

WORKING PAPER NO. 64

# **Children's Perspectives on Risk and Vulnerability in Contexts of Poverty and Change: Findings from Andhra Pradesh, India**

December 2010

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First published by Young Lives in December 2010

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ISBN: 978-1-904427-70-4

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Printed on FSC-certified paper from traceable and sustainable sources.

# Contents

<b>Abstract</b>	<b>ii</b>
<b>Acknowledgements</b>	<b>ii</b>
<b>The Authors</b>	<b>ii</b>
<b>1. Introduction</b>	<b>1</b>
About Young Lives	1
<b>2. Background</b>	<b>2</b>
<b>3. Context: Social protection in India and Andhra Pradesh</b>	<b>3</b>
<b>4. Children's perspectives on risk, vulnerability and economic change</b>	<b>6</b>
4.1 Price increases	7
4.2 Disasters	11
4.3 Health-related issues	12
4.4 Power cuts	13
<b>5. Discussion</b>	<b>14</b>
<b>Appendix: Community Profiles</b>	<b>16</b>
Polur	16
Mayurbhanj/Katur	16
Poompuhar	16
Patna	17
<b>References</b>	<b>18</b>

# Abstract

Young Lives is a long-term study (2000–2015) of child poverty in Ethiopia, India (Andhra Pradesh), Peru and Vietnam. This paper presents findings based on research carried out between 2007 and 2008 with a group of boys and girls in Andhra Pradesh who participate in Young Lives. The research elicited children's views on changes that affected their households and communities over a one-year period, including in relation to broader economic crises. While a positive economic 'turnaround' has been noted for Andhra Pradesh in recent years, there is still a considerable degree of poverty and some notable regional disparities. Children identified both negative and positive changes in their households and communities, including the significant increase in food prices, which they viewed as a risk to child well-being. They described how the financial crisis impacted on their time-use, for example, the way they balanced school and work, as well as how they experienced the various programmes aimed at protecting them (Midday Meal Scheme, the National Rural Employment Guarantee Scheme (NREGS), child sponsorship, etc). They provided critical commentary on how economic and political changes impacted on children and how they coped with them (for example by eating less or working more). Children's views on risk and vulnerability reflected the differing circumstances of their families' livelihoods and of their local environments. They were knowledgeable about and at times critical of the various services and programmes operating in their communities. Overall, their participation in the research was active and engaged and their insights into community change were indicative of their awareness of and involvement in their household economies and wider societies. Their experiences demonstrated that children are not only 'impacted' by crisis, but that they are also active in managing the risks associated with poverty.

# Acknowledgements

The authors are grateful to the Young Lives children, families and community members who make our research possible. We acknowledge the contribution of members of our team in India, especially Udaya Duggani and V. Latha Krishna. Caroline Knowles and Paul Dornan provided useful comments on an earlier draft. Young Lives is core-funded by UK aid from the Department for International Development (DFID) and based on a collaborative partnership between the University of Oxford, Save the Children UK, The Open University and prominent national research and policy institutes in the four study countries. The Bernard van Leer Foundation funds an early childhood transitions stream of research and the Oak Foundation funds activities on children's risk, vulnerabilities and resilience. The views expressed here are those of the authors alone.

# The Authors

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## About Young Lives

Young Lives is core-funded from 2001 to 2017 by UK aid from the Department for International Development (DFID) and co-funded by the Netherlands Ministry of Foreign Affairs from 2010 to 2014. The views expressed here are those of the authors. They are not necessarily those of, or endorsed by Young Lives, the University of Oxford, DFID or other funders.

# 1. Introduction

There is growing interest in understanding how the recent economic, oil and food crisis is impacting on children's lives, stemming from the view that children are among the most vulnerable groups in society and therefore more susceptible to the damaging effects of crisis. Children in poor households are considered especially so. Despite this interest, it remains relatively rare in developing-country contexts to consult directly with children with regard to their views and explanations of poverty and economic change, even when there are efforts to consult directly with adults disadvantaged by poverty (e.g. Narayan 2009). This paper reports on qualitative research carried out by Young Lives that investigated children's experiences of change within the context of programmes and services in their communities (2007–08), including rising food prices and other effects of the broader economic crisis. Children identified both negative and positive changes in their households and communities. They described how the financial crisis impacted on their time-use, for example, by affecting the way they balanced school and work, as well as how they experienced the various programmes aimed at protecting them and their households. Some of these programmes are highlighted here, namely, the National Rural Employment Guarantee Scheme (NREGS), the *Arogyasree* health insurance scheme and the Public Distribution System (PDS). Children not only provided critical commentary on how economic and political changes impacted on their lives, they also discussed how children and their families cope with change (for example by eating less or working more) and what communities and governments should do to protect different groups of children better in these contexts.

## About Young Lives

Young Lives is a long-term international research project investigating the changing nature of childhood poverty in four developing countries – Ethiopia, Peru, India (in the state of Andhra Pradesh) and Vietnam – over 15 years. The aim is to improve understanding of the causes and consequences of childhood poverty and the role of policies in improving children's life chances and well-being. It collects longitudinal data on two cohorts of children: 2,000 children in each country born in 2000–1 (the younger cohort) and 1,000 children in each country born in 1994–5 (the older cohort). A survey is carried out every three years with the full sample of children and their caregivers and is complemented by in-depth qualitative research with a sub-sample of case studies (50 in total) in four communities. Analysis for this paper mainly focused on qualitative information gathered with the older group of children who were aged 12 to 14 at the time of data collection (2007 and 2008), and this is contextualised within findings from the household-level Round 2 survey (2007) and preliminary findings from Round 3 survey (2009).

The remainder of the paper is organised as follows. Section two provides background to the key concepts that frame the paper, namely the relationship between poverty, risk and vulnerability and section three highlights the development of social protection programmes in Andhra Pradesh. This is followed by children's perspectives on whether or not these programmes buffer the effects of the economic crisis in their communities. Finally, the discussion section argues that mainstream social protection programmes should take into account children's differing experiences of managing risk both in times of extraordinary crisis, and in the everyday contexts of poverty.

## 2. Background

Well-being is a core concept for Young Lives research with children and it is an important counter to poverty approaches that emphasise 'deficits', or what children lack. Subjective well-being captures what matters most to children and families constrained by poverty and threatened by the effects of economic crisis. While uncertainty is a defining feature of poverty (Wood 2003), security is central to understandings of well-being. Security was also a theme in a study commissioned by the World Bank in 1999 in Andhra Pradesh that was based on the principle of consultations with poor men, women and young people. Participants understood well-being primarily in terms of four criteria: livelihood security, food security, ownership characteristics, and respect in society. Livelihood security was core among these factors. The nature of people's employment and their exposure to risk were also factors in well-being (Praxis 1999). The capacity to cope with and recover from stresses and shocks is central to the definition of sustainable livelihoods. Such resilience in the face of stresses and shocks is key to both livelihood adaptation and coping (Davies 1996). Those who are unable to cope or adapt are vulnerable and unlikely to achieve sustainable livelihoods. Not everyone who is vulnerable is poor. For example, those working in the informal sector may be vulnerable, even when they are not poor, because they lack any sort of safety net to protect them if they lose their jobs. Santosh Mehrotra, senior advisor to the Government of India, has argued that one of the most effective means of dealing with the crisis would be to provide social insurance for informal workers, who represent the majority of workers.

Vulnerability in this paper refers to the relationship between poverty, risk and efforts/ability to manage risk. One explanation provided for why people are pushed deeper into poverty relates to their risk exposure and their inability to manage these risks effectively (Dev 2009). Social protection is one way of managing risk by aiming to reduce vulnerability. The consequences of not including social protection measures as a component of the response to managing risks and economic crisis may prove severe. Experiences from the 1997 Asian economic crisis have shown that when households suffer loss of income, more children and young people drop out of school, engage in child labour, and suffer from malnutrition, stunting and other health issues (UNICEF 2009). Furthermore, the proceedings from the conference that this document reported on (on the impact of the recent economic crisis on children in East Asia and the Pacific Islands) indicated that the key message of the event was to 'scale-up and expand social protection systems and build new ones where none exist today' (ibid).

Changes in the wider world have had an impact on the situation in India. Apart from the problem of rising food prices, India has been coping with the impact of the global financial crisis since the third quarter of 2008. The crisis has had an adverse impact on liquidity (e.g. cash flow in the economy) and on economic growth in the country. This in turn can have an adverse effect on poor people and food security in the country (Dev 2009).

Within this scenario, the Young Lives study has carried out qualitative research across four communities in Andhra Pradesh, representing different regions of the state. Twenty-four children aged 12 to 13 at the time of research (2008), participated in group and individual discussions to gather their perspectives on changes in their lives, households and communities over the past year. This paper presents emerging analysis of the data, which was examined for variations based on gender, region and access to social protection measures. It argues that social protection programmes and their effective implementation have helped many poor families in our sample to cope with economic crisis, including the



everyday difficulties associated with poverty. It supports the finding that access to micro-finance and social protection schemes will be a key determinant of how families are able to cope with the crisis (Dercon 2008).

### 3. Context: Social protection in India and Andhra Pradesh

Evidence suggests that the impact of the global food, oil and financial crisis in India has been relatively less severe than experienced worldwide (CENTAD 2008). The national policy stance has been to attempt insulation of domestic prices from the high world prices by combining different measures including high subsidies, lower tariffs and export restrictions (ibid). This strategy appears to have been effective, as food prices in India have not risen at the global rate. It was found that almost all the country's food needs are met from domestic markets and that the domestic supply chain plays a crucial role (ibid). Price is a necessary component in the food economy of the country. Therefore, irrespective of the extent of impact, it can be said that rising global prices affect the domestic market (though in a subtle way). Though the export ban has reduced speculation and the rise of food prices to some extent, high prices in neighbouring countries have contributed to the increase of domestic prices and this has affected marginalised social groups the most, especially women and children (CENTAD 2008). Social protection programmes have been a key response, in order to protect poor and other marginalised groups from being pushed deeper into poverty. The social protection scene in India has witnessed several initiatives in recent years. The approach is holistic, with a focus on enhancing capacity, for example, by increasing access to health, education, shelter, income and food.

Andhra Pradesh, after trailing during the first half of the 1990s, achieved a growth rate of almost 6 per cent in the second half of the decade, exceeding the national average of 5.4 per cent. Monetary poverty declined and social indicators improved. But the main driver of growth over this period was the services sector. Young Lives data collected in 2007 appears to corroborate this trend. Responses by children's caregivers to a query about the description of the household's status when compared to four years previously (Round 1) suggest that there has been overall improvement in household economic conditions. The households that considered themselves to be rich remained at 5 per cent between the two rounds of data collection, while those who thought they were comfortable and could 'manage to get by' increased by 10 per cent (from 36 per cent to 46 per cent). The number of households who thought they were poor fell by 4 per cent (from 21 per cent to 17 per cent) (see Table 1).

**Table 1.** *Perceived change in household status (2002 to 2006)*

Description of household	Urban		Rural		Total 4 years ago	Total Current position
	4 years ago	Current	4 years ago	Current		
Very rich	0 0.0%	0 0.0%	1 0.1%	0 0.0%	1 0.1%	1 0.1%
Rich	15 6.0%	32 4.3%	39 5.2%	32 4.3%	54 5.4%	51 5.1%
Comfortable – manage to get by	114 45.8%	322 43.2%	247 33.2%	322 43.2%	361 36.3%	457 46.0%
Struggle – never have quite enough	85 34.1%	263 35.3%	282 37.9%	263 35.3%	367 36.9%	318 32.0%
Poor	34 13.7%	126 16.9%	172 23.1%	126 16.9%	206 20.7%	165 16.6%
Destitute	1 0.4%	2 0.3%	4 0.5%	2 0.3%	5 0.5%	2 0.2%
<b>Total</b>	<b>249</b> <b>100.0%</b>	<b>249</b> <b>100.0%</b>	<b>745</b> <b>100.0%</b>	<b>745</b> <b>100.0%</b>	<b>994</b> <b>100.0%</b>	<b>994</b> <b>100.0%</b>

Source: Young Lives Round 2 data, 2006, older cohort

Box 1 lists some of the key social protection programmes operating in Young Lives sites and mentioned by children in the course of the research. They are grouped into broad categories and explained briefly.

**Box 1.** *Social protection schemes identified by children in Young Lives research*

<b>Education</b>	Free education Scholarships Hostels
<b>Food/nutrition</b>	Public Distribution Scheme (PDS) Midday Meal Scheme (MDMS) Antyodaya
<b>Health</b>	Arogyasree
<b>Housing</b>	Indira Awas Yojana (IAY) Indiramma
<b>Income/employment</b>	National Rural Employment Guarantee Scheme (NREGS) Self-Help Group Scheme (SHGS)
<b>Social security</b>	Old age and widow's pensions

India's policies of procurement, buffer stock and the public distribution system (PDS) has insulated the country against the impact of global price increases. The PDS improves access to food for various groups of people with rice, oil, pulses and other food items provided at a subsidised price to all households identified by the government as being below the poverty line (BPL) through the 'fair price shops'. In spite of some weaknesses related to the implementation of the scheme, such as coverage (e.g. legitimately poor people not being covered or the leakage of benefits to people not targeted), the PDS has been able to contain prices and help poor families. The Midday Meal Scheme (MDMS) also improves children's access to food – all children in government schools are provided with a hot, cooked meal in the afternoon at school (also see Singh 2008). The MDMS was revised and universalised at

the primary level from September 2004, and extended to upper primary schools from October 2007 and to high schools in October 2008.

The latest innovation in dealing with social protection in a more holistic manner is the National Rural Employment Guarantee Scheme (NREGS). Implemented under the National Rural Employment Guarantee Act of 2005 (NREGA), the scheme provides at least 100 days of guaranteed wage employment in a year to at least one adult member of every rural household at the stipulated minimum wage. If effectively implemented, NREGS is going to be India's biggest social security programme for unorganised workers (Dev 2009). The scheme provides cash that is neither conditional nor unconditional, just cash for work. The thinking is that it provides income with dignity: people do their work and get paid for it. The passing of NREGA was a step towards the legal enforcement of the right to work, as an aspect of the fundamental right to live with dignity.

There is substantial evidence that organising women around thrift and credit services is one of the most effective methods both for alleviating poverty and for empowering women (World Bank 1995, 2000/01), and this has been the case in Andhra Pradesh. Poor women organised into self-help groups (SHGs) are encouraged to save an agreed amount of money periodically, provide for internal lending and then access external loans as a group at a low rate of interest. The SHG membership thereby increases poor women's access to credit. The *Moving Out of Poverty* study (Narayan 2009) found that poverty in Andhra Pradesh declined between 1995 and 2005 and that people's local organisations improved their members' chances of escaping poverty. Central to this has been the proliferation of these women's groups as part of the Government of Andhra Pradesh's strategy for poverty alleviation (Galab 2003). The People's Organisations and Poverty Escapes study (Narayan 2009) in rural Andhra Pradesh reported that women participants from 34 per cent of the sampled communities listed SHGs as the key factor responsible for greater prosperity.

*Arogyasree* a health insurance scheme recently introduced by the Government of Andhra Pradesh, provides health cards for all poor households (i.e. those which hold white ration cards) with which they can access free treatment at private hospitals in the case of serious health problems. Among poor people in Andhra Pradesh, health risk dominates all other idiosyncratic risks (SERP 2002) followed by the death of family members. The health insurance scheme therefore serves as an effective mitigation strategy for poor households.

All these schemes and many others, including those that improve access to education and housing, provide adequate evidence of the broader point that social protection is now at the centre of the government's agenda. A paradigm shift is taking place and social protection is going to play a very important role. Currently, in India, social protection measures have a strong political backing. It is clear that they are an essential part of inclusive growth and therefore have to be both on the political and the economic agenda.

## 4. Children's perspectives on risk, vulnerability and economic change

Risks and shocks impact on households as a whole but the impact on children is often different to that on adults and can have devastating long-term affects. Dercon (2008) argues that shocks are a major risk to children, both in relation to their own life course and also in terms of the intergenerational persistence of poverty. Missed opportunities in childhood may trap children into poverty in adulthood (ibid). With this understanding, Young Lives qualitative research gathered young people's perspectives on how risks and vulnerability associated with economic change affected children in their communities and whether or not there were programmes to protect them. This section presents the data collected from the children as part of a group exercise on 'political economy'. It concerns vulnerability contexts, household-level responses and social protection measures as experienced by children, and their expectations of what communities and governments should do.

Children were asked to identify the key areas of change both at the micro and macro levels that had an impact on their lives and to discuss the experiences either of their own households or of others in the community. Research facilitators noted that in almost all the sites, children's participation was active and engaged – a clear indication of their involvement in the day-to-day functioning of the family. It appeared that both boys and girls were an integral part of family-related processes as they could talk in detail not only about the changes that took place in the community but also about wider issues, their impact on children in particular and the various programmes that were being implemented to address them. In addition to describing the key features of these programmes, children also shared the lived experiences related to their implementation, both positive and negative. This only reinforces the need for and importance of children's participation/consultation in issues that concern them.

Children's identification of sources of risk and vulnerability reflected their local circumstances and environments. The four communities referred to in this paper capture contrasting characteristics: Katur and Poompuhar are rural communities, Patna, a tribal village, and Polur an urban Muslim setting. (Brief descriptions of the four communities are provided in the appendix.) Children from the rural and tribal communities tended to focus on similar issues, while the urban children highlighted different concerns. Differing livelihood strategies adopted by the households and prevailing local conditions explained variations across sites. For example, while children from Patna (the tribal area), Poompuhar and Katur (rural areas) talked of price rises and NREGS, children from Polur (the urban site) were more concerned about 'eve-teasing' (teasing between children, particularly targeting girls), *dadagiri* (bullying by powerful people) and how their insecure surroundings impacted on their lives, living conditions and future aspirations. Children in the urban site were less aware of programmes operating in their community. They talked about rising prices, but did not express deep concern about how this affected their daily lives. This is somewhat surprising, since in urban areas, families spend a large part of their budgets on food (Dercon 2008: 2). Philip (cited in CENTAD 2008) also noted that prices were more volatile in urban areas. The social protection schemes discussed by children in our study tended to focus more on rural areas than urban areas

There was some gender differentiation in children's responses (girls' and boys' groups were conducted separately). However, boys tended to cover a larger number of issues and the discussions were not very focused, while girls generally focused on a few issues and discussed the impacts and measures to address them in detail. In terms of the nature of issues identified, it was interesting to note that the discussions concerned their immediate lives and the activities they were associated with. For example the boys talked of climatic changes, drought, heavy rains and crop losses, which were more likely to have an effect on their work. Girls, on the other hand, rarely mentioned these. Instead, they talked more about health-related issues and waged employment, in which they were actively associated, more so than the boys. In terms of discussing the impact of power cuts, boys focused more on crops and irrigation while girls talked about exams, drinking water, computer classes and watching TV. This suggests subtle differences in how boys and girls across regions may perceive the impact of risks on their lives.

Three key areas of change and vulnerability were identified by boys and girls across the sites; these include rising prices, health/ill-health and power cuts. Boys from the rural and tribal sites also identified and discussed natural disasters like drought, floods/excess rains and crop losses. The following sections highlight some of the key areas of focus for children, indicating gender and site variation where relevant.

## 4.1 Price increases

The boys' group from Patna drew up a cycle of consequences resulting from increases in the price of food grains and other pulses in their community. According to them, the price rise caused a scarcity of food grains, thereby increasing dependency on the PDS to meet the food requirements of all members of the household on all days in the month. Survey data from 2007 confirmed a high level of usage of this service by poor households in the sample and those in rural areas in particular: 97.4 per cent of households were receiving rice through the PDS. There were some variations reflecting economic status; the Young Lives sample is divided into five economic groups and the extent of use of the PDS was almost uniform among households located in quintiles 1–4 (98 per cent and 100 per cent), though in the 5th quintile (the non-poor) the use was reported at 90 per cent (Table 2). More rural households (98.6 per cent) than urban (93.4 per cent) get rice from the PDS (Table 3).

**Table 2.** *Households receiving rice through the PDS (by wealth quintile)*

	Wealth index					Total
	First quintile (below 0.1713)	Second quintile (0.1713 – 0.2585)	Third quintile (0.2585 – 0.3704)	Fourth quintile (0.3704 – 0.5093)	Fifth quintile (above 0.5093)	
No	1 0.5%	0 0.0%	3 1.7%	5 2.8%	13 10.1%	22 2.6%
Yes	187 99.5%	177 100.0%	178 98.3%	176 97.2%	116 89.9%	834 97.4%
<b>Total</b>	<b>188</b> <b>100.0%</b>	<b>177</b> <b>100.0%</b>	<b>181</b> <b>100.0%</b>	<b>181</b> <b>100.0%</b>	<b>129</b> <b>100.0%</b>	<b>856</b> <b>100.0%</b>

\* Answer to question: Are you receiving rice through the PDS?

**Table 3.** *Households receiving rice through the PDS: urban and rural*

	Urban	Rural	Total
No	13 6.6%	9 1.4%	<b>22</b> <b>2.6%</b>
Yes	185 93.4%	649 98.6%	<b>834</b> <b>97.4%</b>
<b>Total</b>	<b>198</b> <b>100.0%</b>	<b>658</b> <b>100.0%</b>	<b>856</b> <b>100.0%</b>

\* Answer to question: Are you receiving rice through the PDS?

But these numbers only tell one side of the story. In qualitative interviews, children's experiences of the scheme revealed that, overall, the PDS was viewed as very useful in times of crisis; however, children suggested that the poor quality of food grains sold through the PDS (e.g. sometimes the rice contains worms) has a detrimental affect on the health of consumers, particularly children, sometimes giving them stomach ache that last for days. Several of the children claimed to have experienced similar ill effects after having eaten rice brought from the ration shop. The boys from Patna continued to explain that the money their families saved through the subsidised rice scheme was often used to meet expenses related to healthcare in private hospitals, as government hospitals have limited services. Furthermore, the popular *Arogyasree* health insurance scheme only covers the costs towards serious illnesses and not common ailments, the treatment of which can be equally burdensome for poor households. The quality of food grains provided through the PDS also seems to be a critical issue for adults. Caregivers were surveyed on their satisfaction with the services provided by the PDS, and 35 per cent of them were not satisfied (see Table 4), the three main reasons being poor quality of food grains (67 per cent), inadequate quantity (14 per cent) and irregular supply (12 per cent) (see Table 5). Greater levels of dissatisfaction were reported from households located in the first four quintiles, these households also being those who accessed the service more compared to households from the 5th quintile.

**Table 4.** *Households' satisfaction with the PDS*

	Wealth index					Total
	First quintile (below 0.1713)	Second quintile (0.1713– 0.2585)	Third quintile (0.2585 0.3704)	Fourth quintile (0.3704– 0.5093)	Fifth quintile (above 0.5093)	
No	64 34.0%	79 44.6%	67 37.0%	60 33.1%	32 25.6%	<b>302</b> <b>35.4%</b>
Yes	124 66.0%	98 55.4%	114 63.0%	121 66.9%	93 74.4%	<b>550</b> <b>64.6%</b>
<b>Total</b>	<b>188</b> <b>100.0%</b>	<b>177</b> <b>100.0%</b>	<b>181</b> <b>100.0%</b>	<b>181</b> <b>100.0%</b>	<b>125</b> <b>100.0%</b>	<b>852</b> <b>100.0%</b>

\* Answer to question: Are you satisfied with the quality of the PDS?

**Table 5.** *Reasons for not being satisfied with the PDS*

		Wealth index					Total
		First quintile (below 0.1713)	Second quintile (0.1713–0.2585)	Third quintile (0.2585–0.3704)	Fourth quintile (0.3704–0.5093)	Fifth quintile (above 0.5093)	
<i>Why are you not satisfied with PDS?</i>	Inconvenient time to receive food	0 0.0%	0 0.0%	0 0.0%	2 3.4%	2 6.3%	<b>4</b> <b>1.3%</b>
	Poor-quality food	37 57.8%	51 64.6%	41 65.1%	42 71.2%	29 90.6%	<b>200</b> <b>67.3%</b>
	Quantity of food insufficient	6 9.4%	10 12.7%	11 17.5%	13 22.0%	1 3.1%	<b>41</b> <b>13.8%</b>
	Supply irregular	12 18.8%	13 16.5%	8 12.7%	2 3.4%	0 0.0%	<b>35</b> <b>11.8%</b>
	Location inconvenient to receive food	7 10.9%	5 6.3%	2 3.2%	0 0.0%	0 0.0%	<b>14</b> <b>4.7%</b>
	Unpleasant experience with distributors	0 0.0%	0 0.0%	1 1.6%	0 0.0%	0 0.0%	<b>1</b> <b>0.3%</b>
	Other	2 3.1%	0 0.0%	0 0.0%	0 0.0%	0 0.0%	<b>2</b> <b>0.7%</b>
	<b>Total</b>	<b>64</b> <b>100.0%</b>	<b>79</b> <b>100.0%</b>	<b>63</b> <b>100.0%</b>	<b>59</b> <b>100.0%</b>	<b>32</b> <b>100.0%</b>	<b>297</b> <b>100.0%</b>

Source: Young Lives Round 3 data

The PDS and nutrition programmes can help to improve the food security of households and children (Dev 2009). It has also been reported that the massive PDS in India improves access to food for socially marginalised groups of people (see [www.ipc-undp.org](http://www.ipc-undp.org)). In children's accounts, the impact of price rises on their lives entailed shortages of quality food, and increased household expenditure on food, which resulted in children being required to start working or to work more. Many boys and girls complained that they were less energetic and could not concentrate on their studies, and poor families were not able to eat good food. The households have adopted a range of strategies to cope with this problem; for example, decreasing their food consumption, restricting it to consumption of *dal* (lentils or other pulses) with little variety of vegetables (those that were cheap and locally grown) or no vegetables at all, and diluting *dal* so that it lasted for the entire day across multiple meals. Food grains purchased were of low quality when quantity had to be maintained in view of the household's requirements. Children were also encouraged to access the midday meal provided at school. One of the many other coping mechanisms adopted by households to handle the impact of the economic crisis was limiting the portion size of food when there was a shortage (see Table 6). The MDMS was limited to primary and upper primary school until October 2008 when it was extended to high schools. Prior to this date the children did not have this option and had to cope through other strategies. During the group exercise Yashwanth from Patna asked: 'OK, rice is given through the PDS, but what about vegetables and other items? We can't eat only rice, can we?' Vinay responded and said 'Vegetables! There are no vegetables now. It's only watery *dal* that is available to eat.' According to them, the situation had worsened over the past year. Revanth from Katur was happy about rice being available at two rupees per kilogramme (under the Rs2/kg rice scheme provided through the PDS) but he was concerned about people in general being angry about the increase in prices for all other commodities.

**Table 6.** *Households' response to food shortage*

		Urban or rural site		Total
		Urban	Rural	
If food is short does anyone in your household limit portion sizes?	No	7 58.3%	40 47.6%	<b>47</b> <b>49.0%</b>
	Yes	5 41.7%	44 52.4%	<b>49</b> <b>51.0%</b>
<b>Total</b>		<b>12</b> <b>100.0%</b>	<b>84</b> <b>100.0%</b>	<b>96</b> <b>100.0%</b>

Overall, and despite their criticism, children were by and large appreciative of the PDS and the MDMS and their contribution to mitigating the impact of the food price crisis. Girls in general talked more positively about the impact of the PDS. For example, Sania from Polur maintained that the PDS helped poor people 'to lead life without starvation and children are able to eat full meals regularly'. Another girl described the impact of the programme in terms of 'giving the poor a new life'. However, the boys in Polur had a strongly critical view of the PDS and thought that it was of no use as the quality of the food grains being distributed was too poor and regular supply was not ensured.

The discussions covered other lapses in the scheme, most of which were linked to the implementation process. The most common issues emerging from the discussions relate to exclusion, leakages (food being sold outside the scheme for a higher price), poor quality, limited quantity not being sufficient for large families, errors in weighing resulting in less food, and irregular supply. These observations made by children are in accordance with observations reported in a number of other sources (GOI 2002; Planning Commission 2005; Swaminathan 2000; Saxena 2008). Among the notable problems related to PDS are high exclusion errors (i.e. eligible people not having access to the white ration card that confirms their poverty status), non-viability of fair price shops (e.g. the cost implications of the PDS, such as the Rs2/kg rice scheme, can impact on the state's finances), not fulfilling the price-stabilisation objective, and finally, leakages (Saxena 2008:45). A basic problem for the PDS is lack of accountability, even though this is an important component of the principles fundamental to a rights perspective (Dev 2009). The children in our study were hopeful that if the shortcomings of the PDS were addressed, it could be an important means of tackling the food price crisis effectively. While the government machinery had an important role to play, the fair price shop dealers also needed to be accountable.

The information on price rises and their impact is known to children as they frequent the shops to buy groceries and vegetables, mostly on their own but sometimes with other family members. They become aware of changes in prices and understand their parents' instructions to buy less than what they normally buy. Rahmatullah, a boy from Polur thinks that 'the rich are all right in spite of the price rise. It is only the poor who suffer.' Another boy shared his views about how 'the children are required to eat healthy food to keep fit for the future. When they are not able to eat, it leads to illnesses. The doctor advises the children to eat good food.' And he adds: 'But how can the poor eat such food, particularly in the present situation?'

Tribal children from Patna who stayed in boarding hostels (in order to attend school) did not report feeling the impact of the food price rises in the same way as children living with their families: their needs were taken care of, and no change was perceived either in the quantity or quality of food provided in the hostels.



In responding to queries about other social protection programmes that helped poor families to cope with price rises, the girls mentioned several schemes, including: NREGS, micro-finance through women's Self Help Groups (SHGs), the *Indiramma* housing scheme, and free education and scholarships. Boys also mentioned NREGS and *Indiramma*, but mainly in relation to the impacts of natural disasters like floods and drought. They mentioned women's SHGs in relation specifically to the price rises. Generally, children in all the groups considered the low-interest credit available to women through the SHGs useful to buy food grains in bulk from the PDS and to maintain stocks of food at home. School-related expenses were also met through this credit, which they claimed enabled children to continue their schooling.

## 4.2 Disasters

This was an important theme for boys in the rural and tribal communities. They talked about drought, flooding and heavy rains in terms of disasters that affected their lives by destroying homes and causing homelessness. Children described how, during periods of drought, families were pushed to migrate in search of work, and children had to work more and often missed classes or were pulled out of school as a result. Bhavana from Katur left school at a young age and accompanied her parents to Mumbai each year during the drought season while her parents looked for work. As a result, she missed school and eventually stopped attending altogether.

Children in the rural and tribal communities identified the NREGS as an important buffer against the effects of price rises and natural disasters, and also as helpful in preventing migration (particularly 'distress' migration related to drought). Children in Poompuhar and Katur were positive about its contribution to household income and family maintenance. Most children in these communities had worked via the NREGS and reported missing school occasionally as a result. The main attraction both for adults and children was the 100 rupees wage for a half day's work. A piece of work could be undertaken by a group of people (for example, members of a family) who together could complete the task in less time. The official minimum age for working via the NREGS is 18; nonetheless, children described how young people not officially enrolled in the scheme and elderly members of the family often joined the working group. NREGS turned out to have gained in popularity since 2007 when only 34 per cent of the sample households reported being registered in the programme. The distribution across the quintiles suggests a high registration among the first (poorest) two quintiles (51 per cent and 66 per cent respectively) while it is 15 per cent in the 4th quintile and as low as 2 per cent in the fifth quintile (see Table 7).

**Table 7.** *Household participation in NREGS*

		Wealth index					Total
		First quintile (below 0.1713)	Second quintile (0.1713–0.2585)	Third quintile (0.2585–0.3704)	Fourth quintile (0.3704–0.5093)	Fifth quintile (above 0.5093)	
Has anyone in your household registered for the National Rural Employment Guarantee Scheme?	No	99 49.3%	67 34.4%	123 61.5%	172 85.1%	190 97.9%	<b>651</b> <b>65.6%</b>
	Yes	102 50.7%	128 65.6%	77 38.5%	30 14.9%	4 2.1%	<b>341</b> <b>34.4%</b>
<b>Total</b>		<b>201</b> <b>100.0%</b>	<b>195</b> <b>100.0%</b>	<b>200</b> <b>100.0%</b>	<b>202</b> <b>100.0%</b>	<b>194</b> <b>100.0%</b>	<b>992</b> <b>100.0%</b>

Preliminary analysis of the latest survey data (Round 3, collected in late 2009 and early 2010) and of data collected in a sub-study focusing on NREGS indicates a significant increase in registration and very high registration across the sample, including (non-poor) quintile 5. It is emerging that while nearly all households register with the NREGS, not all households actually participate in it. When we asked about the reason for registering, it was interesting to note that the respondents considered the job card a 'standby' for use during emergencies or crisis in the future, as they were uncertain what turn the agricultural situation would take given the situation with water shortage and long power cuts.

Latha from Katur recalled how she had worked on her brother's card, but when she herself was registered in the scheme, she worked on her own card. Sarada from Poompuhar also worked on holidays and Sundays and used the money to cover school expenses. Managing work and school has become a major challenge for many of these children. In addition to the economic dimension of their work, there was also a social aspect, sometimes positive. For example, girls from Katur considered the work they did through the NREGS an enjoyable group activity. They went together as a group, sang while working, and discussed the TV serials that they watched every day. The remaining part of the day was used for collecting firewood and fetching water for their households. While most girls handed over their wages to their parents, boys gave only part of their earnings to them. Govind said he bought new clothes with his earnings and another boy said he had bought a mobile phone. Latha described how the 2,000 rupees she had earned was used to clear a family debt. When she made a point of telling her older brother that it was her hard-earned money, he laughingly replied that he would return the amount with interest. Many subtle differences in gender expectations and practices at the household level were discussed, especially by girls, who appeared to have less freedom and control over their earnings than boys. In addition, while both boys and girls participated in waged work, girls were also expected to attend to daily household chores, including heating water for their brothers' baths after the long day at work. Gender differences have also been noted more generally in relation to the impacts of the food price crisis. Holmes et al. (2009) have recently argued that women are bearing a disproportionate share of the burden of the crisis, both as producers and consumers. They maintain that in many respects, the impacts have not generated new gender vulnerabilities, but rather have changed (and/or magnified) pre-existing ones.

As in the case of PDS, the NREGS is not free from lapses and loopholes and the boys' groups made a point of bringing out these weaknesses. The main complaint was related to the payment of wages which was either delayed, not paid or only partly paid. It appears that these lapses resulted in some people 'losing interest in the scheme'.

### **4.3 Health-related issues**

Good health is among the most important 'assets' for poor people, given their dependence on selling their labour. Any event of health-related risk can have a devastating affect on the household. Evidence from studies in Andhra Pradesh (SERP 2002) shows that among the individual risks, health risks dominate above all others in poor households. In a study in three states (Orissa, Karnataka and Madhya Pradesh), when all the idiosyncratic (household rather than community) risks across the states were considered together, sudden health problems came out as the dominant risk for all the poverty groups (Dev et al. 2006). Similarly, one of the main findings of the *Moving Out of Poverty* study (Narayan 2009) was that most non-poor families that become poor do so as a result of unexpected events and expenses related to ill health or death, family and social obligations and family breakdown.

Increases in health problems were reported by children in our four research communities; they attributed these to poor sanitation, unhygienic conditions and disasters. Common illnesses reported included malaria, chicken guinea fever, and dengue fever, all of which have long-term effects on individuals. Unfortunately, these illnesses do not get covered by the *Arogyasree* programme. The boys from Polur therefore considered the programme a 'waste' and insisted that a good scheme should be able to cover all the needs of the poor. The *Arogyasree*, as it exists today, provides for free treatment of serious illnesses at private hospitals, including those that require surgery. Nonetheless, children from the other three communities were more positive and recalled a number of examples of how this scheme helped poor children and adults in their communities with treatment for major health problems. The treatments supported by the programme saved many lives and would not have been possible in the absence of this scheme.

The first thing that came to children's minds in connection with health problems was the 108 ambulance service, which is available via a toll-free telephone number. First aid is provided by trained staff even before reaching the hospital. Children admired its service in helping poor people and saving lives more generally. Many pregnant women have accessed the ambulance, giving them access to institutional deliveries, which are safe and protect the newborn baby from infections. Children from Patna described in detail a demonstration given at their school, which included getting them to enter a working ambulance, to familiarise them with the 108 service.

Another health topic mentioned by children was HIV/AIDS, which one of the girls in Patna commented was: 'a burning issue all over the world. Andhra Pradesh has a high prevalence and youth are the most vulnerable.' The school AIDS-awareness programme was therefore considered an important child protection programme by the children.

#### **4.4 Power cuts**

Erratic, untimely power supply has been a problem faced by the people of Andhra Pradesh for the last few years. Children attribute this to low electricity production owing to lack of rains and increase in usage of water for agricultural purposes. Children from Patna, Poompuhar and Polur complained of the government not keeping its election promise of a free and uninterrupted power supply. In reality, the frequency of power cuts has increased over the past few years. The impact of long power cuts was experienced differently by girls and boys and largely related to the nature of the work they did. While boys talked of crops drying up and the need to attend to irrigating the fields at odd hours in the night, girls talked of the long distances that they had to walk to fetch drinking water, which caused them to miss their favourite television programmes. Girls also expressed disappointment about having to miss out on newly introduced computer classes at school, because of lack of power. They considered that these classes would be important for them to keep pace with the growing job-market demands.

Both boys and girls reported not performing as well in school as they could have done, owing to difficulties associated with studying during power cuts. Rural children in particular only had time to study after dinner, as they often worked during the day either in the home or on their farms. A few of the children said that the power supply was better when they had to pay and that the cuts increased only after the introduction of the free supply for agriculture. A small number of them thought it would be better to charge a nominal fee if this meant a more regular service, rather than providing electricity free with long power cuts.

## 5. Discussion

Economic reforms in India over recent decades have spurred economic growth and contributed to an overall decline in poverty. The acceleration of economic growth represents an important achievement. Despite this progress, over 300 million people still live in poverty so India cannot afford to relax efforts to provide more opportunities for its poorest citizens (Ferro et al. 2002). One of the main drivers of growth has been the services sector (Narayan 2009). Without adequate protective mechanisms, millions of poor people will be marginalised further and those who were not poor to begin with may 'fall' or be pushed into poverty. Social unrest is a distinct possibility and economic growth could be further threatened (UNICEF EAPRO 2009). Some of the discussions with children as part of the Young Lives study reported here indicated a degree of disquiet in connection with poorly implemented programmes and lack of safety nets for poor families. Surprisingly, caregivers who reported high use of the various governmental programmes did not think of government as a source of support in difficult situations (see Table 8). Instead, they felt that it was their parents (31 per cent), siblings (16 per cent), relatives (18 per cent), neighbours (15 per cent) and friends (9 per cent) that they relied on during a crisis. Further research is needed to investigate why families look first to their social networks and why they expect less support from the government.

**Table 8.** *Caregivers' perceived source of support in crisis\**

	Wealth index					Total
	First quintile (below 0.1713)	Second quintile (0.1713– 0.2585)	Third quintile (0.2585– 0.3704)	Fourth quintile (0.3704– 0.5093)	Fifth quintile (above 0.5093)	
Parents	36 20.7%	63 34.4%	41 23.3%	74 39.6%	64 35.6%	278 30.9%
Children	3 1.7%	2 1.1%	4 2.3%	1 0.5%	2 1.1%	12 1.3%
Labour union	0 0.0%	0 0.0%	0 0.0%	1 0.5%	0 0.0%	1 0.1%
Work colleagues	6 3.4%	6 3.3%	5 2.8%	9 4.8%	10 5.6%	36 4.0%
Siblings	35 20.1%	24 13.1%	31 17.6%	23 12.3%	27 15.0%	140 15.6%
Government	0 0.0%	2 1.1%	2 1.1%	3 1.6%	0 0.0%	7 0.8%
Other relatives	28 16.1%	34 18.6%	33 18.8%	38 20.3%	29 16.1%	162 18.00%
Neighbours	31 17.8%	25 13.7%	39 22.2%	18 9.6%	18 10.0%	131 14.6%
Friends	17 9.8%	14 7.7%	13 7.4%	14 7.5%	23 12.8%	81 45.2%
Teachers	0 0.0%	0 0.0%	1 .6%	0 0.0%	0 0.0%	1 0.1%
Political leaders	1 0.6%	0 0.0%	0 0.0%	0 0.0%	0 0.0%	1 0.1%
Community leader (informal)	0 0.0%	2 1.1%	0 0.0%	2 1.1%	2 1.1%	6 0.7%
Community leader (formal)	1 0.6%	0 0.0%	0 0.0%	0 0.0%	3 1.7%	4 0.4%
Women's groups	5 2.9%	7 3.8%	2 1.1%	3 1.6%	1 0.6%	18 2.0%
Farmers' association	6 3.4%	1 .5%	2 1.1%	0 0.0%	0 0.0%	9 1.0%
No one	1 0.6%	1 0.5%	0 0.0%	0 0.0%	0 0.0%	2 0.2%
Other	4 2.3%	2 1.1%	3 1.7%	1 0.5%	1 0.6%	11 1.2%
<b>Total</b>	<b>174</b> <b>100.0%</b>	<b>183</b> <b>100.0%</b>	<b>176</b> <b>100.0%</b>	<b>187</b> <b>100.0%</b>	<b>180</b> <b>100.0%</b>	<b>900</b> <b>100.0%</b>

\* Answer to question: Who would help if you had problems?

We found that the children in our study were, at the age of 12 or 13, active in their households and communities and engaged in discussions about changes affecting them, and they were articulate in identifying their roles and responsibilities in managing economic difficulties at home. It was clear that children's experiences varied, not only because of differing levels of poverty, but also in relation to gender expectations, their location (rural or urban) and their access to programmes and services, among other dynamic factors. A greater focus on children in social protection programmes would be valuable, while also taking into account differences between groups of children and what they mean for managing risk and vulnerability. Our research also emphasises the importance of further research into children's roles as social and economic actors within their households and communities and into the everyday ways in which they manage difficulties. Risks are not only about 'outcomes' (for example, worsening health or educational achievement). While these are obviously important indicators of children's well-being, a better understanding of children's roles in the everyday processes of coping with crisis is needed, in order that these processes are appropriately supported. It was clear that children contributed to their households through work and caring activities and by making sacrifices in their food consumption, as described above. Nonetheless, they also emphasised the need for better and more effective social protection programmes for supporting their efforts, especially for vulnerable groups and in difficult times.

# Appendix: Community Profiles

## **Polur**

This is the only urban community among the four qualitative fieldwork sites. It is an informal settlement with a mainly Muslim population. The population is approximately 2,000 living in 400 households. It is an overcrowded locality with narrow lanes and stagnant water. The houses have poor ventilation and sanitation facilities. Among the main sources of employment are jobs in construction and domestic work, 'taxi' service, and in the city's shops. Being an urban slum in the heart of the state capital, its residents have access to all the basic services. There are five private schools and three government schools. There are also three mosques in the area, and studying Arabic and the Koran are major pursuits amongst local children.

## **Mayurbhanj/Katur**

This rural community is situated in Anantapur district. Accessible by tarmac road, it is at a distance of 40 kilometres from Guntakal, which is one of the state's major railway junctions. In 2000/1, Mayurbhanj was divided into two villages separated by about half a kilometre as a result of caste conflicts in the area. Now there is 'new Mayurbhanj' and an 'old Mayurbhanj' with 200 households in each. The major castes in the village are *Boya* Caste and Scheduled Caste. There are also five households belonging to the Forward Caste, and these families dominate in the village because of their caste and land holdings. Agriculture and agricultural labour are the main sources of livelihood in this community. Livestock-rearing is also one of the major occupations. A drought-prone area, all the crops are dependent on the rainfall. During the non-agricultural season, most of the inhabitants attend to the labour work provided under the government's employment guarantee scheme (NREGS). Some of the families also migrate to the nearby villages, towns and cities in search of food and work during the non-agricultural season.

In old Mayurbhanj, there is a government upper primary school which runs classes up to standard 7. Midday meals are provided for the school children. Children continue their high school education at the nearby high school, which is approximately three kilometres away from the village. Since this school is at a distance from the village and the route to the school is also quite deserted, many of the village girls discontinue their education after primary school. There is also a pre-school in this village.

## **Poompuhar**

This rural community is comprised of 463 families with a total population of 2,040. The majority speak Telugu and the dominant group is the Backward Castes, who are Hindus. There are also a sizeable number of Scheduled Caste households, which are located in a specific area at the entrance of the community. (However, there are no children from this social group in this study sample.) The community is accessible by surfaced roads and is well connected by scheduled buses and private transport systems. The major occupations are in agriculture, livestock and daily wage labour. Child labour is engaged for cotton harvesting, and children (mostly girls) are out of school for two to three months each year to

work in the cotton fields. Seasonal migration (February/May until June/July) is common, with adults moving to distant places for labour and leaving their children and aged parents behind in the village. The village has access to most basic services, including electricity, drinking water, drainage, a health centre and religious institutions. It is also covered under different government programmes, including food assistance, educational assistance, health services, natural resource management and other social security programmes. The community has two *anganwadis* (pre-schools) and a high school, which are run by the government.

## Patna

Patna is a tribal community in the Srikakulam district. The area contains 1,056 families with a population of 4,455. The dominant group belong to the Forward Caste, are Hindus and speak Telugu, though they are fewer in number than the Scheduled Tribes in the area (the Savara and Jathapu). The Jathapu people generally have higher social status and speak the same language as the people living in the plains area. The Savara people have a different language and script.

The community is in a hilly area. Agriculture, horticulture and non-timber forest produce (NTFP) are the prime sources of income to the people living in these communities. The Government had assigned one to three acres of dry land to Scheduled Tribe families for horticulture. This area is suitable for growing cashew, mango, pineapple, pulses, cereals and commercial crops like turmeric. The integrated Tribal Development Agency (ITDA) is an important source of employment to young people who are being employed as community teachers in large numbers. Most habitations are accessible though the internal approach roads are difficult to travel on. Road connections are limited to scheduled bus services and so people walk long distances to reach their destinations. The community is often affected by cyclones and roads can be cut off by water flowing from the hills.

The community has access to basic services such as religious institutions, public internet, drinking water, government and private schools, pre-school, electricity, etc. *Anganwadis* are accessible to almost all the communities in the area, though they may not be located within the same village. Savara children often find it difficult to cope in school as they are taught in Telugu. The government has therefore made special arrangements for books to be provided in the Savara language and teachers to be trained in this language.

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