



Chapter 3

State Institutions

They have been plundering everything and eating so much that they cannot carry their own stomachs.

—A poor woman, Latvia 1998

For government schemes we have to pay donations.

—A poor man, India 1997b

Loans should be provided when we still have rice to eat.

—A poor woman, Vietnam 1999a

The food aid last year through work on the road has become a husband to me as it helped a lot.

—A poor widow, Zambia 1994

In virtually every country today governments aim not merely to protect their citizens, but also to ensure that even the poorest among them have access to basic services. Typically these services include education, basic health care, and safe drinking water; sometimes they extend much further to include old-age pensions and support for the disabled. Governments set up a variety of state institutions to provide these services, such as police forces, public works, education ministries, public health services, water authorities, and so on. These same institutions are used by external support agencies as channels for projects intended to benefit the poor. But from the perspective of the poor there is an institutional crisis. While there are pockets of excellence, the poor usually experience formal institutions as ineffective, inaccessible, and disempowering. The recurrent themes running through the reports are distrust, corruption, humiliation, intimidation, helplessness, hopelessness, and often anger. While increasing attention is being paid to the issue of good governance as a way of fostering private sector investment,¹ the PPAs reveal poor people's daily experiences and struggles with poor governance at the local level.

Analysis of the PPAs reveals six major findings about state institutions and the poor:

- ▶ **Formal institutions are largely ineffective and irrelevant in the lives of the poor.** Where government programs of targeted assistance exist, they contribute a little in poor people's struggles to survive, but they do not help them to escape poverty.
- ▶ **Corruption directly affects the poor.** Poor people have widespread and intimate experience with corruption in health, education, water, forestry, government-provided relief, and social assistance—where it is available. In addition, the poor have little access to the judiciary, and they fear, rather than seek protection from, the police.
- ▶ **The poor feel disempowered and humiliated.** Poor people's interactions with representatives of the state leave them feeling powerless, unheard, and silenced.
- ▶ **Collapse of the state increases poor people's vulnerability.** When functioning states collapse, as in Eastern Europe and the former Soviet Union, or go through severe disruption as in East Asia, the poor are particularly vulnerable, and the new poor feel bewildered, crushed, and angry.
- ▶ **The poor confront many barriers in trying to access government services.** These include bureaucratic hurdles, incomprehensible rules and regulations, the need for documents to which they do not have access, and difficulties in accessing necessary information.

- ▶ **There is often collusion or overlap between local governance and the elite.** If not outright collusion, local elite at least have direct access to, and influence over, local officials, and resist sharing power in new decentralization and participation policies. There are also examples of caring local elite.

In this chapter we first define key concepts, and then examine the six findings from the PPAs. These dynamics are further explored in two case studies at the end of the chapter that focus on health care and education.

Understanding Institutions

The most important strategy for finding either public or private employment is to use one's "connections" and pay a bribe.

—Georgia 1997

Sociologists, political scientists, and economists have all turned to the nature of society and its informal rules, norms, and expectations, in order to understand the failure of the state to deliver on its promises.

Institutions are legitimized through public sanction and acceptance; this often has legal or statutory dimensions. They operate and exercise authority through rules and regulations that determine “who” is eligible for “what.” However, institutions cannot be understood simply through their formal rules, since actual practices often diverge from these rules. Institutional behavior is dynamic, and can be better understood through the “regularized patterns of behavior that emerge, in effect, from underlying structures, or sets of rules in use” (Leach et al. 1997; Giddens 1984). For example, while formal rules may prohibit bribery, “rules in use” commonly require a bribe in exchange for service delivery. Institutions can also reproduce existing social and power inequalities by serving only those who fulfill certain requirements, thus perpetuating current social patterns of gender, race, and ethnicity in society.

Formal institutions structure and are structured by other formal and informal social relationships. As a result, they often claim to be serving the common good, while they actually reproduce unequal relationships of power and authority or marginalize the concerns of particular groups, such as women or the poor (Goetz 1998; Kabeer and Subrahmanian 1996; Narayan 1999). This differential impact of state institutions across social groups may not always be readily apparent. Douglas North (1990) explains:

In the modern Western world we think of life and the economy as being ordered by formal laws and property rights. Yet

formal rules, even in the most developed economy, make up a small (although very important) part of the sum of constraints that shape choices; a moment's reflection should suggest to us the pervasiveness of informal constraints. In our daily interaction with others whether within the family, its external social relations or in business activities, the government structure is overwhelmingly defined by codes of conduct, norms of behavior and conventions ... That the informal constraints are important in themselves (and not simply as appendages to formal rules) can be observed from the evidence that the same formal rules and/or constitutions imposed on very different societies produce different outcomes. —North 1990

The experiences recounted by the poor in the PPAs uncover these unwritten rules in use and highlight the ways in which formal institutions are socially embedded, both reflecting and reproducing existing power imbalances. These informal rules, norms, and expectations need to be taken into account when planning services for the poor.

Effectiveness and Relevance

We keep hearing about monies that the government allocates for projects, and nothing happens on the ground.
—South Africa 1998

“L'état est absent”—the state is simply absent from people's lives and strategies for securing their needs.
—Madagascar 1996

Loans should be provided when we still have rice to eat; if we don't have any food, we will spend all the money on food. —Poor woman, Vietnam 1999a

While some government services are reaching some poor people some of the time, across regions formal institutions are commonly described as ineffective and even completely irrelevant in poor people's lives. Both in health-care services and in access to education, the constraints imposed by official and unofficial fees and expenses for school uniforms, books and chalk, transport, ineffective repeat visits to the health clinic or hospital and medicine costs were mentioned repeatedly. In fact, health and education are discussed with such regularity that we focus on them in case studies at the end of this chapter. In some countries (such as

Pakistan), despite the high costs, many poor people go to the private sector where they are at least more assured that they will receive service after all the payments are made. There are few examples of interactions with the judiciary system, which seems to be beyond the reach of poor men and women. There are, however, innumerable examples of police intimidation. (A case study on poor people's interactions with the police appears at the end of chapter 6.)

India has one of the world's largest programs of basic services and public assistance for the poor, lower castes, and tribal groups. These programs provide free schooling, health care, housing, subsidized food, kerosene, water, credit, seeds and relief during natural disasters, pensions for widows, and assistance to the disabled. Our analysis includes excellent, large PPA studies from two different states—Rajasthan and Orissa—that document what often happens to well-intentioned government programs for the poor. While the studies do not constitute an in-depth evaluation of why the system does or does not work, they do illustrate a pattern of problems and the extent to which these programs touch the lives of poor people.

In Rajasthan a participatory assessment of the Baran District Poverty Alleviation Program was conducted in 29 villages selected to be statistically representative of the district. The poor evaluated all programs and institutions affecting their lives. One of these programs, the Integrated Rural Development Program (IRDP), aims to help families below the poverty line with loans and subsidies for livestock, agricultural machinery, funds to open shops, and so on. In the village of Kishanganj people say that the beneficiary selection process left out many families most in need. In the district of Baran as a whole only 40 percent of those selected receive any kind of support at all. People say that "The support is not adequate enough to truly benefit them and the quality of various provisions was substandard and therefore of little use" (India 1997a). Many participants say that the distributed assets (bullock carts, cattle) are in fact more of a liability; hence, many remain unused or are sold, having little impact on the family's well-being. "It is rocky here and it is very hot. So the animals given under IRDP could not survive. All of them died very soon and we could not repay our loans. Those animals needed more water" (India 1997a). Both the TRY-SEM program to provide technical skills to youth living below the poverty line, and the Jawahar Rojgar Yojna program to generate employment for those below the poverty line were rated as having little or no impact on the lives of the poor.

Similarly, the Indira Awas Yojna projects provide free housing to the needy. In Baran the program was designed to construct 1,061 houses. Only 350 houses were actually built, and at the time of the research, all of the

houses were damaged and not one was occupied because the poor found them “alien to their lifestyle and sociocultural way of living” (India 1997a). Many programs providing housing to the poor use substandard construction materials. Also in the Baran district, government-built water storage tanks remain unused in the three years since they were installed because the hand pumps have been damaged and have not been repaired. The only government program functioning well is the Shaharia Vicks Pariyojna program that provides boarding schools for tribal youths and overall development assistance in tribal villages.

The second PPA was conducted in Bolangir district in a drought-prone western part of Orissa. Again, the findings are based on research conducted in 29 villages chosen to be statistically representative of the district. The PPA also includes an institutional assessment. People generally rate the administrative institutions of the government—including the Revenue Inspector’s office, block office, police stations, subdivisional office, and the office of the Zila Parishad—low in terms of efficiency and accessibility. In Padiyabahal village in Khaprakhol, for example, government institutions are rated “medium” to “low” in importance, efficiency, and accessibility. Similarly, in other villages, the government agencies are found to lie at a greater distance from the village compared to the other institutions (India 1998a).

Institutional analysis ratings in Padiyabahal, another Orissa village, illustrate the pattern of ratings by poor men and women. The hospital is rated by the poor as one of the most important institutions—and also as one of the most prohibitively expensive. One PPA states that government “health agencies were seldom used as they are far, there is always a shortage of medicines, and lack of a sympathetic attitude of staff” (India 1998a). People use private pharmacists and traditional doctors instead. Schools, though rated high in importance, are also rated as the second most expensive institution. They receive low ratings in efficiency because of “frequent absence of teachers, nonimplementation of the midday meal scheme, and poor quality education.” Sending children to school is considered futile under these circumstances (India 1998a).

The public distribution system (PDS) of food for families below the poverty line (BPL) is found in every village in Orissa. Although the poor consider it important, they rate the program poorly. A BPL card allows the poor to buy rice at Rs. 2 per kilogram. Not all the poor have BPL cards, and rice quotas are issued irregularly, once every three to four months. The poor are unable to buy in bulk because of limited resources. Several cases are cited of poor people selling off their BPL card because they lack the cash to use their cards. Figure 3.1 lists poor people’s ratings of government programs in one village.

Farmers rate the block agriculture office's subsidized seed distribution program as very important, though erratic and ill-timed. It makes seeds affordable, but the program has other problems. "When we approach the

Figure 3.1 Analysis of Government Programs, Chikili Village, India

GOVERNMENT WORK	WHO DID	YEAR	WHICH CASTE PEOPLE WERE BENEFITED	PRESENT CONDITION	RANKING	PEOPLE PERCEPTION
Well	Govt	1965	Adibasi (ST)	is now buried		Did not work Due to bad construction
Road	Govt.	1962	All Caste	not good	X X X X	Stones [on the side] of the Road have fallen down. Pala is bad
BPL Cards, PDS	PANCHAYAT	1997	All Caste	Regular Supply	X X X X X	Half of the people have not got CARD. Big Farmers are getting Rs. 2 Rice while small farmer Rs. 4/-
Million Wells Scheme	BLOCK	1994	Adibasi & Ganda (SC)	is working well	X X	Many more poor should get it
Loan for Income generation activities	BLOCK	1983	Adibasi & Ganda (SC)	They are not getting now		Waiving off of LOANS was helpful
Indira Awas Houses	BLOCK	1996	Del Ganda (SC)	Houses are okay & of use	X	Many more should get it
Literacy Campaign	BLOCK	1996	All Caste	Ignorant started reading.	X X X X X X	Got some benefit, why it was stopped we dont know
DPT	BLOCK BLOCK	1982 1970	All Caste All Caste	Now stopped Now stopped		We need some medical facilities now (ANGANWADI CENTRE)

Notes: SC: Schedule Caste; PDS: Public Distribution System; BPL: Below Poverty Line Cards; Adibasi: Tribal Groups; Ganda: Tribal Groups; DPT: Diphtheria, Polio, Tetanus; Anganwadi Centre: Preschool center

Participants: Gokul Mahakud, Mityanando Mahakud, Pabitra Loha, Pusindra Kabir Tandi

block agriculture office for paddy seed,” one farmer says, “the official would force us to buy other seeds like Dhanicha, for which we do not have money, and neither do we cultivate these seeds” (India 1998a).

Elsewhere in India people acknowledge that through PDS the government provides subsidized staples such as wheat, sugar, and kerosene to the poor, but that many of the items the poor need to purchase are not available. A PPA reports, “During the course of the survey, the team checked the ration cards of various families and found that there were very few entries, which suggests that the intended beneficiaries are not able to use these systems. Therefore, the PDS are not serving their intended beneficiaries effectively, and it also raises the question of where all the resources are going if they are not being received by the appropriate people” (India 1997a).

The poor list the following reasons for the slow progress and the disappointing results in the implementation of assistance programs in some states in India:

- ▶ Inordinate delays in the implementation of even the approved programs
- ▶ Political leaders being more interested in themselves than in the society they have chosen to serve
- ▶ Lack of participation and involvement of the beneficiaries
- ▶ Poor managerial competencies at each administrative level
- ▶ Lack of supervision
- ▶ Planning from the top ignoring people’s assessment of their needs
- ▶ Pervasive corruption involving the role of government officials and contractors (India 1997c)

Despite problems, poor people participate in government schemes “even if it was not what they wanted because they felt that something is better than nothing and perhaps the schemes could help in some way” (India 1997a). One clear consequence of government agency ineffectiveness is a pervasive distrust of government in general, as expressed in this excerpt from a Madagascar PPA:

In all regions of the study participants expressed a feeling of distrust and betrayal by the government. This can most clearly be seen in the South, where only 12 percent of the participants were in favor of the government. In their opinion the government is not only guardian of their rights but it is also there to assist them during difficult times and in their fight against poverty. However, the remaining 88 percent unanimously expressed distrust toward the government, its representatives,

institutions, and administration. Sixty-seven percent perceived the government as permeated with corruption. Some complained about the attitude of the government, its indifference toward their concerns and problems. —Madagascar 1994

In many parts of the world, poor people frequently complain that the services they need are not available. In South Africa, for example, “Formal financial institutions are virtually nonexistent in rural areas, and in both urban and rural communities, the formal institutions that are available are mostly inappropriate to the requirements of the poor” (South Africa 1998). A Ghanaian PPA notes that “Governmental safety nets were not mentioned by any informants as being in any way relevant for the poorest members of these communities” (Ghana 1995a).

Where services are accessible, their quality and efficiency is often criticized as substandard and unreliable: “Failed water supply schemes by Nigeria’s state and local governments, as well as under such special programs as Directorate for Food, Roads, and Rural Infrastructure, are extremely common in both rural and urban areas. Often, state water boards have designed overelaborate and expensive schemes to supply piped water to house connections and these proved beyond the capacity of local authorities to construct or to manage. Since communities are not involved in planning schemes, they can also play little role in managing them” (Nigeria 1996).

In the Zambia PPA the state-run agricultural extension system, designed to provide information and inputs to farmers, receives highly unfavorable ratings by poor farmers. Many farmers view agricultural services as basically nonexistent or irrelevant (Zambia 1997). Poor farmers say that either extension agents never visit, or they exhibit favoritism in their patterns of work. The youth and inexperience of many extension agents adds to the impression that their knowledge is theoretical and derived solely from books. Others think that the messages conveyed by the extension agents are too repetitive and focus too much on maize cultivation to the exclusion of other cash and subsistence crops. The farmers’ meetings with extension agents are thought to be unnecessarily frequent and, as a result, are poorly attended. The researchers also assessed the importance of the agricultural extension system in the lives of farmers through institutional diagramming techniques in which the size and distance of circles drawn represents the importance and closeness of the institutions in people’s lives. “Compared to the church, the headman, the hospital, the district council and the school, an NGO, and LINTCO (the cotton marketing organization), the department of agriculture is represented as a mere speck on the perimeter” (Milimio 1995).

Overall, state institutions appear to be not at all, or only marginally, relevant in the lives of the very poor, except in times of severe crisis. Formal institutions are discussed favorably in the PPAs in some references to food aid and other emergency assistance. A widow in Simanansa, Zambia says, "The food aid last year through work on the road has become a husband to me as it helped a lot" (Zambia 1994). In many cases, however, there are reports of corruption, and a sense that what actually reaches the poor is a diluted form of what was originally allotted. Excerpts from Swaziland, Kenya, and Bangladesh PPAs indicate that government food aid is vital in times of crisis, yet even then it is unreliable. "In Swaziland most people expressed little confidence that the central government agencies were equipped to address the needs of rural communities. In many rural communities food aid and food for work programs were said to have been vital during crop failures or severe drought but were often seen as sporadic and unreliable" (Swaziland 1997).

In Kenya once famine has been officially recognized and the government relief efforts begin, the poor in some of the districts do benefit. However, government-provided relief food becomes an added category in the coping strategies of the poor, rather than the only strategy. This is because the government-provided relief is both irregular and insufficient in quantity by the time it reaches households to meet food needs. In the districts where food relief is mentioned two issues came out consistently: leakage and political interference. In Kitui people report, "Now we just borrow donkeys and go to the relief center ourselves to collect food, otherwise we would never get anything." In Busia people in one area say, "We finally received one bag of maize for the entire sublocation, over 200 households. So we decided to give it to the school, so at least our children would get a few hot meals" (Kenya 1996).

In urban Bangladesh the poor are critical of government relief services. Either people do not receive the amount allocated, or they need to bribe officials to get any relief at all. "Many said that relief should be channeled directly to them and not through local government" (Bangladesh 1996).

In many parts of Eastern Europe and the former Soviet Union, workers speak about deep unfairness in processes used for privatization of state assets. In Moldova farm workers characterize the land privatization as basically increasing the gap between the rich and poor in formerly egalitarian communities. Farm workers felt that the framework for land reform did not provide any cushion and resulted in five to six families in a community buying up the land, leaving the rest working for them just as previously they worked for the Romanian *boyars*. Farm workers at collectives say privatization consists of "collecting numerous poorly understood documents,

which they fear the farm managers will only sign if the farmer has already established a 'special relationship' with them" (Moldova 1997).

Insufficient government services cannot be attributed simply to unmotivated or corrupt state employees. A PPA from Gabon notes:

Several social centers and facilities in Libreville were visited. Discussion with staff members there showed (1) a high degree of motivation; (2) a feeling that staff were powerless in the face of widespread misery, with no resources to help: "All we can do is say nice things to people, and that doesn't help much. We have lots of ideas but no funds. We have to reach into our own pockets to buy someone some milk. We can help these poor people fill out their application forms, but we never know what will be done with them"; (3) a sense of revolt against the low esteem accorded to them and to their work by the authorities. "Social workers are nobodies in Gabon. The big shots don't even know what we're doing. When we try to help the doctors, they tell us we're useless." Staff become discouraged and tend to stick to their offices. "Why bother going out among people if we can't even help the ones who come to us?"
—Gabon 1997

Not all government programs for the poor get wholly bad reviews. In Nigeria, for example, while opinion leaders in Kwara state noted that many agencies have been providing amenities, such as health clinics, market stalls, immunizations, and employment programs for youth, these leaders also noted several serious problems, such as the large number of government projects started but soon abandoned, and tax monies that seem not to be spent on community betterment (Nigeria 1996). In some cases praise for government projects is unqualified, such as in a PPA from Uganda. "The government has assisted us very much by catering for these four children per family. You may think that is small, but I am told that the government educates about five million children in primary. That is good" (Uganda 1998). In India in an area where the majority of people felt that poverty has declined, the PPA noted that the people's "well-considered" responses attributed the decline in poverty to several things, the first being "state-sponsored development and antipoverty programs" (India 1997c).

Corruption and Distrust

The state steals from us all the time so deceiving the state is not a sin. —Ukraine 1996

Nobody wants you to come with empty hands.
—Macedonia 1998

For government schemes we have to pay donations. Those who should be enlisted in the below-the-poverty-line list are not included, and those who are affluent are enlisted. —India 1997b

We saw the lorry of food relief arrive and the chief told us two weeks later that one-and-a-half bags had been received for distribution to 116 households. —Kwale, Kenya 1996

Teachers do not go to school except when it is time to receive salaries. —Nigeria 1997

Discussions of government failure in the PPAs are often interwoven with references to state corruption, which drastically reduces the efficiency and effectiveness of service delivery while breeding distrust and disdain among the poor who encounter it. These trends have dramatic implications for those who rely on formal government services, as the following description illustrates:

The reluctance to access loans from formal sources in Orissa [India] arises mainly due to two reasons. First, the prevalence of a high level of corruption [as high as 20 percent to 50 percent of the borrowed amount is believed to be lost in greasing the palms of bank officials for getting loans sanctioned]. Second, excessive delay in the process of loan disbursement spanning across seasons, which causes too much frustration and harassment for the loan seekers. By the time a loan from a bank is sanctioned, the original purpose of credit requirement becomes redundant. A bullock loan sought in the beginning of an agricultural season is believed to be of little use if accruing at the end of harvest. Such untimely loans are usually spent on unproductive purposes, landing the borrower in an inevitable debt-trap. —India 1998a

Corruption in education services appears widespread and cuts off students' opportunities for primary and higher education: "We heard many accounts of village youth in Moldova with excellent grades who tried to enter university. In several cases they were forced to return to their villages because their parents could not pay the large bribes professors demanded to guarantee their admission. One such discouraged mother reported, 'My

oldest son graduated as a locksmith from a technical college but could not find a job. He had very good grades and decided to re-educate himself in the Academy of Economic Studies. I was asked to give a bribe of 2,000 lei, but I had no money. As a result, my son failed the entrance examination” (Moldova 1997).

In a country where privatization is equated with theft due to the high levels of corruption permeating the transition, farm workers have a deep distrust of their own farm managers. Farm workers in Moldova are putting their hope in the “American project” funded by the U.S. Agency for International Development (USAID), which will manage the break-up of 70 collective farms around the country. Despite some reservations about the project, villagers feel that the Americans, as outsiders, will be less prone to corruption than Moldovan officials, and thus land and assets will be distributed more fairly (Moldova 1997).

Corruption in health-care services is common in many regions, and poor people with serious health conditions have no choice but to comply in order to obtain the care they need. In Macedonia, “Most of those interviewed stress [that] ‘Nobody wants you to come with empty hands.’ Ordinary services presuppose small gifts (coffee, candies, drink, and similar items), but value goes up as the value of the requested services increases” (Macedonia 1998). Further:

- ▶ One woman with ... gangrene of the foot tried for seven years to get a disability pension. Three doctors composing the commission deciding on the issue of disability, after they learned she had a brother in Germany, determined a bribe in the amount of 3,000 German marks.
- ▶ One person interviewed had to repair the doctor’s car as compensation for a kidney operation.
- ▶ One man who needed a kidney operation had to pay a bribe to get a referral to Skopje.
- ▶ According to one of the interviewed, patients at the Oncology Department at the clinical center in Skopje have to pay up to 1,000 to 2,000 German marks for good accommodation and good services.
- ▶ Doctors openly told one man from Debar whose wife needed an ulcer operation, “If you have a thick envelope it is all right, if not, scram.” In general the opinion prevails that in Skopje hospitals a patient has to pay about 2,000 to 3,000 German marks for one operation (Macedonia 1998).

Examples of corruption in the health delivery system also abound throughout the developing world. Some clinics have no medicines, highly

shortened hours, no doctors, and staff who may demand payments from patients in order to register, to be examined by a nurse or a doctor, and to get tests done. These examples are discussed in detail in the case study on health care at the end of this chapter.

State service delivery mechanisms are often described as either delivering nothing or delivering harassment. A PPA from India notes, "If the government passes a loan of Rs. 10,000, only half of it reaches the beneficiary. The rest is taken away by the government people. If we make a hut, the men of the Forest Department will start harassing us for money, asking from where we got the wood and saying it belongs to the Forest Department and so on" (India 1997c).

In Indonesia, a national bottom-up planning process has been subverted. In a study of 48 villages in three provinces all village heads regarded the process as a mere formality. Village officials after a community consultation process submit proposals for priority action. Villages are frequently pressured to revise their proposals in accordance with "suggestions" or "invitations" by government sector agencies. In Central Java, villagers complained that substantial parts of the subsidy were deducted for expenses. In the province of Nusa Tenggara Timur (NTT), in one village 20 percent of the subsidy was received in cash, 50 percent in goods not requested or wanted, and 30 percent was withheld to cover expenses. Another village received 10,000 carp to be collected from the capital city, three days away. The village had not requested fish and had no fishponds (Indonesia 1998).

In Mexico, state institutions are steeped in *clientelismo*. Only some communitarian institutions among the indigenous peoples of Oaxaca seem to be free of corruption. Others depend on leaders who provide favors in exchange for votes (see box 3.1).

When formal institutions break down, people employ a variety of strategies to meet their needs, including working around a system that is perceived to be unjust or exploitative through active sabotage or passive resistance. Especially in cases of state breakdown, few people express hesitation about employing whatever means are necessary to survive, including overtly illegal or dangerous ones. In Ukraine people say, "The government has ripped us off, so why shouldn't people steal a bit on the sly? We don't steal but we don't judge others who do. You have to survive!" (Ukraine 1996).

The PPAs from many regions describe scenarios in which the state is neither trusted nor relied on to deliver the services or goods it claims to provide. Where there is no public confidence in the official sector, the unregulated, unofficial sector easily replaces it, usually exaggerating the inequalities and rivalries already present in society. In this environment it

is invariably the poor who lose, and those who have power, influence, and “connections” who gain. As a person in Macedonia comments, “You don’t have to be poor in order to be a welfare beneficiary, you just have to pull some strings” (Macedonia 1998).

Box 3.1 *Clientelismo* in Mexico

The custom of providing a service or favor in return for political loyalty is known as *clientelismo*. The PRI party has dominated politics in Mexico for 66 years; this is surely a factor contributing to the importance of *clientelismo*. Fully 80 percent of the respondents in the area of Mexico City state that they engage in *clientelismo* politics to get their houses and urban services (water, electricity, street paving, and so on). Yet, despite widespread participation in this system, it is generally resented. One man interviewed in Mexico City says, “I don’t like politics, nor the ties that come with it ... I think no one is interested; they do it to get something, to give something, the house to the children, such as myself. But they have to participate because in so doing they are able to obtain things.”

With the exception of those in Oaxaca, where strong traditional communal organizations exist, the majority of those interviewed see help coming from either their families or from the government. Given that relatives of poor people are generally also poor, little recourse can be had from the family alone. The government, however, while generally considered the source of benefits for the poor, is also often separate from the people, either by physical distance or by the fact that local leader-brokers speak and act for the poor rather than encouraging them to speak and act for themselves. Found in all discussions about government are two additional issues. The first is that the people are poorly informed about much of what the government has to offer. Second is a pervasive sense that the government is corrupt. The people see that government programs translate into favors done for certain groups in return for affiliation with the ruling political party. Due to long years of control by one political party, the people have equated government with politics and imbued the state with the same distrust accorded politics.

Source: Mexico 1995.

Disempowerment and Humiliation

*We would rather treat ourselves than go to the hospital
where an angry nurse might inject us with the wrong drug.*
—Tanzania 1997

It is a selfish land, with no place for the poor. —India 1998a

Reports of corruption are often directly linked to descriptions of the psychological consequences of institutional failure: humiliation, intimidation, and insults have a significant effect on the extent to which people utilize state services at all. Negotiating a way through the corruption and rude treatment endemic in state institutions leaves poor people feeling powerless, voiceless, and excluded from the state services to which they are entitled.

The PPA from Tanzania addresses the rude and humiliating treatment encountered by the poor in the state health sector, where medical services, ironically, may leave patients with psychological scars:

While much is already known about the general lack of availability of even common drugs in health clinics, widespread rudeness of health staff has not previously emerged as a major issue. People everywhere report that they are abused at health clinics and would only continue to go “because we have no choice and need the services.” Men, women, and youths state over and over that they are treated like animals, “worse than dogs.” They report that even before they could explain their symptoms, they would be shouted at, told they smelled bad, and were lazy and good-for-nothing. An older man in desperate need of spectacles braved the abuse of a nurse for two days until he got his glasses, but he said he would never again go back and be so humiliated. —Tanzania 1997

In Pakistan people report that receiving charity is itself humiliating because they would prefer to work for a living. The embarrassment is compounded in Kasur, where “there was strong resentment at the way in which *Zakat* recipients were called to collect their benefits over loudspeakers, a practice that has become worse since politicians have tried to link social assistance to personal patronage” (Pakistan 1993).

A report from Ukraine suggests that the humiliations endured in contact with government bureaucrats are actually designed to “chase the unemployed away.” According to the report, “The Government Employment

Services Office, like all others, suffers from widespread public disdain and criticism. Many people expect [to be] and indeed confirm that they are treated disrespectfully. 'If you're not sure of yourself after your first trip to Employment Services, you're unlikely to ever go back,' says Mikhail Mikhailovich, a 30-year-old man who went there looking for work as a translator. He is referring to the humiliation that one endures from government bureaucrats, infamous for their ferocious and insulting tone, as they try to make the experience of applying so unpleasant that they chase the unemployed away" (Ukraine 1996).

Profound frustration with corruption and maltreatment is compounded by a sense of being voiceless and powerless to complain, since complaining may result in losing services altogether. In Pakistan a widow says, "If anybody complains or protests against this corruption, they are struck off the lists of all support services because it is the same Local Zakat Committee that recommends names for the assistance programs run by different government departments" (Pakistan 1993).

Poor people typically lack access to justice or even police protection. In South Africa, while access to the judicial system is perceived to be extremely important, officials are generally said to be extremely rude and unhelpful. Transport availability and costs are also said to be major factors inhibiting such access to legal services. "It is difficult to get to the court. It costs 10 rands return by taxi from the farm to Patensie, and then 3.50 rands from Patensie to Hankey" (South Africa 1998).

Lack of police protection emerges as a widespread issue. In Georgia farmers say that they live "in a police state, in which police pay for their positions and freely harass citizens. Indeed people often prefer to contact 'criminal authorities' rather than even come to the notice of the police who often extort payments from them" (Georgia 1997). In the Republic of Yemen court services score the lowest satisfaction ratings (16 percent), below that of garbage collection (28 percent) and police services (26 percent). In contrast telephone services receive the highest ratings, 82 percent (Republic of Yemen 1998).

In many societies women have little access to police stations; going to police stations may be a dangerous act in itself. In the Republic of Yemen, for example, women state that they cannot access police stations because the police will laugh at them and their families will not allow it. "A woman cannot go alone, but only with her husband or brother or neighbor. Even if a crime was very serious, and even if the police station were very close, socially it is not accepted for a woman to go to a police station. If there were a police station staffed by women on the other hand, women stated that they could go there, either alone or with male relatives" (Republic of Yemen 1998).

Widespread lawlessness in some areas has led to disillusionment among young people. “Young people have started to believe that honest and law-abiding work leads nowhere, but in fact this is a road that leads to alcoholism, drug abuse, and prostitution. The last two are considered a time bomb in the countryside at present” (Latvia 1997).

Government officials often have different perceptions of poor people and their problems than poor people themselves have. If, in the judgement of service providers, poor people are lazy and undeserving, it is easy to see why their behavior toward the poor would be uncaring. In India, for example, a PPA reports that government staff view the poor as dependent on outsiders, having little initiative, idle, not interested in working, and caught in traditional beliefs. The poor, on the other hand, believe that they are poor because they do not have sufficient resources or income-earning opportunities, they have the worst land, and they are often cheated and exploited by the rich and powerful (India 1997c).

When government officials have limited knowledge about poor people in their areas it is difficult to develop effective programs. In Kenya, sharp differences are 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. The poor see this gap in perception as an important factor in blocking programs that might otherwise be helping them. “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” (Kenya 1996).

Almost everywhere, politicians are disdained. Poor people note that when they do receive attention from politicians and state officials it is often connected to an agenda external to their concerns. In PPAs from South Asia and elsewhere the theme is of politicians visiting poor communities only seasonally, that is, during election times. In India, for example: “The poor have also been too often treated as a vote-bank by politicians, rather than as an important constituency that needs to be integrated with the larger society. The combination of these factors has led to quite extreme attitudes, in which members of society either pity the poor or believe that the poor have been too pampered with handouts, increasing the stigma and insecurity of the poor and making it more difficult for them to improve their own conditions” (India 1997a).

In Indonesia, since the major political shifts started in May 1998, “the standard practice of paying voters has been brought into the open” (Indonesia 1998). Becoming a village head or village official usually requires financial contributions. Election campaigns often involve sending

out supporters to secure votes through small personal payments to individual voters (Indonesia 1998).

Vulnerability to Collapse of the State

People now place their hope in God, since the government is no longer involved in such matters. —Armenia 1995

It was the rich who benefited from the boom ... but we, the poor, pay the price of the crisis. —Thailand 1998

When poor communities or individuals rely heavily on state institutions for service delivery, the breakdown of the state leaves them vulnerable. This vulnerability is particularly striking in the Eastern European and former Soviet Union PPAs, and in PPAs from regions affected by the East Asian financial crisis. PPAs from the former Soviet Union report a widespread sense that the state has abandoned its citizens, many of whom have been plunged into desperate poverty as a result of political turmoil. The picture of the state that has emerged is one of dishonesty, neglect, and exploitation. In Moldova the poor who are without connections condemn the former Communist Party members who have become rich, as those who “exchanged their party cards for parliamentarians, bureaucrats, local officials, ‘Mafia,’” to use their connections to grab material and start their own businesses. Poor people characterize these government officials as “dishonest,” “swindlers,” “speculators,” and “thieves,” and insist that politicians do not care about the suffering population (Moldova 1997).

In many countries in Eastern Europe and the former Soviet Union pensions are pitifully insufficient, assistance programs inaccessible, and feelings of humiliation widespread. Poverty is often described as a direct result of government incompetence: “Virtually every respondent lambasted government incompetence for mismanagement of the economy. Regardless of how one became poor, the government is held in such low esteem that respondents viewed it as responsible for the catastrophic drop in the standard of living, far more so than any individual shortcomings” (Ukraine 1996).

An elderly woman in Ukraine claims she is ashamed of being poor but that the feeling of shame is fading. “I’m getting used to it or I’ve become indifferent. I don’t know,” she says. Like most others, she blames the government for thrusting her into this impoverished situation. She expects her situation to grow even more desperate. She has already sold most of her possessions. Although she has a small plot, it is located far from any form of transportation. At age 71, she finds it increasingly

difficult to carry kilos of potatoes to the bus stop and is considering renting out the plot. Besides her pension, which keeps her from starving, she hopes this could become a second source of income. —Ukraine 1996

In Thailand poor people's comments on the impact of the East Asian financial crisis also underline the vulnerability of those reliant on the state—particularly the very poor—at a time of institutional breakdown.

The crisis has happened so quickly it has left us confused, puzzled, and let down. We have lost our jobs but are given no explanation,” says a community leader from the slums of Khon Kaen, Thailand. “It was the rich who benefited from the boom but we, the poor, pay the price of the crisis.” Within her community there is a feeling of uncertainty, insecurity, and isolation. “Even our limited access to schools and health is now beginning to disappear. We fear for our children’s future,” adds her husband. Poor families report having to pull their children out of school to work and a mother says, “What is the justice in sending our children to the garbage site every day to support the family?” —Thailand 1998

In an atmosphere of state collapse all those who were formerly dependent on the state for services suffer. The poor, however, suffer disproportionately, since without resources and power they are ill equipped to negotiate in the corrupt and chaotic environment that replaces the former order.

Barriers to Access: Rules, Regulations, and Information

Not every disabled person can afford the procedures to qualify for disability payments. —Moldova 1997

We have to cross three creeks to reach our schools. These creeks swell up to four feet during rainy periods. When the rains come, our mother fears for our lives. —Grade school children, Kimarayag, Philippines 1999

Where formal state recognition is a precondition for access to state entitlements, the absence of that recognition constitutes a barrier. By requiring identity cards, uniforms, or excessive and unreasonable

documentation to access benefits, and by refusing to see and process people's claims, the state formally excludes those who cannot meet its conditions. State regulations may also hinder trade and entrepreneurship by the poor. Those excluded by these requirements are generally the poorest; they mention obstacles of this kind frequently in the PPAs.

While the better-off find ways to circumvent rules, this is more difficult for the poor because of their limited information. In Armenia to get assistance families with elderly members sometimes register themselves as separate households occupying the same apartment so that the pensioner can qualify as "single" and receive kerosene and other forms of assistance. In fact, pensioners living alone who have children living nearby usually have greater assets and so can afford to buy separate apartments for their adult children. Married couples sometimes divorce officially but continue to live together because the divorce qualifies their families for assistance aimed at single mothers. On the other hand, women whose husbands have left Armenia to find work but have not been able to send back money do not qualify for aid targeted to fatherless families (Armenia 1995). The poor also express deep fear of losing their privatized land because of their inability to pay the fee required for land registration.

Even when there are services the rules are seldom designed to make it easy for the poor to participate. In several countries children are pulled out of school because school fees are due when families have the least money. In Ethiopia, for example, the school year runs from September to June—but September is also a month for two important festivals, and these expenses crowd out funds for school fees. Further, children are in school when they are needed for the harvest. In urban areas the poor say that because the children look for work when labor demand is the lowest, in the summer months, this further exacerbates seasonal vulnerability. School holidays also coincide with periods of food stress in families. In one area in India researchers note that, while children do not go to the government school because of the timing of classes, participation is high in the "non-formal" education program conducted by a local NGO. That NGO program is more flexible and "caters to the realities of the village children by allowing them to fulfill their household tasks" (India 1997a). Physical barriers also come in the way of access to education and information. For example, in many rural areas school attendance drops during the rainy season, when travel becomes life threatening.

In Moldova documents are needed for a person to be able to access all kinds of services, including the right to privatize collective enterprises. Moldovans cite numerous examples of being defeated by a system that demands documents to which only state officials have access. A widow in Cahul, for instance, cannot privatize her land because she does not have the

right papers, that is, a “workbook” that lists all her previous jobs. “This book should have been in the collective farm offices, or in the district office archives. Officials at this office refused to surrender the book to her; she then applied to the collective farm officials, but they did not help either” (Moldova 1997).

Women as a group can be systematically excluded from a range of services by the state’s refusal to recognize their status as individuals. When identity cards are issued only to “heads of households”—meaning men—it severely restricts the extent to which women can function outside of their formal connection to men. In addition, women may face specific barriers created by unreasonable rules before they can access welfare benefits and the like. In South Africa these include court rulings that require women to find men who have absconded in order for the court to enforce payments. Even when men are brought to court, the judicial system remains ineffective in enforcing support for children (South Africa 1998).

In a variety of ways the need for documentation can bar the poor from claiming services and benefits. Lack of documentation creates a “precarious illegality” that is widely tolerated, but leaves the poor vulnerable to exploitation by more powerful groups. In urban slums in Brazil, India, Kenya, Mexico, Pakistan, and Vietnam the lack of identity cards or clear titles to land exposes the poor to the tyranny of “slumlords.” The lack of land titles and food ration cards also leads to increased commodity prices for the poor, that in turn leads to dealing with moneylenders and rich landlords, from whose clutches the poor often have great difficulty ever extricating themselves. In other countries, poor people often lack a labor card, needed to claim unemployment insurance, and they do not receive the minimum wage when hired. Also, any general subsidy leaks to the nonpoor, even for products or services such as urban transport, which account for a larger budget share for the poor than for the nonpoor (Brazil 1995).

Unreasonable bureaucratic rules and requirements can make the benefits received from the state less valuable than the time and effort invested in claiming them. For instance: “A 65-year-old widower pensioner living 22 kilometers from Donetsk in Ukraine was denied a housing subsidy. Among the documents he was obliged to present was a certificate from Gorgaza, the City Administration of Gas Maintenance. The authorities claimed the certificate he obtained was flawed. To get an acceptable certificate, he had to go to Gorgaza seven times. When he finally became indignant at the delays, he was accused of hiding his son’s income and denied a subsidy. ‘Do you think they are people? They’re not people! They’re animals!’ he says of the authorities responsible for dispensing housing subsidies” (Ukraine 1996).

Sometimes the mere process of trying to access benefits can be dangerous. In Georgia internally displaced persons (IDP) have been crushed in crowds waiting for their monthly payments. “Despite their legal entitlement to their modest monthly payments, the actual process of receiving them is often difficult. Displaced people in Tbilisi report that money comes to the savings bank only once a month. Because there is never enough to go around, people start lining up early in the morning. Sometimes the crush becomes so fierce that people are injured; a young female respondent had broken her hand. The displaced feel angry and humiliated, since they consider the money official compensation for the property they had to abandon in Abkhazia” (Georgia 1997).

Lack of information is a critical barrier between the existence of an entitlement and the ability to draw on it. Lack of information about program rules and benefits leaves poor people vulnerable to exploitative middlemen and corrupt officials.

In India one outstanding theme common to all of the government programs operating in the study area is that there is a severe information gap between the government and the intended beneficiaries. In the view of the villagers there is very little information and awareness about the various governmental poverty alleviation schemes. Even in the cases where there is some degree of awareness of these programs, an understanding of the specificities and the actual mechanisms of the programs is often absent. In most cases the only channel of information that the villagers have access to regarding these programs is through middlemen, which has proven to be problematic. These middlemen often misrepresent the various programs to the intended beneficiaries for their own purposes, which frequently involve extracting a percentage of the allocated funds for their own use. Another salient point that emerged from discussions with the villagers is that in their view many of the government schemes were not actually serving their needs and interests. —India 1997a

Given the new rules and regulations in Georgia, many people do not even know what assistance they are now entitled to by law, nor do they always know whether the source of aid they have received is the government or private organizations. People receive their information about different forms of assistance from friends, acquaintances, occasionally TV—but never from official sources. Where they used to “pursue their rights” in Tbilisi, or even in Moscow, they no longer know where or to

whom they can appeal for information or restitution. Marneuli residents, for example, were afraid to even approach the medical commission that determines disability, and therefore the right to receive an invalid pension, because they were afraid they would have to pay a large sum. —Georgia 1997

In Latvia only in a few municipalities did respondents report receiving information on kinds of assistance available from the social assistance staff. Because procedures for allocating money are often unclear and appear arbitrary, people react with suspicion and distrust. ... Some potential applicants are held back by distrust and even fear of these institutions. Applicants who have experienced rudeness or contemptuous behavior from the staff do not come back for assistance until they are desperate. ... A neighbor who lives with her unemployed son was shouted at by staff that her situation is her own fault, since she has not managed to bring up a good son. Just as budgets and programs differ regionally, so do attitudes toward the performance of social assistance officers. For example, in Livani respondents felt that local officials were doing their best to distribute assistance fairly, and that local staff treated them with respect. Likewise respondents in Ventspils found the staff there to be “understanding” and “polite.” —Latvia 1998

When governments fail to provide reasonable access to information about benefits, opportunities for exploitation and mistrust flourish, as is evident from the example of a woman in the Republic of Yemen trying to get disability benefits for her daughter (box 3.2).

Regulations may inhibit poor people's trading activities, even while liberalization of trade rules may be benefiting the better-off. Restrictive regulations about vending on the streets and harassment by the police and local “strongmen” emerged as an issue in many urban areas. In rural areas, local officials often become the stumbling block in community management and ownership of assets. In Indonesia, in a village in Jambi, after the license of a private company to manage richly endowed caves came to an end the community applied for authority to manage the caves as an enterprise. The forest officials turned down the request, because the community committee did not have, nor could it acquire, evidence of registration as a company or an operating license to establish a work place. Forestry officials say that only a legally established company owned by individuals could exploit the cave (Indonesia 1998).

Box 3.2 Republic of Yemen: Trying to Find Help for Disabled Daughter

Since her daughter's disability Sharifa went back and forth many times to the Ministry of Social Affairs in order to register her daughter's handicap with the Social Welfare Fund. She spent large sums on transportation, and was finally registered and received 1,200 YR. She thought that this sum would continue as a monthly stipend, but she was told it was only a one-time payment. She suspected that she was registered and then the government officials stole her money during the subsequent months, but she is not certain of this, and is not certain of her rights regarding the social welfare fund.

Not succeeding with the government social safety net program, Sharifa tried to get help from one of the powerful *sheikhs* (traditional rulers). To do this, she had to prove that she had a legitimate need by gaining an official paper, or *waraqa*. The process to get the *waraqa* is long and tedious. First, someone must write up her story, then she must get neighbors to testify to the truth of her story, and finally, the *aqel* (elected official) must testify. She finally completed the process, and armed with her *waraqa*, she went to the office of the *sheikh*. She was made to come back several times before finally being brought before him. He put the paper behind his *jambiya* (Yemeni sword) and told her to come back. When she came back, he told her that he couldn't find the paper. She then appealed to the women in the *sheikh's* household, but couldn't get them to listen to her. In a final attempt she found someone from her village working at the office of the *sheikh* as a soldier and sought his help getting her another audience with the *sheikh*. But when she went back to follow up, they continued to say they had lost the paper. At this point she gave up.

Source: Republic of Yemen 1999.

The Role of Local Officials and Community Elite

The leaders have the power, but they have no interest in the community. And what the people want is that the leaders work for their communities, the people don't want promises.

—Venezuela 1998

The community has no voice; here there are no leaders.

—Panama 1998

While some people state that their poverty is the result of community “voicelessness” and general lack of leadership (Panama 1998), many others believe that local leadership is a large part of the problem. The power wielded by the local elite is often in inverse proportion to the degree to which they are held accountable for their actions and decisionmaking. If communities have few ways, or no viable ways, of influencing the actions of local leadership, if there are no checks on the power of local politicians and other elite, and if the state is not in a position to monitor and regulate the power of the local elite, then patronage ties dominate the options available to the poor when accessing resources. When public sectors are dominated by patron-client relationships, individuals and communities lacking key connections will be unable to make successful claims for government assistance (Togo 1996). In South Africa the creation of homelands during the apartheid period distorted the role of traditional authorities from the “community spokesmen” to bureaucratic elites who lost their connection with the people they represented (South Africa 1998).

In Pakistan (1993) in agricultural areas that depend on irrigation, uncontrolled use of irrigation water has resulted in the waterlogging and salination of lands. This has led to declining crop yields, which in turn has led to movement out of the area by poor families. Many blame the problem on the local elite who control the supply of water and who are perceived to be indifferent to the impact of water misuse on lands cultivated by the poor. People also resent the control local politicians have over funds directed toward localities, and believe they are used only to further the self-interest of politicians. An exception to this rule is found in the village of Badan. There, local leadership is trusted, viewed as fair, and reported to distribute government aid funds equally among those in the village.

In the Republic of Yemen (1998) the local elite is in charge of communities and their interests; contacts and strengths determine what resources flow to the community. One example is in the management of piped water committees. The committees consist of some technically educated

people from the district city, the local *sheikh* (local chief), and the village's elected local leader. In communities where the *sheikh* has weak connections to local and regional level officials because he belongs to a powerless tribe, community mobilization of resources is low because residents know that their *sheikh* is powerless.

In Jamaica (1997) strong leaders have traditionally been perceived as the most important interlocutors for delivery of services and access to work. However as *dons* (godfathers) have become more and more associated with drugs, unequal distribution of handouts, and gang warfare, *dons* are no longer viewed as paternal godfathers who distribute resources and ensure peace and cohesiveness in the community.

In India the poor experience a range of relationships with the local elite. The elite, particularly those from higher castes, are mostly seen as those who divert government resources for their own use. In some areas local leaders are seen as "selfish and also corrupt" and are cited as one of the reasons for lack of development of the area (India 1997a). Here, too, there are some positive examples, however. The *panch*, an informal committee of the village head and four village leaders, is widely respected for its ability to resolve disputes between villagers fairly. This means that conflicts can be resolved at the local level without resorting to the police or courts. In multicasite villages the Thakurs—the higher-caste landlords—are feared but not respected by the lower service-caste poor and poor laborers. In some areas lower castes feel that since they no longer depend on degraded land for survival but instead earn incomes through migration, the traditional hold of the higher castes on lower castes has eroded (India 1997a).

In Eastern Europe and the former Soviet Union many poor people believe that success comes only to those who use criminal organization connections, or who maintain ties to the former Communist Party elite. While currying favor with the political elite and using small bribes to ease transaction costs was common in the previous regimes as well, a Georgia PPA reports, "today the former system of corruption has become more flagrant and ubiquitous. Poor people are outraged by the contrast between their own lives and those of officials." A citizen of Ajara, contrasting the image advertised by local leadership of Ajara as a "peninsula of prosperity" within Georgia, described the leadership as "moneybags" who "build fashionable hotels and tennis courts for high society, consort with local and foreign businessmen, and waste people's money" (Georgia 1997). In rural communities people point out that local officials almost invariably end up with the best and most expensive plots of land and the largest businesses (Georgia 1997).

To the degree that local officials limit the access of individuals to information and other resources, the poor have a difficult time finding work and escaping poverty (Moldova 1997; Armenia 1996; Georgia 1997). It is

important to note that this does not mean that villagers are always completely at the mercy of local leadership; community organizing can be effective. For example, in the Georgian village of Djuta, when local officials delayed the distribution of hay meadows to local farmers, residents took matters into their own hands; they divided the meadows into individual plots and distributed them by casting lots (Georgia 1997).

While negative accounts of corrupt local officials and political elites outnumber positive ones, there are examples within the reports of local leadership being viewed as an important community-level asset. In Livani, Latvia, for instance, officials are reported to play an important role in guaranteeing the equitable distribution of humanitarian assistance (Latvia 1997). Similarly, in India some village leaders have “played an active role in securing the benefit from some poverty alleviation programs for the poor and also improving the infrastructure facilities such as transport facilities” (India 1997c). In fact, as a Nigeria PPA notes, “Many residents of poor communities emphasize the importance of their elite, particularly those members residing and working in urban areas, in securing services for them. Such people are often, indeed, centrally involved in setting up and running ‘self-help’ organizations.” The PPA continues: “Community leaders themselves point to their need to have links with ‘godfathers’ higher up in the system in order to successfully gain access to benefits for the community. Many leaders say that if they are not active politically, they do not attract government action, which in turn means that community members cannot be enticed to participate in development.” A central conclusion drawn from the PPA is that the inclusion of community leaders in government programs is key to the program’s success, for respected local leaders who share the views and values of the community at large can rally support for and participation in development programs (Nigeria 1996).

Conclusions

This review of poor people’s encounters with state institutions is sobering. Dysfunctional institutions do not just fail to deliver services—they disempower, and even silence, the poor through patterns of humiliation, exclusion, and corruption. Legal and other formal barriers that prevent the poor from gaining access to benefits or trading further compound the problem. Thus, those at society’s margins are further excluded and alienated.

The findings raise fundamental questions for programs and agencies that work primarily through state institutions. The answers do not lie in shrinking the state, bypassing the state, or in focusing only on poor people’s networks. The answers lie in starting with poor people’s realities and experiences with the state in order to design appropriate processes to produce change at the local level. At the same time, agencies need to trace the

changes in values, norms, incentives, roles, processes, and policies that are needed at higher levels to support transparency and accountability to the poor at the local level. New thinking is also required to support “clean and motivated” unsung local heroes of the state and civil society, especially at the grassroots level.

Poor men and women recognize the importance of government-provided services and government roles in setting up the framework of rules and regulations, yet they feel powerless to effect change in these institutions. New partnerships are needed between governments (at all levels) and civil society organizations. While this is beginning to happen in the delivery of some sectoral programs, experimentation in direct participation by poor people in local level governance is just starting. To reduce the probability of elite takeover of decentralized programs, poor people’s own organizations need to be strengthened within communities and through cross-community networks. Only then can poor women and men exert their rights to information and accountability without negative personal repercussions. Poor women and men want a life of dignity in which they are treated with respect and fairness by state, civil society, and private sector organizations.

State institutions link people to vital services and to participation in civic processes. When functioning effectively, state institutions provide opportunities for socioeconomic mobility and for overcoming power asymmetries. When state institutions deteriorate, services such as health and education become privileges accessed primarily by those who already have resources and power. The following case studies illustrate some experiences reported by poor people in their efforts to access health care and education.

Case study 3.1 Access to Health Care

If you don’t have money today, your disease will lead you to your grave. —Ghana 1995a

If a poor man gets sick, who will support the household?
—Guatemala 1994b

We are ill because of poverty—poverty is like an illness.
—Moldova 1997

When poor people talk about access to formal health-care services, issues of corruption and cost repeatedly arise. For poor families who are already highly vulnerable, the costs of a sudden illness can be devastating, both because of lost income and because of the costs of treatment. While the actual treatment itself can be prohibitively expensive, in many cases there are

other hidden costs that add to the overall financial burden of health care. These hidden costs include expenses incurred in traveling to a place where health care can be received, and the psychological costs or stigma of having been treated for certain diseases, such as HIV/AIDS. Costs are also incurred from bribes that must be paid and “gifts” presented to doctors and other health-care workers in order to ensure adequate treatment. The poor identify all of these factors as significant barriers to access. In addition, access to health care is often heavily influenced by gender, with men and women using health care differently.

Costs and Corruption

We watch our children die because we cannot pay the high hospital bills. —Ghana 1995a

Costs and corruption are significant barriers to health-care access. Corruption, which increases the costs of health care significantly, is widely reported in the PPAs. In many countries poor people report that they are asked to pay for medicine that should be available to them at no charge. In Armenia, when free medicines are given out the head doctor of the hospital must countersign prescriptions. These prescriptions are then filled in the facility’s drugstore, which is most likely to honor the prescription. Other drugstores may resist honoring prescriptions for free medicines by telling patients that the medicine is out of stock.

A World War II veteran in Yerevan says:

I had a prescription for free medicines. I went to a pharmacy and they told me that they had none. I found the medicines in a pharmacy near the Ministry of Health. I didn’t want to pass as a hooligan, so I dropped in to the Ministry and clarified whether I could get the medicine free with this prescription. They said yes. So I asked, “If they don’t give it to me, can I take it by force?” They said, “If you can, take it.” So I went to the pharmacy and asked to see the box of medicines to verify the expiration date. I took the medicines and said that I was leaving with it. They wanted to stop me. I told them, “I am not a hooligan, if you want, let’s go together to the Ministry of Health and we can ask there. If I am not correct, they can take me to the police.” No one came after me. —Armenia 1996

Where health care is no longer free, its rapidly rising costs, especially for serious illness, send many families into destitution while they wait for death. In Georgia there are innumerable cases of people unable to afford

operations for sick family members. In the village of Akhhalcopeli a man who needs urgent treatment for his stomach ulcer “now lies at home, waiting for death.” Similarly: “Nino, who lives in Kazbegi could not pay to have her heart condition treated; it has become steadily worse. But she cannot obtain a certificate of disability (prerequisite to receiving disability payments)—she can neither afford the trip to Tbilisi, nor does she have enough money to pay for the first examination” (Georgia 1997).

In Pakistan it was common to find that informants had turned to private sources of care because they feared that a visit to a government facility would prove pointless. Although private sources were said to be expensive, government sources may not be any less so if the dispenser or doctor is abusing his position to make illegal fees and profits. Many household heads, therefore, reported that “they had borrowed large sums of money, sold assets, and/or removed a child from school at least once in the history of their marriage in order to meet the expense of treatment for themselves, a wife or one or more children.” Often, several sources of treatment were consulted, either because the disease was particularly alarming or because the first choice was ineffective. As might be expected, less expensive options (such as home care or herbal medicines) were usually tried first and more expensive treatments second. In some cases, however, families went immediately to a qualified private doctor, because of the greater assurance that the private practitioner will have medicine on hand. —Pakistan 1996

Encounters with corruption lead many poor people to avoid formal services altogether, reserving visits to clinics and hospitals for only the severest emergencies. In Bangladesh the poor report many hidden costs and exploitation by government medical staff including bribery, overcharging, and delay in attending to them (Bangladesh 1996). A PPA report from Kenya notes that the poor are health-conscious and engage in a variety of health-maintenance strategies, but visit government health facilities only as a last resort when they are desperate. This is not because they do not believe in or respect the curative powers of health providers, but because their experience with health facilities has been so dismal over the past few years. Here, again, problems cited by the poor include distance to health-care facilities, unofficial “fees,” lack of drugs, and rude health personnel (Kenya 1996).

In some areas charges for health care are unclear. In one government hospital in Ghana official staff members appear unable to give consistent figures for charges for the most basic services. Furthermore,

unofficial rents (bribes) are charged for a wide range of small services (Ghana 1995a).

While health care is expensive, forgoing treatment, particularly when treatment is potentially available, can have tragic consequences. A PPA from Uganda describes the death of a young girl whose family could not afford to seek formal medical care at the first sign of illness:

They had no spare money on them, but this was not a special problem as it was one shared by many. They had something to feel happy about, having been among the few to fully pay their 1995 graduated tax and school fees for two out of their five school-age children. Difficulties started in March, when their five-year-old daughter, Grace, had a serious bout of malaria. Given lack of money, their first recourse was with local herbs. Unfortunately, the little girl's condition did not improve. The family borrowed some money and bought a few tablets of chloroquine and aspirin from the local shop. After some improvement, the girl's health sharply deteriorated two weeks later. By the beginning of May, Grace had become very weak. Her parents then sold some chickens for Shs. 2,500 and, with the help of neighbors, took her to Ngora Hospital where she was immediately admitted. She was seriously anemic and required urgent blood transfusion. However, the family was asked to pay Shs. 5,000 that they did not have. They went back home to try and look for money. It was too late. She died on 8 May and was buried the following day.

—Uganda 1998

While rising costs are a common complaint, declining quality is not always so. In Ghana, “Costs of orthodox medical consultations are perceived as high, though it must be said that hospitals are perceived as more competent in general” (Ghana 1995a).

The traditional and informal medical sectors are repeatedly cited as alternatives to expensive or inaccessible formal health-care services in the PPAs. Often women use traditional health care exclusively, while seeking services in the formal sector mainly for male family members. In the Republic of Yemen both poor infrastructure services and social norms in the household restrict access to health care for women:

Lack of public transportation and high costs of private transportation are a major constraint to access. For instance, from Al Moqaaehha village in Hodeida, a visit to the district health center takes one and a half hours by car and costs about 5,000 YR, of which 2,000 is for car rental and the rest for fees, food,

and accommodation in the city ... Stories are told about pregnant women losing their babies on their way to the health service. In Hazm Al Udeyn center, the cost of hiring a car to the nearest health facility is 5,000 YR. A significant portion of the population cannot afford these costs. As a result, poor families from remote areas go to health facilities only when in extreme need. In both Ibb and Hodeida, it is not unusual for families to sell animals or gold to pay for a trip to a district or regional health center. —Republic of Yemen 1998

In Bangladesh the poor, lacking transportation resources, must be carried to health-care service providers. “The men find it difficult to carry sick people for long distances over the hilly areas, and many patients die during such journeys” (Bangladesh 1996).

Gender and Health

*When women are sick, there is no one to look after them.
When men are sick, they can be looked after by women.*
—South Africa 1998

Male roles in family health care are not described in much detail in the PPAs. Where they are mentioned, men are typically involved in finances, directing the work of wives as community health nurses, and transporting ill family members or neighbors (Bangladesh 1996). Men are most frequently involved with making financial decisions around health care. Women are typically the providers of health care rather than its recipients, and when resources are scarce they defer treatment of their own disorders in order to get care for their families. It is widely accepted that men are entitled to formal health care and the resources needed to secure it, long before women are entitled to such care.

Access to health care for women may be seriously affected by social norms that restrict women’s mobility and public activity. In Pakistan, for example: “The range of care options for some women and their children is restricted by unwillingness to travel alone to a distant facility or by inability to communicate with hospital personnel. In Balochistan women in two households commented that they would not be able to use the hospital unless the men of the household were present to accompany them. In one case the women say they were not “allowed” to go alone, and in the other, the women felt that because they were illiterate they would be unable to describe the problem in words that would be clear to hospital personnel. Women in homes such as these are more likely to use private doctors, compounders,

and traditional healers if these practitioners are familiar to them and located in close proximity to their homes” (Pakistan 1996).

In the Republic of Yemen women do not go alone to health services unless they are close by. The agreement of the husband or another male community member (called a *mahram*, that is, a respectable person or protector) is essential before women and children may go to the health centers, since women do not drive, nor are they allowed to travel far alone (Republic of Yemen 1998).

The interconnected barriers to health-care access experienced by poor women have far-reaching consequences for women’s health, and, by extension, their quality of life and options for productivity. Women’s lower status in many households results in poorer care of their own health and nutritional needs, which in turn affects their ability to feed the family and work. Poor women are often caught in a cycle of malnutrition and preventable disease that stems directly from their place in the household and from gender bias in health-care access. The PPA reports support recent scholarship arguing that gender relations in society and gender stereotyping in health policy and planning dramatically skew women’s access to health care. For instance, the PPA from Pakistan (1993) shows that women are the exclusive targets of promotional and preventative programs, even while they are denied care outside their reproductive roles.

Children and Health

Lack of access to medical services traumatized a mother who found herself “holding and singing lullabies to my baby until she died in my arms.” —Philippines 1999

Children are among the most vulnerable segments of impoverished populations. Although there have been declines in infant mortality, poor children continue to suffer disproportionately from malnutrition, disease, and lack of adequate health care. The PPA for Latvia notes that “in the past few years the children have become more frail and become ill more quickly. The frailty of today’s teenagers’ health has become very noticeable.” A school nurse commented that “in the last few years the patients more often have health problems such as allergies, cardiovascular problems, blood pressure, and dizziness. In earlier years there was nothing like this” (Latvia 1997). Similarly, the Nigeria PPA notes that in many communities participating in the study, poor people say that the health situation of children is deteriorating. This is linked to poor diet and water supply and an inadequate government health system. When children are sick and resources are scarce, “the male is preferentially treated, since he must survive to carry on family

Box 3.3 “Long Live the Child”: Community Health Agents in Ceara State, Brazil

The state government of Ceara has improved the health of young children by providing poor mothers with the information and tools they need to protect their children's health. Community health agents promote breastfeeding; monitor children's growth; teach mothers how to prevent diarrhea-related dehydration using a solution of salt, sugar, and water; educate mothers on the importance of treating drinking water, and teach them low-cost techniques for doing so.

Ceara used to have one of the highest infant mortality rates in the Northeast of Brazil: 95 out of every 1,000 children died before their first birthday. More than half of all mothers surveyed in 1986 had lost a child within the first five months of life due to dehydration brought on by diarrhea.

Among many dramatic changes following the election of a new governor in 1987, the state initiated “Long Live the Child” (*Viva Criança*) a campaign to educate health professionals and the public about primary health care. In the program community members (mostly women) trained in the basics of infant and child health care visit area households monthly (more often, if the household contains a pregnant woman or child under five). The health-care agents travel on foot or bicycle and carry a backpack with basic medical supplies. By 1993, 7,240 health agents were visiting the homes of 4 million people every month at a cost of \$500,000. As a result of this program, infant mortality declined 35 percent between 1987 and 1991.

Source: Brazil 1995.

traditions.” In Benue state, “If the child is not ‘special’ in any way, the sickness may be interpreted as an ‘act of God’ and treatment may not be vigorously pursued” (Nigeria 1995).

The most frequently cited barriers to accessing adequate health care for children included cost, distance to health-care facilities, and mixed levels of confidence in the overall effectiveness of treatment provided by clinics and hospitals. In an unusual example from South Africa, however, street children talk about the usefulness of free health services provided by a local

hospital. The children describe how they are able to take advantage of this health care, especially in emergency situations (South Africa 1995).

In the PPA reports from the former Soviet Union there are frequent examples of children “falling through the cracks” as state-provided health services deteriorated. “Georgian cities have witnessed the appearance of street children as young as five years old, who beg for money and food, and who engage in theft, prostitution, glue-sniffing, and casual manual labor” (Georgia 1997). Some have run away from families, others from institutions, and others literally have no families. “Many have serious bronchitis, pleuritis, and wounds from injuries and burns, often from operating electric appliances and kerosene heaters in small apartments without adult supervision. Only about half receive immunizations ... The children tend to be frightened, aggressive, and unapproachable” (Georgia 1997).

In Macedonia parents with several children are handicapped in regard to health insurance coupons, which cover costs for only three children. In such cases cards are often swapped among siblings, and since outpatient facilities and health institutions are sensitive to the health needs of children, they reach informal understandings with underinsured patients (Macedonia 1998).

The responsibility for overall family health care, particularly that of children, typically lies with women. State health-care institutions by and large have not adapted to the fact that women, even while they earn incomes, remain responsible for children’s health care. In South Africa women in the Lenyenye area made a special plea for clinics to stay open during evenings and weekends in order to allow them to take children for treatment when their daily labor responsibilities were over (South Africa 1998). In some areas in Kenya, “Patients were required to buy children’s exercise notebooks to supply the paper in which prescriptions could be written” (1996). There are important exceptions that show how innovative community-state partnerships can reach poor people with health services, for example in Brazil (see box 3.3).

Poverty, Gender, and Sexually Transmitted Diseases

Even if you are faithful, your partner may not be.

—Uganda 1998

Links between increases in poverty and sexually transmitted diseases (STDs) including HIV/AIDS are mentioned in several PPAs. In Thailand the AIDS NGO network expresses concern that the economic crisis may further marginalize HIV/AIDS patients. They also predict that, with increasing prostitution and poor quality health care, HIV/AIDS infection rates will

inevitably increase. Many private health-care centers have closed down because they are no longer able to pay the loans they borrowed from abroad, and imported drugs have rocketed in price. People are forced to rely on the strained public health system. "Our fear is for the children, elderly, and AIDS patients," a health worker explains (Thailand 1998).

Migration is linked to STDs in many countries. A health worker in Thailand says, "Migration has brought increased competition for living space and jobs, and we are anxious that migrants will bring more HIV to our community" (Thailand 1998). In Togo long-distance drivers and prostitutes are identified as high-risk groups because of their potential exposure to STDs (Togo 1996). Similarly, trading towns are viewed as dangerous in Senegal: "The proliferation of AIDS and other sexually transmitted diseases remains a real threat, particularly in some trading towns (Kaolack, Ziguinchor), even though prevalence rates are lower in countries such as Côte d'Ivoire or Gambia (which juts into Senegal geographically). The context for efforts to prevent the spread of HIV/AIDS and STDs is one in which family planning remains unavailable to large segments of the rural population" (Senegal 1995). The South Africa PPA reports that "women who become suddenly poor through the loss of a male partner are frequently forced into prostitution to earn a living. In fact HIV/AIDS is largely seen as a women's illness" (South Africa 1998).

The HIV/AIDS epidemic has introduced a new long-term trend in impoverishment. One of the principal effects of AIDS at the individual level is that the household of the victim will become poorer. In South Africa this is attributed to high expenditure on travel, admission fees, fees for healers, clinic fees, and funeral expenses, as well as the loss of labor from the sufferer and the caregivers (South Africa 1998). In Ethiopia the participating communities mention illness of family members as a main cause of vulnerability. In Lideta and Teklehaimanot the most common causes of inability to work are illnesses, such as typhoid, tuberculosis, and HIV/AIDS (Ethiopia 1998). An increase in numbers of orphans is a side effect of the deaths of adult household members from AIDS. In Togo 12,000 children orphaned by parents who died of AIDS were reported in 1994, with numbers expected to grow (Togo 1996).

The stigma associated with a diagnosis of HIV/AIDS naturally limits program effectiveness. Poor communities rarely understand the causes of HIV/AIDS and how to assist those affected. Programs for counseling and treatment need to address the fear of social isolation, which leads many households and individuals to hide the fact of infection (South Africa 1998).

The use of condoms for protection from STDs is problematic among poor men in some parts of the world. The South Africa PPA reports that

rural youth find it difficult to obtain condoms, and the negative attitude of clinic staff discourages youths from going to clinics for advice, treatment, and family planning services. “Moreover, men do not like using condoms, claiming that it reduces performance and causes them to tire quickly, and as a result they would be ‘careless’ when using condoms” (South Africa 1998). In Kenya poor men and boys insist that family planning cannot alleviate poverty; instead, they say, priority should be given to the irrigation of land (Kenya 1997). In Latvia, by contrast, information about reproductive health is widely available in media and schools, and products related to this educational effort can be bought in any country store or pharmacy (Latvia 1997).

In sum, the poor report a range of barriers restricting their use of formal medical services. As a consequence, they often receive inadequate health care, depend on informal sources of care, or simply go without health care. In many places women and children are particularly unlikely to receive sufficient medical treatment and those with STDs or HIV/AIDS are often too ashamed or fearful to seek it.

Case study 3.2 Education

Getting a job has nothing to do with what you learn in school. —Uganda 1998

The future lies in the education of our children.
—Uganda 1998

Children have given up studying. They have become tradesmen and merchants. —Armenia 1996

Securing an education is usually a precursor to effective participation in civic and economic life. Yet access to education is also highly gender-biased, according to many of the studies. In a Nigeria PPA, for example, many respondents say that they wouldn’t send their girls to school because they believe it breeds “indiscipline and female disloyalty” (Nigeria 1997). In households where resources are limited, boys are often educated before girls, since girls’ labor may be required in the household, or girls may be subject to cultural norms that limit the value placed on educating them.²

Relevance

By staying out in the street all day [selling peanuts], I saw many of the people who were at the university with me. They also have to do these little jobs to survive. —Togo 1996

Education is losing its allure and teachers their former positions of respect, since diplomas no longer guarantee good jobs. —Armenia 1995

Svetlana, an unemployed Russian woman in Latvia, says that although her son is formally enrolled in school, he frequently skips class and takes part in thefts. Svetlana reported that Misha's teachers used to give her lectures, but they gave up when nothing was achieved. She says, "Why does he need school anyway? It is just money wasted on books. He can read and write well. If you are too smart, you won't get a job" (Latvia 1998).

In Togo a range of institutional forces combines to limit the employment choices available to young people with university degrees:

When my father was made a jeune retraite (forced early retirement, as part of structural adjustment policies) back in 1985, I was finishing my university studies. It was a big blow for the whole family, but I thought that with my university degree I could have helped the family. Nothing was coming along, so I started working with my mother, who is a tailor. I'm lucky she taught me how to sew because that way I can earn some money and sew my own clothes. Then my parents moved to the village where life is cheaper, but I wanted to remain in Lomé because here's the only place where I can find a job using my qualifications. I stay in the house that my father had started to build, with two brothers in school to support. I stay there because I couldn't possibly afford to pay rent, but the house isn't finished: there's only one room with the roof and no floors. So I'm losing all my customers, because they say my house is dirty and their dresses will get dirty. I can't blame them, really. I can't even work myself in such conditions. I don't even have a clean table on which to lay the cloth to cut. Sometimes I'm lucky and I find work with a donor or an NGO. They say I'm good, they thank me, but they have no long-term job to offer me. When I work for them, I'm able to pay off some of my debts, or to buy books for my brothers, or to do some more work on the house. Now I have to sell peanuts on the street, making 600 CFAF a day if things go well. At first I was ashamed to do it, and hoped nobody would recognize me. And you know what? By staying out in the street all day I saw many of the people who were at the university with me. They also have to do these little jobs to survive. —Togo 1996

The perceived disconnect between education and securing a livelihood becomes a barrier to investment in education for many poor families. "Especially in rural areas in Ghana, for many families there is no perceived connection between real adult life and education. Education and teaching have little social prestige ('No husband will want an educated wife') or economic value ('School is useless: children spend time in school and then they're unemployed and haven't even learned to work the land'). Given the low quality of instruction and the limited relevance of the curricula, such attitudes are understandable" (Ghana 1995b).

A further example from Uganda underscores the irrelevance of education in the lives of many poor people. "'Getting a job has nothing to do with what you learn in school.' 'School certificates don't guarantee me that the new employee knows anything useful.' 'School was a waste of time.' Lastly, the communities in several studies noted poor physical infrastructure, especially lack of classrooms and materials. Problems with the education system were seen as the failure of the Government to invest properly in education" (Uganda 1998).

A surprising number of those interviewed in Pakistan also say that they do not feel that postprimary education would be of any future benefit to either daughters or sons. Although basic literacy is seen as helpful even to a farmer or day laborer, any further schooling is often thought to be wasted in an environment in which these are the only employment possibilities. "Formal sector jobs are known to exist, but informants said that these positions were available only to those who could pay a bribe that is enormous by the standards of the poor. Figures such as Rs. 20,000–50,000 were quoted for some positions. Many informants said that even if they were able to provide school fees, textbooks, school supplies, and uniforms needed by high school children, they have no hope of being able to pay a bribe of such magnitude [for a job]" (Pakistan 1996).

In Georgia a deteriorating educational system leads to the danger that uneducated poor children will become unemployed adults. In the past children had the "pioneer palaces," houses of culture, clubs, government-subsidized sports activities, and subsidized holidays. Most extracurricular activities now cost money, and poor parents must withdraw their children from their music and dance classes. For youth, especially in villages, the problem is even worse. The lack of educational or employment opportunities, and the decline of village social and cultural life, have contributed to depression, criminality, and increased youth alcoholism (Georgia 1997).

As the quality of public education appears to be declining, the rich are opting out of the public system, leading to the loss of those with some voice in keeping educational systems functioning. "Parents of children in the public system repeatedly voiced their resentment at those, including

functionaries, educational administrators and teachers themselves, who send their children to private schools and left the public institutions to decay. In Nigeria teachers who were once held up as role models and beacons of knowledge are now practically considered socially marginal ... The deteriorating incomes and employment conditions of teachers have been accompanied by an erosion of their prestige. In the southwest it is reported that landlords advertise: 'House for rent: no teachers'" (Nigeria 1997).

Class Bias

Education has become the privilege of rich people. If you do not have money, you can "rot" in your house. Despite the fact that the poor do well in primary school, they seldom make it to secondary school because of school fees. —Kenya 1997

Only the children of the poor are in public primary schools now. The big men who run the schools have their children in private schools. —Nigeria 1997

Access to "free" education becomes class-biased when poor families have to invest in school uniforms, textbooks, transportation, and other fees, or when the family needs the child's labor in order to survive, as in this example from Vietnam:

Twelve-year-old HL lives with the three other people in his family. His mother works as a washerwoman, his elder sister is a street vendor, and his elder brother works in Ward 8. In the past HL was in grade 2, but he dropped out because the family had run into debt, and he had to work to help the family survive. HL started working at the age of nine or ten. He got a light job inserting balls into roller wheels (of suitcases for example) earning a monthly wage of 300,000 VND. He works from 7:30 a.m. to 5:30 p.m. He gives all the money he earns to his mother in contribution to the family's debt payment. HL does not know how much the family owes or why. His mother usually returns 10,000 VND to HL when he receives his wages. His only wish is to go to school so that he can know how to calculate money like other people. He often feels a bit sad when he sees children his age going to school. —Vietnam 1999b

[In Georgia] one of the greatest concerns of poor families is the fees introduced by the new school reform, according to which schooling is free through the first nine grades, but a fee

is required for the tenth through eleventh grades. ... In addition to these fees parents are frequently required to contribute wood or money to heat schools, plus monthly sums such as five lari for school renovation, to pay the school guards, or to "top up" the teachers' salaries. In some Javakheti villages education continues mainly thanks to parents, who support the school, supply heating fuel, and contribute to the teachers' salaries. Throughout Georgia, however, the impact of these multiple official and unofficial fees is that increasing numbers of children are leaving school when they complete the ninth grade, if not before. —Georgia 1997

Poor parents can rarely afford to buy textbooks, an issue that emerged in many countries including Armenia. The lack of textbooks has an important impact on children's performance. Many parents remarked that "going to school without books doesn't make sense." One father said, "Last year my son was in the sixth grade. He didn't have half the books he needed. For that reason, he never did well. At the end of the school year, the school director called me. I was told that my son was to be expelled. I talked with my son. He said that he could not study because he had no books. I was to blame because I was the one who should have bought him the books. But I had no money to buy them" (Armenia 1996).

Lack of presentable clothing also keeps children from school. In Ajara, Georgia, parents say "Poorly dressed children refuse to attend school because other children laugh at their ragged clothing. One mother teaches her sons, 10 and 12, at home, for this reason" (Georgia 1997). Being shamed in public about being poor makes the stigma of poverty even harder for children to bear. In Macedonia, for example, "a third-grade teacher expressed to the whole class her belief that a certain student was 'the poorest child in the class.' The girl was so humiliated that she refuses to go to school" (Macedonia 1998).

Finally, buildings—where they exist—may be dangerous in poor communities, especially when the financial responsibility for maintenance is transferred to local communities. In northern Ghana serious funding constraints "prevented a sagging roof from being repaired at the state-run Presbyterian Junior Secondary School at Gambaga. Under the government's educational sector reforms, communities are entirely responsible for all structural maintenance expenditures. Owing to the dire state of poverty, manifested in a high rate of malnutrition, this community is unable to raise the necessary finances. Eventually, in October 1994, the roof collapsed on a roomful of schoolchildren while their class was in session. Twelve children were injured, with one suffering fractures in both legs" (Ghana 1995a).

As the rich pull their children out of poor quality public systems and opt for private schools, cycles of exclusion begin. In Latvia, “parents were concerned that a two-tier educational system was developing, one in which children of well-off families, living in cities and town, would have access to elite, well-equipped schools, while poorer children, particularly in rural areas, would be limited to poor quality nearby schools. Parents were concerned about the fall in the quality of instruction, as many of the best teachers sought better-paid work, leaving behind those unable to find other work” (Latvia 1998).

Corruption

We find that teachers are charging 10 córdobas for private classes in their homes. We are trying to remove that kind of behavior. Education is not a business, it is a vocation. If it were a business, we would be in a market. —A school director, Nicaragua 1998

Directors falsify grades for rich students and simply sell them diplomas. —Ukraine 1996

Trust between teachers and parents in Nigeria has been eroded by allegations that teachers misuse money collected by the headmaster, or raised by the community or PTA for school use. Such allegations of embezzlement are quite common. Parents want school management committees to be established to ensure proper accountability (Nigeria 1997). Distrust and lack of respect for teachers and other officials are also problems in Cameroon:

In Far North province of Cameroon parents reported not sending children to school and/or taking them out of school because “a diploma no longer leads to a job.” The standard of teaching is low (PTA teachers typically have seven years of basic education), and there is a general lack of resources. Teachers were generally found to lack motivation due in large part to low pay and poor equipment. Parents criticized teachers for alcoholism, absenteeism, arbitrary grading, and laziness (sleeping in class). In urban areas parents are delaying sending children to school by not enrolling them in nursery schools. Some children are simply staying out of school. In all the regions surveyed except the east, people complained that they had to pay school authorities to gain admission to school for their children. —Cameroon 1995

In Pakistan “free” primary education is actually not free for poor families. On the average, the household’s yearly expenditure on school supplies for the poorest is calculated to be about Rs. 317 annually per primary school child, Rs. 745 per middle school child, and Rs. 1,018 per high school child. In addition, in some areas parents report that public school teachers demand payment for each child in the form of “tuition.” “If parents do not meet these payments, which are as high as Rs. 40–50 per month, the teachers were reported to beat the student or submit a failing grade for her/him” (Pakistan 1996).

Corruption in educational institutions, high fees, and the need to depend on “connections” to get jobs have created pessimism among students and parents about the value of education. A math teacher in Crimea says, “Rich children don’t have to perform well; they know that their parents’ money will guarantee their success. The children understand that what’s most important isn’t knowledge but money” (Ukraine 1996). Another teacher commented that poor students know that they will not be able to continue their studies. “The students have a passive relation to study; they’re pessimistic, a kind of lost generation. By eighth grade they know all the prices and how much it costs to enter any given institute. I’m afraid for my own children” (Ukraine 1996).

Children in Institutions, Former Soviet Union

Poverty is the only reason for the children attending boarding school. —Armenia 1999

Among very poor parents in the former Soviet Union countries one commonly discussed strategy to ensure food for children is to institutionalize their children in homes and boarding schools for disabled, orphaned, or mentally disturbed children: “Olga Vadimovna, 31, has two sons, 11 and 9. When her older son was six, she sent him to a state boarding school (*internat*) because she could not afford to raise him. The younger son told an interviewer, ‘Like my brother, I too want to go to the *internat*. There they eat four times a day. I want so much to eat.’ The children, during interviews, unanimously voiced their preference for the school over home for a single reason—they received more to eat at school” (Armenia 1995).

“Mother, father, and five children live in a storage room at the local post office in Stepanavan. There is almost no furniture in the room. The father’s brother is the chief of the post office and let them stay after their house burnt down. Although the mother is employed full time and the father has work on a temporary basis, their salaries are not sufficient

to keep them out of poverty. The children are dirty, thin, and pale. Three of them attend Stepanavan No. 21 where they often spend the night. 'It is because they get fed there in the evenings,' explains the mother. She describes how she often only consumes coffee during the day in order to be able to feed her children. They use clothes donated by neighbors and she begs soap from them in order to be able to wash the children. The mother says they would not be able to cope if they did not have the option to send the children to the boarding school" (Armenia 1999).

"Most children's institutions in Georgia are no longer able to guarantee even minimal living conditions for the orphans, disabled, ill, or 'troubled' children they house. Nevertheless, in some cases, parents who feel incapable of even feeding their children may request to send them to a boarding school or orphanage. These children have multiple disadvantages in addition to the initial economic problems that may have motivated their families. Many children live in conditions characterized by an appalling lack of hygiene, cold rooms, inadequate food, and often, poor care" (Georgia 1997).

In brief, for both girls and boys, relevance and the real costs of education emerge as critical problems. Without a perceived benefit from obtaining an education, and with no access to the requisite funds, poor families simply opt out of the system. In so doing, they may be denied the tools necessary for civic participation and informed engagement with formal institutions. Denial of education perpetuates cycles of exclusion, disempowerment, and marginalization.

Notes

1. A 1997 survey found that corruption was the most common out of the 15 problems cited by firms doing business in Sub-Saharan Africa and Latin America and the Caribbean. Corruption was the second most common problem cited in the Middle East and North Africa, and third most common problem in Eastern Europe and Central Asia, and in the Commonwealth of Independent States (Brunetti, Kisunko, and Weder 1997). See also table 3.1 on quality of governance across countries in appendix 7 at the end of the book.

2. This topic is explored in greater depth in case study 5.1 on gender and education at the end of chapter 5.