

## **CHILD POVERTY AND DEPRIVATION IN UGANDA**

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### **Abstract**

The need and purpose of this paper is to examine child poverty and deprivation in Uganda. Child poverty has been a concern of a majority of researchers and stakeholders around the world, especially in Uganda. In Uganda, the situation analysis currently is nothing to write home about. There are challenges associated with child poverty and deprivation, such as basic health care; adequate nutrition, water and sanitation; and nurturing and stimulation within a caring, safe and clean environment. Concerned citizens, therefore, have been questioning the problem of child poverty from different perspectives. why child poverty? Is it acceptable to blame poor children for their own predicament? Have their parents been lazy, made poor decisions, and been solely responsible for their plight? What about their governments? Have they pursued policies that actually harm the successful development of child protection? Such causes of poverty and inequality are no doubt real. The research starts by looking at the background with empirical evidence. A desk review methodology was used to unravel the circumstances surrounding child poverty and deprivation. The causes of child poverty, the existing policy to combat it, and strategies to resolve the problem are discussed, and the paper concluded.

**Keywords:** Child Poverty, Deprivation, Policy, Strategies, Uganda

### **1.0 Background**

Child poverty is ubiquitous around the world, but the level of entrapment in the circle of poverty varies from country to country. Children, who are the most vulnerable section of society, are the ones mostly affected by the incidence of poverty, especially those whose ages range from 0 to 5 years (Adeoti and Popoola, 2012).

According to Shah (2013), 1 billion children live in poverty (1 in 2 children in the world). As many as 640 million live without adequate shelter, 400 million have no access to safe water, and 270 million have no access to health services. It is estimated that 10.6 million died in 2003 before they reached the age of 5 (or roughly 29,000 children per day). Child poverty cannot be singled out of the general poverty that affects individuals across the world. Therefore, poverty is an unenviable state for the majority of the world's people and nations.

The Uganda Bureau of Statistics (UBOS), in its report dubbed Uganda National Household Survey 2016/2017, shows that the number of people living in poverty now stands at 10 million, up from 6.6 million. In percentage terms, it means that poverty now stands at 27%, up from 19.7% in 2012/2013. The report shows that eastern Uganda was the hardest hit, with poverty increasing by 27% while northern Uganda, on the other hand, came out as the least affected, with people living in poverty there dropping from 3.1% to 2.4%.

The Government of Uganda launched the Situation Analysis of Children in Uganda in 2015, a report highlighting the urgent need to sharpen investments in basic services to alleviate child poverty and achieve Vision 2040. Compiled every five years, and firmly harnessed on the Convention on the Rights of the Child (CRC) to which Uganda is a signatory, the report provides a comprehensive understanding of the lives of children across Uganda in regard to their fundamental rights - the rights to survival, education and development, protection, and participation (That's Relief Web 2015). Regarding the right to survival, children in Uganda continue to face multiple challenges. Despite significant progress made in the past few years, the under-five mortality rate remains high at 90 deaths per 1,000 live births, far off the country's Millennium Development Goal (MDG) target of attaining 56 deaths per 1,000 live births by the end of 2015 (ReliefWeb, 2015).

This is largely due to a lack of progress in reducing the neonatal mortality rate death within the first 28 days of life which accounts for nearly one-third of all under-5 deaths. Preventable diseases, such as pneumonia, malaria and other infections, account for more than 70% of under-five deaths while under-nutrition contributes to 40% of all

under-five deaths. A lack of access to safe water to one-third of all children, as well as poor sanitation and hygiene to hundreds of thousands of children, are also factors contributing to slow progress in reducing the mortality rate in children.

On education and other developmental rights, early childhood development (ECD) tends to be associated with pre-primary education. But a child's development is not just dependent on education. In order to grow and thrive, children need basic health care; adequate nutrition, water and sanitation; and nurturing and stimulation within a caring, safe and clean environment. Enabling children to develop to their full potential requires all sectors to work together to meet the needs of children at a crucial stage in their lives, and when they are particularly vulnerable.

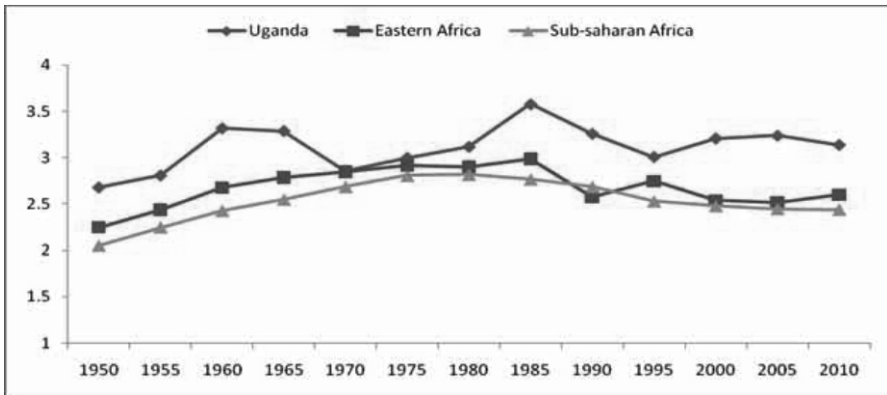
Notably, pre-primary (3-5 years) school enrolment rates remain low with approximately three million children missing out on this critical stage of education that prepares children for future success in primary school and beyond. While the primary school enrolment rate is close to universal at 94%, only 67% of children complete primary school, and a mere 24% enroll in secondary school. This evidence indicates that more than half of all children who enrolled in primary school drop out before they reach secondary school.

The quality of education also provides cause for concern. The literacy rate at P6 stands at 40%, and less than half of all secondary school students reached the defined competency levels in math (47% of all students), English (43%) and biology (15%). Violence against children - physical, sexual and emotional - is also rampant with nearly 40% of all children, at around eight million children, reporting some form of physical violence. And with 49% of 20-49-year-old women married by the age of 18, child marriage is an issue that has negative consequences on the lives of many children, especially adolescent girls, often robbing them of a healthy childhood and better future.

The situation at hand in Uganda, with 55% of children below the age of five and 37% of children between 6-17 currently living in poverty, around 8 million children in Uganda today are often simultaneously deprived of their rights to survival, education and development, and

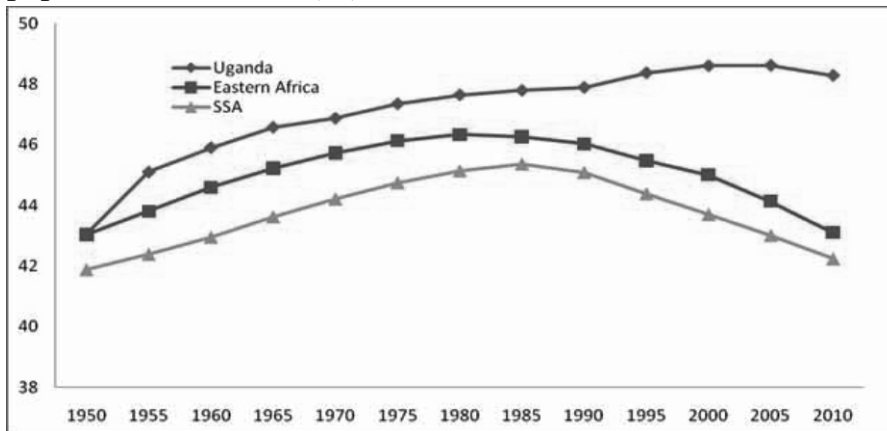
protection, frequently depriving them of the opportunities they require to grow up healthy and realize their full potential, if the situation could improve. The current population of Uganda is 44,316,309 as of Thursday, July 19, 2018, based on the latest United Nations estimates. Uganda's population is equivalent to 0.58% of the total world population.

Uganda ranks number 32 in the list of countries (and dependencies) by population. The population density in Uganda is 222 per km<sup>2</sup> (574 people per mi<sup>2</sup>). The total land area is 199,810 km<sup>2</sup> (77,147 sq. miles). 17.1% of the population is urban (7,583,654 people in 2018). The median age in Uganda is 15.9 years



Source: United Nations World Population Prospects 2010

**Trends in the proportion of children aged 0-14 years in the total population, 1950-2010 (%)**



## 1.1 Literature Review

Poverty is defined here as an unacceptably low standard of living (Bradbury, 2003). This encompasses both a statement about empirical conditions as well as a political judgment about the standard of acceptability. The standard of living can be viewed as either a uni- or multi-dimensional concept. Though authors such as Sen (1985), have considered multiple dimensions of poverty, most statistical measurements are based on the simpler uni-dimensional concept of the degree of access to economic resources. This report focuses on the 'economic' concept of poverty.

Sen's (1985) 'capability' approach is also essentially multi-dimensional. He argues that while income (or economic resources, more generally) may be used to obtain goods, the standard of living should be judged by the capabilities that can be achieved when using these goods.

In the Copenhagen World Summit for Social Development (1995), the United Nations adopted a definition of poverty that was heavily influenced by Sen's conceptualization.

*“Poverty has various manifestations, including lack of income and productive resources sufficient to ensure sustainable livelihoods; hunger and malnutrition; ill health; limited or lack of access to education and other basic services; increased morbidity and mortality from illness; homelessness and inadequate housing; unsafe environments; and social discrimination and exclusion. It is also characterized by a lack of participation in decision making and in civil, social and cultural life. ... Absolute poverty is a condition characterized by severe deprivation of basic human needs, including food, safe drinking water, sanitation facilities, health, shelter, education and information. It depends not only on income but also on access to social services.” (United Nations 1995).*

At the same time, it is recognized that economic resources are only one aspect of child wellbeing.

With a uni-dimensional concept of poverty, Bradbury said, it is possible to define a 'poverty line' a threshold of resources below which someone is defined to be poor. It is common to categorize poverty lines as either absolute or relative. Absolute poverty lines are set so that the income level represented by the line can purchase the same volume of goods in different places or times. (Less common is to use the term absolute to refer to a particularly low poverty line). Relative poverty lines are usually defined as some fraction of the average living standard of a community. They are thus closely related to inequality, though only inequality in the bottom half of the income distribution is relevant for median-based lines. The rationale for a relative poverty line arises from considering the socially-based nature of consumption. In rich societies, consumption norms are higher, and so a higher level of consumption is required to participate in ordinary community life.

According to Bradbury (2003), these different definitions arise from the fact that poverty has both an empirical and ethical/political dimension. To be effective as a policy-targeting instrument, poverty lines need to be set at a level that provides a feasible goal for social policy.

Typically, researchers define children as poor when their family or household has a particularly low income - there as on being that children are under the tutelage ... of their parents, who are the caregivers.

This is only a very indirect indicator of the consumption level of children. Children receive goods and services purchased from this income; they receive goods and services directly from outside the household (for example, child care, education, and health services), and they receive care from their parents. Research on these resource flows is limited and piecemeal (Bradbury, 2003).

The Bristol multidimensional approach was used to measure child deprivation in the Ugandan context. These dimensions are: (i) Nutrition; (ii) Water; (iii) Sanitation; (iv) Health; (v) Shelter; (vi) Education; and (vii) Information. In this regard, child poverty is defined as children deprived in 2 or more of these dimensions, and

extreme child poverty as children extremely deprived in two or more dimensions (UNICEF, 2012). According to UNICEF, child poverty means children who experience deprivation of the material 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. According to the Oxford Dictionary, deprivation is the damaging lack of material benefits considered to be basic necessities in a society. To my understanding, the basic needs of children are: food and shelter (children cannot acquire their own food or sustain any reasonable shelter), physical safety (children cannot protect themselves from aggressive adults and other, stronger, children); emotional security; social skills; career abilities; and internal skills. All of these mentioned above are the necessities for children to function properly in society.

One of every three children in the developing world lacks access to basic sanitation, and one of every five has no access to safe drinking water (UNICEF, 2009). About 600 million children worldwide are growing up in absolute poverty, and over ten million children under five years of age die every year (Insights Development Research, 2005). Every year, nearly 10 million children die from largely preventable causes (UNICEF, 2011). These include illnesses such as pneumonia, diarrhea and malaria, as well as conflict and HIV/AIDS. Malnutrition, poor hygiene, and lack of access to safe water and adequate sanitation contribute to more than half of these deaths (UNICEF, 2005). More than 90% of child deaths under the age of 18 occur before the age of five (UNDG, 2003). Ninety-three percent of all under-five deaths currently occur in Africa and Asia combined, and 40% occur in just three countries: India, Nigeria and the Democratic Republic of Congo (UNICEF, 2008).

It is recognized that children experience poverty as an environment that is damaging to their mental, physical, emotional and spiritual development. Yet, these aspects are rarely distinguished in a child poverty analysis (UNICEF, 2005).

The Bristol approach classifies any child who suffers from two or more different severe/extreme deprivations of basic human needs as living in

absolute poverty (Gordon et al., 2003a). Using this approach, Gordon et al. (2003b) found that over one-third of children in developing countries suffered from severe/extreme shelter deprivation; over 31% had no toilet facilities; almost 25% lacked access to radio, television, telephone or newspapers at home; over 20% had to walk more than 15 minutes to obtain water or used unsafe water sources; 15% had not been immunized against any diseases or had an episode of diarrhea and had not received any medical advice or treatment; and 13% of children aged between 7 and 18 were severely deprived in terms of education.

## **1.2 Methodology**

The researcher conducted a desk review of documents at both global and country levels. This enabled the researcher to obtain information on child poverty and deprivation, and is mainly secondary data gathered from books, journal, and reports.

## **1.3 Causes of child poverty**

Why child poverty? Is it enough to blame poor children for their own predicament? Have their parents been lazy, made poor decisions, and been solely responsible for their plight? What about their governments? Have they pursued policies that actually harm successful development? Such causes of poverty and inequality are no doubt real. But deeper and more global causes of poverty are often less discussed, because there are some anti-development people that are barriers to child poverty.

According to Bradbury (2003), there are several reasons why researchers and policy-makers might find child poverty of particular concern. Child poverty may be considered undesirable in the same way as for other population groups. We may have particular innate feelings of protection for the young, or we may suspect that some adults may be poor because of decisions that they have made (whereas children have little choice over their economic situation).

The most common reason advanced for a focus on child poverty, however, is that children represent an investment in the future. This raises controversial questions of fact. Though there is ample evidence of a strong association between childhood living standards and later



outcomes, in rich societies the evidence for a direct causal link between the two is less clear. Behind the increasing interconnectedness promised by globalization are global decisions, policies, and practices. These are typically influenced, driven, or formulated by the rich and powerful. These can be leaders of rich countries or other global actors such as multinational corporations, institutions, and influential people.

Coming back to our discussion, the major cause of poverty in the world today is structural adjustment. Cutbacks in health, education and other vital social services around the world have resulted from structural adjustment policies prescribed by the International Monetary Fund (IMF) and the World Bank as conditions for loans and repayment (Shah, 2013). In addition, developing nation governments are required to open their economies to compete with each other and with more powerful and established industrialized nations. To attract investment, poor countries enter a spiraling race to the bottom to see who can provide lower standards, reduced wages and cheaper resources. This has increased poverty and inequality for most people. It also forms a backbone to what we today call globalization. As a result, it maintains the historic unequal rules of trade. According to Mayer (1997), income may lift the material standard of living of children, but has little influence on test scores or behaviour, educational attainment, labour-market success or teenage fertility.

#### **1.4 Challenges of Child poverty**

The challenges of child poverty are numerous and interconnected, and related to poverty from families and the government. Firstly, incomes (ie, inequalities in income, irregularity in income or no income) are major challenges attributed to child poverty. The proportion of children in poverty will be determined by the threshold of acceptability (the poverty line), their household income, and the income needs of their household.

Household income primarily comes from the wage income of each member, together with social benefits. Though most poverty measurement focuses on income as a determinant for child poverty, a large part of children's consumption comes via services such as child care, education and health. Equivalence scales, by implication, take

these services into account, and so including these benefits in the measure of resources would not automatically lead to a lower level of child poverty. However, if access to services varied across the population, ignoring this might lead to estimates that did not identify the neediest.

Secondly, though this is a more important issue in poorer nations, family size (that is, family need) matters. African society believes in large families as the norm, leading to poverty, unlike developed countries where the nuclear family system is the order of the day.

Thirdly, lone parenthood is another challenge that is connected to child poverty, which is associated with higher rates of lone parenthood (through increased divorce, separation, and conflict contributing to the growth in lone parenthood). In Africa, the increased proportion of children living with only one parent has been a major reason for the corresponding increase in child poverty. Across nations, however, lone parenthood explains little of the variation in national outcomes (though children in lone-parent households are always poorer).

Fourthly, in many countries, poverty based on market incomes alone rose faster than poverty based on all the income of the household (that is, including benefits). It should be noted, however, that one potential explanation for this is that higher transfers led to a reduction in market incomes. In general, none of the countries with high levels of social expenditure had a high child poverty rate. However, some countries such as Japan, France and Germany had much lower child poverty rates than other underdeveloped countries with low expenditure levels.

Fifthly, the unemployment rate is another challenge that leads to child poverty. Both the increase in joblessness within family types and the increase in lone parenthood contributed to the overall rise in joblessness.

In summary, it has been observed that relatively high rates of child poverty can be seen as stemming from high levels of lone parenthood, as a result of conflict, divorce, disasters and joblessness, together with medium levels of wage inequality and social expenditure.

### **1.5 What does the existing policy on child protection say?**

The UMGLSD (2003) stated clearly that the National Orphans and Other Vulnerable Children Policy (NOP) is the official policy governing the OVC of the Ministry of Gender, Labour and Social Development (MGLSD) of the Republic of Uganda. The policy interprets a vision of a society where all orphans and other vulnerable children live to their full potential, and where their rights and aspirations are fulfilled. The Ugandan Government, through the MGLSD, is mandated to promote the social protection of poor and vulnerable children. Such children include orphans, those who live on the streets, those that toil under exploitative conditions of labour, as well as those that suffer sexual abuse and other forms of discrimination. The HIV/AIDS pandemic has greatly contributed to the huge numbers of orphans and other vulnerable children that are now overwhelming the extended family support systems in the country. This situation is exacerbated by conflict in some parts of the country and other preventable diseases such as malaria and tuberculosis.

The Government of Uganda will focus on services that are cost-effective, and have the greatest impact on reducing vulnerability and improving the welfare of orphans and other vulnerable children to promote equity. Interventions that build capacity and improve quality and effectiveness will be supported and implemented in an integrated manner. The priority areas of focus are care and support, child protection, education, health, food security and nutrition, psychosocial support, socio-economic security, conflict resolution and peace-building. These interventions constitute the Essential Services Package for orphans and other vulnerable children.

While progress has been made to realize children's fundamental rights in Uganda, this report underscores that millions of Ugandan children have unfortunately been left behind. With the new post-2015 Sustainable Development Goals on the horizon, it is now more evident than ever that to realize a more sustainable and prosperous future in Uganda, more robust investments must be made in Uganda's poorest

and most marginalized children; indeed, the realization of Uganda's Vision 2040 depends on it (ReliefWeb, 2015).

Through Vision 2040 as Uganda aspires to see her citizens enjoying a high-quality standard of living. It will focus on improving the quality of its population, health and nutrition status, literacy and numeracy, housing, water and sanitation conditions, and provision of social protection for the citizenry. Focus will also be put on reducing the number of people living in absolute poverty.

On the same note, the agenda of the African Union of 2063 is that all African citizens will be actively involved in decision-making in all aspects. In line with aspiration 6 of section 47, Africa shall be an inclusive continent where no child, woman or man will be left behind or excluded on the basis of gender, political affiliation, religion, ethnic affiliation, locality, age or other factors.

Broadly speaking, the Ugandan policy and programming on child poverty and deprivation are of four categories, namely: the structure of public revenues and expenditures, social spending, fiscal space for public health spending, procurement of pharmaceuticals, foreign aid and Uganda's social protection framework, which is guided by: i) the need to address extreme deprivation; ii) the need to address vulnerabilities caused by conflicts and HIV/AIDS; iii) the recognition of the limited financial capacity to roll out universal programmes; and iv) the need to promote programmes based on contributions from beneficiaries. First, as noted earlier, one of the reasons for the recent expansion in social protection (SP) programmes in Uganda has been the realization among policy makers that the country has maintained a very large population of the poor, despite a fairly stable decline in the incidence of income poverty.

The National Development Plan (NDP) notes that the population of chronically poor Ugandans has stagnated at about 7 million (GoU, 2010b). Such a large population of impoverished persons requires assistance to meet their daily needs. Consequently, in 2010, the Ministry of Gender, Labour and Social Development (MGLSD) initiated a pilot non-contributory cash transfer scheme the Social

Assistance Grants for Empowerment (SAGE) programme targeting the poorest 10% of households in Uganda. Through this scheme, the GoU, with support from international partners, intends to provide grants of about US\$ 10 per month for the poorest households. Prior to the SAGE programme, the GoU had mainly used geographically-targeted projects to provide social protection funds to vulnerable groups. These include the Northern Uganda Rehabilitation Programme (NUREP) that operated over 1992-2002; the Northern Uganda Social Action Fund (NUSAF), operational from 2003-2014; and the Peace Recovery and Development Plan (PRDP) for Northern and Eastern Uganda.

### **1.6 Strategies to alleviate children from poverty deprivation**

Child poverty strategies can be grouped into three policy categories which include direct resources to children and their families, seeking to influence parental fertility and marriage, and seeking to improve labour market outcomes for the parents of children.

Services are the most direct way of targeting support directly to children, and hence education, health and family support services are likely to continue to be central to efforts to improve the well-being of children. However, there are some aspects of children's consumption that are best provided by parents, and so income transfers will also continue to be a major part of any anti-poverty strategy. This includes state-mandated private transfers such as child support though there are strong constraints on the ability of this alone to provide for children.

Policies to address the situation of children with young or lone-parent mothers should still be an important part of a Uganda child poverty strategy. Parental joblessness is a key proximate determinant of child poverty, particularly in underdeveloped countries. Though policies to increase growth and reduce unemployment are part of the solution, they are not the total solution.

Governments throughout the world have assumed that parental employment (particularly mothers' employment) is good for children. They have assumed that parental employment will mean increased consumption for the family and its members, reduced financial stress,

social approval and the teaching of work habits, all of which will improve child wellbeing. However, these benefits must also be weighed against the costs that arise from the loss of parental caring time and increased time pressure on parents. Most evaluations suggest that the benefits of employment outweigh the costs.

### **1.7 Conclusion**

Having critically looked at problems surrounding child poverty and deprivation, I conclude that the reason for child poverty is because people are allowing it to happen in the first place, because of human error. An increasing number of adult workers are being rid of the opportunity to earn a stable income, and so their families will suffer as a consequence.

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