Chronic Poverty in India: lessons from recent research [DRAFT]

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Introduction

This paper is a synthesis of both the recent literature on Indian urban poverty and to draw out the results of the research commissioned in the first phase of the CPRC carried out by Soloman Benjamin in Bangalore and K Lalita in Vijayawada. The paper is structured as follows: the first section provides a brief overview of chronic poverty; the next section provides an analysis of who are the chronic urban poor in the Indian context from the available literature; the next section gives a brief description of the methods used in this longitudinal and participatory research. The remaining sections provide the main themes that have emerged from these two studies namely: firstly the observation that the urban poor are active economic agents; secondly the importance of the importance of the household as both an asset and as an input; thirdly the gender dimensions of change; fourthly the importance of diversification; and finally the importance of other contextual factors and/or shocks.

Overview of chronic poverty

The interest in chronic poverty comes from two divergent sources: firstly a concern with the "other half" of the poor who will remain poor even if the optimistic Millennium Development Goals² are met. The second concern is with recent research in the US and the UK which using panel data sets has shown that there is substantial movement into and out of poverty over time.

There is a debate about how to define chronic poverty with three competing notions namely: the severity of poverty; it multidimensional nature and finally a notion that emphasises the duration aspects of poverty. In this paper we shall emphasise the duration aspect of poverty as the key feature of chronic poverty. This is consistent with the definition that has been taken for the CPRC (Hulme, Moore and Shepherd (2001, 10). For operational purposes this "duration" has been defined as being poor over five years³.

This has two advantages firstly it is clearest of the competing definitions and as such allows the research project to "add value" to our knowledge rather than add to an already substantial general literature on poverty. Furthermore it allow as to ask critical questions about what is it that pushes households into poverty? And conversely what is it that lifts or enables households to escape poverty? There are clearly very significant questions in relation to the design of policy. Indeed understanding the duration and/or time dimensions of poverty also have a profound effect on the extent to which poverty

¹ This is a development of a presentation given World Bank Research Forum Washington D.C. 9th December 2002

²The Millennium Development Goals (or MDGs) are the targets that all the International agencies have signed up to during the late 1990s which are aimed at reducing poverty by 2015 from a benchmark of 1990. There are multidimensional but the clearest is the commitment to half extreme income poverty (those earning less than \$1 a day) by 2015. (World Bank, 2001, p6)

³ While this is an elegant definition as we shall there are huge methodological problems in systematically trying to analyse poverty by this definition. This definition is more a statement of intent rather than one that can be easily applied.

remains a problem. A digression into unemployment may help to illustrate the point. Thus a million people registered as unemployed at any given moment in time has hugely different policy depending upon whether it is the same individuals who are unemployed for a year or whether it a million individuals who are only unemployed for two weeks.

Who are the chromic urban poor in India?

There is little work which identifies directly who are the chronic poor in India. There has been no systematic study of chronic poverty in urban India. Survey data has shown that of 15% of India's urban population can be defined in an extreme poverty category –this is in fact the same percent as in rural areas (Mehta, 2000).

There is a substantial literature on the causes of Indian urban poverty which broadly concludes that it is a function of *inter alia:* position within the labour market; in particular the extent to which employment is permanent or casual; gender, with women being particularly disadvantaged; the importance of location and "economic settings" within the urban environment; the negative impact of shocks, particular the impact of illness – private medicine and further indebtedness; the negative impact of ritual festivals and problems with dowry; the impact of poor environmental conditions on poverty and the negative impact of flooding. (Amis,1997; Benjanmin, 2000; Pryer, 1989) While this work has begun to develop a dynamic focus –especially in relation to the shocks- it is still a long way from a proper dynamic understanding of poverty which is what the focus on the duration element of chronic urban poverty requires.

The work by Noponen on a panel data set of female headed households in Madras is very significant. The study is concerned with the responses (labour, non labour and "other") to stress or shock events. The most frequent was ritual celebrations; the most expensive event was marriage and dowry; the most devastating event was the loss of a major income earner; however the event with the greatest impact in terms of frequency and magnitude was illness to a major income earner. (Noponen, 1991) The dominant responses were to increase female employment and/or for them to take a second job. While the overwhelming non labour response , especially over time, was indebtedness; thus "taking loans from a variety of sources was the dominant adjustment pattern over the study period for 80% of the households. Within this the money lender was the most common response(Noponen, 1991,254). It is interesting to compare these observation with the findings from the research reported here.

Recent work by DFID in India -which building upon the previous participatory studies for DFID- has developed a useful framework which includes three categories namely "improving"; "coping" and "declining" of the poor.

"Improving"	"Coping"	"Declining"
 ?? Range of assets ?? Residence in a registered slum ?? More sons than daughters in a dowry culture ?? Better links to <i>dadas</i> and <i>mastaans</i> (local leaders who mediate access to job markets and services) ?? Skills appropriate to expanding economic opportunities The improving poor are in a position to better their conditions, and to take positive actions (e.g. invest in education) to do so. 	 ?? Have assets but are only able to meet basic needs at present ?? Highly vulnerable as they have insufficient resources to deal with threats to a precarious equilibrium People in this category and unlikely to graduate out of poverty without help. 	People in this category experience multiple vulnerabilities at the same time ?? Poor health ?? Loss of earnings ?? Disability ?? Eviction ?? Possible brake down of family or community based social protection/support systems These people include ?? The elderly without families ?? The dying ?? Orphans ?? "Discarded" children in re-partnered households ?? or living on the streets ?? chronically sick ?? severely disabled ?? victims of life threatening, communicable diseases ?? severely oppressed or abandoned women

Source: Loughead et al, 2001, p 17-18.

This is a very useful matrix with which to consider some of the findings that follow. In an earlier part of this research project we attempted to list the likely household claims and shocks. Broadly speaking it was similar to the above but we put a larger emphasise on the importance of marriage and intra household relations. As we shall see trying to understand the role of the "household" is on of the major challenges that his emerged from these poor people's discourses.

Other recent World Bank work has also sought to list the shocks which low income households in South Asia tend to face; unfortunately this was did not substantially focus on urban areas and was of too high a level of generality to inform the very micro approach adopted here. (World Bank, 2002). Furthermore it does not cover the positive side of the story namely the mechanisms through which households are moving out of poverty.

On widows and old age

The position of widows has received more study than other specifically chronic poor urban groups in India. This is relevant as three(G, H and J) of the Vijayawada panel data set are widows. The problem of widows has a particular relevance in India; thus tthey represent fully 6.5% of the total female population or 30 million in absolute terms. (Dreze and Sen, 2002,263) Thus a recent review notes the following specific problems for widows from survey work in north India. In what follows we shall first record the stated disadvantage and then make a comment about how it might relate to the condition of widows in South India. In the conclusion we shall reflect on the extent to which these assertions have been confirmed by the research reported here.

Firstly a very strong tradition of patrilineal ownership which makes it very difficult for widows to inherit. This is despite very clear legal provision. (Dreze and Sen, 2002,264) This problem becomes worse when the property rights as they are in most urban settings are insecure. Second the notion of partrilocal residance are an important cause of social isolation. Widows are expected to remain in their husbands village. (Dreze and Sen, 2002,265) It is not clear how this would impact in urban settings in South India. Thirdly widows have limited freedom to remarry (Dreze and Sen, 2002,265). As we shall see this may be true but it may not restrict widows from forming unions of one sort or another. Forth the gender division of labour restricts employment opportunities in terms of overll gender discrimination but also because of the reduced capability of the elderly (Dreze and Sen, 2002,265). This is true but as we shall see women still had to resort to some form of employment. Fifth, "most widows can expect little economic support from their family or community, except possibly in the form of co-residence with one of their adult sons. In particular the notion that the joint family provides economic security to widows in rural India is little more than a myth." (Dreze and Sen, 2002,265)

Recent work on widows in slums in Hyderabad –which is also in Andhra Pradesh like Vijayawada is interesting. Generally a positive picture is described where old age is seen as a "success" unlike Western notions which almost tend to define it as a "problem". Furthermore and to some extent in opposition to the position outlined above these widows seemed to be supported by members of their extended families. Those households where two generations of women where able to work were more successful (Afshar and Alikhan, 2002)

Method

This paper is an attempt to synthesise the findings of two in-depth studies of chronic urban poverty in South India. The first based in Bangalore is an in-depth case histories of eight households who were selected as being likely to be amongst the chronically poor. This work has used the same team and has built upon earlier work studying Governance, Partnership and Poverty in Bangalore (Benjamin, 2000: Benjamin and Bhuvaneshwari (2001).

The second was a follow up to an original baseline survey of 32 households that was carried out by Sue Jones for ODA in 1994; K. Lalita working for Thinksoft was able to to re-interview 17 households in 1997 as part of a DFID funded impact assessment study of it Slum improvement; in 2002 it was possible to re-interview six households. The first observation to note is the problem of panel decay. The second observation is

that the rationale for each of the three rounds was somewhat different. Nevertheless it does provide us with three discourses and interview notes at three time periods.

While this is a very small sample from two urban locations in South India. It is argued that they do throw some interesting insights. Generally this paper has sought to identify similarities rather than differences; those interested in the detail should consult the individual papers by Lalita and Benjamin. It is worth noting that the sample is somewhat biased towards the elderly and does not have many cases of disability or children. It therefore has a bias towards the integrated poor.

The urban chronic poor are active agents⁴

The classic definitions definitions of chronic poverty⁵ have a tendency to suggest that they are somehow exceptional in their characteristics whether in terms of life cycle or limited capabilities (disabled, elderly and handicapped). The research from urban India confirms an earlier argument that we must also conceive of the urban chronically poor as also including active agents (Amis, 2001, Benjamin, 2003). The households particularly those interviewed in Bangalore were often fully engaged in economic activity. They are in every sense integrated into the global capitalist economy.

Poor groups, including the chronically poor exist as active political and economic agents although they face very severe ups and downs. This contrasts with the common conception of the poor being passive beneficiaries – a view often underlying the policy process. The extent and form of this 'activeness' is shaped by the local economic, institutional, and political settings. While the issue of heterogeneous settings has been discussed in Benjamin and Bhuvaneshwari (2001) its link to situation of chronic poverty remains to be explored.

The importance of the local setting: both economic and political

A very important aspect of this was the importance of location within the urban area. In this and elsewhere Benjamin has argued of the importance of "economic settings" in explaining poverty and livelihoods. The argument which has much in common with Jane Jacob's (1961)classic of urban planning *The Death and Life of Great American Cities.* The argument is that some urban neighbourhoods because they facilitate mixed land use patterns are more supportive on the poor in developing their complex livelihoods. The alternative is certain tenure situations dominated by single land uses which are not helpful for the poor. The point is that some tenure arrangements (land use and/or economic settings) allow for diversity and flexibility while others do not. This leads us to an argument that Urban location can act as an asset.

⁴ This section and the next section as well as the section on households is an adaptation of drafts carried out by myself and Benjamin in Bangalore in November 2002

⁵ Thus Mitlin (2003) interprets Hulme, Moore and Shepherd 2001, 21) as having identified particular groups likely to be in chronic poverty namely: those experiencing deprivation because of their stage in the life cycle; those discriminated against because of their social position; discrimination within the household; those with health problems or impairments; people living in remote rural areas, urban ghettos[sic], and regions where prolonged violent conflict and insecurity have occurred.

We now have a working hypothesis: Chronic property is structured by local institutional, political, economic circumstances. While these are overarching factors that primarily determine urban poverty in general but they are also relevant to the likely incidence of chronic poverty. However these questions of city wide livelihood strategies particular relevant to our "duration" definition of chronic urban poverty.

Furthermore, there are substantial variation in urban India. These are factors that structure the incidence of chronic poverty rather than determine it. These relates to city wide livelihood strategies rather than individual events. While these settings appear to relate primarily to opportunities as we discuss later city wide factors can also relate to negative interventions. The city wide livelihood strategies might include access to property and employment while the individual events might include changes in for example household events/history and illness.

The institutional dimension firstly relates to Local Democracy. This is clearest in the case of a municipal government that allows voice to the poor that can be used to gain resources via vote bank politics: this is in sharp contrast to Development Authorities and Parastatals which are primarily designed for the efficient to implement Master Plans which allow almost opportunity for the poor (see Benjamin, 2000). The second issue relates to Municipal practice: a municipality that is empowered on the land issue (statutory and administrative procedures) which combined with a "tradition" of active municipal intervention (itself related to "growth coalition") is likely to be more pro poor.

The next dimension relates to the practice of Local Politics. Systems of politics which are "competitive" and/or allow the urban poor space are likely to facilitate more opportunities for the poor. Where the is a active competitive electoral politics it is more likely that vote banks will be used efficiently and used to benefit the poor.

Thus for example in Bangalore which is ethnically diverse has a tradition of independent candidates who have drawn on local constituencies to develop their base. In this situation, the poorest groups find representation easier. This is not only during election time but also during day to day political negotiations⁶. This contrasts to situations with an authoritarian party structure like for example West Bengal; while Tamil Nadu has a more competitive form of politics.

Generally, central city areas are places where households in the most fragile situations tend to locate. We have two sets of cases⁷. Most of our cases are of households in the central areas of Bangalore within the wholesale trading districts. Such locations provide multiple economic opportunities to both elders, adults and also working age children (as we discuss, the issue is complicated for female working children). But also, these locations provide a variety of non-monetary benefits. Moreover, surviving and residing in

⁶ Valli's election where the swing vote at election time influenced about 10% of the vote and the rest being influenced by the longer term relationships established over issues of the PDS, land regularization, extension of basic services.

⁷ We also discuss a third set of cases – families in a chronic situation who have located in a middle of the city areas. These face eviction due to a re-housing scheme by the planning and housing authority, and then are doubly hit very recently in (May 2001) by communal violence. But as we discuss, this group is a special case and could hypothesize that would move to the central city areas. There is also an issue here about communal violence in Indian cities which almost always (when they do) happen in central city areas. But interestingly, the ones that are centrally 'organized' tend to also happen in peripheral areas especially resettlement colonies (Veena Das's work on East Delhi) and perhaps in Gujrath, and certainly the recent ones in Bangalore.

these locations allow some households within their life time to invest in land leases to accumulate surpluses.

Living on the street and terrace in Bangalore: the importance of an inner city location

According to her the place -- on the street where she is living is very safe, rather than having a house in slum. She has lived here for 30 years so all the shopkeepers know her and no outsider will trouble her. The shopkeeper protects her family. They never allow a man to talk to her in their presence. In case she moves to a slum at this stage, and having married a second time to a person with a wife and child, she can be mistaken to be a prostitute / "loose" person and would face harassment. However, during rainy season it is very difficult to stay/sleep on the pavement.

According to her poverty/ or being poor means " yarukku oruvalai sapadu ellayo avango thane allai " (In tamil, those who does not have even a single meal in a day) She says her children have good food and cloths are purchased whenever there is a need. Also, this is a very central city location with access to several types of employment opportunities and her length of stay here has established her very well in the local networks. When I was interviewing, her husbands first wife's son aged around 9 yrs came to see her, and when left, he she spontaneously gave him Rs.10/- -- illustrating her affection. Interestingly, when her own 4 year old daughter asked for Rs. 3 for an ice-cream, she refused since the boy does not come often and she wants to keep a friendly relationship with those children.

She does not have ration card or their names in the voters lists, according to her street sleepers/families are voiceless and powerlessness, there is no one to talk on behalf of us. Even in government hospital they neglect us reason (wearing dirty cloths/lack of cleanliness). The hospital does not require a ration card for its service. According to her gold/cloths/house/money is not an asset but her children are asset - human assets. She says the society in general exploits us, when they go to rag shop to sell the materials/the shop owner reduces the price or reduces the weights indirectly, in this situation they cannot raise question because already they have taken money in advance. Generally she was mentioning, there is lack of protection for the street sleepers, that to particularly for the adult female ones. She is living on site/vacant site belonging to someone else and although she has been here for 30 years, she feels that at any time they might be vacated from that spot in case the owner decides to construct there. The place she is surrounding by built up buildings which provides some safety as compared to if they were on the open streets where anyone passing could pick up. They also have a temporary shelter -- a bath and toilet instead of the public toilet, which is in-accessibly at night (7pm to 6 am). They sleep under the shelter of shops on its adjoining pavement (at the mercy of shopkeepers) during rainy season. After rain stops clean the place and waits until the floor dries.

There are also serious problems with central locations. This is at two levels. One, a more immediate one, relates to poor quality of physical shelter where staying in a plastic

covered shack allows water in during the monsoon, which accentuate sickness (and TB)⁸. Another, is that such locations are also under pressure to change – due to real estate markets and also increased competition. This puts pressure on households to vacate locations. However, except for attempts of urban renewal, its not easy to evict households who have stayed in the same locations for several generations and establish complex reciprocal claims – that the cases illustrate and form an intrinsic part of central city society.

Survival despite governments efforts -although the perception that the State is responsible is stronger in India than elsewhere

A related issue but one which came through very strongly from the case histories in both Bangalore and in Vijayawada is that the poor survive despite government's efforts. This should perhaps not surprise us but the perception and expectation that the State is responsible is much stronger in India than in many other countries in the South. This is most probably the result of India's socialist/populist political culture which can easily be traced back to Nehru but also the extent to which democratic politics and practice are more embedded in Indian society (Khilnani, 1997). Furthermore this notion may be supported by the relationship of politicians to their electorates; this is clearest in the idea of "vote banks" where votes are traded for returns from politicians. Within the Bangalore context the way the poor are able to use this as an effective mechanism to get rewards has been documented (Benjamin and Bhuvaneshwari, 2001).

Despite this rhetoric there is very strong evidence from the Panel data set from Vijayawada and from the case studies in Bangalore that even the poorest of the poor do not use the public provision of education and health. Thus in Vijayawada out of the six households three E, J and O paid for private education while four paid for private medical care.⁹ The rationale for going private was also interesting thus; G noted that private medicine at 5Rs was cheaper than visiting a government hospital which was a total cost of Rs 12 because of bribes and transportation. Meanwhile a respondent in Bangalore noted that going private was in fact cheaper than the public sector since the latter was "dirty and unhelpful" and also required a bribe to be treated.

The Indian Government PDS system or "ration card" was similarly dismissed by one respondent in Bangalore "Has no ration card, spent some money to get a PDS card, but could not manage to get one so far. One has to spend 200-500 to get a card, but he cannot afford to spend this much to get it." These failures of welfare provision in India –despite the rhetoric- to deliver for the poorest have been well documented elsewhere (Dreze and Sen, 2002)

This "survival" is both extremely difficult but also at great personal/physical and psychological cost. The very strong impression from the Vijayawada panel was that the effort of survival itself was detrimental to individuals health, particularly in relation to stress related ill health problems (heart attack and high blood pressure). This should

⁸ While moving to a more 'secure' locations in squatter settlements have their own down sides requiring additional expenses and also norms of behavior for women requiring them to initiate a relationship with a male. This is necessary to avoid the stigma of being perceived as being 'loose' or as a prostitute (see case---).

⁹ This last figure is almost definitely an underestimation since for all most all poor urban households in India must seek private medecine.

not surprise as it increasingly becoming clear that lower paid workers in the UK in fact have more stress related illness than the stereotypical image of the executive under stress. This is partly related to the relative lack of control and/or autonomy that the more lowly paid worker receives. Reading the life histories in the Vijayawada panel one is struck again and again by a) the shear the lack of control¹⁰ and b) the shear complexity of the people' lives which are charcterised by so many thing going on simultaneously.

Individual are often adopting multipe and diverse roles which are themsleves changing and responding to changing economic circumstances. A good example is that many households are simultaneoulsy both borrowing *and* lending funds below. This is often related to what Rutherford describes as "saving down" or "saving up"; the critical point is that low income individuals need to turn small sums of money into useful sums in case of emergencies or likely future payments (Rutherford, 2000). The two diagrams below illustrate the complexity of the poor's arrangements for some households in Bangalore.

Remittance and Investment flows



¹⁰ This could be argued is the same as "Vulnerability" but poor people do not use terms like this but do tend to use terms like "control"



Economic strategies for three types of Urban Poor

The final conclusion to this section is to question whether the livelihoods discourse and the formal academic literature are actual able to capture the issues of daily survival. The first problem is that academic work tends to put an artificial logic and structure on things which are often chaotic and unstructured. There is issue here of seeking a logic that may in fact not exist. The second issue is that the livelihoods and/or survival literature often implicitly assumes that individuals are surviving and that all that is necessary is more subtle research to elucidate yet more complex strategies. This is of course not always the case: many households may not be surviving.

Household compositions is an input/asset

One of the important findings of this research is to emphasize the importance of changing household relations as a major survival stratergy for the chronically poor. This is perhaps not so suprising when you consider that chronically poor groups will typically be low in other more material assets. The majority of the literature on survival strategies tends to treat changes in households as an output here we are almost treating it as an input and intergral to the survival process¹¹.

View of the 'household' and individual:

While this may seem like a definitional issue, it is useful to clarify the unit of analysis as this relates to a more focused understanding of the nature of processes and strategies that impact the situation of chronic poverty. In this research, we use both 'household' and 'individuals'. While the term individual is self –explanatory, our view of 'household' is more fluid and relates to the multiple relationships that individuals maintain and change, in response to a survival strategy. Thus, rather than a conventional view of a 'household', we would see these as following several types of arrangements:

¹¹ Gillian Hart 's argument on power. Julie Gifford needed a "household assets" to Moser's in Uganda...Jo Beal.

- a) A single mother with two working children and one grandparent
- b) The same as above but one child leaves
- c) The same as {a} and a man
- d) A man who has a wife and children in the village or another part of the city, takes on another women (with her children from a previous relationship)

Within this definition of 'household' we may stress the centrality of one of the individuals for example,

in a) the single mother and all of the others may be in a situation of chronic poverty, or it also maybe that the grand parent may at some point find herself alone and 'out in the cold'.

b) It could also be (as in one of the case studies) a grandparent finds herself alleviated of her problems to invest in land after her daughter and 'good for nothing son in law' disengaged themselves from her own problem.

In this conception, changing households forms themselves may be a shock for some and a alleviate a situation for others. Its almost as if the changing households becomes as much of an impact as other economic shocks and opportunities.

This also implies that rather than a convention notion of marriage and divorce, we have found that the situation is best understood as one of fluid relationships that both men and woman form for partnerships and also protection. This is instrumental rather than 'immoral'. Also, rather than being seen as 'exploitative' the situation is more complex; Relationships bring a mixed bag of 'bad marriage / exploitation', a spouse taking seriously ill and savings getting sucked into a dead end

process, or support and protection for children to work the streets safely.

the contribution of adolescent children critical to trajectories: they work as a positive asset

One of the most interesting findings from both the Vijayawada panel and the Bangalore case histories is the importance of adolescent children in households survival strategies.

Children of a working age form a key asset as part of the household, and many times shape survival strategies that adults use. The adjoining box illustrates this from cases. We can see this issue at several levels. One relates to the poverty of households influenced by the presence and absence of children. To illustrate this point, the box opposite uses a composite ranking of children, age, sickness, family status. The most vulnerable group are not only being sick, and being old and sick, not having that younger support base, which a younger couple may have. The important thing in the diagram is the variable of working children.

This is a point often missed in the literature, where the issue of child work is couched in perspectives of child labour, exploitation.

Box on children

- ?? Young Couple with working children $= \varkappa$
- ?? Young Couple &&
- ?? Older couple with working children $= \ll$
- ?? Old couple 🖉
- ?? Old couple sick and without working children = $\ll \ll$
- ?? Single elderly without children and sick =

Meanwhile in the Vijayawada Panel out of the six households four E,G, J and O all benefited from earnings by adolescent children's contribution. In many cases it is important to understand that the impact of these children was often in response to other household shocks namely ill health. Elsewhere the employment of additional family members has been a well established survival stratergy (Moser, 1998)

Thus "When E fell ill .. and they are taking him to the hospital each week at a cost of Rs 500,... the fact that his wife who had not worked before was able to work as a servant maid assisted by her teenage daughter -who was forced to stop attending school- were most probably crucial to the family's survival"

The death of G's husband shortly before the first interview in 1994 had the greatest impact in terms of a loss of livelihoods and repayment of loans to repay the medical expenses she was supported for a time by various husbands the contribution of G's eldest son was also important ... he worked in a cycle shop earning Rs 150 per month which he gives to his mother.

Holding on to children is a critical strategy/factor

While the above argues for the importance of children as an asset and as a component of a survival strategy it is important to understand that the household composition is fluid and mediated. Thus "holding on to children" becomes an important strategy. For very poor individuals it is important to understand that household relationship are more fluid than in wealthier households where it may seem as a "given". However as we have argued above low income individuals classically invest a large amount of resources in their children (and "live through" their children). This is more pronounced when individuals personal options may be very limited and/or restricted.

Housing as an asset¹².

The importance of housing may be more important . The two "stylized facts" from the stories of J and Q illustrate the importance of housing as an asset. In the case of J the property is the critical asset that prevents further impoverishment; while in the case of Q the property seems to act as a hidden factor in Qs relative success story. The importance of property has also been clearly noted from longitudinal work in Zimbabwe (Schtyler, 2001).

The interview in 2002 with J are recorded below.

- ?? J has the same occupation, though is no longer making papads daily due to ill health and old age.
- ?? J and her cousin now live in the same house. There is a marked improvement in terms of material possessions (TV, stove, almirah etc) – from five years ago. J's husband has worked in Dubai as a lorry driver for four years (sends Rs10,000 every 3 to 4 months).

¹² I am grateful for Alan Gilbert pointing this out to me at the World Bank Workshop

?? The house was constructed two years ago after a fire destroyed the huts. The land belongs to J, and her cousin and her husband constructed the house. J will repay the Rs 60-70,000 costs of construction and then the house will belong to her.

An interview with J's brother-in-law (cousin's husband) who is home on a visit provides further details:

- ?? J's younger son (17) now works as a mechanic and earns Rs 500 per month. He says that although J does not accept money from them, she does from her son.
- ?? Notes the acquisition of an electricity connection (for Rs 1500) a year ago.
- ?? Notes previous problems with floods but says that these have been solved, in part, by raising level of the house.
- ?? Notes the fire see above when all their possessions were destroyed. They received some money and material from World Vision, borrowed some additional money, and reconstructed the houses.

Key events/factors, J:

Problems faced by J included her widowhood, worsening health and the strain which her immediate family placed on her resources (youngest son needing school fees / husband, when alive, needing medical fees / eldest son stealing the bulk of her assets).

However several factors contributed to an apparent improvement in J's position over the course of the study.

- ?? Her continued ability to keep on working and earning an income, despite diminishing returns.
- ?? J's ownership of a plot of land was crucial, enabling her to offer this asset as part of a deal whereby her cousin constructed a house after the hut was destroyed by a fire. J was then able to access the improved living conditions/facilities that her cousin enjoyed.
- ?? The contribution of J's teenage son who began work towards the end of the study as J was increasingly struggling with ill health and old age.

Nancharaya, Q:

1994:

43 year old married male heading an eleven member household (children, their spouses and grandchildren) (p 182).

Some members of the family (eldest son and daughter and daughter in law) assist Q in a laundry business, run from his home (with a profit of approx. Rs 1000 per month) (p 182). Q's wife assists him and also earns Rs 200 per month in contract work for washing clothes. Add in other family members earnings (Q's son-in-law works as an attendant, earning Rs 700 a month) and the total is Rs 2,200 per month (pp 184-185).

Two years ago Q constructed a semi-pucca house, incurring a debt of Rs 3000. In April 1993 he incurred a further debt to pay for his son's marriage in Tirupati (Rs 5000). Q is remitting Rs 400 per month (p 185).

1997:

Events:

?? Q has paid off his debts with the exception of Rs 60 month to ODA for his Iron box.

- ?? Q is still in the same business but argues that things are getting harder with rising prices. For example the price of coal has increased from Rs2 to Rs 8 and the price of washing soap from Rs 5 to Rs 9.50, but Q still has to charge same for washing and pressing.
- ?? Q feels the burden of eight dependents (though several are still economically active). Only his son stays away and occasionally helps out financially.
- ?? If Q's wife becomes sick she takes out a Rs 100-200 loan and visits a private doctor.

2002:

Events:

- ?? Q says his business hasn't improved, he is still earning the same. His elder son is a rickshaw puller / his second son goes painting / Q himself is a fish vendor alongside the women of the house (no details).
- ?? Three years ago Q got an <u>electricity</u> connection. Whereas there were only four bore wells in 1997, now there are 19.
- ?? The problem of flooding has receded in recent times.
- ?? Q talks a lot about his work, as the kula sangam president, with ODA. Relevant here?

Key events, Q.

Although Q complains of business difficulties, his life overall seems to improve over the period of the study (he constructs a house, pays off debts, new facilities). This appears to reflect the cumulative efforts of various family members, including his children, largely in the laundry business but also to a certain extent in outside employment.

Festivals and Dowry

While reading the Vijayawada Panel discourses it is impossible not to be overwhelmed by the overwhelming problem of dowry for low income households. This of course has been well noted elsewhere with some alarming new developments in the sex ratio in parts of India. (Dreze and Sen, 2001).

Gender dimensions of changes

In four out of the six household in the Vijayawada Panel major illness events arguably the single most important negative event that effectively dominated the discourses over the last eight years. Thus the life experiences of E, G, H and J are all significantly affected by illness and/or the death of a partner. Illness affects individuals through three mechanism: first the illness itself reduces the ability of individuals to work: second in almost all cases the household had to go into debt to pay for private medicine. This has been well established in the literature (Amis,1997: Pryer, 1989) The evidence of this is so strong that we really do not need more research to document it.

However it also has a more subtle and long run effect is in that illness reduces the ability of individuals to secure or hold down favourable employment. There is also a gender dimension to this. Thus within the Indian context it has already been noted (NSS data)

that women are sick more often the men which means that they are unable to hold down good jobs- so they tend to become more engaged in casual and self employment.

G, a 45 year widow in 1994 story is illustrative of this process... to begin with when her husband was ill (1991) she worked as a sand colliethen after her husband died in 1994 she survives on combinations of contributions from a partner (G1) and money earned as a midwife and for tying charms to children (aprox 50 per month)...

By 1997 G's income appears to have become less predictable. There is no mention of G1, plus G can no longer work as a midwife due to poor eyesight. G is now working as a daily wage labourer in a sand quarry (Rs 25-40 per day) although some days there is no work / no work at all when the river is flooded.

In 2002 G now works as a servant maid during the marriage season – at a rate of Rs 60 per day plus left over food. The remainder of the time she works as a labourer (sand transportation or whitewash work for approximately the same amount). Purchasing meat once rather than twice a week.

Worsening health means G is sometimes unable to work. She visits a private doctor to acquire medicine at Rs 5

1994

H is a 60 year old widow, living alone. She usually works as a domestic servant but recently lost her job due to ill-health. H's relatives (sister's daughter and son-in-law) are feeding H in return for housework and help with the baby.

By 1997H stopped working as a housemaid, lacking the required energy/health. She now survives mainly on food provided by her sister's children and stays at their house. Her daughter also sent her some money (Rs 100) for medicines But H has stopped taking tablets for the past two months because doesn't like to ask for more money. H recently had a cataract operation with Rs 800 of savings.

Finally by 2002 H is still unable to work and is fed by her son (a vendor, earning Rs 70 a day), and his family (H's daughter-in-law works as a maid earning Rs 200-300 a month). H's son also buys her clothes, tea and tobacco. H's four daughters – living in the same town – occasionally contribute in an emergency. H's eldest son, a wage labourer, cannot do much.

H suffers from worsening health and has spent Rs 3000 on medicines and treatment. H is aware that the ODA are supplying medicines but says it is too far to go and consults a doctor once or twice a month at a cost of Rs 50, paid for by her son

Whether it is coincidence but they two most successful households O and Q did not mention any major ill-health event.

Diversification

From preliminary analysis of the Vijayawada panel Diversification is an important strategy for all households: men can often do this successfully than women. We have already noted above the cumulative effect of illness and lack of education has particularly for women. The tentative conclusion is to suggest that these poor women seem to be in a trap because of low education and skills and that each "move" they makes tend to make them worse off. We could suggest the this seems to be through not being able to hold down a job and progress because of relatively frequent illness which brake individuals employment. The result is "having to start again" each time in a competitive labour market when one' skills are less relevant and though age one has less energy and/or the ability to command a high price.

In this context it should be noted that a lot of casual daily wage work is essentially a young person's employment. Furthermore that the pace of the work is so demanding -when linked to relatively poor nutrition- that even young "fit" workers can not work every day. This is the case even when the work is available. (Amis and Kumar, 2000).

It is pertinent to compare the stories above with the more successful story of O.

In 1994

O is a 35 year old married male with two sons and a daughter. The elder son is studying in a government school (away from home) / the other two are eight and five years old. O and his wife are migrants from Ghantasala village. O retails plastic household goods (changes jobs frequently). His wife is a soothsayer. O earns approximately Rs 275 per month, his wife approximately Rs 500

By 1997 both spouses have changed occupations. O now decorates marriage pandals for 30-40 rupees per day. His wife sells fish for approximately 20-30 rupees per day. This is enough to buy the basics, but not to save.

Finally in 2002 O is still decorating marriage pandals albeit at lower rates due to competition and only for four months during the marriage season. O's wife has returned to soothsaying (for Rs 10-50 per day) and stopped selling fish as making losses.

Two points are worth noting. Firstly the extent to which they change jobs and secondly the benefits as a couple they seem to benefit from both working together.

Other contextual observations/shocks

The significance of other contextual factors or shocks was again confirmed. The devastating impact of flooding was noted in the case of Bangalore and was frequently mentioned as one of the main impacts of the DFID slum improvement projects in Vijayawada. Ongoing research in Bangalore was also noting the impact of ethnic conflict and fire on urban low income households. These environmental aspects/shocks which can be devastating for the chronically poor have not been given the attention that they have perhaps deserved. In Bangladesh it is reported that in some slums the residents have a very simple saving scheme which is designed to provide individuals with insurance in case their homes catch fire. (Rutherford, 2000). Finally there is still evidence that dalits and muslim minorities are still the most vulnerable.

Conclusion: What have we learnt?

In this last short section we shall consider what we have learnt and reflect back on the literature. The first point to make is that urban survival is about competition for scarce urban space. This makes us wonder whether we have lost the importance of space in our recent work on urban poverty? To a very large extent I think it is a fair criticism that much of the recent livelihoods work as aspatial. We need to remind ourselves that Cities and urban politics is to a large amount about competition for space (Harvey, 1969).

A related issue is urban survival seems to be a race between making claims -tenure and the negative impact of shocks -both individual and settlement. Again we need to remind ourselves of the critical importance of access to property. This is clearly important in its own right but also more subtlety in helping and/or facilitates households to stay together.

The significance of adolescent children and households staying together has been confirmed in this study. Indeed the is limited support here to suggest that –at least in urban communities in South India- that the argument of widows being abandoned is perhaps too strong¹³. Finally I think these studies have illustrated the long-run and subtly impacts of illness on women and their interaction with the labour market and their ability to pursue diversified livelihoods strategies.

There are three policy implications. Firstly Given the extreme Vulnerability of the urban chronic poor it is critically important that we do not have "bad governance" -mainly regulation and relocation- that weakens their livelihoods. Secondly the necessity of working with the existing livelihood strategies rather than well meaning policy interventions that undermine them -micro finance and child labour- (Rutherford, 2000). And finally the critical importance of education especially of children.

¹³ This is clearly a cup half full or empty issue. But I think the small sample presented here does tend to side more with the slightly more optimistic view of widows outlined by Afsar and Alikham(2002). Than the more pessimistic view of Dreze and Sen (2001). This may simply be no more than the difference between North and South Indian and between rural and urban societies.

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