Kenya: Participatory Poverty Assessment

A Participatory Poverty Assessment (PPA) was undertaken by the World Bank in collaboration with the Government of Kenya to complement previous statistical studies of poverty in Kenya. While the PPA confirmed many findings of the Welfare Monitoring Survey (WMS), it also revealed significant new data concerning poverty, female-headed households, access by the poor to water, education and health facilities, and challenges facing indigenous self-help networks. These findings have important implications for targeting poverty alleviation programs.

Objectives

The Kenya Participatory Poverty Assessment (PPA) was undertaken between February and April 1994 to complement statistical studies of poverty. It had three primary objectives: first to understand poverty from the perspective of the poor and those providing services to them; second, to initiate a process of dialogue between policymakers, district-level providers and the poor; and third, to address the issue of the “value added” of the PPA approach to understanding poverty.

Methodology

To ensure that PPA findings were relevant to policymaking and had credibility, the methodology used in Kenya was developed in consultation with key stakeholders both in-country and in the Bank. To take maximum advantage of information that was already available and to narrow the focus of the study, stakeholders were asked to specify what questions they wanted answered by the PPA.

The key questions which emerged were: What are the perspectives of the poor on poverty? What are their indicators of poverty? What are the long-term trends? What causes poverty? What is their expectation for the future? Are female-headed households poorer? If so, why? How do the poor cope with poverty? What roles do formal and informal groups play? What are the key problems and priorities of the poor? Do the poor have access to basic services, education, health and safe drinking water? Why do they not use services? What are the perspectives of the district officials regarding poverty?

Choosing Methods, Establishing Credibility

Many community level studies are dismissed as anecdotal because the findings are not seen to be generalizable beyond the particular community, and thus of little policy significance. To overcome this, sampling issues were discussed and communities selected in discussion with senior officials from the Directorate of Planning and the Central Bureau of Statistics (CBS) of the Government of Kenya. The PPA was linked to the National Welfare Monitoring Survey (WMS) which used a sample of 12,000 from the national cluster sampling framework. Based on findings from the just completed WMS, five of the poorest districts in Kenya were selected. Within each district, five “clusters” were chosen randomly using maps available at the CBS. The final PPA sample was 3,500 people from 35 clusters or villages from seven districts, and a small sample of female-headed households from two Nairobi slums.

To address specific issues, eleven data collection methods were used. Several focused on the same issues to crosscheck information and to probe issues in depth. The methods were a combination of SARAR (Self-Esteem, Associative Strengths, Resourcefulness, Action Planning and Responsibility), Participatory Rural Appraisal and brief household level questionnaires. Methods included mapping, wealth ranking, seasonal analysis, trend and price analysis, focus group discussions, key informant interviews, problem identification, gender analysis, understanding health seeking behavior and incomplete sentences completed by school children.

Each team also held a day long district level workshop to understand poverty from the perspective of the key decisionmakers and also to brief officials about the...
The in-country work was financed by the British Overseas Development Administration (ODA) and a contribution from UNICEF. The study team was coordinated by the African Medical and Research Foundation (AMREF), a nongovernmental organization. The field research team consisted of 35 researchers, primarily sociologists and anthropologists who could speak the local language. Teams of five to seven people spent two or three days in each village. The urban team was comprised of three people. The study team was trained intensively for two weeks in instrument development and field testing.

Data Analysis
The data were analyzed using systematic content analysis and gradual aggregation of data based on themes from the household, group, village, district to national levels.

Key Findings

What is Poverty? Who are the Poor?
Poverty was widespread in the seven districts studied. Poverty, as defined by the study’s participants, had increased and become pervasive. Estimates of the percentage of each district’s population that was “poor” or “very poor” ranged from 54 percent to 85 percent.

In order to survive or minimize risk and survive, the poor reported that they diversified their income. The nature of their income-generating activities — including small-scale subsistence farming, peddling, manual labor, illicit brewing, welding and cobbling, and small-scale business — varied by region depending on the opportunities available. Many respondents spoke about the worsening situation over the past decade. A fairly typical statement was that, “Ten years ago we had a crop in the field, well-stocked granaries, a cow. Today, because of land subdivision, inflation, drought, the high price of seeds and fertilizers, we have small and patchy yields, the granaries are empty, the cows have been sold, and sometimes to survive, we depend on government relief food.”

Perceptions of the Poor
Village residents and the poor had very specific perceptions of poverty — who was poor and the reasons for their poverty. People become poor over time, they said, due to land division among sons, soil erosion and drought, falling productivity and rising prices, old age and physical disability, and by being orphaned. When people were asked to list the major problems they faced, more than three-quarters of the poor reported that their most important challenge was either lack of food (46 percent) or lack of money (30 percent).

In many districts, sharp differences were noted between the district leaders’ understanding of the intensity and spread of poverty in their areas and the perceptions and experiences of village people and the poor. While interviews with village people showed a high degree of awareness about poverty and who the poor are, district leaders tended to give textbook descriptions of poverty, and the poor were viewed as an amorphous group. This gap was seen by the poor as an important factor in blocking programs which might otherwise be providing assistance to them.

District officials linked poverty with illiteracy, whereas village people said the poor were often educated. The negative stereotypes most commonly used

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* Cluster sampling procedure not closely followed.
by district officers were that the poor are lazy, idle, drunkards, criminals, prostitutes, poor thinkers and uncaring about the future. By contrast, village people described the poor as religious and hard-working, deeply worried about their security and future. While a few villagers viewed the poor as lazy, the majority said a poor person who was lazy was unlikely to survive and, in fact, must combine multiple survival activities “to barely keep afloat.”

How the Poor Perceive their Future
In every village, households that were identified as poor by the community at large were interviewed in private. The final question asked dealt with their vision of the future. Overall, 85 percent of the poor felt that their situation would worsen in the future. The percentage increased to 97 percent in some villages.

How Does Someone Become Poor?
The process of impoverishment is understood by villagers as having two dimensions. First, almost everywhere poverty is seen as an intergenerational phenomenon: “Poverty is inherited. If you are born to a poor father, he cannot educate you and cannot give you any land or very little land of poor quality. Every generation gets poorer.”

But becoming poor is also understood as a process that can happen to anyone over time. Primary factors cited include land subdivision, soil erosion, low productivity, rising prices, reduced government services and having many children. Sickness, physical disability, old age and being orphaned were other routes through which families or individuals plunged into poverty.

Inflation
In all districts, people linked growing poverty with increasing prices, and compared current prices to those of ten and two years previous. According to village people, prices had risen substantially on a continuous basis over the past decade, and dramatically so in the previous two years. During the period 1984-1992, for example, prices of sugar and cooking oil, two basic commodities, increased 20-25 percent per year on average in all districts. From 1992 to 1994, these increases averaged 100-150 percent per year, indicating a significant acceleration in the trend.

Cost-Sharing
While cost-sharing has been credited with bringing about slow improvements in Kenya’s educational and health systems, the study showed that it had also begun to deprive the poor of education and health care. Under the cost-sharing program, parents must maintain the schools and provide blackboards and chalk, desks and chairs, roofs and walls, and playgrounds. In most schools visited, however, parents were not able to afford the escalating fees to maintain this basic educational infrastructure. Study participants recommended bursaries targeted to the poor to assist them in meeting their cost-sharing payments.

Analysis of household data showed that (depending on the district) between 32 and 63 percent of poor households had one or more children who had dropped out of primary school because of an inability to pay school fees. When poor parents had to make a choice about who would stay in school and who should be withdrawn, daughters were almost always the first to go. Overall, more than twice as many of the poor felt that girls should be withdrawn from school before boys.

Access to Water
While the WMS did not identify access to drinking water as a significant problem, the PPA found that access to water was a major challenge facing the poor. In particular, the study found that: in all districts except one, poor people reported access to safe water as a problem; in all districts the water problem became acute during the dry season; where demand was high and community groups had the capacity (skills, technical and business management), local groups managed simple water systems effectively without government support; and successful water user groups branched into income production activities, some of which fed back into water systems to expand the system or for repairs.

Access to Health
The study found that the poor were health conscious and engaged in a variety of health maintaining strategies. However, they visited government health facilities only when they were desperate and often as a
last resort. This was not because they did not believe in the curative powers of health providers, but because their experience with health facilities had been so dismal over the past few years. Problems cited by the poor included distance, “unofficial fees,” lack of drugs and rude health personnel.

Poverty and Female-Headed Households

Overall, 25 percent of the study population was categorized as very poor. In the poorest category, there were over twice as many female-headed households (44 percent) as male-headed households (21 percent). While 59 percent of the male-headed households overall were considered poor or very poor, this was true for 80 percent of the female-headed households. The pattern of greater poverty among female-headed households was true for every district and for all 35 villages. In two districts, more than 95 percent of the female-headed households were classified as poor or very poor.

In every district, women identified food as the most immediate and pervasive problem. In some villages, female heads of households consistently limited the number of meals eaten to cope with the ever-present lack of food. One-third of the female-headed households in one village had only one meal per day (the remaining two-thirds had two). Some women resorted to begging for food, others relied on brewing alcohol, despite being harassed by police. Women often traded their labor for food. In another village, community members observed that “most of the people who worked on the farms of the well-to-do in exchange for food were women.”

Women’s limited control of land was an issue in all districts. Despite the fact that legally women have access to land, when divorce or death of the husband occurs, customary law takes over and women are generally deprived of land. The issue of ownership and rights to land — which has important implications for targeting poverty alleviation programs — was not captured by the WMS.

The Role of Harambee and Indigenous Networks

The poor, and especially the very poor, are difficult to reach through centralized government services, particularly when the quality of service is inadequate and when cost-sharing is involved. Like all societies, Kenya has indigenous social networks which form the basis of resource and labor exchanges and reciprocity. In every village visited, there were at least five, and sometimes as many as 17, associations. This suggests that nationwide, there are about 300,000 such groups in the rural areas. The social capital embodied in these informal networks binds a group of people together and fuels development. Under normal circumstances, these informal associations play a disproportionately important role in the lives of poor people who are constrained in every way except by their labor. The PPA study found in particular that:

- The indigenous self-help system of “Harambee” is stressed, and the informal safety nets of the poor are breaking down in the absence of timely support from the outside.
- There are a large number of strong indigenous self-help groups but they either do not reach the poor or are under capitalized and therefore cannot meet the needs of their potential clients.
- NGOs and church groups, with a few exceptions, are providing welfare support to the poor rather than supporting the poor in building strong self-help groups.
- The potential of women’s organizations as income producing groups is largely untapped.

Box 3
A Women’s Self-Help Group

Even in the harsh circumstances of Mandera — a dry semi-desert district which has reported the harshest environment of any of the areas studied, and which is isolated from markets and city centers — women’s groups persist in their efforts. In Arda Kalacha, a village in which everyone was categorized poor or very poor, a women’s group came into being seven years ago to assist needy people, initiate harambees (public fund-raising events) and help the poor pay for school fees. The group has 30 members.

Despite inadequate and short rains, women undertake small-scale farming during the two brief rainy spells and walk 18 kilometers to the nearest trading center to sell their produce. A few years ago, the group invested in poultry raising; for several years they sold eggs successfully at the trading center. Recently, a disease wiped out a majority of the hens, but the group did not disintegrate. After a while, the women collected resources to start goat herding, but these were also killed, this time in the drought of 1992. The few that survived were sold. Rather than giving up totally, the group then resorted to buying stock for petty trading; they now sell sweets, cigarettes and biscuits in the community. Despite their very limited resources, they continue to extend help to the most destitute in the community who are unable to participate in or contribute to the group’s efforts.