Thinking about youth poverty through the lenses of chronic poverty, life-course poverty and intergenerational poverty

Karen Moore
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Chronic Poverty Research Centre
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Abstract

Youth poverty is a serious global problem, not least because of the large numbers of youth and children living in absolute poverty in developing countries. In many contexts, youth are relatively likely to experience poverty because of age-based discrimination and the uncertainties and dynamism surrounding the transition from childhood to adulthood. But it is not always the case that youth are disproportionately poor. The relative extent of youth poverty in a given context depends on the interaction of many different factors.

This paper draws upon work by the Chronic Poverty Research Centre to argue that the related concepts of chronic poverty, life-course poverty and intergenerational poverty are useful for understanding youth poverty. First, analysis of the causes of chronic poverty can help locate the relative position of different groups of the poor and facilitate policy prioritisation. Second, life-course events (e.g. leaving school, starting work, having children) play a significant role in shaping vulnerability to poverty. These ‘life events’ are more likely to occur during particular ‘life stages’, but stage is only partly related to age. Third, it is important to take an intergenerational perspective because poverty experienced in youth is often linked to parental poverty and childhood deprivation, and – like poverty in childhood or old age – can have implications across the life-course of a young person and that of her/his household.

At the same time that youth may not always be among the poorest or the most vulnerable, adolescence and young adulthood may be the period, after early childhood, in which anti-poverty interventions have the most potential for long-term positive change. Constructing and analysing developing country panel datasets (quantitative and qualitative) can foster the development of suitable interventions, appropriately timed.

Note

An earlier version of this paper (Chronic, life-course and intergenerational poverty, and South-East Asian youth) was presented to the UN Workshop on Youth in Poverty in South-East Asia (Yogyakarta, Indonesia, 2-4 August 2004), and is published in the forthcoming United Nations World Youth Report 2005. Support for the writing of this paper provided by the Programme on Youth, Division for Social Policy and Development, United Nation’s Department of Economic and Social Affairs (UNDESA) is gratefully acknowledged. Thanks to Joop Theunissen and Charlotte Van Hees (UNDESA), Richard Curtain, and the other participants of the workshop, for useful comments. This paper was also presented to the Childhoods 2005 Conference (Oslo, Norway, 29 June – 3 August), in the parallel session ‘Growing up in a context of poverty and marginalization: childhood poverty – analytical and experiential lenses’. Conference participants’ helpful comments are duly acknowledged. Thanks also to David Hulme and Shailen Nandy.

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Table of contents

Abstract and note 2
1 Introduction 4
2 The relevance of chronic, life-course and intergenerational poverty to youth poverty 4
   2.1 Chronic poverty – who, where and why 4
   2.2 Poverty dynamics 8
   2.3 Conceptualising and measuring poverty over the life-course 9
   2.4 The intergenerational transmission of poverty 12
   2.5 The distribution of resources and care 15
   2.6 Sensitivity, resilience and plasticity 17
   2.7 Interrupting life-course poverty 20
3 Childhood deprivation and estimates of youth poverty 20
   3.1 Implications for policy 21
4 Conclusion 23
References 24

Figures

Figure 1 – The global extent and distribution of chronic poverty 5
Figures 2a and 2b – Poverty dynamics in rural and urban Vietnam (1993-8) 8
Figure 3 – Stylisation of IGT and life-course poverty/well-being 14
Figure 4 - Timing matters – An adaptation of Yaqub’s ‘Born poor, stay poor?’ 14

Boxes

Box 1 – Key maintainers and drivers of chronic poverty, with examples of implications for youth 6
Box 2 – Livelihoods approach to intergenerationally-transmitted poverty 13
Box Three – Not a simple story: The influence of social structures and perceptions on investments in children in rural Philippines 17
Box Four – The intergenerational transmission of poverty via nutrition 19
1 Introduction

This paper comprises a review of the related concepts of chronic poverty, life-course poverty and intergenerational poverty, and argues that the concepts are useful to understanding youth poverty. The argument is elucidated and furthered through empirical data, with a focus on the ‘developing’ world, particularly South-East Asia.

In the first part of the paper, it is argued that chronic, life-course and the intergenerational transmission of poverty are useful to understanding youth poverty for two reasons: much youth poverty has its roots in childhood poverty, and some childhood poverty has its roots in youth poverty. First, this approach suggests that the poverty experienced by youth is often linked to childhood deprivation and parental poverty: that in one way or another, the ‘older’ generation has been unable to provide the assets required by the ‘younger’ generation, such that they are unable to effectively meet challenges faced during youth. These challenges may be both structural and idiosyncratic. Second, like poverty in childhood or in old age, poverty during youth can have implications across an individual’s life-course, and across the life-course of her or his household. In many cases, children born to youth in poverty may be especially susceptible to persistent poverty. Drawing on these two arguments, the paper presents new estimates of youth in extreme poverty, based on a new child-centred approach to estimating childhood deprivation, recently developed by Gordon et al. (2004).

2 The relevance of chronic, life-course and intergenerational poverty to youth poverty

This introduction to the concepts of chronic, life-course and intergenerational poverty are based on The Chronic Poverty Report 2004-05 (2004), Moore (2001), and Harper, Marcus and Moore (2003). More detail can be found in these documents, as well as on the Chronic Poverty Research Centre (CPRC) website (www.chronicpoverty.org).

2.1 Chronic poverty – who, where and why

In the recently launched Chronic Poverty Report, the CPRC estimates that between 300 and 420 million people are trapped in poverty. They experience deprivation over many years, often over their entire lives, and sometimes pass poverty on to their children. Many chronically poor people die prematurely from health problems that are easily preventable. For them, poverty is about deprivation in many dimensions – hunger and undernutrition, dirty drinking water, illiteracy, a lack of access to health services, social isolation and exploitation, as well as low income and assets. Such deprivation exists in a world that has the knowledge and resources to eradicate it.

The chronically poor are not a distinct group, but usually are those who are discriminated against, stigmatised or ‘invisible’: socially-marginalized ethnic, religious, indigenous, nomadic and caste groups; migrants and bonded labourers; refugees and internal displacees; people with impairments and some illnesses (especially HIV/AIDS). In many contexts, poor women and girls, children and older people (especially widows) are more likely to be trapped in poverty.

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1 For the sake of simplicity, in this paper I use ‘parents’ to signify older generations of individuals responsible for the well-being of individuals in children. The often significant role of grandparents, siblings and other relatives and non-relatives is duly acknowledged.
While chronically poor people are found in all parts of the world, the largest numbers live in South Asia (134 to 188 million; see Figure One). The highest incidence is in sub-Saharan Africa, where between 30% and 40% of all present day ‘US$1/day' poor people are trapped in poverty: an estimated 90 to 120 million people. East Asia has significant numbers of chronically poor people, between 54 to 85 million, most of whom live in China. Within regions and countries there are often distinct geographies of chronic poverty, with concentrations in remote and low potential rural areas, politically marginalized regions, and areas that are not well connected to markets, ports or urban centres – areas that are also often home to indigenous communities. There are also concentrations of chronically poor people in particular slum areas of towns and cities, as well as the millions of the ‘homeless poor’.

The causes of chronic poverty are complex and usually involve sets of overlaying factors. Sometimes they are the same as the causes of poverty, only more intense, widespread and lasting. In other cases, there is a qualitative difference between the causes of transitory and chronic poverty. Rarely is there a single, clear cause. Most chronic poverty is a result of multiple interacting factors operating at levels from the intra-household to the global. Some of these factors are maintainers of chronic poverty: they operate so as to keep poor people poor. Others are drivers of chronic poverty: they push vulnerable non-poor and transitory poor people into poverty out of which they cannot find a way out. Not all chronically poor people are born into long-term deprivation. Many slide into chronic poverty after a shock or series of shocks from which they are unable to recover. A poverty-related shock experienced at a particular time in an individual or household’s life-course – including during adolescence or young adulthood – can often exacerbate the effect. Box One details the maintainers and drivers of chronic poverty, with a focus on the implications of the different processes for youth.

2 In The Chronic Poverty Report 2004-05, this is illustrated by the story of Maymana and Mofizul, a household in rural Bangladesh: their chronic poverty is an outcome of ill-health, widowhood, a saturated rural labour market, disability, social injustice and poor governance, among other factors.
Box One – Key maintainers and drivers of chronic poverty, with examples of implications for youth

Source: Adapted from CPRC (2004).

<table>
<thead>
<tr>
<th>Key maintainers of chronic poverty</th>
<th>Examples of implications for youth</th>
</tr>
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<tbody>
<tr>
<td>◦ No, low or narrowly-based economic growth means that there are few opportunities for poor people to raise their incomes and accumulate assets.</td>
<td>◦ The employment effects of no, low or narrow-based growth appear to be most extreme for youth. In most countries, young people are between two and four times as likely to be unemployed as those over 25 (ILO 2004). This may reflect real or perceived lower skills levels among disadvantaged youth, and more limited social capital networks (CHIP 2004). ◦ Disillusionment, disappointment and desperation can affect young people who are unable to find or keep decent or productive work despite education and skills, undermining their sense of well-being, and increasing the likelihood of recruitment into militant groups or organised crime.</td>
</tr>
<tr>
<td>◦ Social exclusion and adverse incorporation interact so that people experiencing discrimination and stigma are forced to engage in economic activities and social relations that keep them poor – poorly paid, insecure work; low and declining assets; minimal access to social protection and basic services; and dependence on a patron.</td>
<td>◦ In many contexts, being young increases one’s chances of facing discrimination, particularly in the labour market. As is generally the case, youth who also face another form of discrimination – i.e. based on gender, impairment, ethnic status etc. – will be particularly badly off. ◦ If they have not had the opportunity to build their own networks, young people will be solely dependent on the social and political capital of their households and communities. Where these are weak or destructive (e.g. a member of a marginalized ethnic minority or client-household), the young person’s capacity to build her own positive socio-political relationships may be limited.</td>
</tr>
<tr>
<td>◦ In disadvantaged geographical and agro-ecological regions, poor natural resources, infrastructure and basic services; weak economic integration; and social exclusion and political marginality create ‘logjams of disadvantage’.</td>
<td>◦ Youth are often particularly determined to escape remote, marginal or stagnant areas, and some are able to build better lives as urban migrants. However, limited skills and social networks, membership of an ethnic or linguistic minority, and a lack of access to information undermine many young people’s urban livelihoods. ◦ Disappointment and desperation can affect young people who are unable to out-migrate, because of gender, illness or impairment, family responsibilities and/or extreme deprivation, further undermining their sense of well-being and increasing the likelihood of recruitment into militant groups or organised crime.</td>
</tr>
<tr>
<td>◦ High and persistent capability deprivation, especially during childhood – poor nutrition, untreated illness, lack of access to education – diminishes human development in ways that are often irreversible.</td>
<td>◦ Poor health and nutrition during their own childhood and adolescence means that pregnant women have higher risks of maternal and child mortality and morbidity. This is compounded by early childbearing. It has been estimated that in 2004, 17% of babies in developing countries were born to women between the ages of 15 and 19, and are at greater risk of ill-health (see Box Three). ◦ Unhealthy, poorly educated children can grow into young people with more limited capacity for learning and working. However, adolescence and young adulthood – i.e. when ‘adult functionings’ are being developed – may also act as a ‘window of opportunity’. Skills, education, and health and nutrition status acquired during these periods may ‘override’ earlier disadvantages. See Figure Four and subsequent discussion.</td>
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3 See Abeyratne (2004) for a discussion of how a stagnant economy along with widespread social exclusion of a large and educated youth population laid the ground for the emergence and maintenance of political conflict in Sri Lanka. It is important to note that youth, including and often particularly the disenfranchised, are often at the forefront of liberation movements, both violent and peaceful (see Nina 1999 on South Africa; UNICEF 2002 on Colombia and elsewhere. Thanks to a participant at the Oslo Childhoods Conference (29 June 2005) for reminding me of this important fact.
### Key maintainers of chronic poverty

<table>
<thead>
<tr>
<th>Examples of implications for youth</th>
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</thead>
<tbody>
<tr>
<td>In weak, failing or failed states, economic opportunities are few; a lack of basic services and social protection means that people can easily fall into desperate poverty after an illness, and that children are uneducated; violence destroys assets and discourages investment; and poor people have few means of asserting their rights.</td>
</tr>
<tr>
<td>No specific implications for youth, other than an intensification of the processes detailed above.</td>
</tr>
<tr>
<td>Weak and failed international cooperation over the 1980s and 1990s has deepened poverty through structural adjustment and over-rapid economic liberalisation, allocated aid away from countries with large numbers of chronically poor people, and blocked off trade opportunities for poor countries.</td>
</tr>
<tr>
<td>No specific implications for youth, other than an intensification of the processes detailed above.</td>
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### Key drivers of chronic poverty

<table>
<thead>
<tr>
<th>Examples of implications for youth</th>
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</thead>
<tbody>
<tr>
<td>Severe and/or repeated shocks</td>
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<tr>
<td>Ill-health and injury</td>
</tr>
<tr>
<td>Environmental shocks and natural disasters</td>
</tr>
<tr>
<td>Market and economic collapse</td>
</tr>
<tr>
<td>Violence and conflict</td>
</tr>
<tr>
<td>Breakdown of law and order</td>
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<tr>
<td>Young people are often in the early stages of physical and financial asset accumulation, and as such they may find it particularly difficult to weather and bounce back from a shock.</td>
</tr>
<tr>
<td>Few private or collective assets to fall back on</td>
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<tr>
<td>(Limited physical, financial, social or human capital, highly susceptible to shocks)</td>
</tr>
<tr>
<td>Young couples may deplete assets or reduce their own consumption to ensure that their young children receive health or education, where these services are costly.</td>
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<tr>
<td>Ineffective institutional support</td>
</tr>
<tr>
<td>(e.g. lack of effective social protection, public information, basic services, conflict prevention and resolution)</td>
</tr>
<tr>
<td>Even in labour markets with social insurance mechanisms in operation, young people generally have not built up the time or contributions to benefit.</td>
</tr>
<tr>
<td>Poverty occurring at certain points in an individual or household’s life-course</td>
</tr>
<tr>
<td>(e.g. in utero, childhood, old age, youth and young households – see column 2).</td>
</tr>
<tr>
<td>When a young person is forced to leave education before achieving a secondary, tertiary or vocational qualification, there are reduced returns to, or complete loss on, the significant long-term investments in education of time and resources made by the young person and her family. It becomes more difficult to find productive work and rebuild assets.</td>
</tr>
</tbody>
</table>

**LIKELY TO TRAP PEOPLE IN POVERTY**
The knowledge now available about chronic poverty must be used to mobilise public action and reshape development strategy. While there are many policies that are potentially beneficial for both the poor and the chronically poor, many people living in chronic poverty are not ‘just like the poor but a little bit further down the poverty spectrum’. Overcoming chronic poverty requires policy-makers to reorder their priorities and set their sights higher than that of the current consensus on poverty reduction policy. Development strategy needs to move beyond its present emphasis on economic growth – hundreds of millions of people are born poor, live poor and die poor in the midst of increasing wealth. Chronically poor people need more than opportunities to improve their situation. They need targeted support and protection, and political action that confronts exclusion. If policy is to open the door to genuine development for chronically poor people, it must address the inequality, discrimination and exploitation that drive and maintain chronic poverty. Actions to confront chronic, intergenerational and youth poverty will be returned to later in this paper.

2.2 Povery dynamics

In order to understand and confront chronic poverty, one must understand poverty dynamics – the changes in well-being or ill-being that individuals and households experience over time. Falling into poverty, escaping poverty and getting stuck in poverty are each based on combinations of structural and idiosyncratic factors from the individual and household, to the global. Life-course events, including transitions into adulthood or old age, marriage and child birth, widowhood and death, often play a significant part in altering someone’s vulnerability to poverty.

However, conventional analysis focuses on poverty trends – changes in poverty rates at the aggregate level. This can mask important processes at the household level. For example, during the 1990s, Vietnam experienced significant reduction in poverty: from 1993 to 1998, rural and urban poverty rates fell by about 24% and 15% respectively. But these aggregate poverty trends tells us nothing about what happened to individual households. In rural areas, one-third of the population remained poor, and another 5% fell into poverty (Figure 2a). The urban picture is nowhere near as severe – about 7% stayed in poverty while only about 2% moved into poverty (Figure 2b).

Why did Vietnam’s pro-poor growth fail to reach over half of the rural poor and over one-quarter of the urban poor? Looking at the data in more detail provides some indication. In urban areas, the chronically poor are more likely to be wage labourers, and in rural, dependent on subsistence agriculture. Children in chronically poor households are much
more likely to be under- and malnourished, and out of school. Compared to South Asia and Sub-Saharan Africa, landlessness and assetlessness seem to be less significant as correlates of chronic poverty.

In this way, understanding poverty dynamics can provide a sounder basis for anti-poverty policy formulation than relying solely on poverty trends. This more nuanced understanding of poverty requires the collection of panel data alongside standard cross-sectional household surveys. While cross-sectional household surveys collect data from a representative sample of households, these are not necessarily the same households in each survey. Panel data, on the other hand, are longitudinal datasets that track the same households over time; ideally, panel datasets are comprised of more than two waves of data collection. In this way, those households who are chronically poor (poor in each period) can be identified, as well as those that move in and out of poverty (the transitorily poor – poor in at least one period, but not in all periods).

2.3 Conceptualising and measuring poverty over the life-course

The collection and analysis of panel data, as well as innovative qualitative methods including life histories, is also key to understanding the ways in which the incidence and experience of poverty can change across individual and household life-courses. Poverty based on structural discrimination can be exacerbated and entrenched if it occurs at certain points in an individual or household’s life-course, and cross-sectional data can only go some way in disentangling cohort effects from life-course effects.

For example, consider data that suggests that women aged 65+ are twice as likely to be living in poverty than adult women aged below 45. Based on cross-sectional survey data alone, it would be difficult to determine whether this is primarily due to a cohort effect (e.g. older women are less likely to be literate than their younger counterparts, who have grown up with a different set of educational opportunities and gender roles) or a life-course effect (e.g. women are more likely to be widowed, dependent and/or in ill-health as they age). As an individual ages, her roles, capacities and responsibilities change, as do the opportunities available to her. These changes occur within the context of an ever-changing set of household and other social relations. Changes in household composition (including size, dependency ratios and headship) – through marriage, divorce, abandonment, birth, illness, death, and migration – are differentiated along lines of age, gender and health status, and as such significantly influence how poverty and well-being are experienced by individual members. Returning to our example, panel data can give a better idea whether the younger cohort’s education will ‘override’ the challenges thrown up as individuals and households age.

Indeed, in order to measure the extent of youth poverty, Curtain (2004a) also recommends the use of panel datasets. This is because, he suggests, “young people are more likely to be experiencing a more dynamic form of poverty” (ibid. 18) “due to the obstacles most face in seeking to achieve adult status” (ibid. 4) – i.e. a life-course effect. It is intuitively the case that youth, however defined, face a set of especially dynamic challenges and opportunities:

The transition from childhood to adulthood involves confronting and overcoming a number of uncertainties. Moreover, young people potentially face a large number of changes at the same time, thus compounding the difficulties they may face. These obstacles are encountered in relation to work, living arrangements and personal relationships (ibid. 18).

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4 The ratio of economically-active household members to those who are economically dependant. Children, older people, the ill and disabled are generally considered as dependents, although each may contribute directly or indirectly to household income and consumption.
However, it is because of this very dynamism that ‘youth’ is so difficult to functionally define. The extent to which a young person is economically dependent, independent, or ‘depended-on’ can change extremely rapidly, and has significant implications for his present and long-term well-being. Consider four 18-year old women living in urban Asia:

- Anna lives with her parents and siblings. She is in full-time education and does not work.
- Meena lives alone in a women’s hostel and works in a garment factory. She supports herself, and sends money to her parents in her village for her siblings’ education.
- Sonia lives alone with her husband. She works as a nursery teacher and at home.
- Tania lives with her husband, two small children, in-laws, and her father-in-law’s parents. She works at home.

None of these women are unusual, yet even from this thumbnail sketch it is apparent that each has a very different set of roles and responsibilities, and different opportunities and resources to which she can turn during a crisis. Further, within a very short time – perhaps three years – Anna can ‘become’ Meena, then Sonia, then Tania. Responsibility for her well-being shifts from her parents, to herself, to her husband and in-laws, and she takes on the responsibility for some of her siblings’ and own children’s needs. She can find similar socio-economic conditions more or less challenging depending on, for example, how many dependents she has, whether she is allowed to work outside the home, or the extent to which young women are allocated sufficient resources. Yet she will likely still be defined as ‘youth’.

Longitudinal data can help analysts capture the effects of these transitions on poverty and well-being during the period of transition from childhood through youth into adulthood and throughout the life-course. A good example is a recent paper by Rigg and Sefton (2004) analysing life-course effects on income in the United Kingdom. Using ten waves of the British Household Panel Survey, the authors combine longitudinal and cohort analysis of the income trajectories of people at different stages in their lives, and thus build a picture of income dynamics over the whole life cycle.

Importantly, their definitions of ‘life stages’ are only partly linked to age; in their model, having a partner and/or children of different ages make a difference. While ‘life stage’ affects the likelihood of experiencing particular ‘life events’, ‘age’ is not the only factor that determines ‘stage’. Further, they note that the life stages are not sequential, can overlap, and may not all be experienced by all people, or may be experienced more than once. Anna and Tania from the example above are in different life stages despite their common age, and this in turn affects the likelihood that each will, for example, start a job or become a widow.

For the UK, Rigg and Sefton find that certain life events are closely associated with specific income trajectories: partnership formation and children becoming independent are associated with upward trajectories, while having children and retiring are associated with downward trajectories. However, there is considerable heterogeneity in income trajectories following these different events, and a downward trajectory does not equate to a slide into poverty. Looking only at age, they find that youth (‘older children and young adults’, aged 11-24) are relatively likely to experience an upward trajectory, but also show a higher proportion of unstable trajectories.

While long-term and well-analysed panel datasets are available for many high income countries, panel datasets from low and middle-income countries that allow for analysis of poverty dynamics remain few and far between. The very nature of longitudinal surveys means that they require significant funds to be committed to data collection and analysis over the long-term, which tends not to fit into the budgetary cycles of government statistical offices or donor bodies. Those panels that do exist are often not nationally representative (e.g. only undertaken in one region, or in rural but not urban areas). All longitudinal datasets suffer
from participant attrition and changes in definitions and topics of interest over time, especially those cross-sectional household surveys later turned into panels. Further, cross-country comparability is limited by very different lengths of time between each survey, ranging from one to ten years. The majority of these studies span less than five years and/or have only two waves of data. Most datasets are not accessible (or affordable) to researchers outside the host institution. Datasets with sufficiently disaggregated data for analysing poverty by age or life stage are even rarer.

The situation is beginning to change. There are now two large-scale, child-focussed longitudinal surveys underway in the developing world, the first of which puts children’s experiences of poverty at the centre of analysis.

- **Young Lives**, initiated in 2001, is investigating changes in child poverty over 15 years in Ethiopia, India, Peru and Vietnam. (see [www.younglives.org.uk](http://www.younglives.org.uk))
- **Birth-To-Twenty**, initiated in 1990, explores the social, economic, political, demographic and nutrition transitions underway in urban South Africa, and the impact on a cohort of children, adolescents and their families. (see [http://www.wits.ac.za/birthto20/](http://www.wits.ac.za/birthto20/))

In addition, several longitudinal survey projects have recently undertaken additional waves (for example, in Indonesia), while others are planning additional waves (for example in Bangladesh and Mexico), and many plan to make the datasets publicly available within a reasonable amount of time. Whether these can be used for life-course or intergenerational analysis of poverty depends in part on the extent to which information on individuals within the household has been gathered.

Curtain also argues that “Young people are less likely to be identified as a poverty target group where a static definition of poverty prevails. This static definition focuses on cases of persistent poverty among the long-term poor.” While life-course factors are not always well considered in traditional poverty analysis, I would argue that while the *features* of youth poverty tend to be highly dynamic, youth can also face chronic poverty. This is particularly the case when youth poverty is grounded in parental and childhood poverty, and when it has implications for a youth’s entire life-course as well as that of her own offspring. Longitudinal data is required to understand both aspects of youth poverty – the long-term causes and implications as well as the shorter-term fluctuations in opportunities, obstacles and well-being.

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5 In contrast, in the American Panel Study of Income Dynamics ([http://psidonline.isr.umich.edu/](http://psidonline.isr.umich.edu/)) has collected data annually since 1968. By 2001, 4,800 households had grown to over 7,000. At the conclusion of 2003 data collection, the PSID will have collected information about more than 65,000 individuals spanning as much as 36 years of their lives. The British Household Panel Survey ([http://iserwww.essex.ac.uk/ulsc/bhps/](http://iserwww.essex.ac.uk/ulsc/bhps/)) has collected annual data over thirteen years on 5,500 sample households, new members to those households, and ‘spin-off’ households when individuals have left. Both panels are regularly supplemented with other large samples on topics of interest, such as child development.

6 See Moser (2003) for a further discussion of issues surrounding poverty-related longitudinal research.

7 Annex One of Moore (2004) as well as CPRC (2003) provide further detail on these and other panel datasets in developing countries, and how to access more information on them (if not the data itself). A few qualitative longitudinal surveys are included in the table, as well as two birth cohort studies which, although primarily health-focussed, are notable because they are large-scale developing country panel datasets involving children.

8 Elsewhere, Curtain states that “existing forms of data collection on the poor may be overly oriented to finding out about groups caught in chronic poverty.” This is not strictly true. ‘Static’ (cross-sectional) surveys measure whoever is poor at a particular moment, so both the temporarily and the chronically poor are measured but there is no way of distinguishing between the two. Consider a population with ten households, two of which are ‘never poor’, and two of which are ‘always poor’. The remaining 60%
2.4 The intergenerational transmission of poverty

Poverty is not transferred from one generation to the next as a ‘package’, but as a complex of positive and negative factors that affect a child’s chances of experiencing poverty. As such, livelihoods or ‘assets’ approaches can be useful for understanding the intergenerational transmission (IGT) of poverty, through focusing on the transfer, extraction, and absence of transfer of different forms of poverty-related assets or capital (human, social-cultural, social-political, financial/material and environmental/natural) that can result in poverty in both a multidimensional and in a narrower money-metric sense, in the context of social, institutional and policy environments.

IGT poverty can involve both the ‘private’ transmission (or lack of transmission) of poverty-related capital from older generations of individuals and families to younger generations (especially, but not solely, from parents to their children), and the ‘public’ transfer (or lack of transfer) of resources from one generation to the next (e.g. through taxing the income of older generations to pay for the primary education system). Transfers can be both positive (e.g. cash assets, positive aspirations) and negative (bonded labour, poor nutrition, gender discrimination). Different kinds of assets are transferred (or not transferred) through many different mechanisms, described in Box Two.

These transfers are affected by the social, cultural, political, economic and institutional contexts in which they occur (Boxes Two and Three). While youth face discrimination in many contexts, the extent to which poverty-related capital is transferred to a particular young person depends on norms of entitlement based on their gender, position among siblings and other family members, marital and parental status, health status, as well as on idiosyncratic factors such as the attitude of both parents and youth. Indeed, socially-constructed norms of entitlement not only foster or constrain intergenerational transfers, but are often intergenerationally transferred themselves – discriminatory behaviour often endures across generations.

Both the concepts of ‘intergenerational transmission of poverty’ and ‘life-course poverty’ call attention to the processes that can lead to or entrench poverty, as stylised in Figure Three. ‘Life-course poverty’ denotes the ways in which a poor child or young person can grow into a poor – or even poorer – adult. The processes involved are often so closely related that the distinction can be difficult to make – e.g. the inability of a parent to provide sufficient education to a child can be labelled as IGT poverty, while an uneducated child growing into an unemployed adult can be labelled as life-course poverty – in practice, the processes work together.

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9 Life-course poverty is also sometimes known as INTRA-generational poverty, although this can also mean poverty-related transfers within a generational cohort i.e. between same-generation peers or family.
### Box Two – Livelihoods approach to intergenerationally-transmitted poverty

<table>
<thead>
<tr>
<th>WHAT is transmitted?</th>
<th>HOW is it transmitted?</th>
<th>Examples of implications for youth</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>FINANCIAL, MATERIAL, ENVIRONMENTAL CAPITAL</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash, Land, Livestock, Housing, buildings</td>
<td>Insurance, pensions, Inheritance, bequests, dispossession, <em>Inter vivos</em> gifts and loans, Dowry, bridewealth, Environmental conservation/degradation, Labour bondage</td>
<td>Depending on the socio-legal context, young women or men may not be able to access, own or manage particular forms of assets, including inheritance, leaving them dependent on older relatives. Dowry demands can affect recently married young women and their families in particular.</td>
</tr>
<tr>
<td>Other productive/non-productive physical assets, Common property resources, Debt</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>HUMAN CAPITAL</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Educational qualifications, knowledge, skills, coping/survival strategies</td>
<td>Socialisation, Investment of time/capital in care; education/training; health/nutrition, Contagion, mother-to-child transmission, Genetic inheritance</td>
<td>Youth are often expected to be making a transition from full-time education to employment, if they have not done so already, potentially affecting parental investment in education or training. Those living with HIV/AIDS are disproportionately adults of ‘working age’ and youth, with negative short and long-term effects on the sufferer, her household, particularly children and older people, and the economy.</td>
</tr>
<tr>
<td>Good mental/physical health, Disease, impairment, <em>Intelligence</em>?</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>SOCIAL, CULTURAL, POLITICAL CAPITAL</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Traditions, institutions, norms of entitlement, value systems, Position in community</td>
<td>Socialisation and education, Kinship, Locality, Genetic inheritance</td>
<td>Young people are often key targets for those attempting to maintain or build social, political, cultural movements. This can influence other forms of capital available to them, and the livelihood choices that they make.</td>
</tr>
<tr>
<td>Access to key decision-makers, patrons, organisations, ‘Cultures of poverty’?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Which factors AFFECT transmission?**

- Norms of entitlement determining access to capital
- Economic trends and shocks
- Access to and nature of markets
- Presence, quality and accessibility of public, private and community-based social services and safety nets
- HIV/AIDS pandemic; other diseases regionally endemic; stigma
- Structure of household and family
- Child fostering practices
- Education and skill level of parent
- Intent/attitude of parent and child
- Nature of living space

Source: Adapted from Moore (2001).
Figure Three – Stylisation of IGT and life-course poverty/well-being

INTERGENERATIONAL: transfer, extraction, or absence of transfer of poverty-related capitals

Child is poor/non-poor based on transfer, extraction, absence of transfer of poverty-related capital, and on individual (e.g. resilience, agency) and structural (e.g. safety net, economic growth) factors

LIFE-COURSE EFFECT: poor/non-poor child ‘grows into’ poor/non-poor adult based on individual and structural factors


Figure Four – Timing matters – An adaptation of Yaqub’s ‘Born poor, stay poor?’

Parental poverty

Childhood poverty of offspring
(Contemporaneous adverse biological, social, economic effects on children)

Physiological and socio-economic damage that persists over the life-course, some of which is irreversible

Adult poverty of offspring

1. Affected by societal effects, intrahousehold resource distribution, ‘direct inheritance of non-income characteristics’

2. (a) Sensitive periods
(b) Resilience
(c) Plasticity

3. Possibility of interruption through adaptation, socio-economic opportunities. BUT this becomes more difficult with age (biologically, and because of accumulated disadvantage)

CENTRALITY OF YOUNG ADULTHOOD?
Life-course and intergenerationally-transmitted poverty can be a cause, characteristic, and effect of chronic poverty:

- **CAUSE:** Certain types and extents of deprivation, experienced at particular points in the life-course – especially but not solely early childhood – can lead to damage that is difficult if not impossible to reverse later in life.

- **CHARACTERISTIC:** The defining characteristic of chronic poverty is its persistence over time, so poverty that lasts throughout life, and/or is passed on to the next generation, is by definition chronic.

- **EFFECT:** There is evidence to suggest that the longer poverty lasts, the more difficult it becomes to escape. For example, Yaqub (2000) reports that in the USA people who have been in poverty for more than four years have a 90% probability of remaining poor the rest of their lives. As an individual or household falls below a ‘critical level’ (Chambers, 1983, wrote of ‘ratchets’; Yaqub, 2001, of ‘accumulated disadvantage) of one or more assets (e.g. income, social relationships, psychological resilience), it can become increasingly difficult to move from survival to improvement strategies.

It is important to disaggregate such figures by age, in order to determine the extent to which an additional year of poverty during infancy, childhood or youth, for example, has a greater or lesser effect on one’s capability to escape poverty than an additional year of poverty in adulthood. Yaqub (2002) suggests that the timing of poverty spells – even relatively short ones – also matters, as does the timing of interventions. **Figure Four** summarises this argument.

### 2.5 The distribution of resources and care

(1) First, the extent to which parent’s poverty is transmitted to their children is affected by how resources and care are distributed within the household and society. This idea is elaborated on in **Box Two** above, in the ‘Which factors AFFECT transmission?’ section. Parental investment in children – in terms of time and capital in education and training, health and nutrition, and general care – is strongly affected by available resources and localised norms of entitlement surrounding gender, age and birth order, among other factors.

For instance, in a study of social mobility and adolescent schooling gaps in Latin America, Andersen (2001) found that while in most countries there is a ‘reverse gender gap’, within households, gender as well as birth timing and birth order matter. Teenagers born to a 30-year old household head have about a 7% smaller schooling gap than those born to a 20-year old head. At a time when they must make decisions about their child’s education, young parents are likely to be earning a relatively low and erratic income, so they may act to postpone, reduce or avoid the formal and transactional costs of schooling. At the same time, number of siblings increases a young person’s schooling gap, unless the sibling is an older sister, in which case resources seem to be diverted from her to her younger siblings:

> “Thus, in a hypothetical family who raised first a girl, then a boy, and then a girl, the oldest sister would have a 0.52 year (or 24%) greater schooling gap than the

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10 An ‘adolescent schooling gap’ is defined by Andersen (2004:8) as the “disparity between the years of education that a teenager or young adult would have completed had she entered school at normal school starting age and advanced one grade each year, on one hand, and the actual years of education, on the other hand. Thus, the schooling gap measures years of missing education.” Teenagers are here defined as aged 13-19; only ‘those still living at home’ are included in the analysis. The ‘reverse gender gap’ in education describes the situation in most Latin America countries, where female teenagers have more education than males. In the developing world as a whole, the situation is reversed. Andersen’s analysis suggests that the overall reverse gender gap in education does not, however, appear to lead to as much more social mobility among female teenagers compared to male teenagers as expected.
younger sister. And this is not counting the life-cycle effect, which would further
tend to increase the older sister’s schooling gap compared to the younger sister’s
gap. The effects of siblings are larger in urban areas than rural areas.” (ibid, 30).

Box Three provides another example of how some of these factors, including gendered
norms of entitlement, family structure, parental education, and parental and child attitudes,
interact to determine the level of investment in young Filipina/os.

A lack of adequate education or training is often (but not always) a key constraint to one’s
present and future livelihoods opportunities. Further, in many countries, the impact of
women’s education on children’s (often particularly girls’) welfare is often much more
significant than men’s education. In South-East Asia, where gender gaps in education are
relatively low and education and literacy levels are relatively high (with the partial exceptions
of Lao PDR and Cambodia), Demographic and Health Survey (DHS) data from the late
1990s suggests that economic and social factors are limiting the capacity for many young
women to study beyond primary level. Overall, in the three countries for which DHS data are
available (Indonesia, the Philippines and Viet Nam), about 50% of those women who left
school at any time before completing higher education cited economic factors, and around
23% cited marriage, pregnancy or childcare responsibilities. Of those women who
discontinued their education after completing secondary school, just under two thirds cited
economic factors in the Philippines, and more than 40% of women cited marriage in
Indonesia.11

- In Vietnam, almost 30% of 20-24 year old women only had a primary education. Needing
to help the family was the strongest factor why women stopped studying before
completing primary school and getting married was the strongest factor after completing
primary school.
- In the Philippines, almost 20% of 20-24 year old women only had a primary education.
The inability to pay for school was the most important reason that a woman stopped
studying both after completing primary school and after completing secondary school.
- In Indonesia, the inability to pay for school was the most important reason that a woman
stopped studying after completing primary school, and getting married was the strongest
factor after completing secondary school.
- In Cambodia in 2000, almost 80% of women 20-24 had only a primary education. No
DHS data on reasons for drop-out is available.

National level economic change, such as that experienced in Vietnam over the 1990s, can
also play a significant role in the intergenerational transmission of poverty-related capital.
Wagstaff and Nguyen (2002) discuss the extent to which the liberalisation process during
the 1990s have lead to socioeconomic inequalities in child survival. In the early 1990s,
income quintiles did not show different under-5 mortality rates; by the late 1990s, the
U5MR among the poorest quintile was more than twice that among the richest. The authors
trace these changes to reductions among the poor (but not among the better-off) in
coverage of some health services and in women’s educational attainment.

11 In other countries for which there are relatively recent data, the proportion of those women who left
school at any time before completing higher education who cited economic factors as the primary
reason ranged from only 7% in Jordan (1997) and Turkey (1998) to 47% in Bolivia (1998). Over one
half of those Bolivian and Nepali women who left primary school before completion cited economic
factors. The proportion of those women who left school at any time before completing higher
education who cited marriage or children as the primary reason ranged from only 5% in Turkey to 58%
in Jordan. Over three quarters of those Nepali and Jordanian women who left secondary school before
completion cited marriage or children as the primary reason.
2.6 Sensitivity, resilience and plasticity

(2) Second, the extent to which the contemporaneous adverse biological, social, economic effects of parental poverty on children lead to long-term functional physiological and socio-economic damage depends on (a) when the child experienced poverty, (b) how resilient the child and his environment are to the effects of poverty, and (c) the extent to which the particular form of damage inflicted is functionally reversible (i.e. plastic).

(2a) Yaqub presents evidence that suggests that a human is most sensitive to negative effects of poverty (expressed as insufficient health and nutrition) when she is in the womb, and during the first few years of life. The growth and development, especially of the brain and immune system, that occur during these sensitive foetal and early childhood periods can lay the groundwork for future cognitive and physical capacity (and, possibly, more socio-culturally dependent qualities such as behaviour).

Box Four provides more detail on some of these mechanisms, and points out that children born to low-income adolescent girls are often especially susceptible to persistent poverty (see also Buvinic 1998). Poor adolescent girls are more likely to become pregnant and bear children than their better-off counterparts. Although there is a relatively low incidence of early motherhood in the South-East Asian countries for which there is data, among the poorest
quintile the situation is comparable to that in much poorer countries. For example, the birth-rate among 15-19 year old girls in the poorest income quintile in the Philippines is comparable to that found in Bangladesh or Zambia. As in most developing countries, teenage pregnancy is higher in rural areas, and among women with no or only primary education. This is a key means by which poverty is entrenched over generations.

(2b) Individual resilience (e.g. 'personality'), and the support offered by different segments of the environment (e.g. schools that provide suitable support for children with learning disabilities) can help children overcome early disadvantage, and stop physiological damage from becoming a functional impairment.

(2c) While 'resilience' refers to the child, 'plasticity' refers to the form of damage. A child is more or less resilient if she is able to overcome (i.e. bounce back from) a poverty-related experience to greater or lesser degree. The 'environment', broadly considered, can act as a 'protective factor', promoting children's resilience. But different forms of damage are more or less 'plastic', or 'functionally reversible'. For example, while the negative effects on future income of missing several years of school may be overcome through more education or training later on, labour market changes, etc., there are some forms of damage the effects of which even the most resilient child, in the most supportive environment, will find difficult to overcome. As noted in the box on nutrition, the long-term effects on physical and cognitive development of poor nutrition in utero are considered to be relatively irreversible, although there is some evidence that intensive interventions in early childhood can reverse some of the effects. Serious brain damage is perhaps the least plastic -- i.e. it can be impossible to reverse the negative effects of serious brain damage on motor skills and cognitive development.

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12 These differences are often extreme. For example, In 2001 Benin, teenage pregnancy was 2.5 times higher in rural than urban areas, over twice as common among those with no education as compared to those with a primary education, and over 6.5 times as among those with no education as compared to those with a secondary education or higher.
Box Four – The intergenerational transmission of poverty via nutrition

The intergenerational transmission of poverty via nutrition can begin in utero, as the child of an inadequately nourished mother is likely to grow less rapidly than that of an adequately nourished mother—an estimated 30 million infants are born each year in developing countries with impaired growth due to poor nutrition during foetal life (ACC/SCN 2000). Babies born with a low birth weight (under 2.5 kg) are much more likely to die than heavier infants, and to be stunted and underweight in early life. This can reduce their ability to fight disease and thus increase their chances of ill-health and death in the early years (ACC/SCN 2000; Kielman and McCord 1988, in Tudawe 2001), and possibly in later life. Evidence on the extent to which poor foetal growth is related to future disease is contested, with many studies finding strong effects (e.g. Godfrey and Barker 2000) and the weight of policy opinion inclined to this view (ACC/SCN 2000; James Commission 2000), while other studies find no significant relationship (Krishnaswamy et al 2002; Rasmussen 2001).

In malnourished and frequently sick young children, limited bodily resources may be conserved for fighting infection, with the result that they are directed away from brain and cognitive development. Where children’s cognitive development is impaired, particularly before age two, the impairment may be irreversible regardless of a later improvement in their nutrition and circumstances (ACC/SCN 2000). Education and care that promotes children’s cognitive development may partially compensate for this (Yaqub 2001), as may good nutrition during the adolescent growth spurt (Tudawe 2001), and should thus be considered important policy foci, as well as good nutrition during pregnancy and in early childhood (Mora and Nestel 2000).

Children whose cognitive development has been impaired in their early years may find learning more difficult, both at school and in terms of important life skills. Where this leads to difficulties obtaining skills or qualifications, their future labour market opportunities and thus earning prospects may be constrained. Similarly, for children who grow up to survive from manual labour, malnutrition in the early years may reduce their stature and impair their strength in adulthood, again reducing their earning prospects and possibly increasing their susceptibility to injury or disease, in comparison with better-nourished peers.

Girls who grow up stunted or anaemic are more likely to be underdeveloped for childbirth, and face higher risks of maternal and child mortality, and of low birthweight and stunting among their own children (ACC/SCN 2000). This is often compounded by an earlier start to childbearing among poorer women than their better-off counterparts—an estimated 12% of babies in the least developed countries are born to women aged 15–19 years (UNPD 2000).13 Their babies are at greater risk of having a low birthweight and being less healthy, leading to the cycle of harmful long-term effects described earlier.

Overall, there is considerable evidence of the long-term and intergenerational effects of poor nutrition. Adult and child malnutrition remains an enormous problem. In 2000, over 150 million pre-school children were estimated to be underweight and over 200 million children stunted (James Commission 2000). The consequences of this are shocking—“at current rates of improvement, about 1 billion children will be growing up by 2020 with impaired mental development” (James Commission 2000:iv). Tackling malnutrition should be an absolute priority for action. Clearly the specific action necessary is context-dependent, and includes food supplementation, both to promote adequate protein—calorie consumption and consumption of micronutrients, measures to promote later marriage and childbearing and thus prevent intergenerational transmission of poor nutritional and health status; and, combating gender or other biases in child feeding practices. Action to promote greater food security is also critical (ACC/SCN 2000). Many of these measures are dependent on public action—the wider enabling environment—and on a social context that enables individuals to access the resources they need to meet their own or others’ nutritional needs.

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13 UNPD 2004 data suggests that an estimated 17% of babies in the least developed countries are born to women aged 15 to 19 years, compared to 8% in the more developed regions.
2.7 Interrupting life-course poverty

(3) Childhood or in utero deprivation does not necessarily mean lifelong poverty, but interrupting life-course poverty requires combinations of adaptation and socio-economic opportunities. “Socioeconomic attainments require a sound basis at each life stage” (Yaqub 2002:1082; emphasis in original).

However, Yaqub argues, this becomes more difficult with age, as both biological and socio-economic disadvantage accumulate. This suggests the central importance of the period during which the majority of development of ‘adult functionings’ (mating, labour, capital accumulation14) occurs: adolescence and young adulthood. In many contexts, it may be the case that after prevention of harm through maternal and early childhood interventions, providing socio-economic opportunities and support to youth may be the most effective means of avoiding and interrupting intergenerational and life-course poverty. Ways of doing this are returned to below in Implications for policy.

3 Childhood deprivation and estimates of youth poverty

A recently-released UNICEF-funded report by Gordon et al (2004) uses an innovative child-centred methodology to measure the extent and depth of child poverty in developing regions. The authors argue that it is inappropriate to base estimates of childhood poverty on household income, expenditure or consumption profiles, and instead construct a set of indicators of severe deprivation of basic human needs – “those circumstances that are highly likely to have serious adverse consequences for the health, well-being and development of children. Severe deprivations are causally related to ‘poor’ developmental outcomes both long and short term” (7).

This is relevant to the discussion of youth poverty because (1) a proportion of these ‘children’ (i.e. those aged 15-18 years) are also defined by the UN as ‘youth’, (2) the remainder of these children will be youth within a few years, and (3) the authors have constructed their measure of childhood poverty to capture deprivation that can be expected to have negative implications for well-being in both the short and long term:

1. **Severe food deprivation**: children whose heights and weights for their age were more than –3 standard deviations below the median of the international reference population, that is, severe anthropometric failure.
2. **Severe water deprivation**: children who only had access to surface water (for example, rivers) for drinking or who lived in households where the nearest source of water was more than 15 minutes away (indicators of severe deprivation of water quality or quantity).
3. **Severe deprivation of sanitation facilities**: children who had no access to a toilet of any kind in the vicinity of their dwelling, that is, no private or communal toilets or latrines.
4. **Severe health deprivation**: children who had not been immunised against any diseases or young children who had a recent illness involving diarrhoea and had not received any medical advice or treatment.
5. **Severe shelter deprivation**: children in dwellings with more than five people per room (severe overcrowding) or with no flooring material (for example, a mud floor).
6. **Severe educational deprivation**: children aged between 7 and 18 who had never been to school and were not currently attending school (no professional education of any kind).
7. **Severe information deprivation**: children aged between 3 and 18 with no access to radio, television, telephone or newspapers at home.
8. **Severe deprivation of access to basic services**: children living 20km or more from any type of school or 50km or more from any medical facility with doctors. (This information

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14 Comparable to Curtain’s ‘work, living arrangements and personal relationships’.
was only available for a few countries, so it was not possible to construct accurate regional estimates of severe deprivation of access to basic services.)

Survey data on nearly 1.2 million children in 46 countries, collected mainly during the late 1990s, was used. The results show that over one billion children – more than one-half the children in developing countries – suffer from severe deprivation of at least one basic human need, and over one-third (674 million) suffer from absolute poverty (two or more severe deprivations).15

Gordon et al recommend focusing on improving basic infrastructure and services for families with children, particularly with regards to shelter, sanitation and safe drinking water in rural areas, but note that

…in order to eradicate absolute poverty among children, policies will need to be targeted at the various problems they face. A single set of anti-poverty policies for the planet is not the most effective or efficient way to eradicate child poverty. (31)

Disaggregating childhood deprivation by indicator indeed points to different priorities for confronting childhood deprivation in each country. In South-East Asia, priorities should be improving sanitation, water and health in Cambodia and Laos, and shelter and information in Vietnam and Myanmar.

3.1 Implications for policy

Young people make up a significant proportion of the population of developing countries, and, as Curtain (2004a) argues, as such they require a significant proportion of national and global anti-poverty investment, on grounds of equity alone. In many contexts, youth also may be disproportionately susceptible to poverty, compared to other age groups, due to the particularly fluid nature of the challenges and opportunities faced during the transition to adulthood, particularly in the context of labour markets. This brief review of the interrelated concepts of chronic, life-course, intergenerational and youth poverty suggests another reason that targeting youth within anti-poverty policies and programmes can be justified. Not only can poverty experienced in youth have implications across the lifecourse of the young person, it can hinder the capacity of a young person to bounce back from deprivation suffered in childhood, and affect the long-term life chances of any dependents, including and especially the young person’s own children.

The fourfold framework for action to confront chronic poverty, as defined in Chapter Five of the **Chronic Poverty Report 2004-05**, is equally relevant to youth poverty.

1. First is the need to **prioritise livelihood security**. A much greater emphasis is needed on preventing and mitigating the shocks and insecurities that create and maintain chronic poverty. This is not only about providing recovery assistance but also about giving chronically poor people a secure position from which to seize opportunities and demand their rights. For youth, for those on whom they depend, and for those who depend on them, three priorities must be set:

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15 Annex Two in Moore (2004) details the situation in South-East Asia, where in Cambodia, Indonesia, Laos, Myanmar, Philippines and Vietnam about one-half of under-18 year olds (87 million children) live in severe poverty, and about one-fifth (36 million) are absolutely poor. Those who are absolutely poor are disproportionately Cambodian, Lao and Vietnamese. Compared to East Asia and the Pacific as a whole, levels of both absolute and severe deprivation are higher in all six countries. Compared to the developing world as a whole, Cambodia and Lao PDR fare worse in terms of both absolute and severe deprivation, while Vietnam and Myanmar fare worse in terms of severe deprivation.
Interrupt downward trajectories and allow opportunities to be pursued through innovative social protection policies. These can take the form of, for example, insurance systems and direct transfers, as well as non-contributory pensions (relevant for youth, who often have older dependents as well as their own future old age to consider). Youth-targeted social protection may include ‘hardship funds’ that can be deployed to ensure that structural or idiosyncratic shocks do not push a young person out of secondary, tertiary or vocational education, or to support re-entry into the education system.

Focus on preventing ill-health, and descents into chronic poverty caused by ill-health through, for example, curative services for breadwinners and carers. Universal free health care for mothers and young children can go a long way in protecting the lives and livelihoods of youth throughout the developing world.

Focus on preventing and interrupting childhood poverty, particularly through interventions in nutrition, health, education and household security.

As it can be argued that youth will be better able to face challenges if they have not had to cope with poverty in (and even before) childhood, more detail on preventing and interrupting childhood poverty is included here. Access to basic services and household assets are crucial to children’s survival, protection and development. Needs are well understood: adults without sufficient time and assets cannot adequately nurture children; children in remote areas often cannot attend school; states without adequate resources cannot finance education. Investments that allow chronically poor people to take up opportunities for development are key to the interruption of child, life-course and intergenerational poverty.

At a minimum, this requires the development of adequate adult labour markets; financing of state provision of public services and social protection; and programmes that support asset generation and retention. It can also require campaigns and legal action to prevent discrimination against particular children, households and groups. Sectoral policies should focus on the most crucial aspects of child well-being:

- First, action to foster child health and nutrition includes the promotion of greater food security; food supplementation; the promotion of later marriage and childbearing, helping to prevent the intergenerational transmission of poor nutritional and health status; and combating gender and other biases in child-feeding practices.

- Second, enhancing and equalising opportunities for education across the life-course requires substantial financial investment; a wider environment that prioritises and enables this investment; an enabling social context, involving public action (to promote girls’ education for example); and sustained efforts to create skilled employment opportunities for youth.

- Third, the negative effects of work in childhood can be countered through enhancing school quality and accessibility, particularly for girls; developing adult education; more effective regulation of working conditions; and a wide range of poverty reducing measures that reduce the need for children to work. Blanket policies regarding child work must be treated with caution.

- Finally, develop policies that acknowledge the crucial role of good adult-provided care and nurture in child development.

2. Second is the need to ensure chronically poor people can take up opportunities. While it is argued that “Pro-poor growth is the single most important measure for tackling youth unemployment” (CHIP 2004), growth – even pro-poor growth – is not enough to effectively tackle poverty in its most extreme and chronic forms. It is crucial both to
promote broad-based growth and to redistribute material and human assets, so that chronically poor people can take up economic opportunities.

Making markets work for poor people – including making labour markets work for disadvantaged youth – is clearly both fundamental and difficult. In most contexts, further work on linking education systems and economic requirements is required. This can take the form of increasing the quality and relevance of education and training, ensuring that young people stay in education long enough to achieve the required skills, and combining training programmes with, for example, job search assistance, placement schemes, wage subsidies or access to credit, child care or transportation, can ensure that young people at least get initial employment experience (ibid).

3. Third is the need to take empowerment seriously. Policy must move beyond the cosy rhetoric of participatory approaches, decentralisation and theories about rights. It needs to address the difficult political process of challenging the layers of discrimination that keep people trapped in poverty. For many youth, age-based discrimination adds to the discrimination they face due to gender, ethnicity, and even poverty itself. But children and young people are able to be effective change-agents within their communities. There is an urgent need to enhancing their capacity to influence institutions that affect their lives, through removing the political, legal, social barriers that work against them and other poor and chronically poor people.

4. Fourth is the need to recognise obligations to provide resources. Chronic poverty cannot be seriously reduced without real transfers of resources and sustained, predictable finance. The political indifference to meeting national and international obligations on poverty eradication needs to be challenged and ways found to foster social solidarity across households, communities and nations. The need for policy change must not mask the fact that it is the chronically poor themselves who are the leading actors in overcoming their poverty. To date, when their existence is recognised, the chronically poor – and particularly poor children, youth, older people and disabled people – are perceived both in policy and the popular imagination as dependent and passive. Nothing could be further from the truth. Most people in chronic poverty are striving and working to improve their livelihoods, and the prospects for their families, in difficult circumstances that they have not chosen. They need real commitment, matched by actions and resources, to support their efforts to attain their rights and overcome the obstacles that trap them in poverty.

4 Conclusion

Youth poverty is undoubtedly a serious development problem, not least because of the large numbers of young people and children living in absolute poverty in developing countries – about 674 million under-18 year olds according to Gordon et al.'s recent analysis presented here. And, in many contexts, youth are relatively likely to experience poverty compared to other age groups, because of the uncertainties and dynamism surrounding the transition from child to adulthood (particularly in terms of relationships and responsibilities), or due to age-based discrimination, particularly in labour markets.

As detailed in this paper, however, it is not always the case that youth are disproportionately poor. Context matters, and the relative extent of youth poverty in a given community or country depends on the interaction of many different factors. In those cases where youth, or particular groups of youth (e.g. young women, indigenous youth, disabled youth), are disproportionately poor or vulnerable to poverty, understanding what has driven and

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maintained this poverty is crucial for developing effective policy interventions. Falling into, getting stuck in, or escaping from poverty during youth is, like poverty in general, based on combinations of structural and idiosyncratic factors from the individual to global levels, including on events related to life-course. At the same time that youth may not always be among the poorest or the most vulnerable, it may be the case that, after early childhood, adolescence and young adulthood may be the period in which anti-poverty interventions have the most potential for long-term positive change.

For these reasons, the related concepts of **chronic poverty**, **life-course poverty** and **intergenerational poverty** are useful to understanding youth poverty. First, an analysis of the multiple and interacting causes of chronic poverty can help locate the relative position of different groups of the poor, and in doing so facilitate policy prioritisation in contexts of resource scarcity. Second, life-course events, including but not limited to leaving school, starting work, getting married and having children, play a significant role in altering one’s vulnerability to poverty. These ‘life events’ are more likely to occur during particular ‘life stages’, but **stage** is only partly related to **age**, and again is highly contextual. Third, it is also important to take an intergenerational perspective, because poverty experienced in youth is often linked to parental poverty (expressed as, for example, poor maternal nutrition or inadequate shelter) and childhood deprivation (e.g. being forced to leave school early or do dangerous work), and – like poverty in childhood or old age – can have implications across the life-course of the young person and that of her or his household.

Cross-sectional research, both qualitative and quantitative, has gone far in helping us understand the dynamics of poverty during youth and other periods in the life-course. By their nature, however, these processes change over time, and – particularly in the context of large-scale political or economic shocks – sometimes very rapidly. On-going construction and analysis of developing country qualitative and quantitative panel datasets with information on poverty over the life-course and across generations, is a central way in which researchers can convince policy-makers of the types and timings of anti-poverty interventions required.

**References**


