakeholder mapping also identified secondary stakeholders (the implementers of the PRSP) and the key stakeholders (the funding agencies/donors). Institutions, groups or individuals that had any levy over any aspect of the project were also identified. By doing so, the team linked the key actors involved in child poverty reduction to the PRSP in Nicaragua. Stakeholder mapping was key to implementing the fieldwork strategy because meetings and interviews were conducted with the various stakeholders identified from this method.

Based on findings from the stakeholder mapping, a list of potential organizations to contact emerged. A set of questions for each study area was developed asking specific questions according to the type of work each group did.

This approach enabled the team to gain insights into child poverty reduction across a broad range, from the PRSP policy developers and implementers, to its envisioned beneficiaries. For the purpose of this project, policy areas and stakeholders, which both directly and indirectly affect children, were also analyzed.
**Budget Analysis**

The budget breakdown highlights changes in budgetary priorities since the implementation of the PRSP, in order to assess whether or not these changes have had an impact on children living in poverty.

The analysis started with a breakdown of Nicaragua’s national budget from 1990 to 2004. In conducting this breakdown, shifts in the government’s budget priorities, with a particular focus on its social expenditures in areas such as education and health, were explored. A deeper look into the budget revealed the expenditures specifically allotted for poverty reduction. This established the percentage of the total budgetary expenditure outlays for PRSP priorities, determining whether specific priorities within the framework have changed. The third portion of the analysis included a sector expenditure review. Examining expenditures by sector allowed for conducting a deeper analysis of the government’s budget priorities related to child poverty indicators. As information of this nature was not readily available, the sector expenditure review focused solely in the areas of education. As such, it served as a methodological example of an assessment tool that can be used to obtain detailed budget priority insights.

Overall, the examination of the budget provided a glimpse into how resources were divided and to what sectors the government prioritized. Juxtaposing the findings from the budget analysis with the findings from the non-economic indicator trends, allowed for patterns to surface and impact of PRSPs to be determined.

Information from the secondary data assisted the study with the design and use of the different methods utilized during fieldwork. The following includes the methods used to collect primary data and the importance of these methods.

**Primary Data**

Primary data collection methods are interviews, focus groups and observation. These methods were decided upon prior to traveling to Nicaragua. Ideally, this part of the methodology would have been designed in the field in order to take into consideration more the behaviors, processes and conditions perceived by the individuals and groups studied. It would have been preferable to conduct more research in rural areas along the Atlantic and Central regions, because the majority of poverty is concentrated in these regions outside of the urban areas. However, due to time limitations, the study focused on organizations in Managua some of which also worked in rural Nicaragua.

Through the mapping exercise, the team was able to select stakeholders for the collection of primary data. These stakeholders were selected carefully so as to obtain feedback from an adequate sample representing a wide network of institutions. In addition to institutional stakeholders, a specific session with children was included in the methodology in order to gain children’s perspective on poverty and access to basic services.

Considering the complexities of developing a methodology that integrates primary data to measure impact assessment, the following key points were applied when piloting the methodology:
• Asking questions that would yield the most insight on the PRSP and its impact on child poverty.
• Attempting to distinguish how impact is perceived at a personal, community and organizational level.
• Cross-checking findings with all stakeholders in order to maintain the highest level of objectivity while avoiding getting immersed in the local detail at the expense of the bigger picture.

After careful consideration of the study’s objectives, the challenges surrounding qualitative data gathering and analysis, the following methods were developed for primary data gathering:

1) Interviews
2) Focus Groups
3) Group meetings /Participatory workshops
4) Observations

**Interviews**

The data obtained from interviews provides the study with information, analysis, opinions and perceptions critical to understanding the context of the PRSP implementation and the state of child poverty in Nicaragua. Interviews were designed to engage stakeholders who have been directly and indirectly involved with the PRSP decision and implementation process. In addition, the team also selected stakeholders who were involved in the study of the indicator areas and child poverty in Nicaragua.

A total of twenty interviews, lasting between one and three hours were carried out. Most were individual interviews, but in some cases more than one representative of the organization or representatives of two organizations were present. The interviewees represented three key categories: Government/Ministries, Civil Society (NGO/Community Organizations, International Organizations) and Children. Interviewees included representatives from four Ministries, nine NGOs and community organizations, six international organizations and one sociologist. Due to time constraints, interviewees did not include key stakeholders such as World Bank representatives or other donors.

All the interviewees worked directly with children and had a lot of work experience on child poverty. Interviewees were also asked about perceptions of the network in which their respective organizations worked in order to get broader perceptions and feedback. In order to control for the lack of rural area information, interviewees were selected from organizations that worked in Nicaragua’s rural areas. Research in this area proved to be useful, since the selected organizations were directly involved with child poverty and implementation of PRSP programs (e.g. Program Painin – Ministry of Family), were also directly involved with the designing and implementing of children policies (e.g. Coordinadora Civil), and finally organizations that represented or coordinated a network of a substantial number of other NGOs or community organizations (e.g. CODENI). Hence, data collected from these interviewees increased the reliability of the findings.
Prior to the interviews, a set of guidelines were developed for the interviewees as well as tasks, roles and background information. The goal of this task was to assess which questions yielded better and more focused responses. In addition, through note taking and observation, the team attempted to control for sensitive issues, biases, perceptions and what method made the respondent most comfortable.

The interviews varied from structured or semi-structured to in-depth interviews depending on the area and stakeholder visited. The semi-structured interviews provided deeper analysis about child poverty and PRSP and allowed people to use their own words in describing child poverty status in Nicaragua and their perceptions with the PRSP. This allowed the greatest opportunity to identify the full range of impacts.

Questions were asked based on a number of themes, most of which were common to all interviews. The most important themes selected were as follows:

1. Stakeholder involvement in and overall knowledge of the strategy
2. Stakeholder perspective on child poverty in Nicaragua
3. Impact of the PRSP in the reduction of child poverty
4. Challenges in reducing child poverty in Nicaragua
5. Good and bad practices in the reduction of child poverty
6. The most appropriate indicators to measure PRSP impact on child poverty reduction

In addition to these key themes, the team prepared interview questions for each stakeholder group. Ideally, the team would have conducted a thorough test of the questions prior to conducting interviews. Testing questions with local community members, who understand the cultural context of the interview, is recommended. Due to time constraints, the team tested some of the questions with two persons from a community organization working in human rights and children, and three other random local community people. Testing the questions, albeit limited, was helpful as it provided some insight mainly about sensitivity issues, and which questions would draw a better response. New themes, which arose during the interviews, were used to inform subsequent interview themes and schedules.

The team prepared special guidelines for the interview sessions. Some key guidelines inter alia include:

- Provide a comfortable interview atmosphere that would build the trust of the discussants
- Record answers carefully through active listening and observation
- Prepare an introduction for facilitators to follow during interviews
- Communicate questions clearly while keeping the interviewee focused on the question being asked

When piloting the interview method, the strategy changed and adapted continuously to focus questions towards certain directions. After observing and finding that PRSP had very limited
impact from most of the people interviewed (especially from civil society), the methodology became more inductive. The team started focusing more on child poverty in an attempt to better understand key challenges, lessons and obstacles concerning child poverty. By understanding the reality of the state of children in Nicaragua, the team would be in a better position to identify and provide recommendations on the areas that policymakers need to focus when addressing child poverty within poverty reduction strategies. Further researchers should be prepared to hear that the PRSP is not an active document and be able to ask questions accordingly.

Focus Groups

The team envisioned this method as a means of engaging persons at the village/community level. Focus groups offer qualitative data regarding beneficiaries’ perceptions of the PRSP’s usefulness and its impact on child poverty. It is an important method of disaggregating communities and targeting children, helping understand if or how children have been impacted by the PRSP during the last four years. The team considered this strategy because of its ability to provide a rich amalgam of opinions and insights from beneficiary populations of the PRSP.

Some of the possible goals and outcomes identified included:

- Determine the degree of engagement of the beneficiaries of PRSP programs and/or policies;
- Assess whether participants have experienced any changes in child poverty because of PRSPs or any other factor(s);
- Engage stakeholders/users in order to gauge their level of satisfaction in child poverty reduction; and
- Collect any recommendations that may be applicable to improve PRSP effectiveness in the areas of study.

The initial strategy aimed at conducting four focus groups: three to take place in the city of Managua and one to be conducted in the outskirts of the capital city. Conducting the proposed focus group was contingent upon the support obtained from field contacts. Hence, due to time constraints and obstacles associated with organizing focus groups, such as limited accessibility to communities, the team was able to organize only one focus group with children.

Carrying out a focus group with children was a key component of the methodology for two reasons. First, children were considered the study’s primary stakeholders. Being keenly aware of the shortcomings of PRSPs, and other poverty reduction initiatives, there was a general concern to integrate child-centered perspectives. While there are evident limitations of child and infant inclusion into participatory processes, it is also possible to engage children of specific age cohorts to include their perspective into developmental processes.

In order to engage children effectively, a dynamic exercise was developed to obtain children’s perspectives on poverty, access to basic services and obstacles/recommendations to access these services.
By engaging children in the discussion of poverty, the team aimed at identifying children’s perspective in the study area. However, the method, as it was carried out, yielded limited results mainly because the proposed strategy required a lengthier discussion with the children in order to obtain the desired results. The group of 22 students interviewed consisted of 8th, 9th and 10th graders from a primary school in Managua. The allotted time to conduct the focus group was limited to 30 minutes as opposed to the desired 60 minutes. The methodology was adapted on the spot and the team asked only some of the questions anticipated.

An important aspect to consider when conducting focus groups is to prepare in advance different strategies, which can be used at different contexts and timeframes. The children group was confirmed last minute and was conducted under the supervision of the school principal and classroom teacher, which did not allow the team to have a more relaxed conversation with the students. For future studies it would be useful to have more field time to adequately organize the focus groups based on the needs of the study. Similarly, designing a flexible plan that takes into account changes that can occur while in the field will allow researchers to better adapt the methodology.

**Group meetings /Participatory workshop**

Group meetings/participatory workshops was also an effective method to reach many people rapidly and gain insightful information. In addition to participating in simultaneous discussions with various community members, these meetings provided the team with the opportunity to conduct one on one observation of individuals and their environment. Attending these meetings enabled the team to contact and speak with community leaders about the conditions of children and obtain further resources to widen, strengthen and complement the study.

The team was able to participate in two workshops on children poverty and human rights with community members. Both meetings enabled the team to engage individuals from the community to discuss their perspectives on the state of child poverty in Nicaragua, the critical condition of children in their community, as well as discuss major challenges their community faces to access better services and improve the lives of their families.

Based on the participation in these community meetings, the team was able to arrange a site visit to one of the poorest communities in Managua, La Chureca, which is the capital city’s local dump. The site visit proved to be an asset to the study as it provided a picture of the severity of poverty conditions in Nicaragua and how these conditions can affect children.

**Observations**

Field observation is a necessary component of any holistic impact assessment strategy. This method proved to be especially important in the study’s assessment of a methodological approach. It allowed the developing of concerns and questions that could be integrated into interviews, focus groups and questionnaires. After each field site visit, the team met to reflect and discuss findings or ways of improving the observation exercise.

Building on pre-field work research, as well as focus groups and interviews, field observation visits informed the research on several levels while allowing for groundwork and methodology
assessment. Additionally, the observations also enabled the team to assess the status of implementation or non-implementation of particular projects associated with the PRSP.

**Individual Profiles**

In its initial stages, the methodology proposed conducting individual profiles of selected stakeholders. The intent was to thread the study with profiles from individuals who have worked on the PRSP process and have significant and relevant insight. Initially, the study targeted 6 to 10 individuals to be selected from the stakeholder interviews. From the target list, the limited amount of time in the field allowed two profile interviews to be conducted. The initial proposal called for the selection of individuals from a pool that is gender balanced, involved in poverty policy, and included children and community wisdom. The two interviews conducted did not meet these requirements and thus were excluded from the final report.

However, the method remains a key component of the impact assessment strategy as it has the potential to provide insightful information about perceptions and the reality of poverty reduction strategies at the community and national level.

**Matching Data through “Triangulation”**

Our triangulation consisted of combining the findings from primary and secondary data to generate richer and more robust findings. In particular, triangulation enabled an acceptable degree of objectivity to the subjective perspectives of the various stakeholders.

The triangulation technique was applied at different levels. During the field, after each visit or meeting, data was gathered and discussed in order to reflect on the methods utilized to assess whether the techniques were working or not and what could be done to improve upon each. Collected data were cross-checked, which enabled the team to validate each finding. By combining data collected from each method, quantitative and qualitative, in particular, budget analysis, in-depth interviews, observation, and desk reviews, the team was able to validate the findings and hoped to overcome the weakness, or intrinsic biases and the problems that come from a single method study.

After returning from Nicaragua and analyzing the information obtained, the team dissected data from the interviews and other resources, such as reports from local institutions, to conduct a post-field triangulation.

In order to carry out triangulation, the team identified key analytical themes and developed the study findings which provided a reflection of in-depth analysis of each of the areas mentioned above and a collective understanding of the information these methods brought to light. The basis of the study was to use triangulation with the idea of bringing all the findings together to draw attention to the key issues that highlighted PRSP impact on child poverty reduction. Triangulation enabled our team to obtain confirmation of findings through convergence of different perspectives. The point at which the perspectives converged was seen to represent reality.
b) Team-work strategy

Our six-person team traveled to Managua, Nicaragua from March 25\textsuperscript{th} to April 4\textsuperscript{th}. In preparation to our arrival, we have contracted a research assistant. The individual contracted was referred by a New School University colleague who worked with the consultant in Managua in the areas of PRSPs and child poverty. The consultant was well connected and assisted us in coordinating meetings with ministries and NGOs, translating during meetings (when necessary) and advised us on local customs. After much discussion, the team decided to contract this individual considering that the week prior to our arrival Nicaragua celebrates Holy Week and it became quite challenging to coordinate appointments when most of our contacts were getting ready to take the holiday vacations. The local consultant has proven to be a resourceful addition to our field work strategy and her assistance, although somewhat limited due to budgetary constraints, would be useful in various aspects of our study.

Due to time and resource constraints, we focused our research in the capital city of Managua and we are restricting our qualitative analysis to PRSP policy actions that have already been implemented. While in Nicaragua, in order to both maximize our time and energy as well as to meet as many key actors as possible, we divided our team into three groups of two people. We took into account language proficiency and expertise in each of the study areas to pair team members. Each team had a Spanish speaking person and when necessary, an interpreter/research assistance joined the team.

Each team member had a designated role to play while conducting meetings or interviews. One person asked the questions prepared for the meeting (see annex) so as to take a more engaging role during the interview. The other team member took notes of the responses, but more importantly, made observations of the meeting. The goal of this task was to obtain insights and information concerning the study area (for instance, water and sanitation), while reflecting on the response we received and gauged the interest and efficiency level of our methodology.

This strategy was devised understanding the importance of maximizing resources and taking into account that a large part of our field research includes in depth interviews with the identified stakeholders. It is important to add that this level of observation was the team’s guiding principle during our field work. Throughout our research, we evaluated our methodology so that we may reflect on the tools we are utilizing to assess what is working, what is not working and how can we improve our approach.

We devised this approach as it would provide us with a reasonably comprehensive range of qualitative data regarding child poverty reduction. Using the pre-field work mapping approach we interviewed primary beneficiaries and implementers of the specific policies of the PRSP and asked specific questions about the project and the target population directly affected by that policy. For example, if we were examining child poverty through the indicators for safe drinking water, we would interview the following: 1.) An official in the Ministry of Health or Water Works 2.) Water & Sanitation implementation staff at Save the Children 3.) And finally conduct interviews and/or focus groups in communities where safe drinking water policy actions have been implemented.

This strategy would provide us the opportunity to triangulate the findings from our secondary research data with the results of our primary fieldwork.
c) Field techniques

During our field research we stumbled upon useful techniques for primary data gathering. Comments are organized in the following groups: writing interview questions, planning interviews, conducting interviews, observing interview methods, deciding on focus groups, sequencing of interviews, upon arrival exploration, finding relative community members to interview and problems associated with “research fatigue.”

Writing interview questions

- As for interviews in any context, it was important not to lead in questions.
- Our definition of child poverty included our 7 indicator areas. When we asked questions about “child poverty” we needed to specify which indicator areas we were referring to, so that the interviewee would understand the meaning of our question.
- A local collaborator needed to be hired to review questions and assure they were culturally relative, practical and ethical.
- In writing interview questions it was important to understand as much as possible the people we are interviewing. Thus, it was important to do background research about the organization and find out how, if at all, they were involved in the PRSP. We found it helpful to use two separate sets of questions for civil society, one for the groups directly associated with the PRSP and one set for groups who were not.
- We made a chart/tool to use for the week plan. In it was a list of all the appointments we had, a background area to fill in the main objectives of the organization and the areas to which the organization will benefit us. The part that took the most time, yet was the most useful was the “key questions/what we want to know” section. This reason this section was very important is two fold: firstly it helped us focus the interview accordingly, allowing us to be in agreement of the objective of the interview. Secondly, these questions helped with the introduction; they enabled the facilitator to explain what the reasons were for us being there.

Planning Interviews

- It is important to call and confirm meetings every morning.
- One must take into consider tardiness (especially when it is culturally assumed). Also, take into consideration that when a translator is involved, the interview takes double the time to conduct. Split into 2-3 groups to maximize effectiveness.
- It is useful to make a chart with the following columns for each interview:
  - Who is the interviewee & what time is the interview
  - What is the background info on the organization
  - What are the key things we want to get from the interview
  - What are the key questions to ask for the interview
  - What is the structure of the interview: formal or informal
  - Who will be attending the interview and what role does each attendee play (translator, method observer, etc.)
Conducting the Interview

Each interview began with an introduction. The introduction laid the plan for the interview: why we were there, what we wanted to know, why we wanted to know it, and how that interview would play into our larger plan. The introduction was very important because it allowed the interviewees to know that we had studied their organization, done background research and did not need to use the time understanding what they did, but to understand our objective. Constructing the interview in this way, from the beginning, showed a concerted effort on our part and allowed for a more fruitful interview.

Regarding the introduction, we discussed whether it was too upfront to divulge our mission and objective. Should we say we are from UNICEF or say we were students? We planned to decide on this on a case to case basis.

- One person was the facilitator. Facilitator was in charge of: making sure interview objectives were prepared with the group, introducing group to interviewees and giving overview of our reasons for interviewing, leading and focusing the interview, asking questions and follow up questions and gathering the after interview work from all attendees.
- One person was the Spanish note taker and one person was the English note taker. Ideally it would be good to have both Spanish and English note takers so they could compare notes as well as notice the usefulness of the translator.
- One person was the translator. The group came off as more professional with a translator.
- One person was the method observer. This was to assure the method was appropriate and to analyze how people responded to certain questions in specific situations.

Method Observer

We discussed going into the interviews with specific categories to be able to easily classify things we observe. However, that would mean we were already implying things in our findings. We decided we would focus on writing everything and in a couple of days we revisited the question and start putting things into categories. Some of the things we talked about to look for were:

- Gender situations (how diverse of a group we are, how our interviewees respond)
- The response generated from certain specific questions, especially sensitive questions

Focus Groups

It was not useful to mix levels in focus groups (ie. Community members with institutional people) because it might cause bias. There were advantages and disadvantages of mixing community members from different communities. Benefits of having one community included having a direct link to the people, low cost of transportation from different places and a holistic understanding of one community’s perspective.
Benefits of mixed community focus groups included having different perspectives and allowing for a comparative analysis. Thus, when deciding on focus groups these things needed to be taken into consideration.

**Sequencing of Field Research**

We spoke about what we thought would be the most effective “sequence” of meetings and interviews. Should we begin with community groups and beneficiaries or at the institutional level. We decided it would be best to begin with “local wisdom,” that is, get a sense of the situation around child poverty here. Ideally, it would be best to get to know the area first, and then decide who to choose for interviews and what to ask. Since we did not have that opportunity, we decided it would be best to meet with UNICEF first as well as find a local person, invested in the field of child poverty, to discuss our interview ideas and questions with.

**Upon Arrival Investigation**

Our first encounter with a Nicaraguan was with Henry, the cab driver from the airport. We informally asked him questions while in the car with him. He explained the situation at a park that we passed; there were hundreds of people in hammocks, lined up to receive free food, and basically, living communally together. Henry told us that it was part of a protest that has lasted over a month. The protest was a result of an American company using pesticides. Those pesticides ended up killing and deforming many, while others remained very ill. They were trying to get the government to sue the company for its abuses. This short car ride, less than 20 minutes, gave us inkling into the eyes of a Nicaraguan. We learned that they realize how poor the country is and see it as a problem getting worse. We began to see how open Nicaraguans were to share such info.

**Community Member Interviews**

It was concluded that the best method for finding community members was through the Social Network approach. It was much easier to find cooperating and useful interviewees through asking organized groups, including NGOs and CBOs, then randomly on the street.

**Research Fatigue**

We met with a children rights group who explained to us research fatigue; one of their complaints was that there are always lots of people coming to interview and film them, but they never came back and they never help. It was important to be aware of research fatigue, or the name given to a group of people who were constantly being researched, because interviewing them did not yield accurate results and added to the hardships the interviewees face. To compensate for such a thing, it was important to explain why we are there- we were simply students, studying child problems; we did not come bearing gifts or help, only to research. In this way, the group did not feel abused if they did not receive any assistance from us.
5.3. Annex III: Contact list

In anticipation to interviews, we have developed a contact list. This contact list was assembled based on information provided by the Nicaraguan PRSP of the different stakeholders participating in the programs and policies proposed by the strategy in each area of our study. We looked for government/ ministries, NGOs and civil society groups engaged with the PRSP and identified the following stakeholders:

<table>
<thead>
<tr>
<th>Policy Action Areas</th>
<th>Executors</th>
</tr>
</thead>
</table>
| Health              | • Ministry of Health (MINSA)  
                      | Contact: Luisa Marenco (Social Communications)  
                      | comunicacionsocial@minsa.gob.ni  
                      | • Supplementary Social Fund (FSS)  
                      | • Emergency Social Investment Fund (FISE)  
                      | Contact: Sr. Jaime Icabalceta  
                      | (505-2) 78-1664, 78-1665, 78-1668, 78-1669  
                      | • Social Security Institute (INSS)  
                      | • Ministry of Education, Culture & Sports (MECD)  
                      | Contact: Mrs. Maria Thorny Fabiola  
                      | Social Communication  
                      | Email espinosam@mecd.gob.ni  
                      | Telephone 265-14-51 Ext 248  
                      | • Rural Development Institute (IDR)  
                      | • Ministry of Agriculture and Forestry (MAGFOR)  
                      | Contact: Kar It Alvarado  
                      | Communication and Information  
                      | Telefonos: (505) 276-0200 - 276-0204  
                      | karla_alvarado@magfor.gob.ni  
                      | • Supplementary Social Fund (FSS)  
                      | • Emergency Social Investment Fund (FISE)  
                      | Contact: Sr. Jaime Icabalceta  
                      | (505-2) 78-1664, 78-1665, 78-1668, 78-1669  
                      | • Ministry of Development, Industry and Trade (MIFIC)  

Food
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<tr>
<th><strong>Water</strong></th>
<th><strong>Sanitation</strong></th>
</tr>
</thead>
</table>
| • Agricultural Technology Institute (INTA)  
  **Contact:** C. Estrada  
  Communication Direction and Spreading  
  **Telephone:** 278-1305 e-mail: cestrada@inta.gob.ni | • National Water & Sewerage Company (ENACAL)  
  **Contact:** Violeta Gross, Vice Gerente de Informatica Administrativa  
  vgross@enacal.com.ni |
| • National Water & Sewerage Company (ENACAL)  
  **Contact:** Violeta Gross, Vice Gerente de Informatica Administrativa  
  vgross@enacal.com.ni | • Water & Sewerage Regulatory Institute (INAA)  
  **Contact:** Phone- Telef.: (505) 266-7882, 266-7888, 266-8445, 266-7846, 266-8451 |
| • Water & Sewerage Regulatory Institute (INAA)  
  **Contact:** Phone- Telef.: (505) 266-7882, 266-7888, 266-8445, 266-7846, 266-8451 | • Emergency Social Investment Fund (FISE)  
  **Contact:** Sr. Jaime Icabalceta  
  (505-2) 78-1664, 78-1665, 78-1668, 78-1669 |
| • Municipal Development Institute (INIFOM)  
  **Contact:** Phone- 266-6050, 266-6531 | • Municipal Development Institute (INIFOM)  
  **Contact:** [http://www.inifom.gob.ni/](http://www.inifom.gob.ni/)  
  [http://www.inifom.gob.ni/contactos.html](http://www.inifom.gob.ni/contactos.html) |
| • Emergency Social Investment Fund (FISE)  
  **Contact:** [http://www.fise.gob.ni](http://www.fise.gob.ni) | • Emergency Social Investment Fund (FISE)  
  **Contact:** [http://www.fise.gob.ni](http://www.fise.gob.ni) |
| • Water and Sewerage Regulatory Institute (INAA)  
  **Contact:** [http://www.inaa.gob.ni](http://www.inaa.gob.ni)  
  De la Mansión Teolinda 3 cuadras al sur  
  Telef: (505) 266-7882, 266-7888, 266-8445, 266-7846, 266-8451  
  Fax: (505) 266-7917, 266-7227, 266-8447  
  Assistant Executive, President Donald Guadamuz  
  dguadamuz@inaa.gob.ni | Organizations involved in Sanitation/Water issues:  
  • Agua Para La Vida: [http://www.aplv.org/index.html](http://www.aplv.org/index.html)  
  • Social Emergency Fund (FES) |
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<tr>
<th><strong>Education</strong></th>
<th><strong>National Electricity Company (ENEL)</strong></th>
</tr>
</thead>
</table>
| **Ministry of Education, Culture and Sports (MECD)** | **Contact:**  
http://www.mecd.gob.ni/  
Sra. Celia María Quibilan (Intern)  
Eventos y Relaciones  
Email: quibilanc@mecd.gob.ni / Teléfono: 265-00-29 ext 247 |
| **Emergency Social Investment Fund (FISE)** | **Contact:** [http://www.fise.gob.ni](http://www.fise.gob.ni) |
| **Adult Basic Education Program (A Spanish Organization/Project)** (PAEBANIC) | **Contact:**  
http://wwwn.mec.es/educa/jsp/plantilla.jsp?id=211&area=coop-ib  
paeba@educ.mec.es (a general email address: there were no specific contacts for anyone) |
| **National Universities’ Council (CNU)** | **Contact:** [http://www.cnu.edu.ni/](http://www.cnu.edu.ni/)  
Coordinador: MSC Ing. Arturo Collado Maldonado  
Secretario Técnico, CNU - e-mail: cnuni@ibw.com.ni |
| **Ministry of Finance (MHCP)** | **Contact:** [http://www.hacienda.gob.ni/](http://www.hacienda.gob.ni/) |
| **Supporting the Nicaraguan Education System Project (ASEN)**  
**Supplementary Social Fund (FSS)**  
**System for the Improvement of Education (SIMEN)**  
**Bilingual and Intercultural Education Program for the Atlantic Coast (FOREBICA)**  
**Basic Education Program (BASE)**  
**APRENDE project**  
**Center of Education for Democracy (CED)** | **** Could not find any contact information for the above |
5.4. Annex IV: Qualitative interview questions

Stakeholder Mapping

a. Primary and Secondary Stakeholders

A Stakeholder Mapping is used in the methodology as part of our qualitative data analysis in order to determine the interests and possible impact levels of different groups on the PRSP and child poverty.

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>PRIMARY STAKEHOLDERS</th>
<th>SECONDARY STAKEHOLDERS</th>
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<tbody>
<tr>
<td>-Children immunized under 1 year old</td>
<td>1) The World Bank</td>
<td>Listed in PRSP:</td>
</tr>
<tr>
<td>-Maternal mortality rate</td>
<td>2) International Monetary Fund</td>
<td>1) MINSA – Implementing PRSP agency</td>
</tr>
<tr>
<td>-Infant mortality rate</td>
<td>3) Government of Nicaragua</td>
<td>2) FSS</td>
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<td></td>
<td></td>
<td>3) FISE</td>
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<tr>
<td></td>
<td></td>
<td>Other Government agencies/ affiliates (not listed in PRSPs):</td>
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<tr>
<td></td>
<td></td>
<td>1) SECEP – Evaluation of external health policies 1997-2002</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2) INSS</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) PMSS</td>
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<tr>
<td></td>
<td></td>
<td>NGOs (not listed on PRSPs):</td>
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<tr>
<td></td>
<td></td>
<td>1) Red Cross: working in Managua District IV to:</td>
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<tr>
<td></td>
<td></td>
<td>Improve awareness of the 16 Key Family Practices; Improve health care for pregnant mothers in the home and the community; Improve personal, family and community hygiene practices; Improve health care coordination among networks and community groups.</td>
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<tr>
<td></td>
<td></td>
<td>2) SOS Children’s Village: SOS Children's Villages revolve around the effort to give children who have lost their parents or who are no longer able to live with them a permanent home and a stable environment. The SOS Children's Village family-like structure is formed by four basic principles: mother, brothers and sisters, house and village.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3) The Dennis Martinez Foundation: Shelter in Leon, Nicaragua. The primary purpose of the shelter is to provide a safe, secure and warm</td>
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</tbody>
</table>
atmosphere to orphan, homeless and abandoned children; many of them victims of hurricane Mitch. We currently provide meals, education, clothing and medical care to over 200 children, ranging from newborns to 16 year olds.

4) Action Aid: Sister organization Ayuda en Accion working in Leon to help community members regain self respect by developing skills and abilities to identify their problems and find adequate solutions.

5) TESIS: The Association for Workers for Education, Health and Social Integration. They work with street children with HIV/AIDS and addiction to glue sniffing.

6) CODENI: Coordinadora Nicaragüense de Organismos no Gubernamentales que trabajan con la Ninez y la Adolescencia. The NGO alliance looks at poverty from the perspective of children and emphasizes PRSPs weaknesses to address child poverty. In terms of access to health care, CODENI draws attention to the fact that PRSPs offer a reactive rather than proactive intervention to health care. A major weakness of PRSPs is their lack of inclusion/ emphasis of domestic violence as a public health concern, and its incidence on women, childhood and adolescence.

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<thead>
<tr>
<th>INDICATORS</th>
<th>PRIMARY STAKEHOLDERS</th>
<th>SECONDARY STAKEHOLDERS</th>
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<tbody>
<tr>
<td>Access to Shelter</td>
<td>Inter-American Development Bank IMF</td>
<td>INVUR FOSOVI</td>
</tr>
<tr>
<td></td>
<td>World Bank</td>
<td>Auxiliary Entities in the Municipality of Managua (note: the auxiliary entities are not limited to the following):</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*HABITAR, Ninette Morales.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>-30 houses in Waspan Norte: A solidarity project</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Institute of Social Security and Human Development (ISSDHU): Rose Emelda, tel # 2227101</td>
</tr>
</tbody>
</table>
Habitation project for the city of Tipitapa

Target Group
Individuals who receive funds from FOSOVI
Groups that receive funds from FOSOVI
(see above for specific individuals or groups who have received funds)
Researchers
Jessica Athens from WCCN based in Wisconsin
We should attempt to interview her when we get back possibly an email interview. She is very knowledgeable about Housing issues in Nicaragua.

Civil Society working in sector BUT unrelated to PRSP
The Nicaraguan Human Rights Center (CENIDH)
cenidh@ibw.com.ni
Habitat for Humanity Nicaragua

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<tr>
<th>INDICATORS</th>
<th>PRIMARY STAKEHOLDERS</th>
<th>SECONDARY STAKEHOLDERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Shelter</td>
<td>World Bank</td>
<td>Save the Children</td>
</tr>
<tr>
<td></td>
<td>IMF</td>
<td>Nicaragua Water and Sewage Company (ENACAL). Tel. 505 266 78 63</td>
</tr>
<tr>
<td></td>
<td></td>
<td>E-mail: <a href="mailto:enacal@enacal.com.ni">enacal@enacal.com.ni</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Web: <a href="http://www.enacal.com.ni/">http://www.enacal.com.ni/</a></td>
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<tr>
<td></td>
<td></td>
<td>INIFOM</td>
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<tr>
<td></td>
<td></td>
<td>Target Groups</td>
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<td></td>
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<td>Leon</td>
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<td></td>
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<td>Chinandega</td>
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<td></td>
<td></td>
<td>Marginal Sections of Managua</td>
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<td></td>
<td></td>
<td>Nueva Guinea</td>
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<tr>
<td></td>
<td></td>
<td>These are the areas in which projects have been carried out.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Civil Society working in sector BUT unrelated to PRSP</td>
</tr>
</tbody>
</table>
### Qualitative Interview Questions

#### a. Revised Interview Questions for each stakeholder

#### Governmental Level

1. What is the current situation of child poverty in Nicaragua?
2. What are the major obstacles to the reduction of child poverty in Nicaragua?
3. What role does the PRSP play in the reduction of child poverty (specifically ask health, education, etc.)?
4. Overall, what do you think is needed in order to increase the effectiveness of the PRSP in the reduction of child poverty?
5. The PRSP seeks to improve coordination among networks and community groups. Have you been involved in this initiative? Please explain.

Civil Society/ NGO – Directly Related with Nicaragua’s PRSP

1. What is the current situation of child poverty in Nicaragua?
2. Have you witnessed any changes in child poverty in the areas that you worked during the last 4 years?
3. What are some of the challenges you faced in your work on child poverty reduction?
4. As one of its stakeholders, how are you affiliated with the PRSP? Are you getting resources, technical assistance or support of any kind? If so, has this aided in the changes you have witnessed in the last 4 years in your areas?
5. The PRSP seeks to improve coordination among networks and community groups. Have you been involved in this initiative? Please explain.

Civil Society/ NGOs – Not specifically Related with Nicaragua’s PRSP

1. What is the current situation of child poverty in Nicaragua?
2. Have you witnessed any changes in child poverty in the areas that you work during the last 4 years?
3. What are some of the challenges you face in your work on child poverty reduction on the institutional level? And the local level?
4. Can you comment on the process of involvement regarding the PRSP?
5. In terms of monitoring and evaluation, what types of methods do you employ to measure the impact of your programs?

Community Members

1. What are the main problems children faces in the community?
2. Are there any mechanisms in place to address these problems? If so, by whom?
3. Have you witnessed any changes in child poverty in the last 4 years? If so, can you explain?
4. What do you believe is necessary to diminish child poverty?
5. Do you know about PRSP efforts to reduce poverty?

b. Question interviews for each indicator

The following sets of questions are organized by the seven indicator areas we chose to define “poverty.” Our objective is to use triangulation, or by understanding an area based on numerous perspectives, to indicate whether or not these areas have been improved since the implementation of the PRSP. Each indicator area has four sets of questions, one for each of the following: children, community members, civil society (NGOs, CBOs) and government officials. By asking these diverse groups of people, we attempted to get the needed information that would address the effectiveness of the PRSP. These questions would be reviewed with people in the field to ensure that they are culturally appropriate and reasonable. For each specific interview
we reviewed the relevant questions and posed a distinct set of questions for the person/people at hand.

Ideally, we would have conducted pre-testing for each questionnaire set in order to evaluate their effectiveness. However, considering the study’s timeline, these questions were treated as preliminary in an attempt to leave room for improvements based on feedback from our field contacts or after assessment of each interview. After writing the interview observations and conducting the on-the-ground pre-testing, the team assessed the effectiveness of the questions. In the event they were deemed inappropriate, we reformulated the question and continued on-the-ground testing.

The following twenty questions were formulated mid-week when we were able to better target our inquiries. From that point on, we used the following questions to conduct our interviews. The second set of questions enabled the reader to see the progress made in better aligning our questions with our goals.

**Access to Health Care Services**

In an attempt to better understand the incidence of access to health care and how it affected child poverty, the following questions drew from the PRSP and other national policies and activities related to the area of study. The indicators selected for this particular assessment are: Percentage of children immunized under one year old (measles, Polio, BCG and DPT3); Percentage of maternal mortality rate per 100,000 live births; and Percentage of infant mortality rates per 100,000 live births.

### I) Children
1. Have you participated in any program on vaccinations for diseases such as measles, polio etc?
2. Do you go to the doctors often? Do you remember the last time you went?
3. How far do you have to travel to see a doctor? Or do they come to your house?
4. Do you have to wait long to see a doctor once you are in the clinic?
5. Do people come to your house to give you medicine?

### II) Community Members
1. In 2001 the government rolled out the PRSP in order to formulate a strategy to tackle poverty reduction. Are you aware of PRSPs, what they are? If so, how did you find out about it?
2. Have you been consulted or participated on PRSP programs?
3. In the past three years, have you noticed improved health services to help children, and their families, access health care services?
4. How do you feel about the health services provided to pregnant women?
5. Do you think pregnant women have adequate access to health care? What should be improved?
6. Do you think mothers have adequate information about the importance and access to immunization for their children?
7. What do you consider as some key obstacles to prevent child poverty?
8. What do you recommend should be done to prevent child mortality?

III) Civil Society/ NGOs
1. What role has civil society played in PRSP formulation and implementation? Do you think the needs and demands of civil society were included in the PRSP?
2. What instruments are available for children to approach and influence policymakers, institutions?
3. Do you think the PRSP in Nicaragua is effective in reducing child poverty? Are children targeted from your view, or are they seen as part of a household?
4. What initiatives do you think are most effective in eradicating child poverty? Can you name some of these strategies and why do you think they work?
5. In addition to the PRSP, other assessments indicate a higher incidence of poverty in rural areas as opposed to urban areas. What programs currently in existence do you consider effective in minimizing child poverty in rural areas? How big of a problem is access to health services?
6. Do you believe the National Health Plan has had a positive impact in increasing access to health care for children and their families?
7. What type of support should the government provide to enable civil society improve access to health care for mothers and children? How about the international community?
8. Improved health care coordination among networks and community groups seems to be a prevalent objective among government agencies and community agencies. How do you think this objective can be better achieved?

IV) Government Agencies
1. The PRSP was undertaken in 2001. As a result, various policies and programs have emerged such as the National Health Plan (in 2003), FONMAT, MI FAMILIA and
PAININ. Considering the time elapsed since the implementation of these policies, which policies do you consider being most successful in targeting child poverty reduction?

2. Implementation of the PRSP is a challenging process: from policy coordination, resource allocation and prioritization to the inability to reach and/or engage those who benefit the most from the poverty reduction strategies. What are the major challenges that prevent Nicaragua from achieving the goals set forth in the PRSP? More so, how do these challenges prevent child poverty reduction?

3. What instruments are available for children to approach and influence policymakers, institutions? Are these methods effective?

4. Does MINSA receive adequate support (in terms of budget and policy support) to implement PRSP policies?

5. Improved health care coordination among networks and community groups seems to be a prevalent objective among government agencies and community agencies. What types of policies or programs would help achieve this objective?

6. Would you agree that “on average, poorer households have higher fertility rates and larger families, as well as higher maternal, infant and child mortality.”? If so, do you think that FONMAT and the Social Protection Safety Net programs would benefit from additional support (in terms of policies, programs of financial aid) to improve their impact in child poverty reduction?

7. How can the government of Nicaragua improve the effectiveness of their PRSP in terms of child poverty reduction?

8. How can the FYIP (five-year implementation plan) ultimately help child poverty reduction? Is it on the right track?

**Water & Sanitation**

In an effort to understand if water and sanitation systems have improved since the PRSP implementation, we prepared the following questions to be used as guidelines. These questions focus on the management, access, quality and the ability to meet community needs in terms of water and sanitation.

1) **Children**

1. Where do you go to the bathroom?

2. Did you learn about how to go to the bathroom in school?
3. Where do you get water? Whose job is it to fetch water in your household?
4. How do you wash your hands? Do you have a place in your household where you wash your hands? Why do you wash? Did you learn how to wash your hands in school?
5. Is there a program at your school that teaches you about water and sanitation?
6. Do you have a toilet in your house? Do you use it?
7. Do you have a toilet in your school? Do you use it?

II) Community Members
1. Is the water system working satisfactorily? What problems have occurred with the water supply in the past?
2. What suggestions do you have to improve water supply? What is needed to make these suggestions happen?
3. How do you feel about the privatization of the water system? Who do you think is the best party for monitoring and maintaining the water system?
4. Do you know what the PRSP is? How has the PRSP aided you in water and sanitation? Have you seen any visible changes in the last couple of years?
5. Has your correspondence with PRSP people been useful? Do you feel as though they respond to your needs?
6. Have you seen any of the resources from the PRSP? How was the money allocated spent?
7. Were you consulted at all regarding the PRSP in 1999? If so, can you please comment on this experience?
8. Where do you defecate? Do you have a toilet? Do you have a way of disposing your waste? Do you use your toilet? Who built it? Who does repairs on your toilet?
9. Where do you get your water? Is it clean? Are you sick often?
10. What recommendations do you have for an improved sanitation system?
11. What recommendations do you have for a more effective poverty strategy? Do you feel that your voice is heard in this process?
12. What needs specifically do children have? What can be done to better meet child needs?
III) Civil Society

1. What obstacles exist in Managua to secure a sustainable & effective water system?
2. How has the PRSP aided you in water and sanitation?
3. Has your correspondence with PRSP people been useful? Were you consulted? Do you feel that your input has been addressed?
4. Have you seen any of the resources from the PRSP? How was the money allocated spent? Is the money allocated from the PRSP monitored? If so, how do you feel about this process?
5. Do you feel that community members are aware of the problems associated with depositing waste in common areas? What steps need to be made to make this awareness? What role has your organization or the PRSP played in this?
6. Are the most vulnerable populations targeted in the PRSP? Do you feel that children need to be better targeted in regards to water and sanitation?
7. What recommendations can be made in making the PRSP more effective? Do you think the PRSP is an effective tool for alleviating poverty? What are its strengths and weaknesses?

IV) Government Agencies

1. Ten percent of the area of land in Nicaragua is water. Does Nicaragua face shortages of water or is there an abundant supply?
2. Is it an issue of management?
3. What role do you think poor environmental control has had on reducing potable water?
4. Comments from consultation with urban and rural focus groups of poor and extremely poor individuals and grassroots leaders in the PRSP proposed that potable water and sanitation services, especially in rural areas, be run by community organizations. What do you see as the strengths and weaknesses in this method?
5. In November 1997 the National Assembly approved laws to separate the regulation and operational activities of water and sewage. Has this reform been effective in Managua?
6. In Managua, with a population of over 1.5 million people, over 50% of households are connected to sewerage, but no there is facility to treat waste. Waste is dumped into
Lake Managua. What progress has the PRSP made in reducing this or cleaning the water source?

7. According to the Second SGPRS 2003 Progress Report the PRSP has met its 2002 target by 103% for “national coverage of drinking water” and “access to safe water in rural settlements.” However, these numbers do not reflect any increases for the “most vulnerable” populations. How does the PRSP expect to address these groups for water and sanitation?

8. The mortality rate in Nicaragua for sicknesses linked to diarrhoea is 73 per every 1,000 people, mostly under the age of 5. How do you feel that this vulnerable population can be better taken care of?

9. Overall, what are your plans for increasing the effectiveness of the PRSP in terms of water and sanitation? Do you feel more resources have to be given by donors, community members or CBOs to achieve effectiveness?

Education

I) Children

1. When was the last time you attended school? Do you attend everyday?

2. How many siblings do you have? Ages? Do your siblings attend school? Why or why not?

3. Did you complete primary school? If not, why?

4. If completed primary school, are you enrolled in secondary education?

5. Did you complete secondary education? If not, why?

6. What do you think about school? Do you like school? What do you learn about?

7. What do you think it could be done to improve school?

8. How many students are in your classroom?

9. Do you have school supplies and books?

10. How far do you have to travel to get to school? How do you get there?

11. Have you noticed any changes in the education system within the past four years? If so, what are those changes?

12. Would you consider the education system better or worst than four years ago?
II) Community Members
1. How many children do you have?
2. Do they all attend school? If not, why? Did you attend school? If so, until when?
3. When was the last time your child/children attended school? If not recently why?
4. How old are you children and what grade are they in?
5. If applicable, did your children complete primary education, why or why not?
6. How many of your children are enrolled in secondary education?
7. Within the past four years have you noticed any changes in the education system, if so what are those changes, would you considered them good or bad?
8. What do you think could be done to improve the education system?
9. How far do your children have to travel to get to school?
10. Overall, how would you rate the education system in your community and why, excellent, very good, good or poor?

III) Civil Society
1. What do you know about the Poverty Reduction Strategy Paper? What do you think about the education policies in the PRSP?
2. After the implementation of the PRSP, have you noticed any changes in the education system? If so, what are those changes?
3. Has the education system improved over the years?
4. If so, do you think PRSP is one of the main causes or are there any other factors?
5. Do you think the PRSP target the improvement of children’s basic needs, especially in the education sector?
6. What do you think could be done in order to improve the education system?
7. What are the main problems children face today when attending school?
8. What do you think are the main reasons why children do not complete primary education?
9. Are there any regions in the country that has experienced significant improvement in the education sector? If so, what made these/this region/s so successful?
10. Overall, what do you think about the education system in this country and how would you rate it, excellent, very good, good or poor?
IV) Government

1. How would you compare the present education system opposed to five years ago? What role did the PRSP have in any of the changes noted?

2. Would you say that there have been improvements in the education system, if so what were the causes?

3. What are the main challenges PRSP faces towards improving the education system?

4. How satisfactory are the education policies implemented by the PRSP?

5. How well do children benefit from the PRSP policies?

6. What are the main challenges children faces in the education system today?

7. What is the education system lacking and how it could be improved?

8. The enrolment of children in primary education has improved significantly, however the percentage of children completing primary education remains low, what do you think are the main causes of this? How should this problem be addressed?

9. What are some accomplishments the education sector had gained through the implementation of PRSP?

10. Overall how would you rate the education system in Nicaragua?

Shelter

In an effort to understand if access to shelter has improved since the PRSP implementation, the following questions will be used as guidelines. These questions focus on the allocation of housing subsidies to communities and individuals, access to and the quality of shelter.

I) Children

1. Where do you live?

2. Do you sleep on the street? If so, where? With who?

3. How many people do you live with?

4. Do you have a cement floor? A mud floor?

5. How long have you lived there?

6. Do you feel safe? If not, why? If yes, why?

7. Do you sleep in a separate room from your family?

8. Do you have a roof? Do you know what it’s made from? What happens when it rains?

9. What do you like about your home? What do you dislike?

10. Was there ever a time where you and your family did not have a house?
II) Community Members

1. Do you know of individuals, groups or have you yourself received housing loans/help/subsidies to improve your home, change lots or build a new home?
   - From whom did you receive this loan?
   - How did you hear about it? When?
2. What information did you have to provide to receive this loan?
3. How have these housing improvements helped your day-to-day living situation?
4. Do you have children? How many? Ages?
5. Are you required to pay back the loan? If so, do you think that you will be able to do so?
6. Do you own/rent/borrow the land you live on? If yes, for how long? If no, why not? Where did you live before this?
7. Can you describe what your home was like before the improvements were made? (if there were improvements)
8. Have any community groups in your area formed to deal with the issue of shelter? If so, what positive things have they done for the community?
9. Are there any emergency shelters in your area? Who built them and under what circumstances were they built?
10. What are your living conditions like? What do you like, dislike about your home?

III) Civil Society

1. Have you received funds from FOSOVI? Are you a subsidy auxiliary entity?
2. Did you receive an increase in funds after FOSOVI was created?
3. How do you choose your beneficiaries? Who receives the money and what type of housing projects do you support? Is the recipient criteria given to you by FOSOVI? Are you allowed to commit funds to individuals who do not have repayment capacity?
4. What does your organization do to help children?
5. How do you feel about FOSOVI favouring municipalities over NGO’s to allocate subsidies/loans to communities and individuals?
6. Do you feel that there is full cooperation between INVUR/FOSOVI and your organization/civil society? Does a tension exist? Were you involved in the process of creating INVUR? Was the input of civil society given priority?
7. If the org is not an auxiliary entity able to allocate funds to individuals and groups, would they like to become one? If so, why? If not, why? Are there benefits or disadvantages?

IV) Government Agencies
1. In what way has the development of INVUR contributed to the goals set forth by the PRSP? What did the creation of INVUR hope to achieve?
2. In what way has the Housing Social Fund (FOSOVI) affected national housing?
3. What is the role of INVUR in the housing sector?
4. Does INVUR/FOSOVI have any specific programs that target children?
5. How does FOSOVI choose what municipalities, NGO’s, banks, etc will become auxiliary entities?
6. What real improvements (numbers) has the government made in the housing sector since the implementation of the PRSP? Do you feel that this is because of the creation of INVUR and the dismantling of BAVINIC?
7. In what way do you feel that the housing subsidies that FOSOVI provide reduce poverty?
8. How closely does your agency take into consideration the goals/indicators set forth by the PRSP?
9. Does your agency have any housing programs that specifically target children?
10. Are you able to explain the reason for the suspension of a few of the policy actions that were supposed to be executed (floor/roof construction)?

Food
The following sets of questions have been devised as a means of gaining deeper insight into the situation of food in Nicaragua. These questions focus on the level of malnourishment that is a consequence from limited access to food.

I) Children
1. Do you think that you generally receive enough food each day to be active and strong? Are you hungry often?
2. What have you learned from school about the prevention of malnutrition?
3. Has what you learned in school lead to behaviour changes for you or your family in the home?
4. What are some of the reasons why your family or members of your community might not be able to obtain sufficient food?
5. Are there any programs in your community that help you obtain more food?
6. What do you think can be done to reduce malnutrition, and allow children to grow up healthier?
7. Do any of you have siblings who suffer from illnesses due to malnutrition?
8. If so, how does your family deal with it?
9. In what ways might your government be able to assist children who suffer from malnourishment?
10. Do any of your families receive distributions of sugar, salt, and flour from the government’s Ministry of Health?

II) Community Members

1. How many children do you have?
2. What, if any, challenges do you face in securing adequate food for your family?
3. Are any of your children suffering due to inadequate food supplies?
4. If so, what problems are they having?
5. Is there anything being done by your family/community/local government to address these issues?
6. Do schools in this area have feeding programs? Do you receive help in the form of food or medical attention from anywhere?
7. What do you believe is necessary to diminish child malnutrition in this area?
8. Has Ministry of Health programming designed to promote breastfeeding and preventative health made an impact in your community?
9. Do members in your community have adequate access to fortified foods such as sugar,
10. Flour and wheat?
11. The Ministry of Health has promoted a number of initiatives for behaviour change that are implemented through schools, how do you assess these programs?
III) Civil Society/NGO

1. What is the mission of your organization in relation to malnutrition among children?
2. What challenges do you face at the community and government levels, in implementing your malnutrition programming?
3. What types of policies or actions at these levels might assist the objectives of your work?
4. Can you give us a sense of the changes (negative/positive) you have witnessed in malnutrition among children in the areas where you work? Do you feel that the PRSP has played a role in any of these changes?
5. How has the advent of the PRSP affected your organizations work in Nicaragua?
6. Can you give us an example of an area where your work has made a significant impact in reducing child malnutrition?
7. What has been the impact of Ministry of Health policy actions seeking to promote behavioural change in the areas of hygiene, breastfeeding, and preventative health care in the communities where you work?
8. Have you witnessed a wider distribution of vitamin fortified foodstuffs amongst the population your organization serves?
9. MINSA is currently in the process of designing a coordination scheme that seeks to improve inter-institutional coordination regarding child malnourishment. How do you think NGO’s/Civil Society should be placed in such a scheme?
10. What do you see as the greatest obstacle(s) to the reduction malnourishment of children in Nicaragua?

IV) Government/ Institutional Level

1. What applicable lessons was MINSA able to draw from the “Comprehensive Attention to Community Children” project?
2. What is the current status of MINSA’s policy action which seeks to design a scheme for inter-institutional coordination regarding child malnutrition?
3. What are the major obstacles to reducing child malnutrition within the country?
4. What measures are being taken to overcome these obstacles?
5. What types of tools, training or personnel would help the ministry in achieving these Objectives? What is needed? Has the PRSP allocated any resources for these needs?
8. What types of educational approaches has MINSA instituted surrounding behaviour change among families and communities toward a reduction of child malnutrition?

9. In terms of monitoring and evaluation, what types of methods does MINSA employ to measure the impact of programs for behavioural change?

10. Can you give us an example of some of the most successful community level initiatives you have implemented to promote healthy growth and development strategies for children?

11. What has been the outcome of the MINSA policy action which seeks to promote breastfeeding as a tool to reduce child malnourishment?

12. What measures have been taken to ensure that sugar, flour, and salt have been properly vitamin fortified and distributed? What obstacles exist to properly distribute these things?

Access to information
In an effort to understand if access to information has improved since the PRSP implementation, the following questions will be used as guidelines. These questions will gauge how access to information is viewed as part of a poverty reduction strategy and how individuals view its need.

I) Children

1. Do you read newspapers or books?
2. Do you/ your family own a TV? If not, would you like to own one? Why?
3. Do you/ your family own a computer? Do you have access to a computer? If not, would you like to own one? Why?
4. Do you/ your family own a radio? If not, would you like to own one? Why?
5. Do you watch TV? How often?
6. Do you listen to the radio? How often?
7. Do you read newspaper/ Books? How often?

II) Community Members

1. Do you have children? How old?
2. Can you buy newspapers or books for your children?
3. Do you/ your family own a TV? If not, would you like to own one? Why?
4. Do you/ your family own a computer? Do you have access to a computer? If not, would you like to own one? Why?
5. Do you/ your family own a radio? If not, would you like to own one? Why?

III) Civil Society

1. Do you think children have adequate access to information (such as newspapers, books, TV, Radio, etc?)
2. Do you think access to information is important?
3. Do you think access to information is part of the poverty reduction strategy? If yes, Why? If not, why?
4. How do you think children’s access to information can be improved?

IV) Government Agencies

1. Do you think children have adequate access to information (such as newspapers, books, TV, Radio, etc?)
2. Do you think access to information is important?
3. Do you think access to information should be part of the poverty reduction strategy? If yes, Why? If not, why?
4. How do you think children’s access to information can be improved?

Questions are tailored to address related concerns of the various groups or individual interviews specific to the areas of our study (education, shelter, etc). Additionally, we will develop a questionnaire, which will be used to create a profile of all individuals interviewed.

c. Focus Group Questions and Strategy

This focus group is designed for children. The amount of participants should be between 8 to 10 children. We want to have enough children that we could captured a variety of opinions, however we do not want the group to be too big, where it will be hard to keep up with the dynamics. Our main objective was to find out what children considered “poverty”. We also want to connect the children’s definition of poverty with our own definition. Having that in mind we would introduce the whole concept of the basic seven indicators by having the children rank them, and have a set of activities that would bring us to the impact of child poverty.

Activities:

1) Ice breaker: children will introduce themselves by saying their names, ages, and if they had one wish, what would they wish for?
2) Children would be asked to list down what do they consider poverty:

3) The facilitator will introduce the concept of the seven indicators. Children would be asked to rank the seven basic indicators: access to education, access to health, good nutrition, shelter, safe water, sanitation and access to information. They would also be asked to draw connections between the indicators.

4) Another list will be used to identify major problems children face in relation to poverty. Problems will be subsequently ranked.

5) Using the casual flow (tree) approach we will take the problem, that children consider to be the worst, and the roots will be the causes of the problem and the leaves will be the solutions to the problem.

6) Children would be asked: whether or not all the problems mentioned in activity 3 have improved within the last 4 years or gotten worst? (depending on ages)

7) Children will be asked: if you would have the power to fix all the problems related to poverty what would you do?
5.5. Annex V: List of interview dates and stakeholders

The following is a list of the dates and stakeholders interviewed:

Sunday, March 27\textsuperscript{th}

- Procuradoria para la defensa de los derechos humanos: interviewed community members from the Movimiento Comunal de la Chureca and Cristo del Rosario as well as the staff of the Procuradoria.

Monday, March 28\textsuperscript{th}

- CODENI – Luisa Molina
- Procuradoria para la defensa de los derechos humanos: follow up interview
- UNICEF Nicaragua – Kasper Andersen

Tuesday, March 29\textsuperscript{th}

- Soynica (Leonor Asociacion Soya De Nicaragua) - Luci Morren
- Habitar – Ninette Morales
- FISE – Ignacio Velez
- UNDP – Maria Rosa Renzi
- UNICEF - Fatima Ivette Sandino
- Coordinadora Civil – Violeta Delgado
- UNICEF - Nienke Swagemakers
- UNICEF - Jose Ramon Espinoza

Wednesday, March 30\textsuperscript{th}

- UNICEF - Victor Valdivieso
- Sociologist – Cirilo Otero
- WHO/OPS - Dr. Mario Cruz Penate and Dra. Marianela Corriols
- Tribuna del Consumidor

Thursday, March 31\textsuperscript{st}

- Accion Medica Cristiana - Dr. Francisco Gutierrez
- Hospital Vellez Pais
- Ministerio de Salud (MINSA) – Dr. Omar Malespin
- UNFPA - Jorge Campos
Ministry of Education and Culture (MECD) - Maria Espinosa

Friday, April 1\textsuperscript{st}
- Public School Visit- Centro Escolar Autonomo de la Piedrecitas
- Habitat for Humanity
- MiFamilia – PANIN, Blanca Ulmos and Red de Protection Social
- SILAIS - Dra. Yemira Sequiera Baez and Dra. Sandra Junieth Palma
- Dos Generaciones – Mario Chamorro

Saturday, April 2\textsuperscript{nd}
- Dos Generaciones - La Chureca
5.6. Annex VI: Interview highlights

Government/ Ministries

The following Ministries departments were identified and interviewed: MINSA - Ministry of Health, Immunization Department; MEDC - Ministry of Education, Sports and Culture, Social Communications Department; MIFAMILIA - Ministry of Family and FISE - Emergency Social Investment Fund.

All ministries interviewed agreed that poverty reduction was a specially complex and difficult issue. One government agency in particular mentioned that organizations working on poverty reduction are weak which makes access to the poor difficult, but it is even more difficult to access and impact those living under extreme poverty.

Most agencies when asked about overall involvement and knowledge of the PRSP, initially, seemed to have fairly good knowledge of the strategy. The Ministry of Health and MIFAMILIA were clearly involved in the PRS. However, based on our interview with the Social Communications department of the MEDC, it is not clear the scope of the ministry’s involvement. MINSA’s Immunization office provides training and equipment to carry out the immunization strategy but does not receive funding. MIFAMILIA, on the other hand, implements some of the strategy’s activities and receives direct funding. It was not clear how involved each Ministry was in the creation of the strategy. Their involvement, as specified by MINSA’s Immunization department, seemed to more on a consultative basis, providing feedback for revisions to the strategy.

Interviews with government representatives yielded the following information on projects directly linked to the strategy:

- MINSA – Increase in immunization coverage. Although their involvement on the strategy was sought after the initial draft was created, they were able to provide feedback and make recommendations to the strategy. For instance, the initial strategy proposed immunization for children. MINSA suggested including adults thus extending immunization to the entire family.

- SILAIS – The participation of SILAIS Managua on the PRSP reflected MINSA’s commitment to the strategy in programs related to Prenatal Control, early pregnancy intervention, coverage of family planning and increase of attended births as well as reduction of infant and maternal mortality.

- FISE – According to the FISE’s planning coordinator, their work, although it also involves social policies, is largely vested in infrastructure development on education, health, water and sanitation.
• MEDC – According to the Social Communications office, the recruitment strategy
developed by the Ministry of Education was mainly as a result of the Ley de Autonomía
Escolar (Law of School Autonomy) in order to determine the best strategy to engage
public interest on a recruitment campaign.

• MIFAMILIA - Overall, ministries favored the intervention of the strategy. The strategy
has provided a more comprehensive approach to health; increased access to
immunization for children and their families; improved infrastructure development in
access to water and sanitation; preliminary assessments demonstrate improvements in
some social indicators; and cooperation with NGOs helps build capacity in many of these
institutions.

Other improvements mentioned were in the area of human capital. Increased training, parent
involvement, infant centers and resource allocation for women were all listed as successful
outcomes of the strategy.

Some of the specific challenges the poverty reduction strategy reflected were strong social
policies and weak economic growth strategies. It was also agreed that the National Plan emerged
as a result of weak economic policies in the country and the strategy does a better job in linking
political and economic priorities. In terms of impact, the government institutions felt there was
not enough time and data to measure the strategy’s impact accurately. Furthermore, most
ministries agreed that children are not a priority for the government.

Other challenges facing the government include lack of adequate funding and personnel with
necessary skills, especially at the municipal level. Lack of coherence in planning and policy
evaluation utilizing consistent and scientific methods created additional challenges to measure
overall strategy impact. The problem of impact assessment is further exacerbated due to
insufficient information to aid in measurement.

Along the lines of impact measurement on PRSP and child poverty reduction, some of the
recommendations offered by the government institutions observed that before measuring the
impact of the strategy, it is necessary to evaluate if the strategy was implemented as intended by
analyzing data before and after. Similarly, it was suggested to conduct an analysis of national
trends in the seven indicator areas selected for the study. Additionally, it was suggested that
coverage was the main indicator to use to measure child poverty as it pertains to education,
nutrition, infant mortality and access to services.

Civil Society

NGOs/ Community Organizations

The following community organizations where identified and interviewed: SoyNica,
Coordinadora Civil, Asociación Medica Cristiana, HABITAR, Tribuna del Consumidor and
Habitat for Humanity.

The civil society organizations identified worked on a myriad of areas related to children and
adolescents such as housing, nutrition, health, education as well as human rights. In addition to
these organizations, Sociologist Cirilo Otero was also interviewed in order to obtain a perspective from academia about our study.

One of the five organizations interviewed mentioned involvement during the PRSP formulation. However, their input ultimately was not included on the final strategy paper. All organizations demonstrated disappointment at the weak participatory approach of the PRSP which further underscores the document as a governmental activity lacking a coherent national poverty reduction strategy. Most organizations attributed this occurrence to the government’s inability to take control of the country’s destiny by becoming a regulatory body following foreign interest (particularly the WB and IMF) and impositions. These impositions have led to fiscal adjustments and governmental restructuring. Most organizations recognized these changes and considered them to have had a negative effect in the country since reducing the role of the government has decreased funding, jobs and socially driven policies.

All interviews agreed on the PRSP dependency driven policies as one the strategy’s major weakness. Special emphasis was placed on this area since capacity-building and self-sufficiency are considered long-term goals of any successful strategy. Similarly, lack of a comprehensive strategy was also considered a major obstacle for the PRSP since poverty reduction strategies should be linked to national strategies.

It was widely known that the National Development Plan (or now referred to as the PRSP 2) focuses on the development of cluster areas with high potential for development. However, the most criticized aspect of the plan was this emphasis on growth and how areas without such potential will be left out. Furthermore, organizations did not feel the plan focused on children or other social support initiatives. Yet, one organization listed the National Development Plan as a positive outcome of the PRSP since the strategy served as a platform for the plan.

Another point of contention with the PRSP is the use of national estimates to measure poverty. Most organizations agree that national data needs to be disaggregated by municipality in order to reflect the needs of each area and make adequate budget allocations. Even so, looking at municipal data may not give an accurate picture of poverty. For instance, AMC’s director explained that the high levels of inequality in Managua increase indicator measurements which in turn decrease budget allocation for the city which is overpopulated and poorly equipped to serve all its residents.

All organizations interviewed expressed budget cuts are a concern and this action has hindered their ability to fully execute their programs since funding is a major obstacle and governmental support is needed.

Some of the issues affecting children included school attendance, child labor and sexual exploitation. In part, this is due to high levels of immigration to other countries which then leaves many children behind without protection of parents and often taking care of the household and looking after their siblings. In addition, domestic violence and property land rights are also issues that affect the population in general but also have direct impact on the lives of children. However, considering this precarious situation, children are not considered a priority for policy makers.
Looking ahead, some organizations suggested enforcing and creating programs that created incentives among the youth of the country since they are the majority and the future of the nation is on their hands. Also, regional reunification was suggested since the marginalization of the Atlantic Coast is still a major challenge in the development of the country.

**International Organizations**

The following International organizations were identified and interviewed: UNICEF: Health, Monitoring and Evaluation; UNDP Water and Sanitation and UNFPA

All the international organizations are UN agencies. UNICEF Nicaragua was a key actor in coordinating these meetings.

Some of the major concerns raised during the meetings dealt directly with the overall instability of the country, the role of the government and the need to balance poverty reduction and economic growth strategies and the continuity of these strategies once in place. Similarly, the need for a nationally owned strategy was of common interest. All except one interviewee asserted that the PRSP was largely focused on social policies. UNICEF’s Monitoring and Evaluation office reflected that the PRSP largely focused on macroeconomic issues, but recognized it was largely due to its lack of micro-level assessment which in turn impacted social policies.

The five NGOs interviewed agreed that Nicaragua’s approach to policies has been one of “curing” and not “preventing.” This philosophy appears evident in the development of assistance-based programs which furthers dependency of the poor (FISE programs were identified as dependency-driven). The creation of these programs may be a reflection of the government’s tendency to develop initiatives that leave a mark and so human capacity building is not a priority. This is directly linked to the division of the country based on political interests which takes emphasis away from development.

Specific comments on government decentralization established more transfer of power to the municipalities as a positive step because the current centralized structure did not provide proper oversight of rural areas. Lack of adequate services in rural areas increases migration to cities which in turn increase incidence of delinquency, drug activity and prostitution. Of special vulnerability are children who also turn to illicit activities in absence of food, education, shelter and as a result of domestic violence and forced labor. Children access to education was particularly criticized. Even though constitutionally education is free, many public, and private, schools charge a contribution fee. Many parents can’t afford the contribution and coupled with the home economic and social pressures, children leave school and find an alternative life on the streets.

In general, NGOs agreed that national policies were largely regulated by foreign interest. Privatization, as part of structural adjustment programs, is pushed hard by the World Bank and the government’s willingness to comply seemed to raise questions about the future direction of the country. In particular, recent debates focus on the country’s attempts to privatize water services. Most organizations had reservations about privatization of services, mainly due to lack of investment in the country.
An exception to the view of the government as pursuers-of-foreign-interests idea is The National Plan which emerged as a government driven initiative and does not seem to have World Bank or IMF backing. Furthermore, there was general agreement that the government had to push to “sell” this plan as a nationally owned strategy (as opposed to the PRSP) but is unclear if these organisms (WB, IMF), along with other funders, support the new plan. The Plan is driven by economic investment strategies and even though it includes social policies, it does not provide a strategy to reach the most vulnerable (i.e. children, indigenous groups). The future of this strategy is still very speculative and most agreed it may change once a new government is elected.

Data disparity was also perceived as a particular challenge to create an effective agenda. Both rural and urban areas are affected by the lack of reliable data. Although rural areas disproportionately suffer from inadequate budget allocation, due in part to the country’s geographic polarization, this is both a rural and urban phenomenon. This was largely attributed to needs based on national-estimated data as opposed to municipal-specific data.

Cross-sectoral support was overwhelmingly cited as necessary for the future success of the country’s strategies. At a local level, the unification of stakeholders under a specific agenda would pluralize efforts, increasing coverage, and minimizing rivalry between organizations. UNICEF’s health and nutrition coordinator specifically talked about the plausibility of collaboration based on a successful strategy rolled out during Holy Week by the departments of Health, Education, electricity, etc, where all sectors combined to create and execute an awareness campaign to maintain security and order during celebrations. Although it was a short term strategy, its success reflects the viability of departments working together for a long-sustained strategy. Another advantage to national collaboration would be to reduce the problem of “backward interventions.” An example of this is the construction of health care centers and other infrastructural aids without the consideration of water and sanitation in the facilities as well as the ability for people to get to these facilities.

A positive aspect of the PRSP is that it was considered the first time the country though of a unified strategy to address poverty reduction. However, there is general agreement that since it was done as a requirement for HIPC relief, the process was rushed and exclusive. The PRSP participatory strategy was highly criticized and input from civil society is considered inadequate. It was mentioned that some NGOs were invited to participate in the process but ultimately, their recommendations were not part of the strategy. One particular interviewee did not consider the PRSP reflective of a national consensus.

As a strategy, the PRSP is considered to address the right discourse and includes key social components. Yet, one of its mayor shortcomings is that it fails to measure the discourse (i.e. coverage of water and sanitation does not reflect growth in human capacity). Similarly, the budget reflects monetary support to these social policies, but it does not reflect how these strategies are being carried out and subsequent budget cuts (after PRSP) in social spending call for improved coordination and close monitoring.

In general, most NGOs agreed that PRSP impact was most noticeable in access to health, education, water and sanitation, largely based on the increase of some indicators. However, everyone agreed that, in general, impact assessment of PRSP was difficult due to the lack of
monitoring mechanisms and the inability to distinguish PRSP impact from other poverty reduction strategies. Considering these factors, impact of PRSP in child poverty reduction represents a greater challenge. More so, it is argued that the PRSP cannot be evaluated on something it did not intent to do to begin with. Although this last point is considered an excuse for the poor improvement on the overall condition of children. Lack of updated data once again was cited as a major obstacle to measure impact.

However, all NGOs emphasized that even though access to information was a major obstacle to accurately assess the condition of children in Nicaragua, priorities concerning child poverty need to be continuously mentioned and highlighted since they are often left out of the agenda.

**CHILDREN**

By engaging children in the discussion of poverty, we set out to identify, if from a selected group, their interest in each area, what was most important to them, major challenges they face and their suggestions to improve access to services. Also, by conducting the focus group we can further conduct observations about children’s responses to the discussion and evaluate if this specific participatory tool is useful or other exercises should be considered.

The team initially suggested conducting a focus group to identify what children considered “poverty” and possibly connect the children’s definition of poverty with our own. However, considering the time limit we had while visiting the school where the exercise was to take place, we saw the need to revise the strategy.

With this in mind, we introduced the concept of the seven indicators, and then asked children to rank them, and further elaborate on causes and solutions. Children were not prompted to answer questions in any way and were not given hints.

Initially, the facilitator asked if they know what basic services were. The kids seemed a bit confused so they were asked to mention everyday activities important to them. Kids listed studying, doing homework, brushing teeth and eating as some of the main activities they do during the day. The facilitator categorized each area and the following is a list of the items kids identified as important in connection to each of the study areas:

1) **Education**: Study/Practice, Sports, Respect
2) **Health**: brush teeth, eat everything, wash your body/hygiene, wash hands after using the toilet, if we didn’t clean the school we would get sick
3) **Nutrition** (what do we mean? Eat chocolate?): wash fruit before eating, chicken, meat, fruit, tortillas, beans, cheese, banana
4) **Sanitation**: take care of our body, face and stomach
5) **Water**: wash your hands with water, add bleach
6) **Information**: Radio, TV, newspaper, cellular/telephone, email, chatting on the internet, computers

When asked to rank these services, sixteen (16) kids prioritized Health as the most important service while nutrition was second (5) and education third (4).
In terms of children access to health, the following was identified as causes and solutions:

- **Causes**: insects, diarrhea, heart ache, vomit, virus/bacteria, stomachache, headache, throw out garbage
- **Solutions**: hospital, clinic, doctor, health center, medication
6. Bibliography


Boletín Epidemiológico de Vigilancia de la Mortalidad Materna. MINSA.


New York: United Nations Development Program 2004


MARCUS, RACHEL, JENNI MARSHALL AND JOHN WILKINSON. POVERTY REDUCTION STRATEGY PAPERS: WHAT CAN THEY DELIVER FOR CHILDREN IN POVERTY? DRAFT 4, 5 AUGUST 2002.


Reyes, Celia. *Social Assessment and Monitoring.*


**Additional Resources:**

http://www.childinfo.org

http://hdr.undp.org/statistics/data/

http://www.inec.gob.ni/

http://www.measuredhs.com

http://www.unicef.org

http://www.who.int/countries/nic/en/

http://www.worldbank.org/data

http://www.worldbank.org/lsms/country/
## 7. List of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Full Form</th>
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<tbody>
<tr>
<td>AMC</td>
<td>Christian Health Association</td>
</tr>
<tr>
<td>CCER</td>
<td>Civil Coordinator for Emergencies and Reconstruction</td>
</tr>
<tr>
<td>CODENI</td>
<td>Nicaraguan NGO Coordinator working with Children</td>
</tr>
<tr>
<td>DHS</td>
<td>Demographics Health Surveys</td>
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<tr>
<td>FISE</td>
<td>Emergency Social Investment Fund</td>
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<tr>
<td>HDR</td>
<td>Human Development Report</td>
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<tr>
<td>HIPC</td>
<td>Reinforced Initiative for Heavily Indebted Poor Countries</td>
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<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
</tr>
<tr>
<td>IDR</td>
<td>Institute of Rural Development</td>
</tr>
<tr>
<td>INEC</td>
<td>National Institute of Statistics and Census</td>
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<tr>
<td>INTA</td>
<td>Nicaraguan Institute of Technological Agriculture</td>
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<tr>
<td>INVUR</td>
<td>Urban and Rural Housing Institute</td>
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<tr>
<td>LSMS</td>
<td>Living Standard Measurement Survey</td>
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<tr>
<td>MAGFOR</td>
<td>Ministry of Agriculture and Forestry</td>
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<tr>
<td>MECD</td>
<td>Ministry of Education, Culture and Sports</td>
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<tr>
<td>MIFAMILIA</td>
<td>Ministry of the Family</td>
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<tr>
<td>MINSA</td>
<td>Ministry of National Health</td>
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<tr>
<td>NDP</td>
<td>National Development Plan</td>
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<tr>
<td>NFPS</td>
<td>Non-financial Public Sector</td>
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<tr>
<td>ONDP</td>
<td>Operational National Development Plan</td>
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<tr>
<td>PAININ</td>
<td>Program of Integral Attention for Nicaraguan Children</td>
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<tr>
<td>PDDH</td>
<td>Program for the Defense of Human Rights</td>
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<tr>
<td>PRSP</td>
<td>Poverty Reduction Strategy Paper</td>
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<tr>
<td>SGPRS</td>
<td>Strengthened Growth Poverty Reduction</td>
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<tr>
<td>SILAIS</td>
<td>System of Local Healthcare Centers</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
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<td>-------------</td>
<td>--------------------------------------------------------------</td>
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<tr>
<td>SWAP</td>
<td>Sector Wide Approach</td>
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<tr>
<td>UNDP</td>
<td>United Nations Development Programme</td>
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<tr>
<td>UNFPA</td>
<td>United Nations Population Fund</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
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<tr>
<td>WB</td>
<td>World Bank</td>
</tr>
<tr>
<td>WHO/ OPS</td>
<td>World Health Organization/ Pan-American Health Organization</td>
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</tbody>
</table>
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Website: www.unicef.org/policyanalysis

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