

Even the 'Rich' are Vulnerable: Multiple Shocks and Downward Mobility in Rural Uganda

Kate Bird and Isaac Shinyekwa*

Poverty data rarely capture processes of change, limiting our ability to understand poverty trajectories at the individual or household levels. This article uses a household survey, village-level participatory studies and in-depth life-history interviews to examine people's poverty trajectories and to identify what drives and maintains chronic poverty. Composite shocks can propel previously non-poor households into severe and long-term poverty. Poverty is hard to escape, and people born into chronically poor households find few opportunities for accumulation and wealth creation. The analysis highlights the importance of poverty interrupters, including the end of conflict and the re-integration of internally displaced people, and suggests that state-led interventions would be needed to provide real opportunities to the chronically poor.

1 Introduction

Most survey-derived poverty data generate point-in-time information and are a limited basis for the understanding of processes and compound or linked events. They are normally unable to reveal how long a household or individual has lived in poverty, and therefore suffer from weaknesses when used to understand the processes surrounding chronic poverty. Panel data sets, which use re-surveying to follow a cohort of respondents over an extended period, are much better at this, but are rarely available in developing countries. Uganda has better panel data than many but its analysis still leaves many questions unanswered. As a result, we have a limited understanding of who are chronically poor and what the factors are that drive them into chronic poverty and keep them there. This article uses a household survey, village-level participatory studies, in-depth life-history interviews and focus-group discussions to understand people's poverty trajectories and to identify what drives and maintains chronic poverty.

The article is part of a programme of work on chronic poverty. David Hulme and his colleagues (2001, 2003) show that chronic poverty is likely to be multidimensional, with multiple causes combining to trap individuals, households and communities in long-term poverty. Multidimensionality is not a new idea (Chambers, 1983), but here we emphasise the chronicity of poverty and show how low capabilities (Sen, 1993) and the interlocking nature of their problems trap the poor in chronic poverty (Bird, 2001). The chronically poor differ from the *usually poor* (those who occasionally move out of

* Kate Bird (k.bird@odi.org.uk) is a Research Fellow, Overseas Development Institute, 111 Westminster Bridge Road, London, SE1 7JD and Isaac Shinyekwa formerly a Research Assistant in the Chronic Poverty Research Centre, based at the Economic Policy Research Centre (EPRC), Makerere University, Kampala.

poverty), the *churning poor* (those who regularly move into and out of poverty), and the *occasionally poor* (those who are usually non-poor but occasionally fall into poverty) (Hulme et al., 2001, 2003). This article identifies how composite shocks can drive previously non-poor households into severe and long-term poverty and deepen the poverty experienced by the already poor. It shows that chronically poor households find few opportunities for accumulation and escape.

The article presents findings on the drivers and maintainers of poverty in rural Uganda (section 2), suggests possible poverty interrupters (section 3) and then concludes.

1.1 Poverty and chronic poverty in Uganda

Uganda is an interesting country in which to explore chronic poverty. It has experienced sustained economic growth for over a decade and has outperformed many other countries in sub-Saharan Africa in terms of poverty reduction. There is widespread confirmation that poverty was reduced by a third or more during the 1990s (Appleton, 1998, 2001a, 2001b; Okidi and Mugambe, 2002), reaching 35% by 2000 (Appleton, 2001b).¹ However, performance was patchy, with some parts of the country – particularly the North – lagging behind. The poor are still disproportionately rural, and improvements were slower for non-coffee-growing households and amongst the unemployed, with government employees, traders and cash-crop farmers those most likely to have gained (ibid).

Okidi and Mugambe's (2002) analysis of poverty data from 1992 and 1996 shows a varied picture. Some households moved out of poverty, others became poor and another group were poor during both periods (an aggregate of 54%, with 61% in rural areas), indicating that they were probably chronically poor. Unsurprisingly, the severely poor (those in the lowest income quintile) were found to be more than twice as likely to be trapped in poverty as those just below the poverty line (ibid). Of those who 'escaped' poverty we do not know how many saw long-term gains in well-being, and how many joined the ranks of the 'churning poor', or sank again into long-term poverty (see Lawson et al., 2003, for further analysis of Uganda poverty dynamics).

The poverty reduction of the 1990s can be attributed to growth rather than improved equity or redistribution (Appleton, 2001b). Despite the reduction in aggregate poverty, differentiation increased (Appleton, 2001a, 2001b; Deininger and Okidi, 2003), with the poorest 20% experiencing declines in both social welfare and income (Opio, 1997; Appleton, 1998:28). Spatial disparities also widened, with differentiation increasing between urban and rural populations and between regions (Deininger and Okidi, 2003). Literacy ranges from 46 to 77%, per capita household expenditure from Ush.14,719 to Ush.41,029, access to safe drinking water from 12% of households to 49%, and a lack of access to health care from 2% to 44% (UNDP, 2002). These figures

1. The Uganda poverty line is constructed to differentiate between the minimal expenditure necessary in rural and urban areas. The average is equivalent to US\$34 (in PPP terms) per capita per month, close to the dollar a day poverty line used by many for international comparisons (see <http://www.csae.ox.ac.uk/conferences/2002-UPaGiSSA/papers/Appleton-csae2002.pdf>, accessed 2 October 2003). The World Bank quotes the Ugandan food poverty line as being Ush.18,359 (US\$9.23) per month or Ush. 220,308 (US\$110.76) per year (using www.ouanda.com currency conversion, with rates as at 2 October 2003). (World Bank, n.d.).

have a low top end and mask wide disparities within regions. Poverty has increased in the Northern Region due to the conflict-related loss of life, assets and livelihoods and the destruction of social capital (MFPED, 2001). The poor performance of the Northern Region indicates the considerable impact that conflict has on prolonging and intensifying poverty.

The majority of the chronically poor² (79%) work in the agricultural sector. Nearly two-thirds of the chronically poor (59%) are children, over half of the chronically poor (54%) live in large households with 6-9 people (or more in Eastern Uganda where 62% of households contained more than 10 people), and elderly women are disproportionately represented (MFPED data cited in Okidi and Mugambe, 2002: 14).

While these and other features of the poverty profile can be established relatively easily, current information on poverty in Uganda is weak on providing an understanding of the poverty trajectories of individuals or households. In this article we combine data derived from a range of research methods to build up a picture of the key household-level problems which push people into chronic poverty, and once there keep them there.

1.2 Methodology

We used three main sources of data: outputs from wealth-ranking and other participative exercises with 2343 households in 9 villages in 3 districts in Uganda (Mbale, Kamuli and Mubende) (Figure 1) undertaken by the LADDER research programme in the first quarter of 2001; a dataset generated by the LADDER household survey of 315 households during the same period; and key-informant interviews, focus-group discussions and 28 in-depth life-history interviews, which were undertaken in three of the nine LADDER sites by the authors in the second half of 2002.³

The nine sites were selected purposively by the LADDER team to represent all the main agro-climatic zones and natural resource-based livelihoods in Uganda.⁴ A wealth-ranking exercise was undertaken in each of the nine sites in order to generate a sampling frame. These commonly placed households into five or six strata which were combined by the LADDER research team to form three groups: poor, middle and non-poor. Thirty-five households were selected⁵ from each village for the in-depth household

2. Taken by Okidi and Mugambe to be synonymous with the severely poor in the lowest 20%. They justify this by showing that very few of the severely poor moved out of poverty between 1992 and 1996.

3. For more information about LADDER, see www.uea.ac.uk/dev/odg/ladder.

4. The study sites were not selected based on their poverty characteristics and cover an arc from the central west of the country to the central east, not touching on any of the currently poorest or conflict-affected areas. The selection was effective for the original purposes of the LADDER research but may limit our ability to understand the dynamics of chronic poverty. To develop a more comprehensive understanding, the Chronic Poverty Research Centre is complementing the research in the 'LADDER villages' with additional field work in remote (Kisoro, SW Uganda) and conflict-affected (Northern) rural Uganda.

5. In the fishing villages stratified sampling ensured that roughly half of the households were fisherfolk (e.g. 17 out of 35 in Kiribairya). This was to guarantee that the survey provided adequate information on fish-based livelihoods. Unfortunately this makes other issues difficult to explore with accuracy (e.g. mean village income figures, proportion of households involved in fish-based livelihoods, proportion of landless households, proportion of households in Kiribairya displaced by Teso ethnic cleansing who are owners of neither boats nor land). In addition, researchers selected alternative households when it appeared that the sampling process was generating an over-large number of households headed by a widow.

survey, ten households from each of the middle and non-poor groups and fifteen from the poor group.⁶

Figure 1: Location of LADDER study districts



Source: LADDER Project (2002).

The second round of fieldwork was undertaken by the authors selecting three of the nine LADDER sites for further investigation. Two of the three sites, Buwopuwa⁷ (Mbale) and Kiribairya (Kamuli), were chosen because of the severity of poverty they experience and the third, Kalangaalo (Mubende), because of its location in the Luwero Triangle and the depth of its experience of conflict during the 1981-5 NRM (National Resistance Movement) bush war. Thus, while these villages are not representative of Uganda as a whole they can be said to be typical of the large numbers of poorer villages in rural Uganda.

An average of 9 in-depth life histories (oral testimonies) were collected in each of the three villages. We assumed that the majority of the chronically poor would be found amongst the most severely poor, but wanted to test whether this was true, as well as identifying the key drivers, maintainers and interrupters of chronic poverty. Most of the life-history interviewees were selected at random from the LADDER household survey listing, the majority from wealth ranks 5 and 6, with others up through the wealth ranks (in Buwopuwa 7 out of 11 were poor; in Kalangaalo 8 out of 11; and in Kiribairya 2 out

6. Analysis of the results from this survey shows that the wealth groupings correspond well to household asset and income data although the picture is slightly less clear with regard to per capita income figures.

7. Buwopuwa was selected because the sampling frame for the poorest village in the Mbale sample, Bukhasusa, was no longer available. We re-analysed the dataset to develop a greater understanding of the three study villages, and undertook two periods of fieldwork in the selected study villages.

of 5).⁸ Some people living with AIDS were deliberately selected in Buwopuwa and Kalangaalo⁹ in order to capture information on this subject.

The life histories were collected during semi-structured interviews which traced an individual's life through from their earliest childhood to the present day, including key life-changing events. By talking also to the non-poor we hoped to identify some of the advantages which protected them from falling into poverty, and to show in what way the experiences of the severely and persistently poor differed from those of the transitorily poor. By talking to a person about their life, rather than taking a thematic approach, we hoped to identify path-determination in individuals' lives and to pin-point key moments of choice – or the absence of choice. The life-history interviews were also used to identify themes for further investigation through focus-group discussions and key-informant interviews.

The study sites

Tables 1 and 2 provide a quick overview of the three sites selected for in-depth study. They range in wealth and remoteness, with Kalangaalo the richest and best connected and Kiribairya the poorest and least well connected. More detailed descriptions can be found in Bird and Shinyekwa (2003) and LADDER (2001a, b, c).

Table 1: Descriptive statistics of the LADDER villages

LADDER village	Per capita income (US\$) ^a		Mean hh land holding (ha.)	Livestock ownership in CEUs ^b		% female headed hh	Building materials of houses (%)	
	Mean	s.d. ^c		Mean	s.d. ^c		Brick/concrete walls	Tin roof
<i>Mbale</i>								
Bukahasausa	191	193	0.54	0.54	0.90	17	0	60
Buwopuwa	180	188	2.17	1.72	2.24	23	6	46
Bunabusu	583	645	1.92	1.66	1.68	14	9	89
<i>Kamuli</i>								
Lyingo	512	894	0.71	1.56	4.76	17	23	43
Kinamwanga	246	704	1.12	5.37	11.19	11.	49	63
Kiribairya	111	92	0.18	0.30	0.45	26	0	0
<i>Mubende</i>								
Kabbo	229	164	1.54	3.77	10.37	17	9	57
Kansambya	155	125	2.47	1.09	1.99	3	9	74
Kalangaalo	254	188	2.26	1.64	2.32	20	40	94

Notes: a) Ush. figures converted to US\$ using the average rate during the first quarter of 2001 (when the survey was conducted) of USh.100,000 = US\$57.85; b) CEU = cattle equivalent unit: pigs = 0.14, goats = 0.12; sheep = 0.10, turkeys = 0.04, chickens = 0.02, other = (given price/5% trimmed mean price for cattle); c) s.d. = standard deviation.

8. Kalangaalo – non-poor 2; middle 1; poor 8. Buwopuwa – non-poor 1; middle 3; poor 7; Kiribairya – non-poor 1; middle 3; poor 2.
9. Interestingly, no one was willing to speak to us on this topic in Kiribairya, perhaps reflecting the lower levels of trust in IDP camps in Uganda in comparison with the mainstream rural population.

Table 2: Key characteristics of the study sites

	Kiribairya	Buwopuwa	Kalangaalo
District	Kamuli	Mbale	Mubende
Population	74 households (c. 520 people)	204 households (c.1080 people)	237 households (c. 1600 people)
Ethnic groups	Bakenya, Basoga, Banyoro, Iteso, Jaluo	Bagishu	Baganda, Banyarwanda, Bakiga, Banyoro, Burundi, Botoro, Bashoga, Bagishu, Basamya
Physical description of area	Lake side, drought affected	Flat plateau, moist	Crop land, bisected by several streams
Accessibility	<ul style="list-style-type: none"> • Most remote of the three sites – very poor road access, good access via Lake Kyoga • 1½ – 2½ hours from Kamuli town (small town, poorly developed market and services) 	<ul style="list-style-type: none"> • Good road access • 1 hour from Mbale town (substantial regional centre) • Near Kenyan border 	<ul style="list-style-type: none"> • Least remote of the three sites – excellent road access
Level of service provision	Highly inadequate	Adequate	Good
Access to markets	Poor	Average	Excellent
Main livelihood activities	Fishing & fish processing, casual labour, some agriculture, small numbers of livestock	Annual crop production, matooke, coffee, some livestock, boda boda, brick making	Annual crop production, coffee, livestock, formal employment, alcohol production and sale, boda-boda, brick making, taxis, and construction
Key events	<ul style="list-style-type: none"> • 1986 – arrival of IDPs • 1995 – borehole • 2000 – flood swept away half of village • 2002 – storm demolished primary school, killing 2 children 	2000 – borehole	<ul style="list-style-type: none"> • 1966 Kabaka (Bugandan King) exiled late 1960s -1970s - widespread killings • 1981-5 NRM bush war – area seriously conflict-affected • 1986 peace (after this the local trading centre grew as people invested) • Mid-1980s coffee wilt • 1990 market liberalisation • 1994 Kabaka allowed to return • 1990s – boreholes & clinic built in village • 1996 – Universal Primary Education • 1997 rains destroyed crops • 2002 closure of local police post – crime increased

Source: Life-history and key-informant interviews, August-November 2002; LADDER 2001a, b and c.

2 Poverty dynamics in rural Uganda: drivers and maintainers of poverty

Life histories were found to provide a strong starting point for understanding the trajectories into and out of poverty that individuals and households follow. They enabled the identification of the most common covariant and idiosyncratic shocks which triggered a decline into poverty (drivers), the way in which these interlocked, and the constraints which prevented accumulation, investment and movement out of poverty (maintainers,¹⁰ illustrated in Figure 2, and examined in the current section).¹¹

Evidence from the study sites shows that decline in well-being is associated with a web of meso-level constraints and shocks which commonly combined negatively with household-level shocks and socio-cultural or socio-psychological factors. Composite shocks and loss of assets propelled a number of previously non-poor households into severe and long-term poverty. Chronically poor households seldom faced a single problem or constraint, and found few opportunities for accumulation and escape. Those who were able to reduce the intensity of their poverty generally managed to do so as a result of several serendipitous events or factors combining.

2.1 Differential well-being in the study sites

Looking at the wealth-ranking information produced for the LADDER sampling frame, we see that between 26% and 62% of households are considered poor in their own communities.¹² Data from the household survey show per capita incomes to be low in all three focal villages, particularly in Kiribairya, which has the lowest per capita income and smallest standard deviation, indicating widespread poverty and low differentiation within the community (Table 1).

Household wealth ranks were correlated with a number of variables (education of household head, household education, land ownership, livestock ownership [in cattle equivalent units], household assets, ownership of tools, migration, the household's dependency ratio, receipt of transfers, and the livelihood diversity index). The strength of correlation varied amongst the villages and the only variables important in all three focal villages were land ownership and household assets. Education and the ownership of livestock and tools were important in some but not all of the villages (see Table 3). Looking at the dataset for all nine LADDER villages we found a significant difference

10. In this first round of collecting life histories we interviewed only household heads who had been interviewed during the LADDER survey. This enabled us to move straight into the life-history interview, without having to spend time collecting basic household asset, income and livelihood data. Due to the large number of female-headed households this did not lead to a lack of women's stories, but may have biased our findings in other ways (e.g. inadequate attention to 'youth', women within male-headed households, the situation of co-wives, the chronic poverty of children, and so on). In subsequent research we plan to systematically interview other household members to explore intra-household differentiation (see Bolt and Bird, 2003 for an outline of the method that we hope to use) and other issues.

11. The names of all respondents have been changed.

12. Kalangaalo, 61%; Kansambya, 42%; Kabbo, 28%; Bunabuso, 53%; Buwopuwa, 31%, Kiribairya, 26%; Iyingo, 61%; and Kinamwanga, 62%.

Figure 2: The interlocking drivers of chronic poverty in rural Uganda

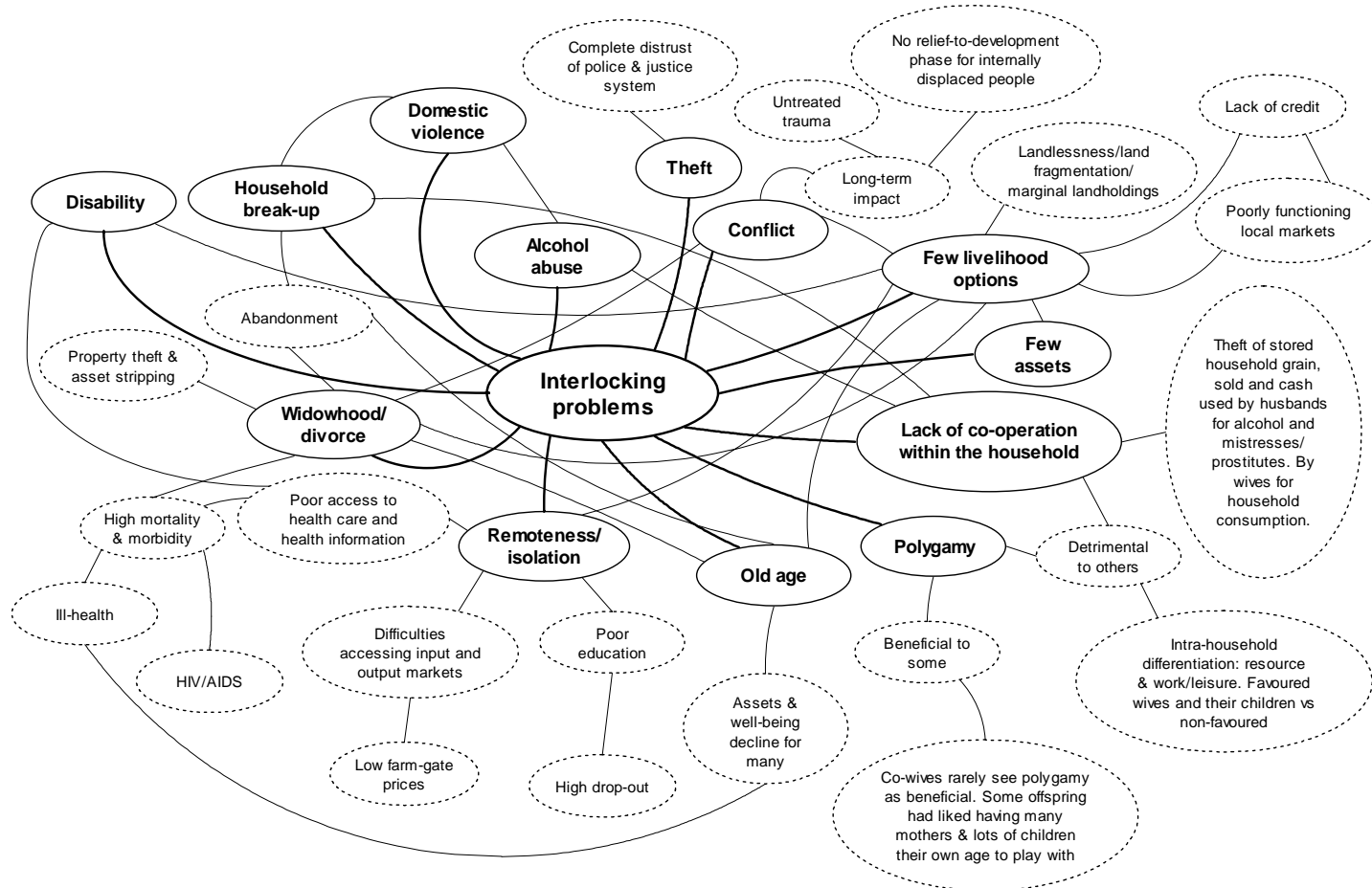


Table 3: Correlating wealth rank groups with selected assets/household characteristics

Village name		Wealth ranking group with							
		Area owned (ha.)	Livestock	Tools	Houshold assets	Education of household head	Household education	Migrants	Dependency ratio
Buwopuwa	Spearman's	-.776 ^a	-.756*	-.705 ^a	-.749 ^b	-.425 ^b	-.303	-.027	-.011
	Sig. (2-tailed)	.000	.000	.000	.000	.011	.077	.878	.952
Kiribairya	Spearman's	-.510 ^a	-.255	-.261	-.485 ^a	-.323	-.450 ^a	.067	-.047
	Sig. (2-tailed)	.002	.140	.130	.003	.063	.007	.701	.788
Kalangaalo	Spearman's	-.519 ^a	-.503 ^a	-.311	-.571 ^a	.098	.115	.211	-.172
	Sig. (2-tailed)	.001	.002	.069	.000	.581	.512	.224	.323

Notes: a) correlation is significant at the .01 level (2-tailed); b) correlation is significant at the 0.5 level (2-tailed). N = 35.

(at the .01 level) between poor and non-poor households in terms of the ownership of land, livestock, tools and household assets.¹³ There was a significant difference also (at the .05 level) in terms of the education level of the household head and reliance on own production for subsistence.¹⁴ Which way causality runs for each of these variables is difficult to determine.

Land ownership in the study villages is closely related to wealth grouping. The poor have marginal holdings, and in Kiribairya only the non-poor own any land at all. Local inheritance practice (whereby all sons receive a portion of their father's land on marriage, rather than primogeniture where only the oldest son inherits) is resulting in land fragmentation. Many holdings are marginal, leading to un- and under-employment – particularly amongst the youth; reduced levels of aggregate and individual well-being and increased differentiation driven by the distress sale of land by households attempting to meet contingencies or clear debts.

2.2 Poverty trajectories

Membership of a non-poor family provides an individual with a number of positive and mutually reinforcing advantages: good diet; access to education; access to health care; higher status; a network of friends and patrons in and outside the village; the ability to travel outside the village, and therefore exposure to ideas; more land or livestock to inherit; and more likelihood of marrying well. However, these advantages cannot necessarily be used to predict that an individual and their household will be able to avoid either short or extended periods of poverty.

Analysis of the life histories and the LADDER dataset shows that most households are vulnerable to downward movements of well-being, not just those in the so-called 'vulnerable groups'. Analysis of well-being changes between 1996 and 2001 in the dataset shows that 64% of households felt that their situations had worsened over that period. The life histories confirmed the predominance of downward movement. Of the 28 individuals interviewed, 25 perceived that they had experienced decreased levels of well-being during their lifetime, 12 perceived a decline from middle or non-poor groups to being in the poorest group, and only 3 individuals felt that their well-being had been stable. None felt that their well-being had improved.

Coming from middle or non-poor groups did not protect individuals and households from declines in well-being, and of the 17 very poor interviewees, 6 described having started life in non-poor households and 6 in middle-ranking households. Interviews with older people illustrated that, in general, they had been much more prosperous during their early lives than they were now. Distorted recall may explain this, but the examples that individuals gave to support their stories were convincing. They included detailed descriptions of household livelihood portfolios, asset holdings (including housing design and type, landholdings and livestock numbers) and dietary patterns, and of their household's comparative wealth within the

13. Poverty in this case is determined by whether per capita income is above or below the poverty line for rural Uganda. Per capita income has been arrived at by calculating total household income from all sources (e.g. crop and livestock sales, the value of agricultural produce for home consumption, land rental, fisheries, casual labour, salaries and wages and remittances) divided by the adult equivalent units per household.

14. Using a version of Dunn's test given in Siegel and Castellan (1988: 213-4).

community, its involvement in village life and celebrations, and the size and composition of the household now and at various points in the past. The latter included its ability to attract and support members of the extended family and/or paid or unpaid servants and farm labour. This rich information enabled a judgement to be made about the relative status and well-being of the household in question.

2.3 Drivers and maintainers of poverty

The often sharp declines described above illustrate the long-run negative impacts of the Amin and Obote I and II regimes, the NRM bush war, acute land fragmentation and the interlocking of other poverty drivers. The sustained economic growth of the last decade occurred from a very low base, and there is a widespread perception that this has yet to bring households and individuals back to the level of basic food security and well-being that was enjoyed early in the twentieth century. This is reflected in the stories of the majority of older life-history interviewees (from all wealth groups) who indicated that life had become harder, over the long term, across a range of dimensions (see section 2.2 above).

The multidimensional and long-run impact of conflict is suggested by many of the life histories collected in Kiribairya (Kamuli) and Kalangaalo (Mubende) (see section 2.5 below) and by the first Uganda Participatory Poverty Assessment (UPPAP 1), during which insurgency was cited as a key driver of poverty in 40% of the UPPAP sites (MFPED, 2000). The national household survey has consistently shown that the incidence of poverty is much higher in conflict-affected Northern Uganda (nearly 67% in rural areas) than in Central Uganda (under 26% in rural areas).

Capabilities and functionings are also of profound importance, and both national household data and UPPAP 1 indicate poor health, high dependency ratios and inadequate skills and education as strongly linked with poverty (Okidi, 1999; Okidi and Mugambe, 2002; Lawson, 2003). Alcohol dependence and problem drinking were found by UPPAP 1 to be widespread, rating only second to poor health as a perceived driver of poverty (MFPED, 2000; USAID, 2003). This is supported by our fieldwork findings (see Boxes 2 and 5 and section 2.5 below).

As an interpretation of focus-group data on cultural or personally-based determinants of poverty, UPPAP 1 lists 'idleness and laziness' as the seventh most commonly cited driver of poverty. But whose views are represented here? This conclusion seems likely to be based on the local elite's derogatory perceptions of the poor (see also Hossain and Moore, 1999; Woodhouse, 2003). Research in neighbouring Kenya repeats this picture, with local government officers stereotyping the poor as lazy, immoral and uncaring about the future, while the local people themselves see the poor as religious, hardworking (a lazy person is unlikely to survive) and deeply concerned about the future (World Bank, 1996).

2.4 Local perceptions of poverty drivers and maintainers

We conducted focus-group discussions to explore local understandings of the causes of poverty, to complement the life histories and analysis of change data in the LADDER survey. Unfortunately mobilising poor men and women proved difficult, as they were

seen by others in the community as being ‘not knowledgeable’. This repeats a common problem experienced by researchers conducting qualitative research, who find that they are discouraged from interviewing people locally regarded as ignorant, resulting in the under-reporting of the experiences of certain groups. It proved difficult to overcome this local bias, and as a result our focus groups were generally composed of people who could be considered the local elite. The one occasion that a group of poor women was successfully mobilised (in Kiribairya, Kamuli) proved ineffective as a data-gathering exercise, as the women lacked confidence and were so unused to expressing their opinions that group discussion was impossible. This was an interesting finding in itself, as it highlighted the difficulties in gathering information from very poor people and illustrated the need for the very particular research skills and approaches.

With regard to the results from the focus-group discussions in Buwopuwa, the group of non-poor women suggested that ignorance and laziness were the two most important drivers of poverty (see Box 2). Their perceptions are countered by poor people who described to us their attempts to develop productive livelihoods, often based on drudgery-intensive activities (for example, hoe-based crop cultivation, brewing, brick-making, casual labour, *boda boda*¹⁵).

The emphases given to the causes of poverty by the elite men and women in Boxes 1 and 2 differ interestingly: men emphasised meso-level problems, external to the household, while women emphasised those largely within the household. Some of the problems raised by the elites are things that the poor themselves are unlikely to see as problems (as they are less vulnerable to them *because of* their poverty, e.g. theft, livestock diseases), or to accept at all (e.g. ignorance and laziness). Again, changes that may reduce the profit margins of large agricultural producers may be vital sources of livelihood for poorer households (monetised labour). However, what is interesting is the complementarity between the perspectives, and by combining them we probably get nearer to the complete picture. Their perspectives¹⁶ are countered, in some cases, by the perceptions of households interviewed during the LADDER survey and from the findings of researchers of the Chronic Poverty Research Centre (CPRC) (see Box 3).

Box 1: Elite men’s perceptions of the drivers of poverty: Buwopuwa¹⁷

- **Markets** were seen as problematic. Local markets do not function well enough for farm households to benefit from liberalisation. As a result, the changes have been damaging, particularly for small farmers. Only farmers producing substantial surpluses can negotiate prices with millers, who collect their output. Others have to sell to agro-traders on bicycles, who offer very poor prices. A lack of trust prevents small farmers clubbing together to negotiate with millers. ‘Whoever has a little wants to sell it quickly.’ ‘Whoever finds a market opening would rather benefit from it himself than share the knowledge.’

15. *Boda boda* is the local bicycle taxi service.

16. We have presented the summaries of focus-group discussions in this village as it was seen as more representative of Uganda as a whole than conflict-affected Kiribairya and Kalangaalo.

17. Structured interviews with all 315 households examined perceived changes in livelihoods and well-being over a five-year period (1996–2001). The answers of those who had experienced declines in well-being provide insights into what they considered to be the key drivers of poverty.

Box 1: Elite men's perceptions of the drivers of poverty: Buwopuwa (contd)

- **The removal of subsidies and changes in the terms of trade** have led to real rises in input prices, and farm-gate prices have not kept pace.
- The **monetisation of labour** has meant that richer farmers can no longer afford to employ casual labourers. 'In the past you could cultivate a lot of land by using community labour. People would come and dig and you just fed them. Now it's cash.'
- Devastating **livestock diseases**, following reduced veterinary extension services and increases in drug costs, have reduced animal traction. Cultivation intensities and yields have declined.
- **Poor local education standards** prevent local children's access to good secondary schools. 'Without well educated young people the development of the area will be held back'.
- **High medical** costs and the loss of labour associated with long-term illness have pushed some people into poverty.
- **Theft** was not just as an irritant but actually limited investment and accumulation. Respondents described the petty theft of crops and armed robberies by thieves from outside the community working together with villagers who identify individuals with household assets or money from a recent sale of livestock or grain. The community has no faith in the police, who are seen as utterly corrupt. This has led to the community taking the law into their own hands and lynching nine robbers in the last five years.
- Problems at the household level include **land fragmentation** due to population pressure, where land is 'divided first amongst four sons, then ten grandsons'. This is particularly a problem in polygamous households, and **polygamy** was identified as a cause of poverty. 'It's costly to feed and clothe the children and cover medical fees. In the short run having two wives may seem like a good deal – more people to dig etc. but then you end up with thirty mouths to feed from one acre. Lots of children are only good if they are educated and get jobs, otherwise you all end up depending on the one acre.'

Box 2: Elite women's perceptions of the drivers of poverty: Buwopuwa

'Poor people have no land, no money. All they can do is casual work.' Women listed the key causes of poverty (numbers in brackets refer to the top 6 causes).

- **Ignorance (1)**: defined as a lack of knowledge; doing things which are not helpful, and being unable to communicate well, resulting in not using assets well.
- **Laziness (2)**: for example, 'someone who has land, but instead of cultivating it, rents it to obtain money for alcohol, or despite having their own land they do casual work to get quick money for alcohol'.
- **Animal diseases (3)** have impoverished people, in particular those affecting cattle and pigs.

Box 2: Elite women's perceptions of the drivers of poverty: Buwopuwa (contd)

- **Lack of co-operation within families (4):** mainly men 'stealing' from the household. Men pay school fees¹⁸ but very rarely pay for their children's medical treatment. Women must pay for everything else – soap, salt, etc. Women estimated that two-thirds of households in Buwopuwa suffered from a lack of internal co-operation.
- **Low education (5).** 'Most of the youth do not have skills, so they spend their day drinking and then gang up to break into homes.' The women link the lack of education to polygamous husbands who favour the children of one wife and neglect the others. Their daughters are 'sentenced to marriage'. 'No more school fees for you. Go and get married!'
- **Sale of household assets by husbands (including those in polygamous marriages) (6):** Husband will sell his wife's goats to spend the money on a mistress or prostitute. The husbands feel that they can do anything they like. 'If a wife complains she is told to go back to her parent's house.'
- **Drinking.**
- **Poor soil fertility,** leading to low yields. Farm fragmentation/small holdings mean that people cannot fallow their land, but cultivate it continuously with food crops, leading to reduced matooke,¹⁹ potato and cassava yields.
- **Theft:** of animals was blamed on 'people who drink at any time of day'; of crops occurs when people steal bunches of matooke from the trees; armed theft from shops – outsiders bring guns and work with locals who identify premises. Villagers cannot afford to 'raise security' themselves to defend their property and the police are ineffective.
- **Decline in farm-gate prices.**
- **Men curtail their wives' movements.** When women start a self-help group (e.g. to save to buy livestock) their husbands stop them going to meetings and make them withdraw their savings. Men fear women using meetings as an excuse for other activities.
- **Polygamy.** Women are tricked into becoming second or third wives. Resources are concentrated on the younger, favoured wives and the older/ unfavoured wives suffer.
- **Variable climate.** Drought causes problems, as does unseasonal or too heavy rain, which can cause seeds to rot in the soil rather than germinate.
- **Sickness: (HIV)** 'During the first phase of the illness, people think that they have been bewitched and sell a lot of goats and chickens to consult traditional healers. During the second phase they discover that they are sick with HIV. They become weak and cannot work hard. They have lower income and spend a lot of money on treatment.'

18. They have benefited from universal primary education which provides free primary education for four children per household. School fees are required for secondary schooling, and are out of the reach of the majority of rural households.

19. Matooke is a savoury green banana grown as the staple food crop in the central belt of Uganda, where it is strongly preferred over maize.

Box 3: Poor Ugandans' perceptions of the drivers of poverty

- Sudden loss of employment (urban areas) or loss of ability to earn
- Loss of productive resources, particularly land and cattle due to insecurity (conflict and cattle rustling), 'grabbing' by relatives and distress sales
- Reduced *access* to land (women losing access, poorly functioning rental markets, land divided to pass on to adult sons or to support additional wives)^a
- Production failure and loss of property caused by climatic factors (resulting in drought or floods and landslides), pests, disease and land fragmentation and degradation^a
- Sale or loss of productive assets^a
- Reduced draft power and labour (through death or sale of livestock; divorce or death of partner; marriage, death or migration of adult children; pregnancy and childbirth; sickness and diversion of labour into nursing sick family members; declines into frail older age)^a
- Poorly functioning local markets (reducing availability of inputs and profitability of outputs)
- Lack of capital. This prevented 35% of households cultivating their preferred crops, 59% from investing in livestock, and 55% from diversifying into non-farm activities when they wanted to^a
- Reduced fish stocks (important to lake-side communities)^a
- Long-term illness
- Weakness due to old age^a
- Death of family members^a
- Disability, with poverty severity associated with the degree of disability
- Increased family size and dependency ratios through polygamy and/or more children
- Costs associated with marriages (bride price, division of land holding on marriage of son) and funerals
- Sudden loss of support through the death, injury, illness of the breadwinner or through abandonment
- Adverse incorporation (e.g. extractive patron-client or labour relationships)
- Domestic violence

Sources: a) analysis of change data in the LADDER dataset; De Coninck (2004); Lwanga Ntale, (2003); Najjumba-Mulindwa (2003); Lwanga-Ntale and McClean (2004); Kasente (2003).

2.5 What life histories tell us about poverty dynamics

Many of the key drivers of poverty identified in the previous sub-section above are amplified by the life histories collected in the three study villages. Not surprisingly, when talking about their lives, the interviewees tended to focus on the individual and family events which had led to improvements and declines in well-being, the inter-linked nature of which is illustrated in Figure 2. In this sub-section we highlight those which emerged most strongly by being repeated most often or by having had the most profound effect on people's lives.

Domestic conflict, separation and divorce

Domestic conflict, separation and divorce emerged as a recurrent theme in the study villages. Both women and men were found to end marriages, and well over a third of interviewees had personal experience of abandonment, separation or divorce. Some (both men and women) were on their third marriage and many on their second.

Domestic violence was reportedly widespread, with women commonly suffering years of persistent and severe beatings to avoid the consequences of breaking up the family and risking intensified poverty and food insecurity following the likely loss of access to productive resources. Women might seek arbitration by the clan leaders, but the latter were commonly 'reluctant to interfere in the business between a husband and wife'. Violence was strongly associated with husbands' heavy alcohol consumption (Koenig et al., 2003) (see below) and with a 'lack of co-operation within the household', where husbands would take livestock and 'steal' food from household granaries and fields to sell, using the cash to support heavy alcohol consumption and expenditure on mistresses and prostitutes. This led to conflict and 'disciplinary' beatings. Patrilocal marriages and the low status of women meant that some women lived their life as a visitor in their husband's house with little autonomy and decision-making power (Lawson et al., 2003).²⁰ All stocks and assets are the property of the husband, who can dispose of them as he wishes and can block his wife's access to or control of resources, pointing out that 'the food and livestock come from *my* father's land'. Some women fear that attempting to curb their husbands' behaviour may result in savage beatings and expulsion from the household. However, some women would also steal from household granaries, claiming to use the money for household necessities (such as salt and soap).

It was common for adults who had experienced downward mobility to trace the start of their misfortunes to the breakdown of their parents' marriage, which, in many cases, was having an impact on their lives decades later (see Box 5). As with widowhood, families commonly break up on the separation of parents. If the mother did not rapidly remarry, she would rarely be able to access adequate land to 'dig' and feed the family. Some women embark on micro-enterprises, such as brewing, distilling and selling alcohol or other enterprises with low barriers to entry and – commonly – high levels of drudgery. Those who cannot make enough money to meet their household consumption needs leave children with their former husbands or take them to live with maternal relatives. A second husband rarely accepts another man's children into his house, and mothers commonly establish a separate household or have their children fostered by relatives. Widows commonly marry into polygamous households, which can complicate family arrangements and lead to children being treated unequally, with limited access to education, poorer quality food and clothing and a greater burden of productive or reproductive work, causing tension between wives (see below).

Our data do not allow us to conclude that separation, divorce and family fragmentation are more widespread amongst the poorest, or that they are equally common throughout the spread of wealth groups. However, it appears probable that such problems are more commonly found in the poorest households, where stresses are greater.

20. See Bolt and Bird (2003) for a fuller assessment of the impact of intra-household differentiation, based in part on asymmetric gender relations

Polygamy

Nuclear families had higher mean incomes than non-nuclear households in most of the nine LADDER villages and in each of the three study villages. Non-nuclear households were larger than nuclear households in all villages except Kiribairya, which may be explained by survivors from ethnic cleansing re-marrying to form (smaller) polygamous households.

There were divergent field study findings on the impact of polygamous marriages. Many men highlighted the problems associated with polygamy: many mouths to feed; family disputes and land fragmentation.²¹ They saw it as a key cause of impoverishment. However, polygamous households were seen as 'rich in people' and sometimes advantageous to both wives and their children (if the children were from the current husband, and the wives lived on one compound). Women rarely saw polygamy as beneficial, commenting that, if men took a second or third wife, resources tended to be diverted – to the point of not feeding and clothing children from unfavoured wives. Polygamy emerged as a serious source of conflict in some households, contributing to increased domestic violence and eventual family break-up. However, some of the children of polygamous marriages stated that they had enjoyed having a number of 'stepmothers' to turn to, and lots of children of their own age to play with.

Alcohol²²

Informal-sector alcohol production and sale is an important source of livelihood and provides substantial agro-processing value-added, particularly for widows and divorced women who have limited alternative sources of revenue or food security for themselves and their children. Alcohol is used ceremonially in marriages, conflict resolution, rituals and traditional worship, and drinking places are important locations for networking and the sharing of information. On the other hand, alcohol is a key cause of poverty, second only to ill-health (GoU, 2002). Excessive alcohol consumption was regarded by 56% of UPAP respondents as a cause of household poverty and by 24% of respondents as a response to poverty (USAID, 2003). The role of alcohol is confirmed by Lawson et al. (2003) whose analysis of survey data²³ shows that the chronically poor and those who moved into poverty were more likely to devote higher proportions of their budgets to it, with large numbers spending more than a quarter of their entire food and drink budget. Epidemic levels of alcoholism reflect the introduction of new industrially produced and commercially marketed forms of alcohol, coupled with the impact of post-conflict coping and rapid changes in the social norms governing alcohol consumption which have all occurred since the 1950s (see Bird and Shinyekwa, 2003; Bird et al., 2004a).

Chronic alcohol dependence is widespread in rural Uganda, with a high proportion (50-70%) of households profoundly affected in some areas (according to focus-group discussions). In all three study villages men congregated and began drinking millet beer early in the morning, and addiction to *waragi*²⁴ blighted the lives of several life-history interviewees.

21. UPAP findings suggest that polygamy is seen as a widespread driver of poverty (Lawson et al., 2003).

22. This sub-section draws on Shinyekwa (2002).

23. The 1992/93 Integrated Household Survey (HIS) and the 1999/2000 Uganda National Household Survey (UNHS).

24. Local 'gin' – in fact a raw and powerful rum distilled from cane juice, banana juice or molasses.

Conflict and internally displaced people

Insecurity and displacement have been identified by this study as key drivers and maintainers of poverty and chronic poverty, confirming findings by the second UPPAP (USAID, 2003; GoU, 2002). The Northern Region of the country is still affected by conflict but much of the rest has been peaceful since 1986. However, life-history interviews in central Uganda provide evidence of the surprisingly long-run impact of the ethnic and political conflict and mass-killings which marked the Amin and Obote II eras. Mubende was known to have been a site of intense conflict, and we selected Kalangaalo village because it was understood to have been seriously affected. However, in Kiribairya (Kamuli) conflict emerged unexpectedly as a major source of ill-being and we use the experiences of this village to illustrate the impact of conflict in driving chronic poverty and the failure of effective public policy responses as a factor in maintaining it.

The village of Kiribairya developed into its current form in 1986 when internally displaced people (IDPs) settled in the area, having crossed Lake Kyoga to escape the ethnic cleansing of Bantu-speaking peoples from Teso (see Bird and Shinyekwa, 2003, for the background to these events). The temporary IDP camp set up at this time has gradually become a semi-permanent settlement,²⁵ but the majority of villagers do not own the land their huts stand on, and few have felt secure enough to invest in permanent homes (see Table 1, which shows that none of the 35 survey respondents had a brick or concrete house with a tin roof). Crisis support was not followed by a relief-to-development phase, and the majority remain destitute and assetless. District officials and the staff of a well-known international NGO provide no support, claiming to be unaware that an IDP population remains in the District.

Many of the IDPs arrived in Kiribairya with literally only the clothes they stood up in, while others escaped with cash and resources; the difference between these two groups has largely determined their present situation. Fewer households own land in Kiribairya than in any of the other 8 LADDER villages (see Table 1), 83% own no land at all and none own more than 2 ha. Mean livestock ownership is lower than for the whole sample average (1.96) and for Buwopuwa (1.72) and Kalangaalo (1.64) and, despite some involvement in fish-based livelihoods, income is lower in Kiribairya than in the other eight villages.

Those with resources have been able to move on, and have bought land or established enterprises, usually elsewhere. Grace's story (Box 4) illustrates that 'in-comers' face risks, and that buying land does not guarantee security. But those who arrived destitute have had far fewer choices and subsist by cultivating small parcels of rented land and working as casual labourers fishing the lake. A few have been able to acquire boats and nets. Few have returned to Teso as some of those who tried have been murdered or driven out again. Despite this continued tension, some of the poorest in Kiribairya travel across the lake to find casual agricultural work, but they refuse to stay after dusk as the Iteso have threatened to 'kill them like chickens' if given the chance, and there are 'too many bushes over there' for them to hide behind. Interestingly, others in Kiribairya felt that relations had been normalised and that the problem was 'all due to the rebels'.

25. Around half the huts (and a large number of people) were washed away in a storm in 1997.

Vulnerable groups

People identified as belonging to ‘vulnerable groups’²⁶ may be more exposed to risk, due to their poor capabilities, their low functionings and their failure to accumulate and retain assets. However, describing them as ‘vulnerable’ masks the fact that individuals and categories of people may be differentially vulnerable to specific risks at particular times. Despite the shortcomings of the use of ‘vulnerable groups’ as an identifier, we use the term here because it reflects the way in which these groups of chronically poor people are described in the policy discourse in Uganda. While findings on some vulnerable groups in Uganda are contradictory, a strong picture emerges that very high proportions of children (MFPED, 2000) and disabled people fall below the poverty line (Mijumbi and Okidi, 2001).

Widows

In 1992-3 roughly 10% of women over the age of 15 in Uganda were widows (UNDP, 2002: 50), rising to nearly 12% by 1997 in the North, due to persistent conflict and poor health service delivery. Frequently women and children will be evicted from their homes and stripped of their assets, leading to impoverishment and in extreme cases destitution. Evidence from the LADDER dataset illustrates women’s fragile hold over the land they cultivate. Thirty-two of the 52 female-headed households in the sample (out of a total of 315 households) saw their land holdings decline between 1996 and 2001, in ten cases because the woman was widowed and the land was inherited by her sons, leaving her with none, and in five cases because she lost access to land through abandonment or divorce. Others in the sample lost land on the death of a brother, by neighbours encroaching on their land or by handing over land to children when they became too frail to cultivate it.

The impact of widowhood is differentiated, with the behaviour of in-laws and other relatives a key factor in determining outcomes. AIDS widows (between 24% and 60% of all widows in Uganda) are commonly stigmatised (ibid.: 49-50), and are more likely to lose their home and other assets. Women who have lost land will commonly return to their parents’ village and beg for a small parcel of land to cultivate; others will seek a protector, often marrying again soon after their widowhood. However, this option is not available to AIDS widows, who are shunned.

The outcome of re-marriage for the children depends very much on the willingness of their new ‘father’ to support them. Frequently widowhood leads to the break-up of the family, with children being separated from their mother and siblings and fostered by relatives. Despite the emotional trauma of such separation, the long-term outcome can be positive for children absorbed into prosperous households. However, children’s education is commonly truncated by the death of a parent or the break-up of the household, boys may lose the right to their father’s land, and girls may be pushed into early marriage to generate bride price. Grace’s story (Box 4) illustrates some of these findings.

26. These commonly include children (particularly orphans), the sick, people with physical and mental impairments, widows and widowers, the elderly and the landless (Babirye, 1999; Mijumbi and Okidi, 2001).

Box 4: Displaced, widowed and vulnerable

Grace was widowed shortly after she and her husband escaped brutal inter-tribal violence in Uganda in the mid-to-late 1980s. They escaped from Teso across Lake Kyoga to Kamuli District with a little money, but lost almost all their accumulated assets; with the sound of bullets coming closer they had to make stark choices between saving a cooking pot or a child.

Once in Kamuli District, Grace's husband spent the little money they had on some land, but soon after he was murdered by the land's original owners. Grace was driven away, and settled in Kiribairya, where she has now been for over 10 years, but, twice a refugee, she has been able to re-accumulate very little. She lives in a simple one-room thatched hut, which is her only asset; she owns no land and 'even the hoes I had have been stolen'.

Grace has limited support from others. Although she had 13 children, only 5 lived beyond early childhood, and of these the youngest daughter died some time ago of AIDS leaving 3 children, two of whom died. Grace is now bringing up the third, a girl. She feels that she has no one else to turn to for help, as there are no clan leaders or members of her tribe in the camp, and although her three surviving daughters and her son are all in the camp they rarely give her any food or other support. When she is ill it is difficult for her to go to the clinic, as 'you have to go with your brother', meaning that you have to take a bribe for the doctor, and she has no one who will give her the money. Nevertheless, she is not entirely without a support network. A young man lent her a small patch of land during the last agricultural season, on which her children helped her cultivate sweet potatoes. An old man built her a granary next to her house, where she planned to store the potatoes. Unfortunately pests destroyed the crop, leaving her no better-off than before. She does not expect to be offered land again; 'you are given only once, and if you are unfortunate, that is it.'

Orphans

In 2000 there were 1.7 million AIDS orphans in Uganda. At 14% of all children, this was the highest rate of orphanhood in the world (UNAIDS, 2000 quoted in UNDP, 2002). Despite this, Uganda has no central government programme to tackle the issue. Instead, NGOs provide *ad hoc* support to some orphans in some areas.

Malaria is still the country's biggest killer but is less likely than AIDS to kill both parents, and the parents of 80-90% of recent orphans had died of AIDS (UNDP, 2002: 79). Extended families have been overwhelmed and numbers of street children and child-headed households have risen, as have the rates of child poverty, school drop-outs, and early marriage for girls (*ibid.*: 49). This is clearly a source of inter-generational transmission of poverty (Moore, 2001).

Children of unfavoured wives

Although the story emerging on polygamy is a complex one, we found that in some households there was significant discrimination against the children of unfavoured wives. This resulted in heavier domestic workloads, poorer access to education and in some cases poorer levels of nutrition and health care.

One young man's story (Box 5) showed that his poverty was not simply due to the erosion of family assets, but was also the long-term outcome of his mother's non-favoured status and the accompanying domestic violence, the systematically unequal distribution of resources within the household, his disrupted upbringing, early exit from school and the damage to his family's reputation from his father's alcoholism and his parents' erratic relationship. Ultimately these problems had affected his inheritance of assets and his marriage options. Others had seen their families fragment under the pressure, and had been brought up by maternal relatives, another source of the intergenerational transmission of poverty.

Box 5: The long-term impact of marital conflict

Laurant's story illustrates the potentially long-term impact of conflict within the household. His alcoholic father, Peter, regularly beats his mother. He has tried to intervene but feels unable to protect his mother, Agatha, from his father's drunken rages. His parents' poor relationship not only affected him as a child, influencing his diet and his access to education, but has also influenced the way his life has turned out, including the amount of land he now has to farm and his choice of a wife.

Peter was relatively wealthy by village standards. He had 5 acres of land, a range of productive and household assets²⁷ and a better quality house than many, with internal walls dividing the living space into separate rooms. The household had two granaries, and they used to have a number of cattle and goats. He was respected in the community and was the elected village head²⁸ until 18 months ago. Nevertheless Laurant is poor. His father had two wives, Agatha and the second, favoured, wife. When Laurant was only a few months old his father lost his job in a Kampala hotel. He sold off household assets and drove Agatha away in an attempt to maintain consumption levels for his second wife. Agatha returned to her parents' compound, leaving her children behind,²⁹ but her co-wife refused to feed them. Laurant was singled out for harsh treatment, as his father thought that he was illegitimate. Agatha tried to protect him and to provide the children with enough food. Eventually she returned to her husband, partly so that they would have enough to eat, but also so that her sons could inherit some of his land when they married. But there is little left now of the family's former wealth and Laurant received only $\frac{1}{8}$ acre from his father when he married two years ago. The family history made it difficult for him to find a bride, but two years ago when he was 20 he was introduced to a secondary school drop-out who was eight weeks pregnant. He is delighted with his wife, has adopted her daughter, and they have had a son together. Because of their small landholding they depend on brick-making and casual work to have enough food to eat.

Older people

Analysis of the dataset correlating per capita income with the age of the household head shows that households led by older people are *not*, on aggregate, more likely to be poor

27. Including nine hoes, a machete, an axe, five saucepans, a bicycle and a radio.

28. LC1 Chairman.

29. This is entirely normal in a Ugandan setting. Men do not pay maintenance for ex-wives and children, so leaving your children with your husband is often the only way of ensuring that they will get fed.

than other households. This must mean that there are richer households headed by older people who have managed to hold on to their asset base and the support of younger household members. However, old age was mentioned in the LADDER survey by 13% of households as affecting their current livelihood, and a high proportion of the poorest are the abandoned elderly who have become physically weak and ill. They lack productive assets (or are unable to make good use of them), and their ability to gain an independent livelihood has been dramatically reduced, with serious implications for their health and well-being and, where they are supporting orphans, for the inter-generational transmission of chronic poverty.

A lack of transferable skills limits older people's ability to earn, and remittances and physical transfers are an important element in the livelihoods of many. Some never had children, or their children died; for others, their children's redundancy or the requirements of their own households limit support. We found that in some cases older people, who have become almost destitute, are supported by neighbours who prepare meals for them. This indicates that, for some, traditional systems of support are alive and well. However, some individuals were surviving with very limited support, perhaps because of conflict with neighbours or some other factor which had resulted in lower social capital. They ate infrequently and were powerless to change this situation. They had no access to credit and no savings to enable them to start up non-farm micro-enterprises.

Box 6: Old and facing an uncertain future

Kabanda Gladys is unable to guess her age, but appears to be in her late sixties or early seventies. She lives in a simple compound with her husband in two thatched mud brick huts. She is broadly happy with her life and describes herself as being neither the poorest nor the most wealthy. The family she grew up in was similarly a middle-ranking family. Until recently her old age had been comfortable. She had a son working in Kampala who sent money home to her and her husband and to his wife and children. Sadly he died recently of AIDS, leaving them all to experience a rapid and permanent decline in income and well-being. At around the same time their livestock also died of disease. The cattle had been used for traction and for milk for the family and for sale. Without them cultivation is more difficult, they have less income, their diet has worsened and they have nothing left to sell in an emergency.

Despite these setbacks, Gladys enjoys the respect which comes with age. She is called grandmother by everyone, and likes it. However, she fears getting older. At the moment she can still cultivate her land and collect water and firewood, but she fears becoming dependent. Her husband is older than her and frail. She has her daughter-in-law and grandchildren, but what happens if they refuse to help her? And what will happen when her daughter-in-law (she is HIV positive) dies?

HIV/AIDS-affected households³⁰

Despite the attention given to AIDS by the Ugandan government, donors and the NGOs, none of the HIV/AIDS-affected people interviewed had received *any* support from

30. Our case studies of HIV/AIDS are based on our work in Buwopuwa (Mbale) and Kalangaalo (Mubende). We found that it was not possible to discuss the issue openly in Kiribairya.

government or NGO schemes. Medical treatment was woefully inadequate, and the most that interviewees had been offered was palliative care in the form of aspirin. This may be partly because few of our interviewees were willing to have their status confirmed by an AIDS test, probably to avoid stigma, but is more likely to be due to ineffective service delivery. They all felt ostracised; former friends would no longer visit or eat with them, and people gossiped about them, labelling them as ‘the AIDS victims’ rather than calling them by their names.

UNDP’s *Human Development Report 2002* for Uganda focused on assessing the country’s response to HIV/AIDS 20 years on from the emergence of the disease. It is not yet clear whether it has stimulated central and local government to begin developing home-based care to support the sick and help their families cope with nursing, medical fees and social stigma.

Box 7: HIV/AIDS in Buwopuwa

None of the AIDS-affected households in Buwopuwa were in the poorest category. The household head, or their sexual partner, had been either migrant workers or in the army, confirming the pattern found in the early stages of the spread of the epidemic elsewhere in the country.

One of the two women interviewed was around 30 and had been infected by her (violent) partner while working in a bar in Kenya. Her partner died less than 2 years ago and she was now very ill with ‘this terrible disease’. She could no longer work in the fields, losing her remaining source of income, and was too weak to do anything other than light housework. When she dies she will leave two children under five to be looked after by her elderly widowed mother.

The other female AIDS sufferer was around 40, and had been infected by her husband, who had worked in Kampala and died in 2001, devastating the lives of his parents and family who depended heavily on his remittances (see Box 6). When she dies she will leave young children and a niece (an AIDS orphan) to be looked after by her frail parents-in-law.

The man interviewed had been a soldier and admitted to knowing about AIDS and how to avoid it, as his unit had been briefed and supplied with free condoms. However, when the free supply ran out he failed to buy his own. After being disabled out of the army (having been shot in the foot), he heard that his mistress had died of AIDS. By then he had already infected his wife. They will leave three young children.

The long-term sick and physically impaired

Echoing the conclusions of UPPAP 1, we found ill-health and disability to be significant causes of asset depletion and ill-being. Disability appeared to be commonly caused by late or inappropriate health interventions. The disabled in Buwopuwa reported that their physical impairments not only undermined their livelihood but also exposed them to frequent teasing, taunting and abuse from their neighbours. The rural ‘community’ emerged as a not particularly benign environment. The government was seen as entirely ineffective in providing assistance, as it had failed to encourage less discriminatory cultures at the village level, to provide targeted economic or

developmental support, or to supply individuals with wheelchairs, callipers, spectacles or other aids. Clearly there are problems with implementing Uganda's progressive legislation on disability (Ntale et al., 2002; Bird et al., 2004a, b).

The usefulness of 'vulnerable groups' as a categorisation

Evidence from analysis of the life histories and the LADDER dataset shows that all types of household risk downward mobility. While assets may act as a buffer for non-poor households, the interlocking of poverty drivers, particularly over an extended period, has the potential to pull even members of the richest households into severe and long-term poverty. Targeting 'vulnerable groups', such as older people, the disabled or those living with AIDS is therefore subject to substantial errors, by including the non-poor and excluding those in need of help who do not fit any of the 'vulnerable' categories. A better method may be to follow a layered approach, starting with identifying poor regions and then, for example, older widows or deprived women of childbearing age (who would be likely to pass their poverty on to their children). While this would still miss chronically poor people in non-poor areas and those not fitting an obvious category, the identification of the key potential interrupters of chronic poverty could be used as a starting point for the development of policies with national coverage.

3 Interrupters

We have illustrated in the previous section the forces which can drive individuals and households into long-term poverty. In this section we examine how individuals have responded to impoverishment and suggest what policy-makers might do to provide them with relevant support.

3.1 Individual responses: coping and livelihood activities

Understanding how people currently respond to livelihood shocks may contribute usefully to identifying poverty interrupters. Livelihoods in all nine LADDER villages are predominantly farm-based, with a substantial fisheries component in three of them. Although there is a trend towards diversification to cope with declining returns from agriculture, and 85% of households now combine farm and non-farm livelihoods, opportunities of this kind are limited for the poor. More than half (51%) of households in the LADDER survey said that they would like to undertake more non-farm activities, often in response to land shortage or old age, but they were constrained by the need to meet immediate consumption needs, weakness or ill-health, or a lack of capital or labour.

The story of Nalweyiso Kintu in Buwopuwa, a poor young man with a wife and three children, illustrates this situation. He inherited only a quarter of an acre of land from his father, completely inadequate to meet household consumption needs. He therefore diversified into *boda-boda*, where he can earn between than \$1 and \$2.5 a day. This has allowed him to join a ROSCA (Rotational Savings and Credit Association) and his savings have enabled him to acquire more land and begin to improve the family home. He hopes that eventually they will provide start-up capital for a small shop.

Grace's story (Box 4) shows that attempts to improve one's life through hard work do not always pay off. Despite working hard to cultivate a borrowed field, she gained nothing. Sonko Peter, from the middle wealth group in Kiribairya, has seen bad luck in the form of ill-health undermine his advances. He first came to Kiribairya as a travelling salesman of 'first aid drugs', initially working for someone else. After a time villagers 'supported him' in starting his own petty pharmacy in the village, which did well until his wife had an ectopic pregnancy and he had to borrow money and spend all his savings on treatment for her. He was forced to rely on casual labour to repay the debt, and his business has still not recovered from the withdrawal of capital. His wife has been left weakened by the operation and is no longer able to earn an income or do many of the heavy chores which are part of rural women's lives. This is undermining his hopes of rebuilding the business.

These examples illustrate that, while the young and healthy can take advantage of opportunities (if they have some money to invest), others are less able to do so, and shocks can have a long-term or even permanent impact on people's livelihoods.

3.2 Institutional and policy responses

Ugandan policy has emphasised achieving poverty reduction through public infrastructure and service provision. Substantial investments in rural roads over the last decade have reduced the distance from markets. Complementary interventions are now needed which create an enabling environment for rural enterprise and really deliver employment generation and broad-based economic growth (Williamson and Canagarajah, 2003; Lawson et al., 2003). At present rural Ugandans are poorly served by local institutions which, instead of supporting enterprise, impose multiple and regressive local taxes (James et al., 2001). Providing an enabling environment is necessary but not sufficient for sustainable reductions in chronic poverty in Uganda. Since 1998 the Poverty Action Fund (PAF) has allocated a substantial proportion of the national budgets to pro-poor expenditures, but the poorest have too few assets to be able to gain substantial returns from investment in curative health and primary and adult education (Williamson and Canagarajah, 2003).

The Chronic Poverty Research Centre suggests that, in order to move the long-term poor out of poverty, interventions must address inequality, discrimination and exploitation (CPRC, 2004: 50). Activities must prioritise livelihood security by preventing and mitigating shocks; enable chronically poor people to take up opportunities; move beyond rhetoric on empowerment to real action which will tackle discrimination; and provide sustained transfers across and between nations (ibid.).

The importance of peace, support for IDPs and improving household characteristics

Resolving the conflict in northern Uganda and providing effective post-conflict reconstruction, including programmes targeting IDPs, would have a tremendous positive impact. But for the chronically poor throughout Uganda to be able to take up opportunities, policies must reach into households to improve their characteristics (e.g. number of literate members, size and quality of workforce and size and quality of land holdings), which have been shown to be powerful pre-determinants of poverty reduction

(Okidi, 1999). To achieve such changes, activities to improve education and health outcomes will need to be coupled with effective family planning. More challenging will be land reform to reverse decades of fragmentation and to provide women with secure land rights (Bird et al., 2004b). The impact of crop and livestock pests and diseases and declining soil quality highlights the importance of extending the benefits of improved agricultural advice provided under the PMA (Plan for the Modernisation of Agriculture) as widely as possible.

Improving livelihood security

Other mechanisms are clearly needed if the government of Uganda is to prevent and reverse chronic poverty. However, few governments have yet developed successful interventions to prevent or mitigate shocks. Where early warning systems exist, they tend to identify only severe shocks affecting large numbers of households, commonly when they are in advanced stages of coping (for example, having sold productive assets) and where the depth of the decline in well-being makes full recovery difficult. This is illustrated by experience in one of our study villages, Kiribairya, where neither a flood in 1997 which swept away half the village, nor a long-term drought which has profoundly affected cropping decisions, production levels and household food security since the mid-1990s, has stimulated either a government or a non-governmental response.

Some of the best opportunities for learning about low-cost and decentralised interventions may come from rural microfinance which can help households spread their consumption and deal with contingencies, and micro-insurance which can be used to mitigate risks around harvest failure, personal and livestock health, and funeral costs. But these are unable to deal with covariant shocks and the poorest may be excluded as high-risk and unable to afford the premiums. Stepped interventions to build their asset bases are needed, coupled with externally funded insurance and mitigation measures.

Tackling alcohol dependence

Alcohol dependence has been shown to have a strong relationship with poverty but policy-makers in many developing countries are reluctant to tackle drinking problems, as they feel their interventions will penalise people for being poor. Not only would a source of solace be removed but artisanal producers, often the poorest, would have their livelihood undermined. However, this article has shown alcohol to have a profound impact and not only on the drinker. Its role in driving chronic poverty and transmitting poverty inter-generationally, and the scale of the dependence problem, highlight the need for a policy response.

Programmes around the world which combine regulation and taxation with health promotion and treatment have shown that reducing alcohol dependence is a slow and incremental process, particularly difficult in developing country contexts where large informal sectors are brewing, distilling and selling alcohol (Bird et al., 2004a, b). However, studies have shown that the poor are price-sensitive and that policies which drive up prices can be effective (Saxena, 1999). Where problems centre around the share of household income allocated to alcohol purchase, price increases may intensify family hardship in the short to medium term unless behavioural change is accomplished

through a combination of gender empowerment training, health promotion and counselling and treatment.

Accessible women's courts and a role for social protection

Complementary innovations leading to the setting up of credible local 'women's courts' are needed to tackle the fall-out from marriage breakdown and domestic violence. Indeed, evidence of systematic discrimination within households, property grabbing and abandonment illustrates that not only are legal innovations needed which strengthen the rights of women, particularly divorcees, widows and wives (and their children) in polygamous marriages, but that they must be widely supported by the general public and street-level bureaucrats if they are to be effective (Bird et al., 2004a, b).

Transfers and social protection measures are unpopular with Ugandan elites and policy-makers, partly in response to widespread corruption in the *Entandikwa*, one of the country's best known targeted anti-poverty schemes. Examples from other countries can be drawn on to overcome the perception that social protection programmes are inherently and inevitably prone to corruption and political capture. Policy-makers must be encouraged to reconsider the subject, to identify suitable programme designs and to provide a strong lead to district administrations on how and when to intervene. Patchy interventions for orphans and people living with HIV/AIDS exist, commonly implemented by NGOs. These should now be evaluated and the best of them used as models for scaling up interventions and providing extended coverage in the form of pensions and targeted financial (and other) support to chronically poor people.

Lastly, tackling discrimination to reduce stigma and remove barriers to economic participation is important. Training for women's, young people's and disabled people's representatives in local government could contribute towards this, and could be supported by campaigns by the mass media.

In the absence of legal reform, improved public service provision and some form of targeted social protection, it is difficult to see how the short-term well-being of the poorest can be improved to allow for long-term investment. Without efforts to generate the political will and the public (or elite) acceptance of this as a central issue in the country's poverty reduction agenda, Uganda will continue to fail to extend the benefits of growth to the poorest.

4 Conclusion

This article has responded to the lack of data on why some individuals and households become poor or stay poor over long periods of time, using information generated by a combination of methods to build an understanding of the key drivers, maintainers and interrupters of chronic poverty in three sites in rural Uganda. Key findings, regarding the importance of alcohol and the long-run impact of conflict, are supported by the Ugandan Participatory Poverty Assessment and analysis of national household surveys, suggesting that the issues identified are likely to be important more widely.

The article's specific contribution has been to show that problems can interlock over an extended period to trap individuals and households – even the previously non-poor – in chronic poverty and to pass that poverty on to the next generation. The evidence presented suggests that downward mobility is common, with individuals and

even whole families being pulled from relative prosperity into severe and chronic poverty. A recurrent finding from the life-history interviews and focus-group discussions is that the poorest had suffered recurrent and composite shocks and personal tragedies. Those who had retained their non-poor status had done so largely because they had managed to avoid personal disaster, allowing them to retain their assets and even continue to accumulate. The high proportion of respondents in all wealth groups who reported declines in well-being during their lifetime suggests that, despite nearly 20 years of post-conflict reconstruction and a sustained period of economic growth, Uganda is still in the process of recovery.

The deep and multidimensional problems facing people have been found to be coupled with an absence of effective poverty interrupters. Severely and chronically poor people have limited opportunities and choices. Thus, although a majority of the households interviewed during the LADDER survey expressed a desire to diversify into non-farm activities they were unable to do so because they lacked the necessary capital or labour. The binding nature of these constraints suggests that tightly targeted interventions for 'vulnerable groups' are likely to be inadequate in providing social protection or enabling entrepreneurial or accumulative responses by poor people.

Policy-makers should aim to prevent people becoming chronically poor by prioritising the key factors influencing livelihood security. Among the most powerful axes of intervention would be seeking a ceasefire in northern Uganda, developing a national programme for the economic and social reintegration of IDPs, increasing the effectiveness of local service provision and well-designed policies to reduce alcohol dependence.

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