

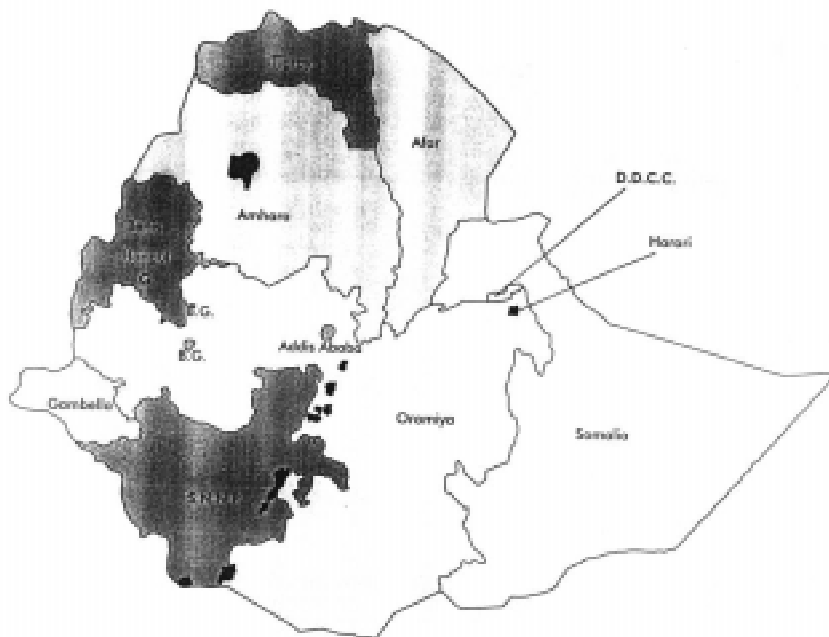
Poverty in Ethiopia

Discussion paper prepared for DFID: final draft

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The Federal Democratic Republic of Ethiopia



A.A. = Addis Ababa
D.D.C.C. = Dire Dawa City Council
S.N.N.P. = Southern Nations Nationalities Peoples



A relief map of Ethiopia

Some key events in Ethiopia's history

- late 19th century - Emperor Menilik II was involved in a process of consolidating the Amhara conquest of territories inhabited by Oromo, Somali, Afar, Sidamo, Gedeo, Gurage, Hadiya, Kembata, Wolayita, Gamogofa, Kefe, Omotics etc
- In 1896 he defeated the Italians in the Battle of Adwa and the boundaries of Ethiopian were consolidated
- Amhara domination of south and west involved an armed settler system and a law of conquest; it assumed that Amharic culture was so superior to other Ethiopian cultures that eventually they would be subsumed within it.
- An Eritrean liberation movement was founded in 1960
- Haile Sellassie's attempt to modernise and Amharise this 'multi-national feudal state' ended in an urban uprising and military coup in 1974
- In 1975 a land reform ('land to the tiller') was introduced abolishing private ownership; no household was allowed to farm more than 10 hectares
- Claims from the colonised to the 'right of self-determination' were acknowledged, though later not met, by the proto-Marxist military government (Derg) in its nationalities programme of 1976
- 1974 - 77 was a period of acute conflict including labour strikes, urban unrest and military mutinies which were met with draconian responses; there was a heavy toll of civilian casualties through the 'white' and the 'red' terrors including 'extermination' of the intellectuals who had been in the vanguard of opposition to the old regime
- In 1976 a group of students (including Meles Zenawi) left Addis Ababa for Tigray to found a Tigrayan liberation movement
- By 1978 Colonel Mengistu was firmly in power
- 1979-84 was devoted to the process of establishing a socialist republic based on the model of the USSR ; this entailed a range of campaigns and mobilisations in the countryside
- In 1984 the People's Democratic Republic of Ethiopia was created
- 1984/5 juxtaposed 'pompous parades and extravagant celebrations' (Kinfe, 1994:xix) and the spectacle of starving people in Welo and Tigray
- The years 1986-88 saw the spread of central planning
- 1987 saw another year of drought and a gradual escalation of the nationalities conflicts in Tigray and Eritrea
- In 1989 the government introduced the first of their liberalisation measures
- In 1991 the TPLF-dominated EPRDF entered Addis Ababa and took power; despite disappointment with the Mengistu regime people did not know what to expect of a regime which had been projected as a movement based on the ideas of Albanian socialism; there was also a fear of Tigrayan domination
- Between 1991 and 1995 Ethiopia was ruled by the Transitional Government; the government introduced more liberalising reforms which stabilised the economy and were associated with good rates of GDP growth
- In 1993 Eritrea became independent following a referendum
- 1994 saw the first poor harvest of the regime resulting in pockets of famine
- In 1995 the Federal Democratic Republic of Ethiopia was established with a new Constitution; the principle of ethnic federalism underlies the political structure and many government responsibilities have been devolved to the regions
- Meles Zenawi, President of the TGE, was elected as Prime Minister in the FDRE
- In May 1998 a border dispute with Eritrea erupted leading to major fighting in February 1999; around 350,000 displaced people needed emergency assistance
- In late 1998 and mid-1999 pastoral area rains failed in Somali regions and Borena zone area rains
- 1999 the nearly complete failure of *belg* rains affected *belg* crops and preparation for the *meher* season leading to increased food needs in Oromiya, Amhara, Tigray and SNNP regions
- In 2000 a peace was negotiated; famine appeared again parts of the west and south

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1. Introduction and Background¹

1.1 Discourse issues

In preparing this paper I have read a range of documents produced by the Ethiopian government, donors, NGOs, academics, and interested individuals. A ‘discourse analysis’ of some of these documents reveals five problems likely to lead to inadequate understanding of the situation in Ethiopia. Such misunderstanding may lead to recommendations for inappropriate, perhaps damaging, interventions. These problems are:

- the application of concepts (such as ‘the state’, ‘democracy’, ‘the market’, ‘civil society’) as if they had the same meanings in Ethiopia as they do in ‘donor’ societies
- the use of statistics rather freely and thoughtlessly, without taking notice of where and when they were generated
- in particular a tendency for ‘over-generalisation’ to ‘Ethiopia’ of conditions which applied in a particular place at a particular time
- short-termism and lack of historical awareness, both in analysis and in expectations of what development outsiders might achieve
- unhelpful rhetoric which can obfuscate proper analysis and minimise dialogue: NGOs tend to use ‘biblical’ styles, donors ‘scientific’ or ‘moral’ styles, academics ‘disciplinary’ styles, and the government ‘revolutionary’ styles²

In this context, the aim of this paper is to try to tell a story about poverty in Ethiopia, and what donors (particularly DFID) might do to address it, which avoids the pitfalls, but which makes use of the insights, generated by the different perspectives. Given the short period for writing it and the patchiness of available statistics and other information this story is full of holes, which if filled, might lead to different conclusions. Also, stories always involve interpretation of information. As an attempt to draw conclusions from Table 1 shows, interpreters face considerable problems (and opportunities).

Table 1: Changes in GDP 1990-98, Ethiopia

Series Name	1990	1998
GDP per capita (Const. 1995 US\$)	100.32	109.63
GDP per capita (Cur. US\$)	133.68	106.81
GDP per capita based on PPP (Cur. US\$)	403.14	517.18
GNP per capita (Const. 1995 US\$)	99.54	108.10

Source: World Bank Africa Data Base 2000

¹ I am particularly grateful to Stefan Dercon for sharing with me his wide knowledge and string of papers on poverty in Ethiopia, to Abi Masefield for responding so thoroughly to the questions which I emailed to her, and to Bereket Kebede and David Bevan for their comments. I had useful discussions with a number of DFID staff including Peter Dearden, Kenny Dick, Simon Gill, Bill Kilby, Keith Miller, Dennis Pain, Neil Squires, and Eric Woods and documentary assistance from Stephen Lister, Peter Oates, Alula Pankhurst, Nick Taylor, SCF (UK) and HelpAge International, and Steven Devereux sent me his paper in very good time.

² These can be related to both the socialisation and the interests of NGOs, donors, academics, and government officials

An interpreter is always faced with two questions which are in tension: (1) do I believe these statistics? or (2) what kind of story can I tell to explain them? There are three possible solutions (1) to critique the statistics (2) to make up a story to explain them (3) to adjust or recalculate the figures in ways that fit what I want to say. The ultimate decision as to how to proceed is usually governed by the interpreter's moral, political, personal economic, and/or scientific priors. In this case if I wanted to argue that poverty was likely to be increasing in Ethiopia I would present changes in GDP per capita in current US\$; if I wanted to claim some success for policies I had advocated I would go for GDP per capita based on PPP.

The Ethiopian policy scene contains a number disputes which are ostensibly all about 'facts', but actually involve ideology and interests as well. I found no contradictions between the (seriously collected) data which finds declining poverty (in some areas at some times; Dercon, WMU) and that which finds increasing destitution (in other areas at the same or different times). It seems very plausible that overall poverty levels have reduced, in part as a result of the success of fertiliser/seed programme in food-surplus livelihood systems which have not had climatic or pest problems (World Bank, 1999:8), but that also in food-deficit areas, particularly those hit by continuously failing rains, we see starvation and increased destitution (Dessalegn and Akililu, 2000 and the SCF Food Security Zone studies).

The next two sections briefly describe the major government and donor policy themes, as they appear in relevant documents.

1.2 Government policy themes

Objective of achieving rapid economic growth that benefits entire peoples at all levels

Agricultural programme for rain-rich localities, agricultural programme for areas with rain shortfall, livestock development programme, natural resources preservation, constitution-based fair land policy, expand efficient marketing services, plan to allow private investors to play their proper role in agricultural development, socioeconomic infrastructural development, improve quality of urban life and develop the urban economy, support for private investors, especially Ethiopian investors, fairness of educational supply, expansion of vocational and technical education, programme of higher education, prevention-based health programme (especially health services, vaccination, malaria, and HIV/AIDS) supply of basic medicines (EPRDF Programme: August 2000)

Execution of the programme for realising peace and stability

Ensure the unity and equality of peoples, establish competent and democratic law enforcement systems, develop a relationship of sound relation with neighbouring countries³, capacity-building for regional states, use of own language, balanced growth through budgetary allocation and subsidisation, legal action taken against private press, individuals or

³ But, even while our country during the years of our program was making major efforts to create good neighbourliness, the arrogant EPLF regime invaded our country in violation of international law and principles. (EPRDF, 2000:34)

groups that attempt to create hostilities among peoples, programmes for army, police, judiciary

Execution of the program to realise participatory democracy and development

Democratic state structures, efforts to expand the culture of democracy, decentralisation of power to woreda and kebele levels, mass associations of youths, women and farmers based on the free will of their members⁴

Execution of capacity-building activities

1.3 Donor policy themes

These include macroeconomic stability, food security and food aid, land policy, input delivery - fertiliser, extension and credit, regionalisation and decentralisation issues, 'civil society' and 'democracy', the war with Eritrea, HIV/AIDS, 'ownership' and 'partnership, the preparation of a Poverty Reduction Strategy Programme, basic health and education services in the context of a Comprehensive Development Framework (World Bank, July 1999 and other donor documents)

1.4 Historical contexts

I have provided a potted history at the beginning of this paper since I believe that an understanding of poverty and policy in Ethiopia must be rooted in an understanding of the (diverse) historical experiences of poor (and rich) people and policy makers. Some knowledge of geographical and ecological context is also very important. Ethiopia is a country of high cultural and ecological diversity; 18 agro-ecological zones⁵ have been identified, from the densely-settled mixed farming regions of the temperate central highlands to the transhumant lowlands. Overall the economy is predominantly subsistence and coffee-based but, in this context, there is considerable diversity in the way livelihood systems are constructed (see Annex 3 for some examples). There is a population of over 60 million people, in over 89 distinct ethnic groups; two equal-sized ethnic groups (Oromo and Amhara) together account for over two-thirds of the population. About 60% are Christians and a third Muslim. In some urban areas there is occupational specialisation by ethnic group (Berhanu, 1999).

2. Poverty Profile⁶

2.1 The experience of poverty in Ethiopia

While some aspects of poverty experience vary according to context, others are universal. In their 'consultations with the poor' for the World Bank WDR 2000/01 (10 sites in three areas of Ethiopia, rural and urban) Rahmato and Aklilu (2000) found that three terminologies

⁴ 'However, the task of establishing and strengthening such associations in a country where the culture of passing direct orders to these entities has been long entrenched, has not been an easy one.' (*ibid*:38)

⁵ Recent research by SCF focuses on 'food economy zones' (Boudreau with Coutts, 1998, Haile *et al*, 2000)

⁶ Unfortunately I only got hold of a copy of the Ethiopian Economic Association Report on the Ethiopian Economy just before the deadline for the paper, and I have not been able to include much of the very interesting information and arguments presented in the report.

predominated: terminologies that indicate no future (eg 'Life is from hand to mouth', 'We envy the dead'); terminologies that indicate hopelessness and desperation ('Waiting to die while seated', 'we are full of debt'); and terminologies that indicate hunger and food insecurity ('We live on coffee, We eat when we have the means, and we go to bed hungry when we don't'). In the rural sites focus groups identified four major categories: wealthy farmers, those in the middle getting by, and poor farmers/daily labourers, and 'the disabled' (physically disabled, sick and elderly). In the urban sites participants identified four categories: the well-to-do, those with middle income, the poor and the very poor (including the elderly, the disabled and the homeless).

These consultations were conducted in three regions of the country, and included (1) three rural sites east of Debre Zeit and one urban kebele in Debre Zeit, (2) three rural sites near Dessie and one urban kebele in Dessie, and (3) two kebeles in Addis Ababa. In these areas respondents reported an increase in the numbers in the lowest category of well-being and a decline in the numbers in the highest category. These are important findings which require focused policy action but, given that the ten sites cannot be considered as representative of the country as a whole it is important not to over-generalise these findings to 'rural Ethiopia' or 'the population'. What is needed is a mapping of the country which identifies declining, stationary and improving areas.

In these declining areas the rural problems identified included drought, landlessness, shrinking farm plots, deforestation, erosion, pests and the high price of fertilisers. The main problem in urban areas is chronic unemployment. In both rural and urban areas participants identified problems related to rapid population growth, the absence of services such as health, water, sanitation, housing and electricity, and the lack of development or social protection assistance from either government or NGOs. In times of distress people and communities rely more on informal local organisations, than on formal government or non-governmental organisations. *Idir* (burial society) stands out as the most important, followed by the church or mosque.

Rural and urban people (poor and not-so-poor) are active in a range of local social networks, groups and organisations based on kin, clan, church/mosque/traditional religions, neighbourhoods, occupation etc, about which donors appear to know very little. Successful policies and projects require an understanding of the social and cultural construction of livelihoods.

2.2 Structures of poverty: exploitation, social exclusion, conflict and insecurity

The government rhetoric with regards to poverty comes out of a tradition in which exploitative structures have been seen as the major cause of poverty. 'By supporting a social hierarchy that was markedly extractive and exploitative, Ethiopian peasants lived for very many years in a terrible state of ignorance and gruesome conditions of deprivation and poverty' (Gebru, 1991:3). The rhetoric and ideas that fuelled the Derg's programme and that

of the TPLF during the civil war were of Marxist origin⁷. Since the decline of ‘dependency theory’ in academic circles in the 1980s analysis of social and political structures and relations of inequality has not been at all fashionable in the development literature (although it has continued in the academic disciplines of history, political science, and sociology). However, now that much more is known about the economic aspects of poverty, it has become clear to many in the development field that exploitative relationships, and processes of social exclusion and conflict, are major causes of poverty in many contexts that need investigation. In some respects donor rhetoric is getting closer to the government rhetoric than it was a decade ago.

2.3 The underlying ‘poverty model’

There is a depiction of the poverty model underlying this poverty analysis in Annex 1. An understanding of poverty requires attention to both the ‘statics’ and the ‘dynamics’. The static model suggests a complex set of inter-relationships (with many ‘feedback effects’) among unequal structures (inter-penetrating economic, political and cultural structures), community, household and individual assets, income (flows of cash, things in kind, and services), capabilities (broadly defined) and ‘quality of life’ (subjective experiences). Poverty can be seen as having ‘universal’ aspects (non-contextual) and ‘particularistic’ aspects (contextual). If we want to make comparisons across time and space and look for generalisations we must use non-contextual measures (such as income converted to a cash metric, or death counts at different ages). If we want a more complex understanding of the generation of poverty we need to look at local, regional national and global⁸ contextual aspects. Ideally we will do both simultaneously. In the context of this paper the major focus is on assets, income/consumption, and the capabilities of health and education, but it is important to remember that quality of life depends on much more than these⁹.

Individuals are differentially situated in socially, spatially and economically located households according to sex, age, health, education, and relationship to household head and other members. Intra-household distributions are important for individual welfare. In terms of individuals we want to look at ‘capabilities to do and to be’ (Amartya Sen) and, for Ethiopians, these include:

- nutrition
- health (including survival)
- security
- satisfactory family and other personal relationships
- indigenous knowledge and skills

⁷ It seems likely that the government’s suspicion of ‘markets’ relates to monopolies (‘profiteering merchants’, EPRDF, 2000:12) and to untrammelled capitalism, which they believe will increase poverty.

⁸ This paper has no space for the role that world economic and political relationships have played in Ethiopia’s poverty, which does not mean that they are unimportant.

⁹ In addition to the different aspects of individual and household inequality (economic assets, income and human investment, dignity, identity and status, and ‘voice’) people’s goals include belonging to a group, emotional satisfaction, spiritual comfort and physical health, and physical safety. Some circumstances require trade-offs between these goals and it should not be assumed that people will choose the ‘IDT goals’. Also, in conditions of scarcity, competition for resources and intra-group and inter-group conflicts are likely.

- status and participation in local society
- self-fulfilment in terms of personal and spiritual goals
- voice in household and local decisions
- education/literacy

In the available literature the focus is on the first two and the last of these, and Section 2.6 presents some evidence relating to these for Ethiopia. However, I believe that if development interventions are to be successful they must take more account of local definitions of what it is good ‘to do and to be’; in other words it must be recognised that livelihoods, poverty and wellbeing are socially and culturally constructed, and that some of these constructions may be in tension with western values.

A dynamic approach to poverty requires us to look at the extent to which, and the ways in which, people move in and out of poverty. An understanding of this can lead to improved policy and project interventions. Income poverty for some individuals or households is a moveable state¹⁰:

- when it is not we can use the term chronic income poverty
- when it occurs as a result of patterned regularities, we can describe it as variable poverty, depending for example on closeness to pay day, which season it is, whether the annual harvest has been good, lifecycle changes
- when it occurs as a result of a shock we talk of vulnerability. ‘Shocks’ may be on the cards or totally unexpected - those who are not vulnerable are ‘insured’ against both ‘risk’ and ‘uncertainty’. Climate, pests, sickness, accidents, and conflict have been the major generators of shocks in the Ethiopian context
- Those with few assets (broadly defined to include social, cultural and political assets) are either currently income poor or vulnerable. Those with no assets may be described as destitute¹¹.

2.4 Ethiopia’s income poverty in the wider context

‘Ranked at 210th out of a total of 210 countries in GNP per capita terms and 208th in terms of GNP per capita measured at Purchasing Power Parity (PPP) by the most recent World Bank World Development Report, Ethiopia is, by any measure, one of the poorest countries on earth’ (EEA, 1999:1). However, Table 2, which shows the GNP per capita and the proportions living below \$1 and \$2 a day in a number of developing countries, demonstrates

¹⁰ ‘On average year-to-year poverty is very similar. However, we find high variability in consumption and poverty, over the seasons and year-by-year. Econometric analysis suggests that consumption is affected by idiosyncratic and common shocks, including rainfall and household-specific crop failure, while households respond to seasonal incentives related to changing labour demand and prices. The results imply that a larger number of households are vulnerable to shocks than implied by the standard poverty statistics, while some of the non-poor in these statistics are in fact otherwise poor households temporally boosting their consumption as an optimal response to changing seasonal incentives.’ (Dercon and Krishnan,)

¹¹ There is a growing concern about the apparent increase in the number of destitute households in the Northeastern Highlands and a Study on Destitution in the Northeastern Highlands (Amhara Region) is currently under way with DFID financing.

Ethiopia's achievements with regard to individual poverty; while ranking definitively lowest in terms of GNP per capita (although not in GNP per capita PPP\$) it is sixth (out of nine) in terms of the incidence of poverty (measured as having less than \$1 a day). Namibia, with a GNP per capita more than 18 times that of Ethiopia has a larger proportion of its population (although a much smaller number of people) living below \$1 a day than Ethiopia has.

Table 2: International poverty lines and GNP for selected countries

Country	Survey year	Population below \$1 a day %	Population below \$2 a day %	GNP per capita \$ 1999	Avg annual growth rate % 1998-9	GNP per capita PPP\$ 99
Ethiopia	1995	31.3	76.4	100	4.8	599
Mali	1994	72.8	90.6	240	2.7	693
Tanzania	1993	19.9	59.7	240	3.1	478
Nigeria	1997	70.2	90.8	310	0.5	744
Uganda	1992	36.7	77.2	320	4.8	1,136
Kenya	1994	26.5	62.3	360	0.1	975
Bangladesh	1996	29.1	77.8	370	3.3	1,475
Ghana	-	-	-	390	2.1	1,793
India	1997	44.2	86.2	450	4.9	2,149
Namibia	1993	34.9	55.8	1,890	0.6	5,369

Source: World Bank Development Report 2000/2001 pp 274/5 and 280/1

2.5 Changes in income poverty since the 1970s

There is a lack of reliable data on the historical trends of poverty rates. Ethiopian economic data are generally incomplete or inconsistently reported, especially for periods longer than 5 years (Berhanu, p5). Table 2 brings together data found in a number of sources. Two direct

Table 3: Data on Income Poverty in Ethiopia

	Whole country	Rural	Urban
1981-2 Population below \$2 a day <i>Berhanu but no ref</i>	90%		
1982 Population below \$1 a day <i>World Bank database</i>	46%		
1992 <i>World Bank Poverty Mission</i>		50%	64%
1995/6: Moderate poverty (headcount) <i>Dercon, 199</i>	64%	66%	49%
1995/6: Poverty (headcount) <i>ibid</i>	45%	47%	33%
1995/6: Extreme poverty (headcount) <i>ibid</i>	24%	25%	18%
1995: Population below \$1 a day <i>WDR 00/01</i>	31.3%		
1995: Poverty gap (\$1 a day) <i>ibid</i>	8.0%		
1995: Population below \$2 a day <i>ibid</i>	76.4%		
1995: Poverty gap (\$2 a day) <i>ibid</i>	32.9%		

comparisons can be made: the percent living below \$1 a day fell from 46% in 1982 to 31.3% in 1995 and the percent living below \$2 a day fell from 90% in 1981/2 to 76.4% in 1995.

2.6 Capability poverty: Ethiopia in the wider context

Ethiopians consume, on average the lowest supply of calories per day, although more of this is protein than is the case five other countries in the table. The food production index rose from 100 in 89/91 to 121 in 97/98 which was the fourth best performance. However, only Bangladesh received more food aid cereals in 1998.

Table 4: Food security indicators for selected countries

Country	Daily/capita supply of calories 1997	Daily/capita supply of protein 1997 gms	Daily/capita supply of fat 1997 gms	Food prod'n index 89-91=100 1997-8	Food imports as % merchandise imports	Food aid cereals 1000s metric tons 1998
Ethiopia	1858	54	23	121	14	589
Bangladesh	2085	45	22	112	15	1557
India	2496	59	45	120	6	327
Kenya	1976	52	47	105	14	71
Mali	2029	61	42	116		12
Nigeria	2735	62	71	149	-	-
Namibia	2183	60	38	124	-	1
Ghana	2611	49	32	144	-	27
Tanzania	1995	49	31	103	17	36
Uganda	2085	45	28	113		57

Table 5: Health and education indicators for some selected countries

Country	Mal-nutrition % under 5 1992-8	Infant mortality rate per 1000		Under 5 mortality rate per 1000		Life expectancy at birth 1998		Adult illiteracy % 15 and above 1998		Changes in private consumption per capita % 1980-98*
		1980	1998	1980	1998	male	fem	male	fem	
Ethiopia	48	155	107	213	173	42	44	58	70	-0.3
Bangladesh	56	132	73	211	96	58	59	49	71	1.4
India	-	115	70	177	83	62	64	33	57	1.7
Kenya	23	75	76	115	124	50	52	12	27	0.2
Mali	27	184	117	-	218	49	52	54	69	-0.5
Nigeria	39	99	76	196	119	52	55	30	48	-2.1
Namibia	26	90	67	114	112	54	55	18	20	-1.4**
Ghana	27	94	65	157	96	58	62	22	40	0.2
Tanzania	31	108	85	176	136	46	48	17	36	0
Uganda	26	116	101	180	170	42	41	24	46	1.2

*Avg annual growth rate; distribution-corrected

** not distribution-corrected

Source: WDR 2000/01 pp276/277 and 286/287 Note: there the WDR contains no figure for maternal MR

While, in 1998, Ethiopia comes bottom of the list for male life expectancy and male illiteracy, for all the other measures there is one (but only one) country with worse scores.

With regard to health there is now considerable donor interest in the spread of HIV/AIDS. However, there are other major health problems which require attention. Data presented in the World Bank Social Sector Review suggest that the top 10 killers, accounting for 75% of all deaths include perinatal-maternal conditions (17%), acute respiratory infections (14%), malaria (14%), nutritional deficiency for children under 5 (8%), diarrhoea (8%), AIDS (7%), and TB (5%) (EEA, 1999:107).

2.7 Changes in some capability indicators

Table 6: Nutrition measures for Ethiopia (%)

	1983	1992
Stunting prevalence (Height for age)	59.8	64.2
Wasting prevalence	8.1	8.0

Source: World Bank Africa Database

Table 6 shows that, while there was not much change in wasting prevalence between 1983 and 1992, the proportion of stunted children rose from 59.8 to 64.2

Table 7: Changes in Life Expectancy 1967-1997

	1967	1970	1972	1977	1980	1982	1987	1990	1992	1997
Life expectancy at birth (years)	38.91	40.14	40.96	41.96	41.96	41.96	44.61	45.00	45.27	43.33

Source: World Bank Africa Database

Life expectancy rose from 38.91 in 1967 to 43.33 in 1997; it reached its highest (45.27) in 1990.

Table 8: Changes in Child Mortality Rates 1967-1997

	1967	1970	1977	1980	1982	1987	1990	1992	1997
Infant mortality rate (per 1000 live births)	162	158	149	155	159	132	124	119	107
Mortality of children under five years, (per 1000)	..	239	..	213	190	..	175

Source: World Bank Africa Database

Child mortality rates improved: the IMR which was 162 in 1967 had fallen to 107 by 1997 and the under-five rate fell from 239 in 1970 to 175 in 1997.

Table 9: Changes in Literacy 1970 - 1997

	1970	1975	1980	1985	1990	1995	1997
Illiterate females as share of female pop 15+ (%)	93.9	91.3	88.6	84.5	79.5	73.6	70.8
Illiterate males as share of male pop 15+ (%)	80.4	76.4	72.0	68.0	64.0	60.1	58.5
Illiterate pop as share of pop 15+ (%)	87.3	84.0	80.3	76.2	71.7	66.8	64.6

Source: World Bank Africa Database

There were also improvements in literacy rates between 1970 and 1997: the illiteracy rate for females dropped from 93.9 to 70.8 and for men from 80.4 to 58.5.

This section generally shows improvements in these capabilities, although there is still a long way to go.

2.8 Spatial aspects of household income poverty

As Annex 3 on coping strategies shows the causes of household income poverty are related to location; there are differences between rural and urban, and within the urban category there are differences according to area of residence. Within the rural category there are differences according to livelihood system which in turn depends on topography, ecology, and history.

Differences among regions

Table 10: Some measures of differences between the regions

	Per capita income/expenditure <i>birr</i> 95/96 ¹	Poverty headcount P0 %	Poverty gap P1%	Poverty Severity P2
Tigray	904	57.9	18	7
Afar	1106	51.8	16	6
Amhara	917	56.7	17	7
Oromiya	1184	34.7	8	3
Somali	1167	34.6	8	3
Benishangul-Gumuz	1027	47.6	14	5
SNNP	945	56.5	18	7
Gambella	1223	41.8	12	5
Harari	1460	29.1	2	3
Addis Ababa	1569	30.0	11	4
Dire Dawa	1397	24.6	9	2
Total	1088	45.5	13	5

Source: WMU, Poverty Situation in Ethiopia, 1999:11

Table 10 shows regional differences in poverty according to three measures. Tigray, Afar, Amhara and SNNP show the highest rates of income poverty. The WMU data shows considerable intra-regional differences in poverty between zones and woredas.

Urban-rural differences

The urban population has grown both absolutely and relatively since 1965 (Table 11), when 7.6% of the population lived in towns. By 1998 the figure was 16.7%.

Table 11: Urban population as a % of the whole 1965 - 1998

	1965	1975	1985	1995	1998
Population, urban as % of total, interpolated (%)	7.6	9.5	11.7	15.4	16.7

Source: World Bank Africa Database

The most noticeable feature of Table 12 is that, while generally urban calorie intake is around the same or larger than rural calorie intake, this is not the case for urban Tigray, which in fact has the lowest average intake of all regions.

Table 12: Differences in calorie intake by region and urban/rural situation

	Region	Calorie intake/day/adult
Rural	Tigray	1902
	Amhara	1957
	Oromiya	2004
	SNNP	1800
Urban	Addis Ababa	1993
	Dire Dawa	1831
	Tigray	1734
	Amhara	2107
	Oromiya	2126
	SNNP	2039
	Harari	2085

Source: WMU, Poverty Situation in Ethiopia, 1999:12

Table 13 makes rural/urban comparisons using three different poverty measures relating to headcount under poverty line, depth of poverty beneath the line, and severity of poverty beneath the line. While the proportion living in extreme poverty is higher in rural areas (25% compared with 18%) the measures for severity of extreme poverty are identical.

Table 13: Comparison of rural/urban poverty using three poverty lines and three poverty measures

<i>Poverty line</i>	<i>Head count P0</i>		<i>Poverty gap P1</i>		<i>Severity P2</i>	
	<i>Rural</i>	<i>Urban</i>	<i>Rural</i>	<i>Urban</i>	<i>Rural</i>	<i>Urban</i>
Extreme poverty	0.25	0.18	0.06	0.05	0.02	0.02
Poverty	0.47	0.33	0.13	0.10	0.05	0.04
Moderate poverty	0.66	0.49	0.22	0.16	0.10	0.07

Source: WMU, Poverty Situation in Ethiopia, 1999:44

Researchers involved in a panel data survey of seven large towns¹², including Addis Ababa and Dire Dawa, reported an increase in consumption per capita by, on average, 5.3% per annum between 1994 and 1997 (16.7% in total). Over the period headcount poverty (based on an absolute poverty line) fell by 8.6%, but the poverty gap and the squared poverty gap remained largely unchanged or even increased, reflecting an increase in inequality (the Gini coefficient increased from 0.44 to 0.48). ‘High growth in the urban economy in this period did not deliver substantial poverty decreases.’ (Dercon, 2000:9)

2.9 Spatial aspects of some capability poverty

Table 14 shows differences in gross enrolment rates for 1998. Data from the Welfare Monitoring surveys of 1996, 97 and 98 show that for the whole of Ethiopia rural gross enrolment increased from 26% to 44% (net enrolment from 13% to 23%), and urban gross enrolment increased from 97% to 110% (net enrolment from 64% to 73%).

Table 14: Primary gross and net (in brackets) enrolment rates by region 1998

	<i>rural</i>	<i>urban</i>	<i>all</i>
Tigray	53 (21)	132 (77)	64 (29)
Afar	10 (7)	120 (88)	32 (22)
Amhara	37 (21)	109 (77)	43 (26)
Oromiya	41 (21)	106 (70)	48 (26)
Somali	9 (4)	73 (47)	29 (18)
Benshangul	70 (36)	122 (73)	73 (38)
Debub-Hisboch SNPP	57 (27)	106 (71)	60 (30)
Gambella	107 (55)	147 (81)	113 (59)
Harari	62 (33)	118 (81)	89 (56)
Addis Ababa	61 (36)	116 (77)	114 (76)
Dire Dawa	37 (20)	114 (75)	81 (51)
Ethiopia	44 (23)	110 (73)	52 (29)

Source: Dercon 2000:17

¹² Run by the Economics Department of Addis Ababa University with Gothenburg University

The findings relating to illness and the use of health services is more difficult to present in a simple form.

Annex 2 contains more information on capabilities by region. These tables show considerable variation by region and even more so by woredas (selected as outliers). It would be interesting to explore these apparent ‘success stories’ for possible copying. For example Konso special woreda has achieved very high levels of child immunisation (Annexes p7), while Sidama shows particularly high enrolment rates.

2.10 Social aspects of poverty

‘Identifying the poor’

Given poverty variability measures of poverty based on survey questions asking about consumption ‘last week’ or ‘last month’ do not ‘identify the poor’ in a any useful way (Bevan and Joireman, 1997). Indeed, given the earlier analysis of ‘poverty’ with its focus on movement and diversity, it is questionable that there is ‘a poor’ to identify. Furthermore, this kind of language fits rather too easily with a view of people as passive units waiting to be ‘targeted’. This is not to say that interventions should not be designed with a focus on particular deprived categories. Rather, I would argue for the use of more meaningful social categories which relate to contextualised needs and appropriate activities. Within communities status (related to norms and identities) is a key variable which might (depending on the community) be more or less dependent on, for example, role in the community, ethnicity, caste, age, sex, wealth, religious activity, disability etc.

Table 15: Categorising ‘The Poor’ in a more intelligent way: individuals in structured relationships

Social category	Urban not-poor	Urban poor	Rural not-poor	Rural poor
Old men				
Middle-aged men				
Younger men				
Adolescent boys				
Older boys				
Younger boys				
Infant boys				
Old women				
Middle-aged women				
Younger women				
Adolescent girls				
Older girls				
Younger girls				
Infant girls				

Table 15, focuses on the more ‘non-contextual’ social features, and constructs a matrix which highlights (in the rows) aspects of socially-contextualised human biology which generate different needs. For example, male adolescents need excitement, opportunities and guidance

from adults; female babies do not need to be circumcised; old people need dignity and respect. However, these non-contextual aspects of people are always constructed and experienced in particular social and cultural contexts (which are simply differentiated in the columns).

If we then imagine a third dimension, the axis of which might be 'Disabled ' or 'HIV/AIDS'-affected, we see a variety of different experiences, needs and activities. In particular, we can identify a number of categories¹³ with potential problems which are not recognised and who have no NGO voice advocating for them, for example younger rural men or disabled girls.

In the rest of this section some of the problems of poor 'children', 'women' 'old people', and 'people with disabilities' are highlighted.

Children

Most of the problems that children face are a result of the poverty described above including poor access to food, health, education, welfare services and water. These problems are compounded by the fact that many categories of children are traditionally discriminated against including girls, the disabled, minority ethnic groups, and the children of the poorest. Also their right to participate in decisions which affect their lives is almost universally denied. They are increasingly affected by the HIV/AIDS epidemic (SCF 1999:3).

Women

The FDGE has 'declared its unequivocal commitment to the development of women' (Beijing+5 Country Report:1); women's rights are enshrined in the National Policy on Women (1993) and the Constitution promulgated in 1994. However 'implementation of the women's policy is proving to be a challenging and formidable task' (Women Affairs Office:1) particularly given regionalisation and decentralisation. A major problem is that the customary laws form part of the broader regulatory framework within which women operate. Most development interventions are currently 'gender-neutral' and interventions for women tend to consist of a number of ad hoc and unconnected projects. Since women generally do not participate in formal institutions top-down activities are not reaching them.

There seems to be very little recognition of women's roles in development, which involves producing and maintaining human, social and cultural 'capital', as well as food and incomes. There is also little general recognition of the diversity of women's experiences resulting from differences in wealth, livelihood system, and culture. For example, on the basis of analysis of household nutrition data, Dercon and Krishnan (2000) suggest that 'poor southern households do not engage in complete risk-sharing: women in these households bear the brunt of adverse shocks' (p688).

¹³ Not 'groups', since a group has some form of collective identity and interaction, which is an empirical question

Male bias against women is deeply entrenched in Ethiopian culture. During their consultations with the poor men told Rahmato and Aklilu that women did the household tasks (preparing food, taking care of children, fetching water and firewood) because they are 'physically weak' (1999:13). At the community level women are mostly limited to preparing food and drink at social gatherings. Violence against women in both rural and urban areas is common and has been going on for a long time. In the household the most common forms are beatings and forced acceptance of marriage while outside the household the most common violence is *telefa* - abducting women against their will and consent, which involves rape. However in some places women are being elected as *idir* or association chairs. The authors suggest this may be a change in culture or 'a poverty-induced deterioration of males' control over females'.

Old people

The general problems which old people suffer from include loneliness, health, and blindness. Also images of older people as dependent encourage relief-oriented solutions and there is a lack of government social security systems and policies towards older people (HAI-Ethiopia, 2000a). In rural areas old people are mostly supported by kin but this is undermined by migration and shortage of land and employment. Food relief and credit schemes often target younger age groups. Older people in urban areas are particularly affected by a weakening of traditional support systems, HIV/AIDS, 'streetism'¹⁴, poor shelter, problems of ensuring a decent burial, lack of access to health services, and very low pensions. Some of these old people are supporting dependent children.

People with disabilities

I have not had time to research this area but it should be on record that, partly as a result of wars, a substantial proportion of the population suffers disability and their issues need to be put on the development and social protection agendas.

2.11 Causes of income poverty

The extent of income poverty depends on the distribution of assets, the efficiency of their use, mechanisms for redistributing income to those unable to work, and extraneous factors such as the weather, taxes, commodity prices, diseases such as HIV/AIDS and malaria, conflict and aid. In Ethiopia, which starts from a low asset and technology base, the weather and other climatic and pest-related factors play a big role.

'Following the real GDP growth of 10.6% in FY (Financial Year) 96 and 5.2% in FY97, output contracted by 0.5% in FY98 owing to the effects of El Nino weather phenomenon on agriculture and transportation and despite an increase in non-agricultural output by 9.5 per cent. With a rebound in the Meher (long season) harvest on FY99, total output rose by an estimated 6.7 per cent. However, the recovery has been tempered by a drought in the second

¹⁴ A study reported over 2000 people living on the streets on one day; older people are vulnerable to abuse and often have to pay protection money to younger street residents.

half of FY99, which has severely affected the Belg (short season) harvest and caused a food security crisis affecting approximately 5 million persons. Moreover, the war with Eritrea, which started as a border skirmish in May 1998 and intensified into a full-fledged conflict in February 1999, has likely resulted in some slowing in non-agricultural activity, as evidence by a slump of indirect tax collections, slowing in civilian imports, and reduction in tourist arrivals.’ (IMF, 1999:9)

The conflict with Ethiopia also led to a slowdown in ODA flows and delays in debt relief (specifically the HIPIC initiative) which must affect macroeconomic performance (Jemal, 2000: 10 and Dercon, 2000) and social sector expenditure. It has also involved considerable damage, suffering and disruption of economic activity in and around the war areas, and closed down a historic source of wage labour for many Tigrayans.

Table 15: Income Inequality in a sample of countries

	Ethiopia	UK	Ghana	Zimbabwe	El Salvador	India
Gini coefficient	40.0	36.1	32.7	56.8	52.3	37.8
Percentage share of income or consumption						
Lowest 10%	3	2.6	3.6	1.8	1.2	3.5
Lowest 20%	7.1	6.6	8.4	4.0	3.4	8.1
Second 20%	10.9	11.5	12.2	6.3	7.5	11.6
Third 20%	14.5	16.3	15.8	10.0	12.5	15.0
Fourth 20%	19.8	22.7	21.9	17.4	20.2	19.3
Highest 20%	47.7	43.0	41.7	62.3	56.5	46.1
Highest 10%	33.7	27.3	26.1	46.9	40.5	33.5

The contribution of inequality to poverty is a complex topic, but it is useful to look at how current income/consumption is distributed. Table 15 shows some income inequality measures for a number of countries for comparison. The Ethiopian distribution is much better than that of Zimbabwe and El Salvador and quite similar to that of India.

2.12 Asset poverty and entitlement failure

Livelihood systems and assets

The assets which are important for production vary by livelihood system: in grain-producing areas using plough technology the major assets are land (for food production and grazing), labour and oxen (or horses in some parts); in enset-based livelihood systems livestock are important for the manure they provide which is vital for enset production; in coffee-producing areas access to coffee-washing facilities and good prices can be seen as assets; major assets for pastoralists are access to water and grazing. In rain-rich localities without population pressures people can mostly depend on agriculture as the major source of living; where these two conditions do not hold they are forced to use other assets to pursue non-farm activities. In all contexts current distributions of resources are embedded in historically

situated political and economic structures, and the related social and cultural rules governing access to these resources. Ethiopian livelihood systems and cultures are diverse; communities fill inter-penetrating ‘niches’ in a complex ecological and socioeconomic landscape (Bevan and Pankhurst, 1996). While a major distinction can be made between rain-rich rural areas and those with insufficient or unreliable rain, within and beyond these categories there is a lot of diversity. As Annex 4 shows all rural communities are sites of structured inequality; even in very poor localities there is differentiation in terms of asset ownership, status and local power.

In towns the important assets are skills, having employment and land, buildings and infrastructure as a basis for different types of self-employment. There is some fear that the institutions for accessing land are acting as constraints on urban development but I have not found a proper study of this.

Land: efficiency v security

The argument about land policy has tended to polarise into a confrontation between ‘efficiency’ and ‘security’ and often becomes over-emotional. However, some quite sensible things are said in a recent World Bank draft (1999). In practice, the Regions have primary responsibility for land administration and seem, on the whole, to be following a policy of avoiding redistribution and allowing renting of land. The Oromiya government recently decided to allow land leases for 15 years. Also qualitative studies do not suggest that fear of confiscation is preventing owners from investing; evidence can also be presented that the long history of sharecropping in Ethiopia has led to ‘the evolution of a system of informal exchange that rationalises input ratios’ thus removing some of the inefficiencies associated with ‘land market imperfections’. The fact that land cannot be used for collateral is not likely to have had much effect since rural credit markets are not very advanced; also evidence from elsewhere suggests that even if peasants can sell their land they are reluctant to mortgage if foreclosure in the event of default is seen as likely. The authors conclude that there is ‘a surprising dearth of recent research on land and before recommendations can be made a better understanding is needed. The scanty evidence that is available suggests that current land policy is not a major constraint on food security.’ (World Bank, 1999).

2.13 Coping strategies and consequences

Coping strategies can be analysed at three levels¹⁵, although individual strategies are usually (though not always) nested in household strategies, which in turn are nested in community strategies. Community-level strategies are those common strategies regularly adopted by households (such as Tigrayan migration for labour to Eritrea and elsewhere). Household level strategies are concerned with the allocation of activities and consumption among household members (such as taking a child out of school). Individual strategies relate to decisions made at individual-level (such as the decision to take up prostitution).

¹⁵ There is much more that could be said about coping strategies but not enough space

Community-level

Annex 3 describes some of the community-level coping strategies of poor people from different livelihood systems. A number of consequent problems are associated with some of the common strategies, for example:

- selling of fuel wood results in de-forestation unless there is replanting
- selling of dungcakes means that less manure is applied to the fields
- male migration for labour leaves women lonely and with heavy work burdens
- the production of *chat* creates a pool of addicts
- grain-selling and diversification leads to increasing inequality
- planting eucalyptus for sale may be affecting the water table
- food aid leads to dependency

Household-level

Households use different strategies at different times depending on their structure, position in the life cycle and the reason why they need to adopt a coping strategies. Regular strategies to maintain income levels include

- children used for labour and not educated
- early marriage for girls
- abduction of girls (to avoid the costs of marriage)

Households that are prone to food crises adopt a variety of strategies to cope including diversification, inter-cropping, and flexible production schedules. Livestock holdings are diversified and often disperse. In great crisis people will share their food with their livestock and use the thatch from their houses as fodder. Other strategies involve marketing animals and products, wage labour, sale of craft work, sale of local alcohol. Households also make changes in consumption including reducing the number of meals eaten and consuming wild food. There is evidence that children's consumption is cut first (World Bank, 1999) which will have long-term effects. Long-term food security strategy should be designed to try to prevent the use of short-term coping mechanisms with long term adverse impacts.

Individual-level

Many individual-level coping strategies are part of a process of 'adverse incorporation': people are forced to engage in short-term survival strategies which have implications for their future welfare

- eating wild foods (eg *beles*) which cause health problems
- resorting to prostitution lowers status and involves health risks
- not having time or resources to invest in their own skills

3 'How to reach the IDTs'

3.1 Ethiopia's IDTs

The International Development Targets

ECONOMIC WELLBEING

- a reduction by one-half in the proportion of people living in extreme poverty by 2015

HUMAN DEVELOPMENT

- universal primary education by 2015
- demonstrated progress towards gender equality and the empowerment of women by eliminating gender disparity in primary and secondary education by 2005
- a reduction by two-thirds in the mortality rates for infants and children under age five and a reduction by threequarters in maternal mortality, all by 2015
- access through the primary health care system to reproductive health services for all individuals of appropriate ages as soon as possible and no later than the year 2015

ENVIRONMENTAL SUSTAINABILITY AND REGENERATION

- the implementation of national strategies for sustainable development in all countries by 2005, so as to ensure that current trends in the loss of environmental resources are effectively reversed at both global and national levels by 2015

Source: DFID, June 2000

I started to try to complete Table 16 but it required more time than was available to hunt out the data (some of which may not exist). It is probably something that should be done thoroughly.

Table 16: The IDTs for Ethiopia

International Development Target	Evidence 1975	Evidence 1995	Post-1995 evidence	Goal 2005	Goal 2015
Proportion living in 'extreme poverty'					
% in primary education (gross enrollment)					
ratio girls/boys in primary education					
ratio girls/boys in secondary education					
Infant mortality rate					
Under 5 mortality					
Maternal mortality rate					
Access to reproductive health services					
Implementation of national strategy for sustainable development					

3.2 ‘How to reach the IDTs’

This phrase is part of my brief and an exploration of its ambiguity reflects some of the contradictions we currently find in the aid discourse. The IDTs were targets set outside Ethiopia without consultation with the government, and one interpretation of the phrase is that they are something to be reached by donor/DFID action. On the other hand donors want governments to ‘own’ their (pro-poor, donor-approved) policies; however, while you can be ‘in the driving seat’ you must use a donor car and drive in the direction you are pointed. Implicit in the question are six ‘sub-questions’:

- how realistic are the IDTs for Ethiopia?
- does the government want to reach the IDTs?
- does the government have the capacity to reach the IDTs?
- can donor action contribute towards the meeting of the IDTs?
- is there more to a poverty agenda than the IDTs?
- what should DFID’s role be?

3.3 How realistic are the IDTs for Ethiopia?

It will be easier to answer this question when Table 16 is completed. However, it is clear that, by their very nature, the amount that has to be done to reach the IDTs will vary by country, depending on the initial starting point, the size of the poor population, and GDP per capita. Cutting something in half is much easier if it is relatively small in the first place. The IDT targets for Ethiopia require huge changes and are probably unrealistic.

A recent study by the UNECA suggests that Ethiopia must increase its growth rate to 8 per cent per annum and sustain this over the target period if it is to reduce poverty by half by the internationally agreed year of 2015 (EEA, 1999:2)

3.4 Does the government want to reach the IDTs?

Government policy documents show a firm commitment to attacking poverty. For example, the government’s land policy is driven by the belief that the only way rural people will find security, and hence avoid destitution (if not poverty) is by ensuring that they all have access to the major agricultural asset. Similarly these documents show a commitment to improving education and health and tackling environmental problems. While there are some targets in these documents, they do not commit the government to the IDTs. While the IDTs are high priority for donors, the government has other problems and agendas which may at times be of higher priority.

3.5 Does the government have the capacity to reach the IDTs?

Table 17 shows that compared with the African average Ethiopia scores quite well on the World Bank policy and institutional assessment scores; in particular the public sector management score is relatively high.

Table 17: Country Policy and Institutional Assessment (average scores for 1998)

	Ethiopia	Africa (average)
Macroeconomic management	4.3	3.2
Sustainable and equitable growth	3.1	3.1
Reduction of inequality	3.8	2.9
Public sector management	3.9	2.8
Overall rating	3.7	3.0

3 = moderately unsatisfactory

4 = moderately satisfactory

5 = good

Source: World Bank, quoted in Berhanu, 1999 p7

However, the government itself has expressed considerable concern about the institutional capacities of regional governments and skill capacities of sectors such as education, health and agriculture. It is important that a balance is maintained between capacity-building and direct assistance to poor people.

3.6 Can donor action contribute to the meeting of the IDTs?

Table 18: Debt and aid 1990 and 1998 for selected developing countries

	External debt			Official development assistance			
	Total \$millions		Value '98	Dollars per capita		% of GNP	
	1990	1998	% of GNP	1990	1998	1990	1998
Ethiopia	8,634	10,352	135	20	11	15	10
Bangladesh	12,769	16,376	22	19	10	6.9	2.7
India	83,717	98,232	20	2	2	0.4	0.4
Kenya	7,058	7,010	45	50	16	14.7	4.2
Mali	2,467	3,202	84	57	33	20	13.5
Nigeria	33,440	30,315	74	3	2	1.0	0.5
Namibia	-	-	-	90	108	5.1	5.8
Ghana	3,881	6,884	55	38	38	9.7	9.6
Tanzania	6,438	7,603	71	46	31	29.3	12.5
Uganda	2,583	3,935	35	41	23	15.8	7.0

Source: WDR 2000/01

Table 18 shows Ethiopia's debt to be considerably more than the other countries in the sample in terms of % value of GNP. In terms of \$ per capita, official development assistance is higher in all the African countries, except Nigeria, even though, as Table 2 showed, Ethiopia is considerably poorer. If the international community is serious about its IDTs Ethiopia should be receiving considerably more ODA and its debt relief should be much higher than that proposed in the HIPC Initiative¹⁶.

However, more aid may not lead to reductions in poverty and improved capabilities. In Ethiopia's experience aid was first used to support a modernising agenda in the context of 'feudal exploitation'; privatisation of land for high technology capitalist agriculture was not accompanied by programmes for those subsistence farmers who lost access to land. Much Soviet aid, and some famine-related humanitarian aid in the 1980s, served to fuel conflicts which caused considerable human suffering and poverty. The real consequences of aid depend on donor motivations, depth of understanding of local conditions and implementation practices.

With regard to the current situation Ethiopia is one of the World Bank's Comprehensive Development Framework (CDF) countries, although this initiative seems to have been sidelined for the moment by the aid 'holiday' and the recent requirement that countries prepare Poverty Reduction Strategy papers (PRSPs) before they can access conditional assistance from the World Bank (through the International Development Association) and the IMF (through the Poverty Reduction and Growth Facility - PRGF). Until the recent ceasefire few donors were willing to make new funding commitments (apart from humanitarian relief) and the IMF programme lapsed. However, sector wide approaches in roads, education and health have laid a promising foundation for the future and the annual Public Expenditure Review exercises have become increasingly collaborative, both among donors and between donors and government. DFID provided consultancy support to the preparation of the sector programmes and the PER. The World Bank wants to re-engage in Ethiopia and its current agenda is to get the government to commit to the PRSP process.

The EC is one of the major donors and Ethiopia has been the largest beneficiary of EC support among the ACP states if both EDF resources and EC budget lines are taken into account. It is intended that EC support to education will be expanded and will focus on the quality of primary education.

3.7 Is there more to poverty attack¹⁷ than the IDTs?

Society, economy, polity and culture in Ethiopia are in the middle of a process of long-term structural change which must be understood for effective policy and donor actions to guide that change in pro-poor directions. Ethiopia is an extremely poor country. With a per capita

¹⁶ 'For a poor country such as Ethiopia, where a large majority of its population suffer from lack of daily necessities and are vulnerable to life threatening and yet easily preventable causes of death and infirmity, an annual repayment of more than US\$100 million is too much of a burden.' (EEA, 1999:282)

¹⁷ The World Bank's new word for what must be done to poverty

GDP of US\$100 the Ethiopian Economic Association has calculated that (assuming an average growth rate of 7%) it will take 24.4 years for Ethiopia to reach the average per capita GDP for Low Income Countries - US\$520 (assuming that this average does not rise at all). The focus should be economic development and growth now. While the IDTs are useful as targets in an ideological sense and as one metric to monitor what is happening, they need to be adapted for particular country contexts in a realistic manner. Also, DFID may have ideas and expertise to offer that will improve the quality of people's lives but make no direct contribution to whether they have 'enough' calories, go to school, or survive longer. Furthermore, the generally positive preoccupation of donors with poverty alleviation may lead to neglect of crucial areas of support with apparently weak direct links to poverty alleviation, for example aid for high-tech and high-skill activities.

3.8 What can DFID do to assist in the achievement of the IDTs?

DFID's past experience

The UK has been a relatively small player in aid to Ethiopia, with disbursements declining because of the phasing out of emergency and rehabilitation aid and programme aid, and also because of 'a complication in aid relations between the UK and Ethiopia in 1997/98' (Christian Aid, 1999:2). Shortly after this had issue been resolved the outbreak of the Ethiopian-Eritrean war once again caused a halt in the aid process. British aid was increasingly being channelled through the Ethiopian government rather than through NGOs. Also DFID has had a policy of funding consultants to work with World Bank Public Expenditure Reviews and to assist broader European programmes. Some small, already-financed, institutional programmes have continued.

Should DFID commit to a new aid programme in Ethiopia?

- DFID has made some very public commitments to fight poverty; Ethiopia is one of the poorest countries in the world - how is it going to justify not working there?
- The idea that aid should not be given to countries in conflict is naïve and impractical: most countries have their 'Northern Irelands'
- The idea of an 'ethical foreign policy' is very welcome but a simplistic interpretation of ethics in terms of simple *a priori* principles may lead to actions (for example stop-go aid) with 'unethical' consequences
- The IDTs are most at risk in countries in conflict and in many parts 'humanitarian aid' has fuelled and become institutionalised in long-running conflicts; to meet its agenda DFID will have to learn how to 'do development' alongside conflict reduction in conflict situations
- The relationship between DFID and the Government has suffered as a result of the 'police incident' and the war - there is a problem of trust; it may be that the only donor which currently has 'clout' (if not trust) is the World Bank

If so, what kind of programme?

GENERAL

- Ethiopia is much more ‘foreign’ to British people than other African countries, especially old colonies; understanding requires long-term commitment by the Department and the use of people with a long-term relationship with the country
- Encouraging ‘ownership’ or ‘partnership’ led by aid-recipients requires a negotiation of discourses and a recognition that the government is in it ‘for the long-haul’, unlike donor officials
- DFID has never been a big donor in Ethiopia, and has not worked there much since 1997: there is an issue as to whether it should build mainly on what it was doing before (police, large scale support for the Education Sector Development Programme, small fragmented support for the health sector) or should have a thorough rethink
- For example while four of the IDTs are health-related health has been excluded from the Horn portfolio
- Some small already-funded institutional programmes continued throughout the ‘aid holiday’, as did emergency food programmes supported by the small DFID presence in Addis Ababa; there is a feeling that emergency food programmes need reassessment in the light of new ways of thinking about livelihoods (Masefield, 2000)
- The UK has accepted that HIV/AIDS is a humanitarian crisis and a fund of £5m has recently been agreed for HIV/AIDS activities; the World Bank has allocated \$70m for these activities and UNAIDS and the national government are strengthening their programmes.
- One striking feature of the aid approach and dialogue in Ethiopia is how different it seems from that, for example in Bangladesh or Uganda; there are many lessons that DFID has learned in other countries that could be adapted for the Ethiopian experience.

BUDGET SUPPORT AND POLICY DIALOGUE

- One proposal is that DFID’s main aid contribution should be via budget support; besides contributing to macroeconomic stability (Dercon, 2000a) this would give access to policy dialogues related to the development of the PRSP and CDF frameworks and around such issues as food security, land reform, agricultural policies, and policies for non-farm rural and urban activities
- There would also be scope for DFID to introduce to the Ethiopian development discourse (in a sensitive way) some of the newer ideas and concepts developed since 1997¹⁸

¹⁸ Development discourses are increasingly recognised as powerful resources in the development process (or lack of it). The donor element in the Ethiopian discourse seems (until very recently) to be quite old-fashioned. The following list suggests some additions (not replacements) to various key ‘tropes’: food security /secure livelihoods (Abi Masefield); fertiliser and improved seeds /diversified rural livelihoods; consumption poverty and ‘human needs’/ quality of life and human rights; formal employment / smallscale enterprises and informal sector problems; ‘years of primary schooling’/ appropriate quality education for livelihood enhancement¹⁸ including adult education and informal education; health buildings and modern drugs / dialogue with informal health providers; ‘the poor’ and ‘gender’/ more socially relevant poor categories; a balanced approach to women’s responsibilities and needs in production and reproduction; ‘civil society’ as a description of ‘modern’ often foreign NGOs/ indigenous organisations

- On the other hand while there is ‘a lot of paper’ at this level it may not be where the real business is currently taking place - which is in the regions; some donors seem to be having quite good experiences in some regions and zones
- Also it may be possible to get involved in policy dialogues more cheaply, through the strategic use of consultancies

LAW, ORDER, JUSTICE AND CIVIL SOCIETY

- DFID has experience in Ethiopia and other countries in Africa in supporting training and capacity-building for police forces and armies
- The judiciary is also in need of capacity-building
- While the space for urban civil society to operate is larger than it has ever been, there is more that could be done to meet the shortage of resources and outside links of organisations such as the Ethiopian Economics Association and the gender Centre at Addis Ababa University

SECTORAL WORK: EDUCATION, HEALTH, AGRICULTURE, ENVIRONMENT, ROADS, WATER, SANITATION

Sector-wide approaches involve the coordination of the activities across federal and regional spaces, of a number of different specialists, including economists who know about budgeting, governance specialists with an expertise institution-building, sector specialists such as educationists, medical experts, agriculturists etc and social development advisers to explore the ‘demand side’ and the construction of policy on the ground; this requires coordination within DFID and with other donors¹⁹

- DFID was quite heavily involved in the Education Sector Development Programme before the aid halt; the regions of Gambella, Benshangul-Gumuz and two zones in Oromiya were the focus of the effort (it is not clear why from the documentation)
- While DFID has just committed funds for an emergency ‘humanitarian’ HIV/AIDS programme, there is plenty of scope for other useful interventions which would contribute to achievement of the IDTs
- In addition to efforts designed to meet the IDTs of increased enrolment, DFID experts have also expressed concerns about the quality and appropriateness of formal education, and the need for diverse approaches depending on circumstance
- Agriculture must play the major role in poverty reduction in Ethiopia; a sustainable livelihoods approach focuses attention on the different potentials and policy needs of different areas, and integrates concerns about environmental degradation, access to resources, gendered contributions, poverty, entitlements, food security and adverse coping strategies, and emphasises the importance, in some contexts, of off-farm livelihood diversification strategies.
- A key input to the agriculture and livestock sectors and for reproduction is water
- There needs to be more focus on poverty among pastoralist groups

¹⁹ The CDF aims to integrate programmes across sectors which will require even more commitment to coordination among donors, something they are not always very good at

URBAN POVERTY

- There also needs to be more focus on urban poverty, with an emphasis on increasing employment, supporting the ‘informal sector’ (which contains two merging ‘subsectors’: a ‘security’ sector providing household income for poor people and an enterprise sector) and improving urban services (especially water, sanitation, refuse, housing, and health)

WORKING WITH SPECIAL SOCIAL CATEGORIES

- This kind of work is currently mainly undertaken by NGOs; there is scope for building government capacity for partnerships in these areas
- Children: SCF has identified four important areas of work - improving food security, providing equitable social and welfare services, addressing the HIV/AIDS epidemic, and promoting the Convention of the Rights of the Child as a legal instrument
- Women: in terms of gender awareness and pro-women activities Ethiopia is a very long way behind countries such as Uganda
- Young men: in many areas this category is facing particular problems which require a focus
- Old people: age should not be a reason for exclusion from development opportunities
- People with disabilities
- People with AIDS

WORKING WITH REGIONAL GOVERNMENTS

- In addition to the sectoral work described above there is a need for capacity-building at regional, zonal, woreda and kebele levels; some regions are more competent than others
- There is also scope for working to help regional governments to pursue federal agendas such as gender equality and the rights of children

WORKING WITH NGOS

- The Ethiopian government is not ‘NGO-friendly’ and despite the fact many NGOs (local and international) work in the areas of health and education they have not been very involved in the design of the social sector development programmes
- NGOs are seeing a loss of funds as donors divert them to the government; while some of this goes with the shift from a humanitarian agenda to a development one, many NGOs are making this shift themselves, or are working in the growing area of social protection
- DFID might get involved in facilitating the relationship between government and NGOs²⁰.

²⁰ ‘The best contribution the Ethiopian government could make to create a more enabling environment for NGOs is to rationalise procedures for registration and coordination, to create more transparency about criteria and guidelines and to create a single window for NGOs at federal, regional and zonal levels. Relations between NGOs and government could also receive a real boost if a forum were to be established where NGOs and government meet on a regular basis to discuss issues of mutual concern’ (Christian Aid). HelpAge International also report that NGOs wishing to establish programmes for old people (predominantly churches) are constrained by the registration problems.

WIDER POLICIES THAT AFFECT ETHIOPIA

- In accordance with the British government's 'joined-up' policy approach DFID needs to bring some wider issues to the attention of other government departments
- Coffee prices
- Debt
- Security in the Horn

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Annex 1: Poverty model

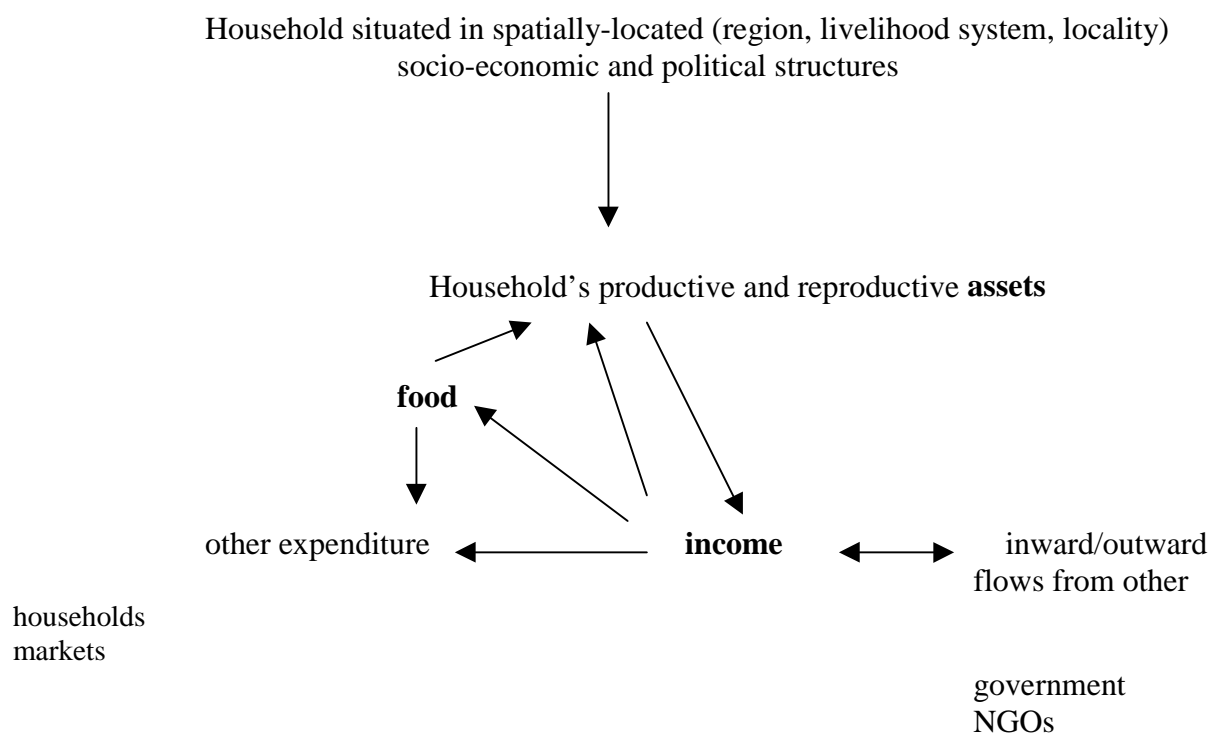
Individuals, differentiated by sex, age and relationship to others, live together in households which can be classified as poor or not. However, intra-household distributions of resources, including time, result in intra-household differences in consumption, effort and capabilities.

Households are situated in broader structures which are characterised by, on the one hand exploitation, exclusion, and conflict, and on the other redistribution, reciprocity and negotiation.

Household poverty

While poverty is usually talked about and measured with reference to households, capabilities are something that pertain to individuals. Figure 1 shows the household livelihood model underlying my analysis of poverty in Ethiopia.

Figure 1: Household Livelihood Model



The key features are:

- Households are differentially situated in spatially-located, socioeconomic, cultural and political structures in which livelihood systems are embedded; the way in which individual households pursue livelihoods will depend on their ecological situation and their productive and reproductive assets, very broadly defined to include social, cultural and political assets, in addition to the material; assets have to be viewed contextually and the extent of diversity is an empirical question.
- Through the activities of their members households use their assets to reproduce themselves and to produce goods and services; this generates flows of income (subsistence goods, cash, services) some of which is 'consumed' (personal investment) and some of which is invested in material, social, cultural and political assets.
- In peasant societies it has been argued that reproduction (of the family/clan/lineage) has been more important than either increasing production, or investing in individuals.

- The major item in personal investment is food, but it also includes expenditures on clothing, health expenditures, education; this personal investment in each member of the household contributes to their 'capabilities' (see below)
- Resources for personal investment have to be allocated among members of the household and this may be done unequally; there is a need for intra-household investigations
- There are universal needs for food and health; these can be compared across cultures using non-contextual comparisons based on consumption survey data using cash equivalents and calorific needs
- In contexts such as Ethiopia these measures are more useful as a measure of poverty at a particular time, than for identifying the poor (Bevan and Joireman, 1997)

ANNEX 2

Table 2A1: Information on the regional states and cities from the Parliament of Ethiopia website (www.ethiopia.net)

	Structure	Nationalities	Religion	Topography and climate	Major economic activities	Investment potential	Private investment
<p>Oromia</p> <p>Working language: Oromifa</p> <p>Population: 9,371,228 males 9,361,297 females 18,732,525 total</p>	<p>12 admin zones 180 woredas Bale and Borena zones = 47.5% area but 14% population Rural = 89.5%</p>	<p>Oromo 85% Amhara 9.1% Gurage 1.3%</p>	<p>Muslims 44.3% Orthodox Christians 41.3% Protestants 8.6% Traditional religions 4.2% Urban Oromia: Orthodox Christians 67.8% Muslims 24% Protestants 7%</p>	<p>Landscape of great diversity: high rugged mountain ranges, plateaus, gorges, plains. High relief over 1500m is dominant. 3 climate categories: dry, tropical rainy, temperate rainy. The highlands - mean temp of coolest month <18C; rainfall 1200-2000mm</p>	<p>Agriculture is main source of livelihood: maize, tef, wheat, barley, peas, beans, oilseeds. Coffee is the main cashcrop. In Ethiopia Oromia accounts for 51.2% crop production, 45.1% of the area under temporary crops, 44% livestock</p>	<p>Awash National Park etc- tourism Gold, platinum, nickel, iron-ore, soda ash, diatomite, limestone etc. There are goldmines in Borena and Wollega and other minerals are being exploited in other parts. Geothermal, coal and solar power possibilities; hydro generates 367,120kW</p>	<p>More than 761 investment projects - 3.4 bn <i>birr</i> - employment for > 51,728 employees</p>
<p>Amhara</p> <p>Working language: Amharic</p> <p>Population: 6,947,546 males 6,886,751 females 13,834,297 total</p>	<p>10 admin zones 1 special zone 105 woredas 78 urban centres Rural = 90%</p>	<p>Amhara 91.2% Oromo 3% Agew/Awi 2.7% Kimant 1.2% Agew Kamyr 1%</p>	<p>Orthodox Christians 81.5% Muslims 18.1% Protestants 0.1%</p>	<p>Highlands: >1500m - mountains and plateaus Lowland: 500-1500m - <i>kolla</i> - 31% total area <i>Woina dega</i> 44% <i>Dega</i> 25% Annual mean temp for most parts 15C-21C. State receives 80% of country's rain -most June-Sept</p>	<p>About 85% engaged in agriculture. Amhara is one of the major tef producing areas; also barley, wheat, oilseeds, sorghum, maize, wheat, oats, beans, peas. Cashcrops grown in lowlands: cotton, sesame, sugar cane, sunflower. 9.1m cattle, 8.4m shoats, tourism, coal, limestone, gems, etc</p>	<p>Water resources from Lake Tana and rivers provide potential for irrigation - about 450,000 has of arable land is irrigable and suitable for horticulture</p>	<p>By May 1998 362 investment projects licensed which ill provide employment possibilities for 75,883 - agriculture, industry, hotel and tourism, real estate, social services. One of main projects is a steel and brewery factory at Kombolcha.</p>

	Structure	Nationalities	Religion	Topography and climate	Major economic activities	Investment potential	Private investment
SSNNP* Working language: Amharic Population: 5,161,787 males 5,215,241 females 10,377,028 total	9 admin zones 72 woredas 5 special woredas 149 towns 3804 farmers' associations (rural) North Omo, Gurage, Sidama most densely populated; west and south sparsely populated Rural = 93.2%	More than 45 indigenous ethnic groups speaking: Sidamigna 18% Guragigna 14.72% Wolayitigna 11.53% Hadiyigna 8.53% Keffigna 5.22% Kembatigna 4.35% etc	No information on religion	Undulating land dissected by Omo river into western and eastern parts; 56% below 1500m - hottest low land Mean rain 500-2200mm; Mean temperature 15C-30C	Coffee is the most important cash crop; other crops are maize, tef, enset, potatoes and wheat	Water (fisheries, irrigation, hydroelectricity); fauna, flora, minerals - gold, coal, mineral water, clay, nickel, limestone, etc 7 preserved forests (cover of forest/ bushes approx 18%) Tourism	575 licenses issued; 1.94bn <i>birr</i> ; will create employment for 64,557 skilled and unskilled employees
Somalia Working language: Somaligna Population: 1,875,996 males 1,563,884 females 3,439,860 total	9 zones 49 woredas Urban residents: 492,710	Somali 96% Oromo 2% Amhara 0.69% Somalians 0.63% Gurage 0.14%	Muslim 98.7% Orthodox Christians 0.9% Other 0.3%	About 80% flat About 7% mountainous Lowlands 80% Temperate 15% Highland 5% Max temp 32-40 Rain 300-500mm	Most earn their income mainly from livestock, but also some crop production: sorghum, maize Commercial activity	11.15million domestic animals Natural gum Natural salt Natural gas/oil	5 investors in agriculture and 5 in food processing Up to January 1997 28.6million <i>birr</i> 140 employees
Tigray Working language: Tigrigna Population: 1,542,165 males 1,594,102 females 3,136,267 total	4 admin zones 1 special zone 35 woredas 74 towns	Tigrayaw 94.98% Amhara 2.6% 0.7% Erob 0.05% Kunama	Orthodox Christians 95.5% Muslims 4.1% Catholics 0.4%	Centuries of erosion, deforestation, over-grazing - dry - treeless plains, hills, plateaux. Annual rain 450-980mm; 39% semi-arid, 49% warm temperate; 12% temperate	About 83% are farmers; main crops teff, wheat, barley; irrigation and terracing Exports cotton, incense, sesame, minerals, handicrafts in historic cities	Small rivers suitable for irrigation dvt; tourism; gold, copper, iron ore, zinc, lead, nickel, asbestos, silica, marble, granite etc	At the beginning of 1998 there were 361 projects, 4 bn <i>birr</i> - agriculture, industry, hotel and tourism, social services, mining, construction, transport 200,238 employees

	Structure	Nationalities	Religion	Topography and climate	Major economic activities	Investment potential	Private investment
Addis Ababa City Council Working language: Amharic Population: 2.3million 51.6% female	6 zones 28 woredas 328 <i>kebeles</i> (305 urban and 23 rural) Rural = 1.2%	Amhara 48.3% Oromo 19.2% Gurage 17.5% Tigraway 7.6% others 7.4%	Orthodox Christians 82% Muslims 12.7% Protestants 3.9% Catholics 0.8% Others 0.6% (Hindus, Jews, Bauhaus, Jehovah, Agnostics)	Addis Ababa lies between 2,200 and 2,500m; warm temperate climate. Lowest and highest annual temps 9.89C and 26.64C. City rambles across treed hillsides and gullies	119,197 trade and commerce 113,977 manufacturing 80391 homemakers 71,186 civil admin 50,538 transport and communication 42,514 education, health and social services 32,685 hotel and catering 16,602 agriculture irrigated; 129,880 quintals vegetables	Tourism Industry, real estate, trade and commerce, handcrafts	1992-97 52,480 private investment projects licensed - 18 billion <i>birr</i> . This surpasses all investment undertakings of the city prior to 1991. >150,000 people will benefit from employment. Licenses given in industry, real estate, trade and commerce, hotel and tourism, handcrafts. Unemployment was 40%
Afar Working language: Afarigna Population: 626,839 males 479,544 females 1,106383 total	5 zones 29 woredas 326 farmers' associations 28 towns 32 <i>kebeles</i>	Afar 91.8% Amhara 4.5% Argoba 0.92% Tigraway 0.82% Oromo 0.7% Wolaita 0.45% Hadiya 0.013%	Muslim 96% Orthodox Christians 3.86% Protestants 0.43% Catholics and others 0.02%	In Rift valley: mostly flat - from 116m below sealevel to 2063m above Max temp 50C Range 25C to 48C Rain 187.9mm at Dubti	90% of people lead a pastoral life. Crops: maize, beans, sorghum, papaya, banana, oranges Cotton Commerce - especially salt	Salt, potash, sulphur, manganese, bentonite, aluminium, marble, gypsum, petroleum geothermal energy solar energy	60 private investors in agriculture, construction, smallscale industry services 551.2million <i>birr</i> 305,947 employees
Benishangul-Gumuz Working language: Amharic Population: 233,013 males 227,446 females 460,477 total	3 admin zones 17 woredas 2 special woredas 33 <i>kebeles</i> Rural = 92%	No information	No information	About 75% of state is <i>kolla</i> Average annual temp - 20C-25C Annual rain 500-1800mm	Farming and cattle-breeding; major products - millet, sorghum, tef, coffee, mango. Also primitive goldmining and non-sustainable charcoal and firewood production	High potential but no reserved hunting area, wildlife sanctuary or park. Gold, copper, zinc, marble	Up to Nov 1998 39 investment certificates - 332m <i>birr</i> . 30 have started functioning - job opportunities for 23,126

	Structure	Nationalities	Religion	Topography and climate	Major economic activities	Investment potential	Private investment
<p>Dire Dawa Administrative Council</p> <p>Working language: Amharic</p> <p>Population: 127,286 males 124,578 females 251,864 total</p>	<p>1 woreda 4 <i>keftegnas</i> 24 urban <i>kebeles</i> 28 rural peasant associations</p> <p>Rural = 52%</p>	<p>Oromo 48% Amhara 27.7% Somali 13.9% Somali 4.5% others 5.9%</p>	<p>Muslims 63.2% Orthodox Christians 34.5% Protestants 1.5% Catholics 0.7%</p>	<p>515km from Addis Ababa; in the <i>kolla</i> and <i>semi-kolla</i> zone. NE is relatively sparsely populated lowland with agro-pastoral and pastoral systems. SE escarpment with mixed farming. Av temp 24.8C; av rain 604mm</p>	<p>10,370 hectares of farmland produce maize, sorghum, chat, coffee, fruit, vegetables</p>	<p>Cultural and modern tourist attractions</p>	<p>136 investors in agriculture, industry, commerce, real estate, hotel and tourism, construction, transport, education, health</p>
<p>Gambella</p> <p>Working language: Amhara</p> <p>Population: 92,090 males 89,960 females 181,862 total</p>	<p>2 zones 8 woredas</p>	<p>Nuer 40% Agnuak 27% Amhara 8% Oromo 6% Mezhenger 5% and other small groups</p>	<p>Protestants 44% Orthodox Christians 24% Traditional 10% Muslims 5% Catholics 3% Others 13%</p>	<p>Mostly flat Hot humid weather Annual rainfall 615.9mm Min temp 21.1C Max temp 35.9C</p>	<p>Pastoralism Cultivation of sorghum, beans, sesame, mangoes, bananas</p>	<p>Cotton, ground nuts, sesame and other oil seeds, fishing, gold mining, petroleum, mineral water, construction materials</p>	<p>9 private investors 28.4 million <i>birr</i> 543 employees</p>
<p>Harrari People</p> <p>Working language: Harari</p> <p>Population: 131,139 about 50% male and female</p>	<p>Harrari is a town in eastern Ethiopia 19 <i>kebeles</i> in the city 58% of population is urban 17 farmers' associations in the rural part</p>	<p>Oromo 52.3% Amhara 32.6% Harari 7.1% Gurage 3.2%</p>	<p>Muslims 60.3% Orthodox Christians 38.2% Protestants 0.9% Catholics 0.55%</p>	<p>Located in the eastern wall of the great Rift valley looking over the Danakil desert to the north and Harar mountains to east. The climate is one of the most pleasant in Ethiopia; temps between 17.1C-20.2C all year rain 750-1000mm</p>	<p>Farming, civil service and commerce; crops - sorghum, maize, chat, coffee, oranges, mangoes Artisan crafts - weaving, silver and copper filigree, tanning, cutlery and blades, sandals</p>	<p>Tourism Construction minerals such as marble, granite, dolomite, asbestos</p>	<p>More than 80 investors with a capital of >200 million <i>birr</i> - employment opportunities for >10,000 people Investment in industry, agriculture, construction, mining, transport, hotel</p>

1.1994 Census (www.ethiopia.net)

- The State of Southern Nations, Nationalities and Peoples

Table2A2:Health Indicators Welfare Monitoring Survey 1998

	< 10 km to Health Centre	Health problem in last 2 months	Immunisa tion against measles	BCG	DPT	Polio	Vitamin A given	Prev- alence of diarrhoea / fever	ORS admin- istration % cases	Wasting 3-59 months	Stunting 3-59 months	Use of field/ forest sanitation
Country level	66.8	35.1	46.9	50.9	51.6	79.4	51.8	30.6	10.9	9.6	54.7	83.3
Rural	<i>61.4</i>	<i>36.4</i>	<i>43.4</i>	<i>47.2</i>	<i>48.0</i>	<i>77.9</i>	<i>48.9</i>	<i>30.9</i>	<i>10.3</i>	<i>9.7</i>	<i>56.2</i>	<i>92.0</i>
Tigray	56.0	46.7	70.2	74.4	75.6	93.1	83.6	35.1	17.8	14.4	60.3	97.6
Afar	59.9	34.7	15.5	16.1	19.5	48.6	37.2	24.3	6.1	8.3	51.4	98.1
Amhara	58.6	36.8	43.0	44.8	46.0	79.1	49.8	32.3	9.0	10.5	65.5	97.3
Misrak Gojjam	74.2	24.1	45.0	45.2	44.6	82.1	35.1	27.4	21.6	11.2	76.5	98.4
Oromiya	61.9	35.7	42.9	47.6	48.2	78.8	42.6	31.6	9.6	9.2	50.3	90.3
Somali	62.5	35.9	23.1	30.5	31.2	42.2	32.0	32.6	4.5	10.3	54.8	98.2
Ben-Gumuz	58.0	36.8	45.1	50.4	56.0	illegible	illegible	32.7	21.1	13.9	49.3	76.6
SNNPR	65.6	34.0	37.1	41.1	41.6	71.1	48.0	26.6	10.2	8.2	55.9	86.3
Konso special woreda	77.9	36.3	73.4	79.6	79.4	91.9	77.3	24.3	25.2	6.2	62.6	80.8
Gambella rural	70.4	40.8	61.5	69.5	68.8	85.2	69.1	23.8	26.7	9.1	50.2	86.1
Harari rural	91.0	32.0	58.0	75.7	71.1	88.6	86.3	33.0	25.9	6.1	47.8	96.5
Addis Ababa	87.1	13.5	59.3	57.4	53.2	88.8	84.1	10.6	15.0	5.5	41.7	85.2
Dire Dawa	86.4	47.3	66.6	75.8	73.9	87.2	84.1	52.6	10.5	10.1	30.5	91.3
Urban	<i>99.7</i>	<i>27.1</i>	<i>80.8</i>	<i>86.6</i>	<i>86.8</i>	<i>94.0</i>	<i>80.2</i>	<i>27.8</i>	<i>17.4</i>	<i>8.5</i>	<i>40.5</i>	<i>30.6</i>
Mekele	100	34.1	91.9	97.1	96.8	98.1	94.7	30.3	17.9	8.4	41.8	22.0
Harari	99.6	23.1	88.7	100	100	100	94.6	38.6	19.9	3.6	31.2	15.2
Gambella	100	39.6	85.9	93.6	84.8	98.6	85.3	31.9	40.6	13.2	25.9	59.2
Addis Ababa	99.6	16.5	90.1	93.5	95.1	97.8	90.1	19.4	26.7	4.5	34.2	10.5

Table2A3: Literacy (p92) and Enrollment ratios (p95): Welfare Monitoring Survey 1998

	Literacy			Gross enrolment primary			Gross enrolment secondary			Net enrolment primary			Net enrolment secondary		
	all	male	fem	all	male	female	all	male	female	all	male	female	all	male	female
Country level	26.6	36.3	17.1	52.3	63.2	40.7	15.6	17.4	13.7	28.6	32.5	24.6	10.2	10.9	9.6
Rural	<i>18.8</i>	<i>28.8</i>	<i>8.8</i>	<i>44.3</i>	<i>56.8</i>	<i>31.0</i>	<i>4.8</i>	<i>7.2</i>	<i>2.4</i>	<i>22.5</i>	<i>27.0</i>	<i>17.7</i>	<i>2.6</i>	<i>3.6</i>	<i>1.5</i>
Tigray	19.7	29.5	10.2	52.9	59.7	45.4	8.0	11.8	4.1	21.4	21.2	21.6	4.3	5.0	3.6
Afar	6.3	9.2	2.9	10.3	13.8	5.8	2.4	3.3	1.4	6.6	8.3	4.5	2.0	2.9	0.8
Amhara	16.1	23.9	8.1	36.8	40.7	32.6	2.8	3.4	2.3	21.5	21.6	21.4	1.4	1.6	1.1
Oromiya	18.3	28.9	7.8	41.2	57.4	23.6	4.1	6.3	1.7	20.7	26.9	14.1	2.4	3.6	1.0
Somali	6.6	11.0	2.2	9.0	12.0	5.1		0.1		4.5	6.2	2.2	-	-	-
Ben-Gumuz	24.3	38.4	9.9	69.6	94.7	42.4	6.8	11.0	2.5	35.6	45.8	24.4	4.0	6.0	2.0
SNNPR	23.0	35.4	23.0	56.6	73.7	38.1	7.8	12.2	3.4	27.2	35.0	18.9	3.8	5.7	2.0
Sidama, SNNPR	28.9	44.1	12.9	73.8	101.4	46.4	6.0	10.4	1.3	35.3	45.9	24.9	1.8	2.6	1.0
Gambella rural	31.4	45.7	17.5	106.8	117.6	95.2	11.9	22.7	1.2	55.1	56.4	53.7	5.8	11.2	0.5
Harari rural	20.3	34.5	6.4	62.3	93.1	29.0	3.0	4.9	0.7	32.6	43.2	21.1	2.1	3.4	0.7
Addis Ababa	38.5	46.4	30.4	70.6	75.0	65.9	23.9	29.8	18.0	35.7	36.4	35.0	17.9	20.3	15.5
Dire Dawa	14.1	21.7	6.0	37.3	49.9	22.5	2.4	3.3	1.4	19.8	25.2	13.3	1.8	2.3	1.4
Urban	<i>69.0</i>	<i>81.0</i>	<i>59.0</i>	<i>109.7</i>	<i>114.6</i>	<i>105.4</i>	<i>65.9</i>	<i>70.8</i>	<i>61.7</i>	<i>72.9</i>	<i>75.9</i>	<i>70.2</i>	<i>46.1</i>	<i>48.6</i>	<i>44.0</i>
Mekele	72.3	87.3	59.8	136.3	131.2	141.7	75.0	92.0	60.7	84.3	90.4	77.8	50.8	63.3	40.2
Addis Ababa	81.5	90.5	74.0	115.6	116.2	115.1	81.4	86.9	77.5	76.7	79.9	74.0	56.4	59.1	54.5

Annex 3: Coping strategies

Table 3A.1: Some rural coping strategies from different parts of Ethiopia

<i>Community</i>	<i>Food status</i>	<i>Economic coping strategies</i>	<i>Threats</i>	<i>Consequences of coping strategies</i>
Adele Keke	deficit	selling <i>chat</i> and potatoes	crop disease, failure of <i>belg</i> , insecurity, reduced freedom of movement, possible action against <i>chat</i> export	drug addiction
Sirba and Godeti	surplus	grain selling and diversification	crop diseases, pests, cattle diseases	increasing inequality (?)
Yetmen	surplus	grain selling, diversification, migration	frost in October, reduced freedom of movement to other areas, insecurity	increasing inequality (?)
Turufe Kecheme	surplus	diversification	crop diseases, institutional failure - reliance on MoA for vaccination and pesticides	increasing inequality (?)
Debre Berhan	sometimes surplus, risk of crop failure	selling dungcakes	cattle disease, rising prices of medicine and fertiliser, frost, failure of <i>belg</i>	dung not put on the soil
Adado	deficit	cash crop - coffee	coffee berry disease, fall in world coffee prices, <i>enset</i> disease, wheat and barley diseases	
Aze Debo'a	deficit, vulnerable to drought floods	migration for wage labour	price of fertiliser, floods, frost, pests, crop diseases, reduced freedom of movement	<i>de facto</i> woman-headed households
Imdibir	deficit	migration for trade and business, selling eucalyptus	reduced freedom of movement	eucalyptus affecting water table? <i>de facto</i> WHHs
Harresaw	deficit (used to be rich)	migration Eritrea and Saudi Arabia (illegal), aid	failure of <i>belg</i> & <i>meher</i> , frost, floods, livestock diseases, crop diseases, pests, shortage of grazing	<i>de facto</i> woman-headed households
Koro-degaga	deficit: no good harvest in last 10 yrs	selling firewood, in the past irrigation	drought, aphids, institutional failure including corruption which led to failure of irrigation scheme	deforestation?
Shumsheha	deficit: famine for the last 10 years	migration, aid	drought, crop and livestock diseases, pests including baboons, shortage of grazing/trees, government building airport	dependency <i>de facto</i> woman-headed households
Geblen	deficit	migration to Eritrea, eating wild food (<i>beles</i>), and aid	erratic inadequate rainfall, short-termism, lack of communal grazing land	<i>de facto</i> WHHs, dependency, tooth stomach problems from eating <i>beles</i>
Dinki	deficit	aid	aid fatigue	dependency

<i>Community</i>	<i>Food status</i>	<i>Economic coping strategies</i>	<i>Threats</i>	<i>Consequences of coping strategies</i>
Do'oma	deficit	aid, irrigation	unreliable and unpredictable rain, human livestock diseases, insects, pests, baboons, aid fatigue	dependency
Gara Godo	deficit	trading, migration, aid	overpopulation, <i>enset</i> disease, aid fatigue, reduced freedom of movement	dependency

Source: Bevan and Pankhurst, 1996

Table 3A.2: Some urban coping strategies from Debre Zeit, Addis Ababa and Dessie

<i>Community</i>	<i>Employment</i>	<i>Economic coping strategies</i>	Threats	<i>Consequences of coping strategies</i>
Kebele 11 Debre Zeit town	40% unemployed. Few with permanent employment. A few wealthy traders. Some men do weaving, carpentry, bricklaying	men - daily labour, petty trade, driving carts women - petty trade, selling local drinks	No adequate garbage collection or sanitary services - hygiene-related diseases: typhoid and diarrhoea. Health centre and school of questionable quality.	Drinking ‘The poverty prevailing in the kebele has the effects of uniting the people. Neighbours help each other, and people form more bondship at the time of need’
Kebele 30 (the Pensioners’ Area), Wereda 3, Zone 1, Addis Ababa	Large groups of unemployed. Main source of men’s income - plumbers, bricklayers, pipe workers;	Men and women do daily labour, petty trade, and begging (about a quarter of men)	Severe problems of latrines, kitchens and waste disposal; housing and crowded living conditions are major problems. Population has increased by 30% in last 10 years. Prices of consumer goods have risen. Local NGO declining resources	
Kebele 11, Dessie town	Little employment:	Men do daily labour and sell handcrafts. Men and women do petty trade and sell wood. Women sell drinks	Rapid population increase and decline in the local economy (erosion and deforestation), price rises, political changes	Drinking

Source: Dessalegn and Aklilu, 1999

Annex 4: Descriptions and distributions of wealth in 18 rural areas of Ethiopia

<i>Rural Area</i>	<i>Groups</i>	<i>Explanations of why particular households were allocated to the respective groups</i>	<i>% (no)</i>
Sirbana Godeti poor = 8% (consumption poverty measure from household survey)	1 rich	enough oxen; enough land; inherited land; leases land; sharecrops land in; rents out oxen; ox-fattening; strong farmer; enough sons;lends money; help from (educated) children; hard worker; trader; wise use of money; additional off-farm income; sells <i>tella</i>	22 (21)
	2 middle	doesn't plough; only 1 ox; being female; works at mill; sick; no helper; old age; a lot of children; unwise use of money; drunker; wife died; not enough oxen; very large family; cannot manage family	20 (19)
	3 poor	no ox; not enough or no land; rents land out; very lazy; drinker; smoker; extravagant; being female; large family; lazy wife; lazy oxen; sick children; divorced; no helper	59 (57)
Aze Debo'a poor = 9%	1 rich	cultivate large size of land; head and children engaged in off-farm activities; own more livestock; get remittances	12 (9)
	2 middle	cultivate more land and own more livestock than group 3 but less than group 1; business activities smaller than group 1	27 (20)
	3 poor	cultivate less land; own fewer livestock or none at all; some returned from resettlement; some landless; land less fertile; some are dependent	61 (45)
Adele Keke poor = 10%	1 richest	very large size of land; good quality <i>chat</i> ; some have 2 oxen; some have fertile land; some hardworking	10 (10)
	2 rich	large size of land; good quality <i>chat</i> ; some hardworking	10 (10)
	3 middle	enough land; most have good quality <i>chat</i> ;	20 (19)
	4 poor	small size of land; less quality or no <i>chat</i> ; some have large households, or no husband, or are old	14 (14)
	5 poorest	very small size of land; less quality or no <i>chat</i> ; no husband or old or sick	29 (29)
	other	disagreement about ranking	16 (15)
Yetmen poor = 12%	1 rich	owns land; sharecrops (lots of) land in; strong farmer; uses enough fertiliser; good harvests; (very) hard worker; good manager; wise use of money; hires labour; lots of oxen; crossbred cows;beehives; cash savings; moneylender	18 (11)
	2 middle	relatively good income; off-farm income; owns land; uses some fertiliser; doesn't use enough fertiliser; can manage in bad times; enough farmworking kids; enough livestock; a few livestock; small household; new household	30 (18)
	3 poor	land shortage; sharecrops land out; landless; works less hard; extravagant; no labour; no livestock; usually needs credit; dependent	52 (32)
Imdibir poor = 12%	1 rich	was/is engaged in trade; large land; large cash crops; large family; was/is government employee; inherited large land; hires labour; fertile land; have livestock;	13 (9)
	2 middle	medium-sized land; receives remittances; grows cash crops; works hard; off-farm income; land fertile	30 (20)
	3 poor	small plot of land; medium plot but large family; has lost land; land less fertile; no man in household; sick; concentrates more on wage; lazy wife; old	57 (38)

<i>Rural Area</i>	<i>Groups</i>	<i>Explanations of why particular households were allocated to the respective groups</i>	<i>% (no)</i>
Debre Berhan: Milki poor for 4 sites = 14%	1 rich	has livestock; pairs of oxen; very fertile land; unique traditional farming skill; good at saving - stores grain; works hard; inherited wealth; made fortune when administrator; moneylender; manages labour and other reciprocities well; children to help on farm	20 (11)
	2 middle	have oxen; rear livestock; strong woman; works hard	55 (31)
	3 poor	lazy; no livestock; no family worker; no oxen; large family size; bad fate; widowed; too old	23 (13)
	other	disagreement about ranking	2 (1)
Debre Berhan: Kormargefia	1 rich	>2 oxen, > 3 cows, 2-3 mares, 2-3 donkeys and other livestock; complete agricultural equipment; stored food grains; healthy; knows traditional farm skills	39 (23)
	2 middle	1 ox; 1 cow; a few sheep; older; widow; no land	25 (15)
	3 poor	no livestock; widow; old; ill; displaced	25 (15)
	other	disagreement about ranking	10 (6)
Debre Berhan: Karafino	1 rich	small family size; oxen; children to help on farm; grain in stock to last at least 1 year; rear livestock	47 (18)
	2 poor	no land; no livestock; large family size; not able to feed themselves	45 (17)
	other	disagreement about ranking	8 (3)
Debre Berhan: Fagy and Bokhafia	1 rich	wealthy people wiped out in the fall of the feudal system (1974)	4 (1)
	2 middle	has livestock: land; pairs of oxen; strong farmer; rears livestock; children to farm; sells milk	44 (11)
	3 poor	old; no land; no livestock; gives land for sharecropping; works as day labourer;	24 (6)
	other	disagreement about ranking	28 (7)
Turufe Kecheme poor = 14%	1 rich	many livestock; inherited land and wealth from before Revolution; off-farm income; share-rents land in; hardworking; was PA/ <i>wereda</i> official; good at using income; enough male labour; keeps farming seasons	14 (15)
	2 average	good farmer; good house manager; has leprosy; hardworking; recent farmer; large family; extravagant; 2 families; enough labour; enough land;	20 (21)
	3 poor	enough farm but less male labour; lazy, drinker, smoker; large family/ies; less land; new household; old; sick; female-headed; gets remittances; no male labour; returned from army;	25 (26)
	4 very poor	not enough land; rents land out for cash/ share-cropping; no oxen; new farmer; old; sick; no male labour; lazy	27 (28)
	5 very very poor	gives land to sharetenant; no oxen; lazy; no male labour; very old, female-headed; ill	12 (12)
	other	disagreement about ranking	2 (2)

<i>Rural Area</i>	<i>Groups</i>	<i>Explanations of why particular households were allocated to the respective groups</i>	<i>% (no)</i>
Adado poor = 15%	1 rich	have many plots; saving in the form of cash; have sufficient coffee/ <i>enset</i> ; have sufficient clothes; do not borrow; galvanized iron roofs; can use effectively what they have; produce many products and sell some; employ daily labourers	7 (9)
	2 middle	fewer plots than rich; cannot overcome problems of coffee berry disease; less coffee and <i>enset</i> than rich; have sufficient land; work day and night to compete with rich farmers; able to manage household; do not borrow; roof made of thatch (sometimes galvanized iron)	24 (33)
	3 poor	a very small plot; inadequacy of farm product for food consumption; employed in SC coffee milling; work for individuals; do not have savings and exposed for borrowing; roof of <i>enset</i> leaves	23 (32)
	4 very poor	no land and food consumption; employed in coffee milling; employed in local households and town for daily food consumption; or go to Shakiso goldmining; unable to borrow since have no collateral; house of twig and <i>enset</i> leaves; those who are drunkard; those who are going to steal if there is a possibility	31 (42)
	other	disagreement about ranking	15 (21)
Shumsheha poor = 16% after food aid; poor = 36% before food aid	1 rich/ middle	none in Shumsheha	0
	2 poor	has land; livestock; oxen; very strong	22 (33)
	3 very poor	no oxen; no livestock; old; has nothing; sick; only income from sale of firewood; gives land for sharecropping	78 (116)
Harresaw poor = 20% after food aid poor = 61% before food aid	1 rich	land; 2 oxen; sheep, goats, beehives; relatives working abroad (eg Saudi Arabia)	6 (5)
	2 middle	1 ox; a few livestock	10 (8)
	3 poor	no oxen; no livestock; may have chicken/sheep	18 (15)
	4 very poor	possess "nothing"	63 (53)
	other	disagreement about ranking	4 (3)
Dinki poor = 46% no food aid	1 rich (none)	?	0
	2 middle (maybe 1)	can manage during problem periods	0
	3 poor	too many children; sick; no plough; not enough land; widow; no inputs; no oxen; only 1 ox etc	100 (87)
Do'oma poor = 60% no food aid	1 very rich	more livestock (50-250); provide oxen to many households as sharecropping arrangement; own irrigated land; large amount of food stocks and cash savings ABOUT 5 FARMERS IN PA: NONE IN SAMPLE	0
	2 rich	more livestock (about 10), irrigated land; fertile land; enough family labour; sharecropper by providing oxen; very hardworking; large cash saving; occasional trading in livestock; off-farm income	12 (9)
	3 middle	fewer livestock; 1 or no ox; irrigated land; hardworking; drunk; extravagant; off-farm income; some own non-irrigated land	9 (7)
	4 poor	young household; no irrigated land; landless; irrigated land sharecropped out; sick; lazy; no livestock; old; land not fertile; large family; livestock death	19 (14)
	5 very poor	female-headed household; too old to work; no livestock; dependent; sharecropping for oxen; hardworking; very large family; landless; new settler; land fallow; wage labour; selling firewood	51 (38)
	other	disagreement about ranking	8 (6)

<i>Rural Area</i>	<i>Groups</i>	<i>Explanations of why particular households were allocated to the respective groups</i>	<i>% (no)</i>
Korodegaga poor = 61% after food aid poor = 81% before food aid	1 rich	2 oxen; lot of cattle and goats; sharetenant; owns camels; hardworking	16 (18)
	2 middle	large family size; works hard; enough labour but less cattle; enough livestock but works less hard	43 (47)
	3 poor	few or no cattle; old; works less hard; not enough male labour; sick;	38 (41)
	other	only 1 ox; disagreement about ranking	3 (3)
Geblen poor = 62% after food aid poor = 80% before food aid	1 middle	own more livestock (ox, cow, goat) than others (more than 2); land near river	6 (4)
	2 poor	own less livestock; capable of farmwork; have marketable goods (oranges, tomatoes etc); can collect firewood	48 (31)
	3 very poor	no livestock; old; ill; cannot manage farm activities; dependent on relatives or government;	46 (30)
Gara Godo poor = 76% after food aid poor = 78% before food aid	1 rich	active in trade and agriculture; strong farmer; educated; state employee	12 (11)
	2 middle	middle class income gaining farmer; all have enough land and ploughing oxen	24 (23)
	3 poor	all have land but not enough oxen or labour power so they share 1 ox from another	36 (35)
	4 very poor other	no oxen and therefore they sell their labour and their land in rental form disagreement about ranking	25 (24) 3 (3)

ANNEX 5

Notes from Meles speech, April 2000

- real economic growth has been initiated, although the impact on livelihoods may have been marginal
- our economic progress has significance for our meaningful survival as a nation
- we realise that drought is not a recurrent shock but a part of regular life and that this recognition will require a new approach - we must learn and adapt ADLI
- peace is essential for development in economic and political domains
- Eritrea has tried to exploit the Government's pro-poor agenda; we had reduced defence expenditure to 2% and demobilised 500,000 troops
- Ethiopia is being asked to make a choice between national dignity and cooperation with its international partners. We are now asking ourselves can we realistically make economic progress and hold on to our national dignity

Response to panel questions

land tenure

- we believe in a fair and equitable distribution of productive assets
- before commoditisation there must be a degree of meaningful off-farm employment generation and industrial take-off; major social disruption would undoubtedly occur as a result of land sales
- a significant unemployed and unemployable sector would result
- we do not believe that those who would buy land from others would necessarily be those who use it best and would expect to see speculation and land rental
- out only 'holy cow' is protecting the interests of the rural poor - the vast majority
- we have made clear that access is a permanent right passed on through inheritance although we may redistribute if necessary
- in the short term there may be instances of land allocation that are unfair and/or economically irrational
- in the longer term if there is successful agricultural growth non-farm employment will rise and labour will be attracted from agriculture; with fewer hands to work the land pressure on land would decrease
- if there is not successful agricultural growth there would be a need to act flexibly on short-term basis to accommodate rural needs
- we are not closing creative opportunities for improved security if we feel the moves would be favourable for economic growth

agriculture

- our strategy needs to be based on the recognition that good rain is an exception in many parts of the country; we need to speed up and think about voluntary resettlement
- the future of cereal production in these areas is uncertain; we need to concentrate on environmental protection, agro-forestry and livestock development
- we are revisiting our food security strategy in low potential areas; the two main components of our future strategy will be resettlement and diversification to more appropriate agricultural practices

politics

- we recognise that the independent peasant voice is essential and that at present they are not as organised or independent as they should be; we hope to press on with our efforts to promote independent peasant cooperatives

women, the old and children

- in a situation of successful agricultural growth labour would be attracted away from agriculture - women, elderly and infants would remain in rural areas

relations with donors

- institutional reform is now a key issue for us; we will undertake these reforms with or without external assistance - our reform programme is in no way conditional on external support

ANNEX 6

Table 6A.1: A ‘bottom-up’ view of illness and treatments from 15 Ethiopian sites

Site	Diseases (reported from village)	Traditional treatment sought	Non-traditional facilities available
Adele Keke	women: "lung cancer", diarrhoea, malaria, liver, inability of giving birth men: malaria, "lung cancer", gastritis, amoeba, coughing, colds, diarrhoea children: meningitis, <i>tiktik</i> , measles, diarrhoea, TB, polio, anaemia, amoeba	Traditional herbalists and traditional midwives in PA; bonesetters in near PAs; sheiks and <i>kabiras</i> (religious with lower status than sheiks) who can heal sick and harm others through magic spells.	Health centre: typical visit costs 10 <i>birr</i> ; drugs at time of visit - chloroquine, promethazine. preventive programmes: latrine construction.
Sirba and Godeti	women: malaria, influenza, eye diseases, "emergency", gastritis, pneumonia, measles men: malaria, pneumonia, <i>moyale</i> , influenza, measles children: diarrhoea, vomiting, malaria, pneumonia, measles	Traditional prevention and treatment included eating black <i>tef</i> pancakes with oil (diarrhoea), cut herb leaves and juice applied to the body and taken internally (pneumonia), and other unspecified traditional treatment.	Malaria, diarrhoea, vomiting, and pneumonia are treated at the hospital
Yetmen	women: TB, breast cancer, haemorrhoids, typhus, FUO, VD, trachoma, arthritis, gastritis, rabies, anthrax, leprosy men: typhus, TB, haemorrhoids, rubella, FUO, VD, gastritis, anthrax, meningitis, diarrhoea, trachoma, arthritis, elephantiasis, leprosy children: diarrhoea, rubella, <i>wosfat</i> , amoeba, GIG, FUO, typhus, trachoma	Overwhelming majority use traditional medicines. Traditional remedies include drinks and eardrops made from herbs, creams for rubbing on the body made of herbs, and eating bat's flesh cooked in <i>wat</i> (for hepatitis). <i>Tsebel</i> (holy water) is also used.	Some used to get modern drugs from a shop owned by a retired health assistant but closed down because he had no licence. As last resorts they use health clinics and hospitals.
Turufe Kecheme	Women: gastric stomach, kidney, leprosy, asthma, gynaecology, TB, colds, malaria, headache, eye problems Men: liver, TB, kidney, gastric, leprosy, eye problems, malaria, colds, headache, gonorrhoea Children: measles, throat infections, coughing, diarrhoea, persistent itching, body-swelling disease, fever, bronchitis, pneumonia, meningitis, dry cough, eye sickness	Traditional treatments include drugs made from local herbs, and burning swelling with hot iron. Self-treatment include bleeding the joints of an arm by slightly pricking the blood vessel with a blade. People also keep houses clean.	Shashemene General Hospital is about 2.5km from the PA; it provides general health services, a leprosy centre and eye clinic.

Site	Diseases (reported from village)	Traditional treatment sought	Non-traditional facilities available
Debre Birhan	<p>women: flu, stomachache, <i>mitch</i>, kerato conjunctivitis, meningitis</p> <p>men: kerato conjunctivitis, flu, stomachache. <i>mitch</i>, meningitis</p> <p>children: flu, stomachache, <i>mitch.</i>, kerato conjunctivitis, meningitis</p>	A respondent said farmers prefer witchcraft; hospitals are places where people die. Another said disappearance of forest makes it hard to find herbs.	Nearest clinic to Fagy in Debre Birhan (10km); clinic at site is closed most of the time. Hospital in Debre Birhan: most frequent illnesses: TB, broncho-pneumonia; AIDS patients recorded 1986EC 60 male, 40 female.
Adado	<p>women: <i>butan</i> (a local form of sorcery), diarrhoea, <i>banko</i>, <i>chineha</i>, <i>kerssa</i>, <i>arshu</i>, <i>sida sirbu</i></p> <p>men: typhoid, relapsing fever, TB, arthritis, cancer (<i>luta</i>), gonorrhoea, <i>ruga (aba koda)</i>, diarrhoea</p> <p>children: measles, diarrhoea, typhoid, <i>nehessa</i>, <i>keleto</i>, <i>sulla</i>, <i>chenicha</i></p>	All the diseases listed by women had some connection with sorcery, magic, or social impropriety. There are traditional practitioners in the community.	Health clinic (typical visit costs 3 <i>birr</i>) provides EPI, family planning, public health and medical treatment (the community only identified the last). They have in store antibiotics, antihelmints, analgesics, antiasthmatics, first aid, antiseptic, antifungal drugs.
Aze Debo'a	<p>women: cancer, kidney, malaria ascaris, colds, amoeba</p> <p>men: cancer, ascaris, kidney, amoeba, gastric, typhoid, yellow fever, asthma, headache, tapeworm, eyesight, tooth disease</p> <p>children: amoeba, ascaris, tooth disease, common cold</p>	People try traditional treatment before going to the clinic. Home treatment includes garlic, salt, lemons, and some herbs.	Health centre is planned for the community; now go to Durame (4km). The nearest hospital is 70km.
Imdibir Haya Gasha	<p>women: toothache, backpain, eye disease, earache, gastritis, "sharp pain", amoebic dysentery, heartburn, abdominal pain, severe headache</p> <p>men: gonorrhoea, gastritis, toothache, amoebic dysentery, severe headache, pneumonia, eye disease, liver, TB, mental illness</p> <p>children: dysentery, vomiting, <i>tiktik</i>, measles, <i>gudif</i>, coughing, fever, eye disease</p>	Self-medication includes the root of a special <i>enset</i> plant. There are 2 types of traditional medicine: ritual (a spiritual healer called <i>Yeway demam</i>) and non-ritual (bonesetters and herbalists).	The health facility most frequently used is Imdibir clinic (4 dressers, not enough drugs, take prescriptions to private drug shop) Vaccination programme v TB, tetanus, polio, measles. Typical visit costs 3-5 <i>birr</i> . There is a nurse at GM clinic (5 km). Most frequent illnesses seen at clinics: trachoma, malaria, intestinal parasites, other respiratory illnesses.
Harresaw	<p>women: coldness, coughing, fever</p> <p>men: cough, fever, measles, childbirth, backpain</p> <p>children: measles, cough, fever</p>	Traditional treatment includes cutting the ill parts with a blade to make it bleed, going to holy water, smoking the leaves and roots of plants.	Many go to health centres and even hospitals. There have been epidemics of typhoid (1984 - 112 deaths and 87 - 127 deaths) and polio (1991 - 80 children died). Local health clinic only provides first aid (typical visit costs 0.50 cents)

Site	Diseases (reported from village)	Traditional treatment sought	Non-traditional facilities available
Korodegaga	<p>women: malaria, TB, gastric, amoeba, headache, eye problem, teeth problem</p> <p>men: malaria, amoeba, diarrhoea, TB, gastric, eye problems</p> <p>children: malaria, stomach problems, colds</p> <p>The Awash river brings a lot of waste from factories and hotels which is in the drinking water.</p>	The only traditional treatment mentioned was cutting the tonsils of children but there are traditional practitioners and sheiks.	A dresser can give first aid, tablets and injections and buys drugs etc from the nearest Red Cross shop. Drugs at the clinic include chloroquine, anti bacterium, tetracycline, measles drugs, and ORS. A typical visit costs 5 <i>birr</i> . The malaria control centre is 25km - too far for residents (you have to wait there 2 days)
Shumsheha	<p>women: diarrhoea, malaria, conjunctivitis, whooping cough</p> <p>men: malaria; typhoid; diarrhoea, meningitis, toothache, conjunctivitis</p> <p>children: diarrhoea, marasmus, conjunctivitis, whooping cough</p>	There are many <i>wogeshas</i> (bonesetters), <i>kalicha</i> , and <i>bale wukabi</i> . <i>Tenquay</i> are most revered.	There is a non-professional, inexperienced person who randomly prescribes medicine. There is no clinic in the PA: the nearest is 12 kms (2 doctors, 6 nurses, 13 health assistants, 1 pharmacist - free for those who cannot pay (75%). Nearest hospital 110kms.
Geblen	<p>women: pain on pelvic bone, headache, gastritis, trachoma</p> <p>men: typhoid fever, flu, malaria</p> <p>children: malaria, dental pain, headache/anaemia, gastrics</p>	The nearest traditional doctor is 1/2 km from the village; the initial fee is a cup of coffee. Children's teeth are harmed by eating cactus; teeth are pulled by people in the village (the fear contamination by HIV at clinic). There is healing water near the village (45 minutes on foot).	The nearest pharmacy is 22km. The nearest clinics and pharmacies are 22 km and the nearest hospital 25km; they have to travel on foot (4 hours).
Dinki	<p>women: malaria, typhoid, <i>mogne bagegne</i>, measles and false measles, mumps, fever</p> <p>men: malaria, typhoid, <i>mogne bagegne</i>, headache, fever, waterborne diseases, joint pains, trachoma, flu, false measles and measles, elephantiasis, haemorrhoids</p>	There are traditional practitioners in the village.	There is no health clinic in the village; the nearest is 10kms (no doctor, no nurse, irregular supply of drugs, course of malaria drugs costs 3 <i>birr</i>); nearest assumed hospital 66km; nearest pharmacy 70 kms.

Site	Diseases (reported from village)	Traditional treatment sought	Non-traditional facilities available
Do'oma	<p>women: malaria, <i>alta</i>, arthritis, abdominal ache, elephantiasis, tropical ulcer</p> <p>men: malaria, <i>alta</i>, arthritis, diarrhoea, eye disease, elephantiasis, abdominal ache, tropical ulcer, breathing problems</p> <p>children: malaria, fever, headache, tropical ulcer, diarrhoea, pneumonia, common cold</p>	The people use extensive traditional medicine including <i>aste</i> (heating with wood), bird's waste mixed with water, shell worn to protect from evil eye, bleeding, and herbs.	The nearest clinic is in Wacha; the hospitals in Arba Minch and Sodo. The Wacha clinic has 3 nurses, 7 dressers and 10 health assistants; it gives vaccinations, health education and family planning guidance at Do'oma once a month. The "top" diseases in the clinic are malaria, anaemia, intestinal worms, and lung sickness.
Gara Godo	<p>women: yellow fever, rheumatism, malaria, <i>gergeda</i>, eye problems, toothache, diarrhoea, headache, cough, <i>wugat</i>, amoeba, asthma, anaemia</p> <p>men: yellow fever, diarrhoea, TB, eye problems, toothache, malaria, cold, gastritis, cough, hepatitis, amoeba, asthma, anaemia</p> <p>children: tonsillitis, gum, eye problems, stomachache, fever, <i>yewof</i>, cough, tetanus</p>	Traditional treatment includes herbs, cutting the tonsils, avoiding taboo food, and bone manipulation.	The health clinic in the PA has no doctor or nurse. It has a regular supply of drugs and vaccines; a course of antibiotics costs 10 <i>birr</i> . The nearest maternity clinic, doctor, nurse, and pharmacy are 13km. The nearest hospital is 43km.

