

PUTTING YOUNG PEOPLE INTO NATIONAL POVERTY REDUCTION STRATEGIES

A GUIDE TO STATISTICS ON YOUNG PEOPLE IN POVERTY





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GUIDE COMMISSIONED BY UNFPA



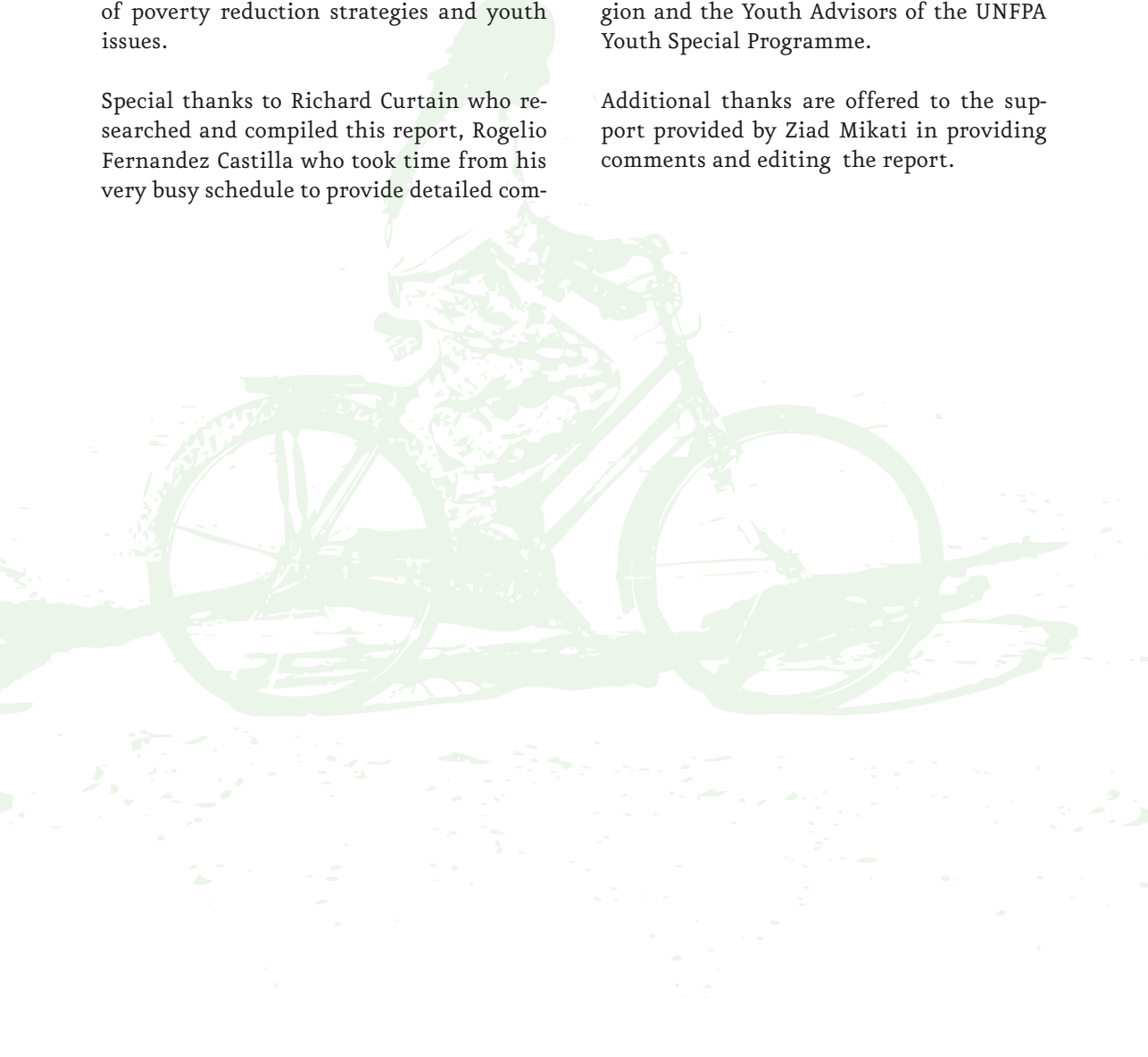
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OVERVIEW

Many national poverty reduction strategies overlook the needs of young people. Even where national strategies do have a youth focus, the analysis of their situation is limited because little or no reference is made to readily available data. For those advocating on behalf of young people in poverty, considerable scope exists to make use of simple but reputable statistics to mount a strong case for Governments and civil society to allocate more resources in addressing poverty among this major population group.

The purpose of this guide is to show how relevant statistics on young people in poverty can be easily sourced for use in developing national poverty reduction strategies. The guide shows how to use accessible databases on the Internet to provide individual countries with sophisticated statistical profile of young people in poverty.

Use of data at three levels to compile a profile of young people in poverty

The available data can provide a profile at three levels of young people in poverty. At the broadest level, it is possible to show how significant young people, defined as a specific age group, are in a country's basic demographic structure now and in the future. The second level focuses in on the incidence of young people in poverty, using, for example, national averages based on Millennium Development Goals indicators. A third level of data offers a more differentiated picture of young people in poverty. This involves presenting detailed data, tak-

ing into account young people's differences by gender, rural/urban location, where the data is available, household poverty status.

Use of age profile

The starting point for a profile is to highlight the socio-economic implications of young people as a broad age group in their country's population age structure. A population age pyramid can be used to show young people's place in the total population and their share of the working age population aged 15 years and above. The policy implications of a 'youth bulge' can then explored. This might be in terms of the potential for a demographic bonus. Or alternatively, a large youth share of the adult population may indicate a source of pressure on limited resources such as jobs, increasing, where other conditions are conducive, the risk of civil conflict.

Use of national averages

The guide then shows how statistics can be assembled for a specific county in relation to the youth-oriented Millennium Development Goals. The limits of the MDG indicators are discussed and alternative indicators suggested that better reflect the underlying goals. For example, the lack of a focus in the MDGs on young people's reproductive health is addressed by showing how national data on adolescent mothers aged 15 to 19 years can be accessed.

Compiling social vulnerability profiles

Finally, the guide shows how to use more



complex data sources to produce social vulnerability profiles for young people in poverty. These profiles can highlight to Governments whether a pro-poor focus in program design and delivery is required. This is in contrast to the traditional, but unexamined, universalist approach of providing the same level of service to all. Readily available household survey data for over 50 developing countries can be used to show how

a young person's household poverty status is related to exposure to major health adverse events. A social vulnerability profile can also show whether differences in young people's household poverty status is related to education and health outcomes and their access to the services.

I. INTRODUCTION

The potential resource young people in developing countries represent and the hurdles they face in realising their potential are major themes of the World Bank's flagship publication: World Development Report 2007: Development and the Next Generation. However, few countries analyse in depth the situation of young people in their national poverty reduction. A 2006 review on the youth focus of the Poverty Reduction Strategy Papers shows that little or no use is made of a wide range of readily available statistics on young people in poverty. The challenge for advocates is to make good use of readily available statistics to ensure that governments and civil society do not continue to overlook the needs of this major population group.

1.1 OBJECTIVE

This guide shows how reliable data sources can be accessed easily to highlight the situation of young people in poverty. The guide's aim is to show how to use available data to identify young people in poverty so that their situation can be addressed in a national poverty reduction strategy. Readily available data can be used to show how young people are experiencing poverty and who, in terms of gender, location and poverty status, should receive the most attention in efforts to alleviate poverty.

Age range defining young people

Defining young people for public policy purposes by reference to a specific age group is difficult. This is due to the length of time

many young people in poor countries can take to overcome the hurdles they face in their transition to adulthood. The age range of 15-24 years adopted by some UN agencies is often only used, if only for statistical convenience. UNFPA and UNICEF prefer to start at age 10 but are unclear about the upper age limit. The World Bank has used the age range of 12-24 years in its World Development Report. Individual countries often adopt much broader age ranges, covering adolescence to the end of young adulthood. This guide follows UN practice and focuses on 15-24 year olds. However, in most cases the data available permit a variety of age groupings to be used.

Intended audience

The guide is aimed to in-country staff of international agencies, and other stakeholders such as NGOs, to assist them raise the profile of young people in poverty. It is assumed that the focus of their efforts will be some form of engagement with the poverty reduction strategy process, ranging from providing input into its initial formulation, assessing different policy options or being part of a subsequent review of its effectiveness.¹

1.2 USING EVIDENCE TO LEVERAGE POLICY CHANGE

The three levels of data outlined in this guide to statistics on young people offer three main leverage points for influenc-

¹ See Attachment 1 for more information about the brief for the guide.



ing policy makers. First, by showing the current and future youth age profile in a country's population age structure, governments have to address the bigger picture. The motive for policy makers to act may be a positive one, such as seeking to realise a potential 'demographic bonus' from decreasing fertility, if one is in the offering. Alternatively, evidence of a youth bulge in the adult population now and in the future, together with the likely persistence of a weak economy and poor governance, may encourage governments to see the problems faced by young people as a national security concern.

Evidence of the shortfall in citizen entitlements to their economic, social and cultural rights can be a second point of leverage on governments. This shortfall can be shown by comparing a country's progress towards the targets of the Millennium Development Goals with that of neighbouring countries or with regional aggregates.

The third way that statistics can put pressure on policy makers is by showing the

extent of inequality among young people within a country. Making public the link between socio-economic differences in access to basic education or health services, makes it hard for Governments to hide behind general claims that these services are available to and benefiting all.

What sort of data are readily available?

This guide presents quantitative data from mainly three sources: UN population projections based on official census results, Millennium Development Goal indicators and recent demographic and health survey results for over 50 countries.

The data sources presented in this guide meet the following three criteria:

1. they have high credibility and are generally regarded as 'best available';
2. they are easily accessible on the Internet; and
3. the data are based on recognised definitions to enable comparisons be made between countries and geographical regions.

1.3 REVIEW OF YOUTH FOCUS IN PRSPS

The World Bank and the International Monetary Fund launched the Poverty Reduction Strategy (PRS) Initiative to help make public policy in low-income countries more effective in reducing poverty. Poor countries seeking debt relief have been required to show how they plan to use the savings from the debt relief to reduce poverty. The Poverty Reduction Strategy Papers (PRSPs) are the product of this process.

A review of the youth focus in 55 PRSPs to April 2006 shows that young people are under-represented, despite their large share of the populations of poor countries.² Only one in five poverty reduction strategy papers identify young people as a major group vulnerable to poverty. Another one in three PRSPs identify in a minor way young people's vulnerability to poverty. One in four PRSPs identify youth as merely one of several groups vulnerable to poverty.³

Few PRSPs take an integrated view of the needs of young people in the proposed policy responses. While seven out of ten PRSPs mention young people in their action plans, only four out of ten address youth issues as a key goal. Three out of ten action plans do not mention youth at all. In most cases, the focus on young people is not part of a coherent cross-sector approach to addressing the needs of the young. Even where young people are a focus in the PRSP action plans, there is little follow-through in terms of specific targets or budgetary allocations for implementation.

² Curtain, R; 2006, 'Young people and national poverty reduction strategies: a content analysis of completed PRSPs to April 2006', October.

³ See Note 2.

Limitations of available poverty data in PRSPs

The review also shows that even where young people are acknowledged to be a major group in poverty, little or no use is made of systematic data to show the extent and nature of the problems experienced by young people. Of the post-September 2003 PRSPs, only Serbia's PRSP is the exception to this finding.

However, this is not a problem confined to analysis about young people. In general, PRSPs make limited use of available data on the Millennium Development Goals for their countries. Most PRSPs also fail to make use of available standardised survey data with their considerable potential to map the nature and extent of poverty at country level. Despite the fact that Demographic and Health Surveys (DHS) have been conducted in 27 countries which have completed PRSPs, only 8 PRSPs make use of these surveys to identify groups in poverty.

The review shows that there is considerable scope to use more data to explain why investing in young people is important to





reducing poverty, what aspects of poverty young people in particular experience and which groups of young people are the worse off.

1.4 THREE DIFFERING POLICY PERSPECTIVES ON YOUNG PEOPLE

The PRSP review also identified three broad policy perspectives which are used to define young people in poverty. These perspectives are based on the common rationales for public policy interventions for this age group. From a close reading of the Poverty Reduction Strategy Papers, it is clear that most policy makers see young people as either:

- vulnerable or alienated to be protected or helped;
- a threat to the civil order and responded to as such; or less commonly
- as an asset to be fostered.⁴

Although in theory, these perspectives are not mutually exclusive, in practice the formulators of the Poverty Reduction Strategy

Papers tend to take one perspective. It is important, therefore, to counterbalance an emphasis on young people as vulnerable or a threat with attention to how to make the most of young people's potential. Indicators about young people and poverty can highlight both their exposure to adverse events and the scope to empower young people to lower these risks.

The youth-oriented Millennium Development Goals can be used to highlight both the negative and the positive. Table 1 outlines how youth-oriented indicators may illustrate more than one of the above policy perspectives. The literacy rate of 15 to 24 year olds, for example, can be used to highlight the vulnerability of those who are not literate or alternatively the potential asset the younger generation offers compared with a lower literacy of older generations. Another example is the unemployment rate of 15-24 year olds, an indicator for Millennium Development Goal 8. The youth unemployment rate could be evidence of either the marginal position young people occupy

⁴ See Attachment 2 for evidence from the PRSPs to illustrate these different perspectives.

in society, the potential threat frustrated young unemployed represent or it could show the extent to which unemployed young people are a 'wasted asset'.

Two MDG indicators in Table 1 have been included as youth-oriented indicators because a large proportion of the people they

refer to are young people. In relation to the proportion of population below \$1 per day, a third or more of the adult population in many developing countries are aged 15-24 years. The prevalence of children under five years of age who are underweight reflects in many cases the poverty of mothers who are teenagers and aged 20 to 25 years.

TABLE 1: HOW YOUTH INDICATORS CAN ILLUSTRATE THREE COMMON POLICY PERSPECTIVES ON YOUNG PEOPLE

Youth-oriented indicators	Shows young people as vulnerable or alienated	Shows young people as potential threat	Shows young people as a potential asset
Relative share of young people in total population now and in the future		✓	✓
15-24 year olds as proportion of working age population aged 15 yrs +		✓	✓
MDG indicator 1 Proportion of population below \$1 per day	✓		✓
MDG indicator 4 Prevalence of underweight children (under-five years of age)	✓		✓
MDG indicator 8 Literacy rate of 15-24 year olds	✓		✓
MDG indicator 9 Ratio of girls to boys in primary, secondary & tertiary education	✓		✓
MDG indicator 10 Ratio of literate females to males of 15-24 year olds	✓		✓
MDG indicator 18 HIV prevalence among 15-24 year old pregnant women	✓		
MDG indicator 45. Unemployment rate of 15-24 year olds	✓	✓	✓
Subgroups of young people, differentiated by gender, age, location and wealth status and attainment of education or health status	✓	✓	✓
Subgroups of young people, differentiated by gender, age, location and wealth status and access to services	✓	✓	✓
Subgroups of young people, differentiated by gender, age, location and wealth status and exposure to adverse events	✓	✓	✓

II. USING LEVEL 1 DATA TO PRESENT A POPULATION PROFILE



START WITH THE BIG PICTURE

The first step in building a profile of young people in poverty is to highlight to policy makers the size of relative share of young people in the population of the country, now and in the future. This initial step also involves showing how a country's relative youth share compares with other countries and what the implications of this comparison may be.

POPULATION AGE PYRAMID

The population age pyramid provides the best overview of the age sex distribution in five year age cohorts of a country. A population age pyramid uses bar graphs to represent the percentage or number of people in each age-sex group. By convention, the younger ages are at the bottom, with males

on the left and females on the right.⁵ In contrast to a typical bar graph, the graphs are on their sides with the axis in the middle. This means that they often take the shape of 'pyramids' as the size of the population in the upper ages is usually smaller than that in the lower ages. The population pyramid graph allows easy comparison of the relative size of age and sex groups at a glance.⁶

STEP 1.1

CHOOSE A POPULATION DATA SOURCE FOR YOUR COUNTRY

The preferred data source for UN member countries is the UN Population Division's 2006 Revision of the official United Nations' population estimates and projections: World Population Prospects: The 2006 Revision Population Database.⁷ The 2006 Revision incorporates the full results of the 2000 round of national population censuses. It also takes into account the results of recent specialised surveys carried out in developing countries to provide both demographic and other information to assess the progress made in achieving the Millennium Development Goals.⁸ The more detailed Panel 2 data for the period 1950 to 2050 are available for downloading

⁵ http://www.prb.org/Content/NavigationMenu/PRB/PRB_Library/Glossary2/Glossary.htm

⁶ http://www.ageworks.com/course_demo/200/module2/module2b.htm

⁷ <http://esa.un.org/unpp>

⁸ UN Population Division, 2005, World Population Prospects The 2004 Revision Highlights, ESA/P/WP.193 24 February, p v.

to a spreadsheet program at the UN Department of Economic and Social Affairs (DESA) Population Division website.⁹ Knowledge of the filter command in Excel or Open Office is required to select males only and females only to compile the table.

Another population data source is the United States Census Bureau's International Data Base.¹⁰ The International Data Base provides demographic and socioeconomic statistics for 228 countries and areas of the world, covering in particular smaller countries with a population of 5,000 or more in 1998. The International Data Base combines data from country sources, especially censuses and surveys with estimates and projections to provide information dating back for specific years to 1950 and forward to 2050. However, in the case of particular countries, there are important differences between the two sources of population data.¹¹ The UN population source is the preferred population data source for UN member countries because it incorporates the 2000 round of national population censuses and other data sources, making it a more up-to-date source.

STEP 1.2

IDENTIFY THE GENDER/AGE STRUCTURE OF YOUR COUNTRY'S POPULATION FOR THE CURRENT YEAR AND COMPILE A POPULATION PYRAMID

The graph below is an example of a population pyramid, based on gender and five year age cohorts, using aggregate data for



the least developed countries.¹² This graph, when based on the population data for an individual country, is a good starting point for presenting a demographic profile of young people. The easiest way to produce the graph is to use the Excel spreadsheet program PYRAMID.¹³ An alternative, web-based, method for producing the graph which uses the International Data Base (IDB) is also available.¹⁴

¹² The UN definition of the least developed countries refers to 50 countries: Afghanistan, Angola, Bangladesh, Benin, Bhutan, Burkina Faso, Burundi, Cambodia, Cape Verde, Central African Republic, Chad, Comoros, Democratic Republic of the Congo, Democratic Republic of Timor-Leste, Djibouti, Equatorial Guinea, Eritrea, Ethiopia, Gambia, Guinea, Guinea-Bissau, Haiti, Kiribati, Lao People's Democratic Republic, Lesotho, Liberia, Madagascar, Malawi, Maldives, Mali, Mauritania, Mozambique, Myanmar, Nepal, Niger, Rwanda, Samoa, São Tomé and Príncipe, Senegal, Sierra Leone, Solomon Islands, Somalia, Sudan, Togo, Tuvalu, Uganda, United Republic of Tanzania, Vanuatu, Yemen and Zambia.

¹³ US Bureau of the Census, International Programs Center, Population Analysis Spreadsheets (PAS) <http://www.census.gov/ipc/www/pas.html> This spreadsheet produces population pyramid graphs for data by 5-year age groups. The pyramid can be plotted by population, by percent of the total population for each sex, or by percent of the total population for both sexes.

¹⁴ See US Census Bureau, IDB Population pyramids <http://www.census.gov/ipc/www/idbpyr.html>

⁹ <http://esa.un.org/unpp/index.asp?panel=2>

¹⁰ <http://www.census.gov/ipc/www/idbagg.html>

¹¹ See Attachment 3 for an outline of the factors explaining differences in population estimates produced by UN and US Census Bureau's International Data Base.

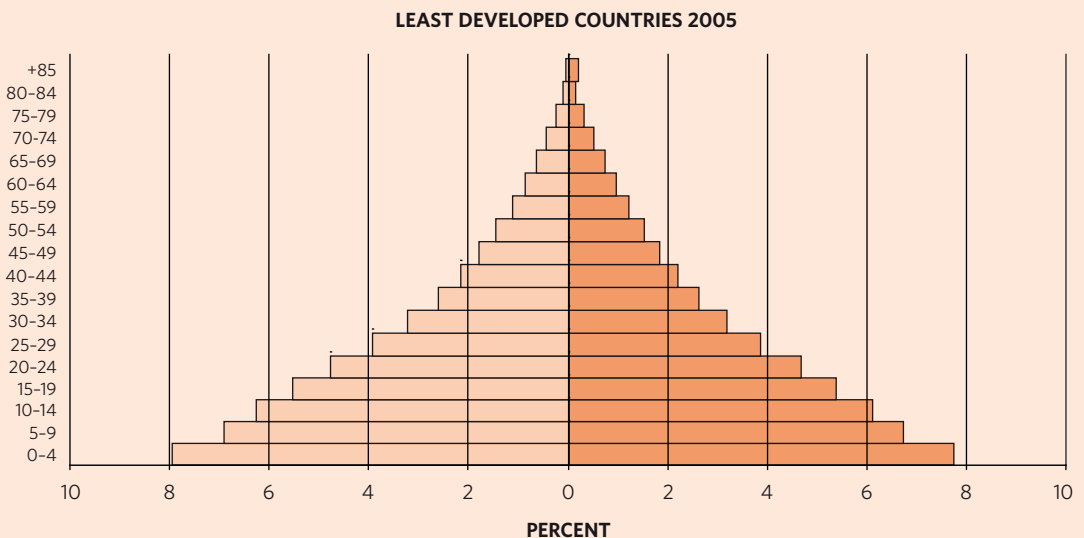
It is also important to use the data underpinning the graph to describe the share of young people in the population. For example, the data from which the population pyramid below is drawn shows that the youth share of the population (aged 15-24 years) of least developed countries is one in five (or 20 per cent) of the total population (see Attachment 4 in the brochure).. It is also important to show the actual number of young people in total and in each age subgroup.

Many countries use a broader age range to define their youth population. The 15 to 29 years age range is commonly used. Other age ranges used by international agencies and governments are 10 to 24 years or 10 to 29 years. These age groupings are available from the population age pyramid. Other

age groupings, such as 12 to 14 years, 15 to 17 years and 18 to 23 years, are also used but are not available from the UN Population Division's Population database or the US Census Bureau's International Data Base.

Another way to make good use of the population pyramid is to highlight the proportion of the population aged under 25 years of age. This can provide a quick way to see what the size of future youth cohorts will be. In the case of the least developed countries, three in five people (62 per cent) are under the age of 25 years in 2005. The important point to note is the much larger numbers in young age groups. This shows that the size of the youth cohort in least developed countries in the immediate future will increase significantly.

GRAPH 1: POPULATION GENDER AND AGE PYRAMID FOR LEAST DEVELOPED COUNTRIES, ESTIMATED POPULATION 2005, PER CENT (2005 N= 759,390,000)





STEP 1.3

IDENTIFY THE GENDER/AGE STRUCTURE OF YOUR COUNTRY'S POPULATION FOR A YEAR IN THE FUTURE AND COMPILE A POPULATION PYRAMID

To identify future trends, compile a population age pyramid for 15 years ahead of the current year. This will show, on the basis of the current age cohort of 0 to 15 years, the size of the youth population in 15 years time. If the share of young people in the population increases or remains at the same high level, policy makers will have an incentive to take a longer term view of the policy changes needed to meet the needs of young people. A longer time period of 30 years into the future should also be shown using the population projections. The relative size of the youth population in 30 years time can show whether a 'demographic bonus' is likely. This is explained further in the following section.

STEP 1.4

IDENTIFY SCOPE FOR A 'DEMOGRAPHIC BONUS'

A mere focus on a country's population size and growth rate offers little insight to policy makers on how to respond to the future. The more important dimension is the age structure of the population. This refers to how the population is distributed across different age groups. Two broad policy arguments in favour of more investment in young people can be made, using information about a country's age structure now and in the future. The first argument concerns the benefits that can come from having a large youth share of the population, provided the fertility rate is lower than previous years. The second argument concerns national security and is based on the pressures on the civil order a large and growing share of young people can produce if their energy and potential are not tapped in positive ways.

What is the demographic bonus?

Individual economic behaviour varies at different stages of life and when there are changes in age structure, this can significantly affect national economic performance.¹⁵

Nations with a high proportion of young or old dependants tend to devote a relatively high proportion of resources to these groups, often limiting economic growth. By contrast, nations in which a relatively large share of the population has reached the prime ages for working and saving may enjoy a boost to income growth stemming from the higher share of the population that is working, from the accelerated accumulation of capital, and from reduced spending on dependants.¹⁶

In a country with high fertility and mortality, each successive age group is smaller than the preceding age group, thus producing a pyramid effect in the age structure of the population. If fertility decreases, the 'new young' age cohorts tend to be smaller than those born during the high fertility period. As the age cohorts born during the high fertility period enter working age, their proportions tend to exceed those of young dependants and older age groups. With lower fertility rates but high mortality rates for older population, the age structure is dominated by the working age population, thus creating a 'bulb' effect. However, at later years, with a growing older population and low fertility rate, the age structure comes to

resemble a rectangle.¹⁷ See Attachment 5 (in the brochure) for a graphic representation of three stages of Thailand's demographic transition.

Identify the potential for a demographic dividend

According to the World Bank's 2007 World Development Report: Development and the Next Generation, large numbers of young people in the population offer countries a major opportunity to deepen their human capital.¹⁸ This will improve their economic prospects as the skills of the labour force are an important determinant of a country's overall investment climate.

As noted above, it is possible to show a country's population age pyramid in the future, using the UN population estimates. This can show whether a 'pyramid', or 'bulb effect' is likely to emerge within what time frame. As a country makes the transition from a mostly agrarian, rural society with high fertility and mortality rates to wealthier, more urbanised society, health standards improve ensuring that fewer children will die. With lower infant mortality and growing prosperity, parents are likely to have fewer children and to invest more in their education.

When mortality and fertility rates fall, governments can reap the benefits of having a growing cohort of working-age adults relative to the dependent population. However,

¹⁵ Rand Corporation, 2003, 'Banking the 'Demographic Dividend': How Population Dynamics Can Affect Economic Growth', http://www.rand.org/pubs/research_briefs/RB5065/index1.html

¹⁶ Op cit.

¹⁷ See Barker, JF; 2004, The 'Demographic Dividend': The Demographic Transition and the Demographic Dividend. <http://www.population-growth-migration.info/essays/DemographicDividend.html>

¹⁸ See also Jimenez, E; and Murthi, M; 2006, 'Investing in the Youth Bulge', Finance and Development, Vol 43, No 3, September, p1. <http://www.imf.org/external/pubs/ft/fandd/2006/09/jimenez.htm>

Governments need to implement a range of supportive policies to reap the potential benefits of a declining dependency burden. These policies include promoting gender equality, delivering improved education and public health outcomes as well as facilitating investment to create jobs.¹⁹ The relative share of the youth cohort aged 15-24 years in the working age population is another important feature of the age structure with implications for public policy. This is discussed in the following section.

STEP 1.5

IDENTIFY POTENTIAL FOR THREAT TO NATIONAL SECURITY

Another argument for investing in young people that may appeal to policy makers concerns national security. In societies with poor records of economic growth and little prospect of new opportunities, a youth bulge in the adult population could also increase the risk of civil unrest. A Norwegian researcher, Henrik Urdal, has shown that countries have a high propensity for internal armed conflict, terrorism and rioting if they have poorly performing economies, weak governance, big populations and a youth bulge (aged 15-24 years) in the adult population aged 15 years and above.²⁰ In particular, less developed countries with youth bulges of 35 per cent of their adult population, and all other characteristics controlled for, have one and a half times greater risk of conflict compared with developed countries.²¹

¹⁹ UNFPA, 2003, *Achieving the Millennium Development Goals: Population and Reproductive Health as Critical Determinants*, p 5.

²⁰ Urdal, H. 2006, 'A clash of generations? youth bulges and political violence', *International Studies Quarterly* 50, 607-629.

²¹ See Note 20.

Another study by the same author of 27 states in India between 1956 and 2002 shows that the likelihood of armed conflict, political violence events and Hindu-Muslim rioting also increases with the presence of a youth bulge. This applies especially in the states which also have large male surpluses and high levels of urban inequality.²² Other studies have found similar strong links between social conflict in a country and measures of a large youth share of the adult or working age population together with a number of political and economic factors.²³

It is important not to claim that a youth bulge is the only major risk factor associated with civil conflict. A range of other risk factors may be just as or more important. These include prior civil conflict, dependence on a natural resource such as diamonds and oil as well as poor economic conditions.²⁴ Also important risk factors associated with conflict and violence are rapid population growth, environmental degradation, unequal distribution of renewable resources, and elite self-interest.²⁵

²² Urdal, H, 2006, 'Population, Resources and Political Violence: A Sub-National Study of India 1956-2002', Centre for the Study of Civil War, The International Peace Research Institute, Oslo, Norway.

²³ See Staveteig, S; 2005, 'The young and the restless: population age structure and civil war' Commentary *Population and Conflict: Exploring the Links*, Woodrow Wilson Center for International Scholars, Washington DC. and O'Brien, S; 2002, 'Anticipating the good, the bad and the ugly: an early warning approach to conflict and instability analysis', *Journal of Conflict Resolution* Vol 46 No 6, December, pp 791-811.

²⁴ Collier, P et al; 2003, *Breaking the Conflict Trap: Civil War and Development Policy*. World Bank and Oxford University Press.

²⁵ Kahl, C, 2006, *States, Scarcity, and Civil Strife in the Developing World*. Princeton University Press, New Jersey

III. MAKING USE OF LEVEL 2 DATA TO PRESENT NATIONAL AVERAGES



PROVIDE EVIDENCE OF YOUNG PEOPLE IN POVERTY USING MILLENNIUM DEVELOPMENT GOALS AND RELATED INDICATORS

Showing how young people are progressing in relation to the Millennium Development Goals targets can also place pressure on policy makers to consider their situation. Reference to the Millennium Development Goals is drawing on a human rights basis for seeking action from governments.²⁶ The Millennium Development Goals are based on the economic, social and cultural rights enumerated in the Universal Declaration of

Human Rights (Articles 22, 24, 25, 26) and other human rights instruments.²⁷

The economic, social and cultural rights underpinning Millennium Development Goals are viewed by those affected as claimable rights.²⁸ This means governments and other key stakeholders cannot view poverty reduction merely as just another policy problem. Rather they should see their actions to meet the MDG targets as a response to their obligations under the treaties and covenants to which they are part of. The human rights-based entitlements underscoring the MDGs provide the basis for a moral and legal framework by which key actors such as governments, citizen groups, corporations and international organisations can be held accountable.

A rights-based approach to addressing the needs of young people in poverty is particularly valuable for four reasons.²⁹ A rights perspective provides a greater focus on the root causes of poverty by highlighting the importance of specific rights and the obstacles to realising those rights. Second, using a rights-based approach makes it easier to specify the criteria for measuring outcomes rather than mere outputs. Third, governments and other agencies under a rights-

²⁶ The Millennium Declaration of the UN General Assembly in 2000 states clearly that human rights underpin the MDGs see Jahan, S; 2003, 'Millennium Development Goals and Human Rights', Senior Adviser Employment for Poverty Reduction, Bureau for Development Policy, UNDP, New York, http://www.dse.de/ef/human_rights/jahan.htm

²⁷ UNDP, 2003, Human Development Report 2003, p 28, Box 1.1

²⁸ UNDP, 2003, Human Development Report 2003, p 28

²⁹ Frankovits, A; 2002, 'Rules to Live by: The Human Rights Approach to Development.' PRAXIS, vol XVII, The Fletcher Journal of Development Studies. Tufts University, p 6.



based approach need to give attention to the processes involved in working out priorities for action. This usually means involving the poorest, as far as practicable, in the development and implementation of public policy to give effect to their rights.³⁰ It can also encourage governments and NGOs to monitor the delivery of basic services to see whether they are reaching the poor.

The most important feature of a rights-based approach, however, is the obligation on the part of governments and other actors, such as international agencies and donors, to realise these rights. This obligation imposes a duty on those responsible to undertake the necessary actions to achieve specific rights-based outcomes. It requires identifying the duty bearers and having them fully accept the responsibility. However, this also implies that the duty holders

have the capacity to meet their obligations. The state actors are the relevant government ministries, supported by international agencies, non-government organisations and international corporations.

STEP 2.1

HIGHLIGHT THE YOUTH FOCUS IN THE MILLENNIUM DEVELOPMENT GOALS

The Millennium Development Goals have a strong youth focus because many of the Goals directly or indirectly refer to young people. However, five Goals refer explicitly to young people because they cover activities in which mostly young people engage. These are the MDGs that relate to: literacy attainment, gender equality, improved maternal health, combating HIV/AIDS and other diseases such as malaria and tuberculosis and decent employment opportunities for young people (see Table 5).

³⁰ See Note 29, p 28, Box 1.1

Achievement of two other Millennium Development Goals, 1 and 5, also involve young people as well. As young women aged 20 to 24 years have the highest fertility rate of all women in less developed countries, their nutritional status is closely associated with the prevalence of underweight children under-five years of age, an indicator for Millennium Development Goal 1. So action to improve the nutrition and education levels of young mothers will have a direct impact on undernourished children.³¹ Reducing maternal mortality – a key indicator for Millennium Development Goal 5 – also depends to a significant degree on lowering the incidence of high-risk pregnancies among young women, especially undernourished adolescents.³²

As noted above, efforts to achieve Millennium Development Goal 3 on gender equality and women's empowerment will have major follow-on effects for the achievement of other Millennium Development Goals. Pervasive gender discrimination puts girls at severe disadvantage in terms of completing school which, in turn, is strongly associated with early age of marriage. Lack of gender equality places girls and young women at high risk of unwanted pregnancies, unsafe abortion and HIV/AIDS infection through sexual coercion, child

marriage and other pressures that stem from a lack of control of key decisions in their own lives.

STEP 2.2

PICK BEST DATA SOURCE FOR COUNTRY-LEVEL MDG STATISTICS ON YOUNG PEOPLE

The best source of data for individual countries on progress towards the Millennium Development Goals can be found at the Official United Nations Millennium Development Goals Indicators website.³³ This website presents the official data, definitions, methodologies and sources for the 48 indicators specified for the targets set in relation to the Millennium Development Goals. The data and analysis are the product of the work of an Inter-agency and Expert Group on MDG Indicators, covering 19 agencies and coordinated by the United Nations Statistics Division.

Country level and regional data can be accessed from this website, using a simple querying tool. These data can then be downloaded into a spreadsheet program, with several optional formats available, such as an Excel or CSV file. Attachment 6 (in the brochure) lists most of the MDG indicators and highlights those with a direct and indirect link to young people. Table 5 lists the seven indicators with a direct reference to young people. These direct indicators can be used for a particular country to highlight the position of young people because they apply to a specific age group of young people aged 15-24 years.

³¹ The age specific fertility rate for women aged 15-24 years for the years 2005 to 2010 in less developed countries is 230.54 compared with 115.69 for 15 to 19 year olds and 223.9 for 25 to 29 year olds. UN World Population Prospects: The 2006 Revision Population Database.

³² See Note 32. The evidence for this discussed in section below entitled 'focusing on adolescent mothers to reduce poverty', and Notes 39 to 41.

³³ See <http://mdgs.un.org/unsd/mdg/Default.aspx>

TABEL 5**MDG INDICATORS WITH DIRECT REFERENCE TO YOUNG PEOPLE AGED 10 TO 24 YEARS**

8.	Literacy rate of 15-24 year-olds
9.	Ratios of girls to boys in primary, secondary and tertiary education
10.	Ratio of literate women to men, 15-24 years old
18.	HIV prevalence among pregnant women aged 15-24 years
19b.	Percentage of population aged 15-24 years with comprehensive correct knowledge of HIV/AIDS
20.	Ratio of school attendance of orphans to school attendance of non-orphans aged 10-14 years
45.	Unemployment rate of young people aged 15-24 years, each sex and total
See Attachment 6 for full MDG list	

However, another set of indicators can also be used to highlight the number of young people in poverty. These indirect indicators can be used to focus on young people by applying the indicator for the general population to the youth population. data from the UN Population Data Base can be used to work out the number of young people that the indicator refers to. For example, if 40 per cent of the population is living on less than \$1 a day, it is possible to work out the number of young people living on under \$1 a day. This is done by finding out the total number of young people in the population and taking 40 per cent of this number to show the number living on under \$1 a day.

In a similar way, the share of births by young women can be worked out. The UN Population database provides data on 'births by age group of mother' for five year age groupings from 15-19 years to 45-49

years. These data can be used to calculate the combined number of births to young women aged 15-24 years as a proportion of all births to women 15-49 years. From this, it is possible to estimate what proportion of young mothers aged 15-24 years are dying in childbirth, have children dying in their first year of life, or have underweight children under five years of age.

Table 6 suggests five MDG indicators that could be used with other data on young people from the UN Population Data Base to provide estimates on how the indicator is related to young people.

TABEL 6**SUGGESTED MDG INDICATORS WHICH CAN BE USED TO ESTIMATE THE NUMBER OF YOUNG PEOPLE AFFECTED BY THIS ASPECT OF POVERTY**

1.	Proportion of population below \$1 (PPP) per day
13.	Under-five mortality rate
14.	Infant mortality rate
16.	Maternal mortality ratio
17.	Proportion of births attended by skilled health personnel

STEP 2.3**BE AWARE OF THE LIMITATIONS IN USING THE MILLENNIUM DEVELOPMENT GOALS TO TRACK POVERTY AMONG YOUNG PEOPLE**

However, there are also some limitations of the MDGs for promoting a focus on young people in a national poverty reduction strategy. To make effective use of the MDGs as part of the process of identifying young people in poverty, it is important also to ac-



knowledge their limitations.

Four limitations can be identified which are relevant here:

First, two gaps in the MDGs relevant to young people are reproductive health and security. The lack of attention to sexual and the reproductive health in the MDGs results in a bias against young people in particular because adverse events associated with sexual behaviour and giving birth affect young people more than older age groups. Another major gap in the MDGs that also concerns young people is in relation to conflict prevention and peace building since young people are the most likely age group to be both the perpetrators and victims of violence. Although the Millennium Declaration of the UN General Assembly in 2000 specifically mentions peace, security and disarmament, and protection of the vulnerable, these issues are not made explicit in the Goals.³⁴

³⁴ 'Security from violence is fundamental to reducing poverty, protecting human rights and achieving the Millennium Development Goals...' See Para 6. Conflict prevention, Peace-building and the MDGs, The DAC, and the achievement of the Millennium Development Goals (MDGs) OECD, www.oecd.org

Second, the MDG indicators, in several cases, do not refer to outcomes, merely outputs. Literacy attainment is an outcome if it is in some way tested but the MDG target of completing a certain number of years of education is merely an output. The MDG indicators say nothing of the quality of the education received.³⁵ Too narrow a focus on outputs as a performance measure can mean that a government's attention is directed at only the form rather than the substance of the changes needed to eliminate poverty.

The indicator for decent and productive work for young people is the unemployment rate for 15-24 year olds. This indicator has a number of shortcomings, not least is the fact that most young people without decent work cannot afford to be full-time job seekers. In addition the labour force framework used by the international agencies is biased

³⁵ Deon Filmer, Amer Hasan and Lant Pritchett, 2006, 'A Millennium Learning Goal: Measuring Real Progress in Education', Center for Global Development, Working Paper Number 97, August.



against counting the under-employed.³⁶ These limitations are recognised and the official list of MDG indicators states that ‘an improved measure of the target for future years is under development by the International Labour Organisation’.

Third, most official MDG targets are set too far into the future to be useful for short-term accountability purposes.³⁷ Most MDG targets are set for 2015, a date beyond the political life of most current senior politicians and policy makers. It is important that individual countries set their own shorter-term targets.

Fourth, MDGs do not of themselves point to an underlying strategy for reducing poverty

in a particular country or region within a country. Identifying who are the poor does not provide any guidance on how best to reduce the poverty this group is experiencing. Choices still need to be made by Governments about the most cost effective options, based on good evidence where possible.

The following sections address the first two limitations of the Millennium Development Goals highlighted above by proposing data sources that help to fill the gaps.

STEP 2.4

USE MDG INDICATORS ON SEXUAL AND REPRODUCTIVE HEALTH TO FOCUS ON YOUNG PEOPLE

The two MDGs which refer to sexual and reproductive health (Goal 5: Improve Maternal Health and Goal 6: Combat HIV/AIDS...) should be given a youth focus, as this age group accounts for most of the people who can potentially benefit from achieving these two goals. UNFPA’s publication *Achieving the Millennium Development*

³⁶ ‘Sugiyarto, G, 2007, ‘Measuring underemployment: establishing the cut-off point’, ERD Working Paper No. 92, Asian Development Bank, Manila.

³⁷ ‘White, H; 2004, ‘Using development goals and targets for donor agency performance measurement’, in Richard Black and Howard White (eds), 2004, *Targeting Development: Critical Perspectives on the Millennium Development Goals*. Routledge, New York.

Goals: population and reproductive health determinants also highlights in what ways each of the MDGs can be linked to population and reproductive health issues.³⁸

STEP 2.5

SHOW HOW LOWERING ADOLESCENT FERTILITY CAN ADDRESS SEVERAL MDG GOALS AT THE SAME TIME

The adolescent fertility rate is an important poverty indicator because it addresses several Millennium Development Goals at the same time. First, reducing the number of adolescent mothers will greatly improve maternal health – MDG 5. Adolescent mothers, especially those who are poor, are at higher risk than other age groups of major complications from childbirth. These complications include preterm labour, obstructed labour and permanent damage to reproductive organs.³⁹

The sources of the greater health risk stem from two sources: being poor and being an adolescent. Pregnancy and childbirth expose women to serious risks of adverse events if they are in poor health. The effects of malnutrition, malaria, immune deficiency, or TB on pregnant women can greatly increase the chances of complications, illness, permanent disability or death

³⁸ UNFPA, 2003, *Achieving the Millennium Development Goals: population and reproductive health determinants*. Population and Development Strategies series number 10/2003, September, New York.

³⁹ *Youth and Parenting: Trends and Challenges*, Growing Up Global: An Advocacy Kit on Youth Issues, Population Reference Bureau, June 2006, based on key findings taken from the major report of the National Research Council and Institute of Medicine, 2005, *Growing Up Global: The Changing Transitions to Adulthood in Developing Countries*, cited above.

of the mother or baby.⁴⁰ These risks are further increased for adolescent mothers from poor households.⁴¹

Second, policies to encourage a lower number of births to adolescent mothers will reduce infant mortality and under 5 child mortality (MDG 4) and also child malnutrition (MDG 1) because adolescent mothers have higher rates of infant mortality.⁴² The average mortality rate for infants born to teenage mothers in a large sample of developing countries was 100 per 1,000 live births compared with rates of 72 and 74 per 1,000 births among mothers aged 20-29 and 30-39 years of age respectively, and a rate of 94 per 1,000 births among mothers aged 40-49 years of age.⁴³

STEP 2.6

MAKE USE OF STATISTICS ON THE BIRTH RATE AMONG YOUNG WOMEN

Country level data are available to show how many young women in particular who

⁴⁰ Jamison, Dean et al; 2006, *Priorities in Health*. The World Bank, Washington DC; p 31.

⁴¹ For a detailed discussion of the research concerning pregnancy related disadvantages for adolescents see National Research Council and Institute of Medicine, 2005, *Growing Up Global: The Changing Transitions to Adulthood in Developing Countries*, Panel on Transitions to Adulthood in Developing Countries (C. B. Lloyd, ed), Committee on Population and Board on Children, Youth and Families. Division of Behavioral and Social Sciences and Education, Washington, DC: National Academies Press; pp 519-523. available to read at <http://www.nap.edu/catalog/1174.html> See also section on Adolescent pregnancy and poverty in poor countries in Margaret E. Greene and Thomas Merrick, 2005, 'Poverty Reduction: Does Reproductive Health Matter?', Health, Nutrition and Population (HNP) Discussion Paper, World Bank, July.

⁴² See Note 42, p 522-523.

⁴³ These data are based on DHS survey results from 49 developing countries see Note 42, p 522 citing a 2002 source reporting Demographic and Health Surveys data by the Alan Guttmacher Institute.

would benefit from improved maternal health. The UN's World Population Prospects Database: 2006 Revision provides data on the number of births by age group of mother.⁴⁴ For example, women aged 15-24 years accounted for nearly half of all births (47 per cent) in the least developed countries for the 2000-2005 period. Adolescent mothers, aged 15-19 years, accounted for one in five births (19 per cent). These statistics for young women in both these age groups can be produced for both individual countries and regions.

Reliable data are also readily accessible from the Demographic and Health Surveys (DHS) for up to 63 countries on median age at first marriage for women and median age for women of first sexual intercourse.⁴⁵ However, only 24 countries have survey results more recent than 2000.⁴⁶ These surveys also provide more detailed data on the specific year of age of teenage pregnancy and background characteristics such as her education level, and whether resident in urban or rural area. Other data are available on women aged 15-24 years who have a comprehensive knowledge of HIV/AIDS.⁴⁷

⁴⁴ See Panel 2; detailed data <http://esa.un.org/unpp/index.asp?panel=2>

⁴⁵ See STATcompiler Express, <http://www.measuredhs.com/>. The Demographic and Health Surveys (DHS) collect information on fertility, health, and nutrition issues from 5,000 to 10,000 or more households in each country.

⁴⁶ These countries are: Bangladesh 2004, Benin 2001, Bolivia 2003, Burkina Faso 2003, Cameroon 2004, Chad 2004, Colombia 2005, Dominican Republic 2002, Eritrea 2002, Ghana 2003, Indonesia 2002/2003, Jordan 2002, Kenya 2003, Madagascar 2003/2004, Mali 2001, Morocco 2003-2004, Mozambique 2003, Nepal 2001, Nicaragua 2001, Nigeria 2003, Philippines 2003, Tanzania 2004, Vietnam 2002 and Zambia 2001/02.

⁴⁷ Population Reference Bureau, Data Finder, Search Population and Health Data, Health and HIV/AIDS variables <http://www.prb.org/datafind/datafindery.htm>



STEP 2.7

SHOW GENDER DIFFERENCES IN HIV PREVALENCE FOR YOUNG PEOPLE

Young women need to be an important focus for policy intervention to achieve MDG 6: 'halt by 2015, and begin to reverse, the spread of HIV/AIDS'. This is due to the fact that women under age 25 account for many of the new HIV infections in poor countries. Women in sub-Saharan Africa, for example, are more likely to become infected and at an earlier stage in their lives than men.² Young women aged 15-24 years, depending on their country, are between two and six times are likely to be HIV-positive than men of a similar age. This reflects the vulnerability of young women and girls due to the unequal gender relations in many societies.

As noted above, data for the MDG indicator on HIV prevalence among 15-24 year old pregnant women are available from the official UN Millennium Development Goals website. However, UNAIDS-sourced sta-

tistics for the year 2005 are also available for 42 countries in sub Sahara Africa. This data source shows the estimated percentage of young women aged 15-24 years living with HIV compared with young men of the same age group. It is, therefore, possible to show for each of the countries for which data are available how much more girls and young women are vulnerable to HIV infection compared with males of the same age group.

The World's Youth 2006 Data Sheet of the Population Reference Bureau offers data on young people by gender and different age sub groupings (10-24 years, 15-19 and 20-24 years). The data on young people show by region and country their population share, levels of education attainment, share of 15-19 year olds who are economically ac-

tive, marriage/fertility, and young people's health status and use of health services.

The Alan Guttmacher Institute of New York has published a comprehensive set of tabulations from Demographic and Health Surveys (DHS) related to the sexual and reproductive behaviour of young people. The surveys were carried out in the late 1990s and early 2000s in 24 Sub-Saharan African countries. Most of the reported data pertain to males and females aged 15-19 years, married and unmarried; although in some instances the data refer to a broader age-group of 15-24 year olds.

STEP 2.8

FOCUS ON EDUCATION OUTCOME MEASURES WHERE POSSIBLE

A limitation of the MDG indicators, as noted above, is the focus in some instances on outputs rather than outcomes. Millennium Development Goal 2 - achieving universal primary education - is measured by merely completing a certain number of years of formal schooling. The outcome sought should instead be a minimal set of competencies to enable each person to make a successful transition to adulthood, defined broadly in its economic, social and political aspects. So the real test of whether progress towards this goal has been achieved is not the simple output statistic favoured by governments. It is whether each young person has gained and retained a set of competencies to enable them to perform their roles as citizens. So in relation to education, are data available for young people which show outcomes?

The value of using literacy as an outcome measure

Assessing whether a young person has at-



tained literacy is an outcome measure for basic education. Years of schooling is an unreliable measure because many young people may lose the ability to read or write if it has not been used often. In other instances, official data collection such as a census may simply rely on self-identification to identify whether a person is literate or not, without asking them to prove it. So it is important for each country to assess directly whether basic literacy has been achieved. For some countries, survey data are available which asks people whether they are able to read a sentence or not?

STEP 2.9

USE DEMOGRAPHIC AND HEALTH SURVEYS TO ASSESS LITERACY ATTAINMENT

As noted above, official data, such as a national census, are usually based on a respondent's own assessment of their ability to read or write. However, it may be

possible to use other data based on a person's demonstrated ability to read a simple statement. The Demographic and Health Surveys (DHS) asked female respondents to prove their literacy by reading a simple sentence based on their everyday life. As noted above, these surveys are available in the public domain.

Use the information about the age grouping of household members on the household characteristics label of the DHS STAT compiler database, to identify the proportion of 15-19 and 20-24 year old females who have shown that they are literate for a particular country. Survey results for the last five years are available for 24 countries. Other age specific data for young women, aged 15-19 and 20-24 years, on key characteristics such as their employment status and occupation are also available from this data source.



IV. MAKING USE OF LEVEL 3 DATA TO PROVIDE A PRO-POOR VIEW OF YOUNG PEOPLE



USE MORE DETAILED DATA TO IDENTIFY GROUPS OF YOUNG PEOPLE IN POVERTY

Standard measures of poverty are often too general for policy purposes. Many measures of poverty, such as those used in the MDG indicators, are limited in the information they can offer to policy makers because they use only national averages. National averages do not show the extent of differences between socio-economic groups within a country.

Without a pro-poor focus aimed directly to improving equity, governments may ex-

pand the coverage of education and health services without necessarily making any better the plight of the poorest in the population. It is well documented that inequalities in health status and health care in particular are persistent and pervasive.

Improved service delivery in education and health can have a dramatic impact on poverty reduction if it is targeted at the poor. However, governments often fail to ensure that service coverage is extended to the poorest.

Pro-poor strategies require governments to ensure that citizens can access their entitlements under their economic, social and cultural rights. Awareness of the gaps in these entitlements according to a citizen's gender, age and economic status show policy makers where to direct resources. This approach offers the potential for improving citizens' standard of living directly, ahead of the benefits that might trickle down from economic growth and general increases in per capita income. In relation to the benefits flowing from better targeted health services, for example, it has been noted that:

...income growth is neither necessary nor sufficient for sustained improvements in health. Today's tools for improving health are so powerful and inexpensive that health conditions can be reasonably good even in countries with low incomes.

STEP 3.1

MAKE USE OF A MEASURE OF HOUSEHOLD WEALTH TO SHOW INEQUALITIES THAT PERPETUATE POVERTY

It is possible to use an assets-based measure to rate households. This is a better measure than using household income because information about household assets such as ownership of bicycles and radios and access to water and fuel offer a more dependable way of assessing wealth. The Demographic and Health Surveys gather data on up to 30 household attributes or assets related to wealth status. These household features include: type of flooring and/or roof; source of water; availability of electricity; ownership of items such as watches, radios, bicycles or a car.

Researchers for each country have combined information about household assets into a single wealth index. This index is then used to divide the population into five groups of equal size, or quintiles, to show an individual's relative wealth standing. The wealth index, thus, provides a country-specific or relative definition of economic status rather than an absolute definition of wealth. Therefore, the comparisons about differences between asset quintiles are strongest when limited to a particular county.

More specific information about the fertility rate of adolescents who are poor compared to better-off adolescents can help governments to target services more directly. An analysis of 12 countries in Asian, Africa and Latin America shows that all but one country had a significantly higher fertility rate among the adolescents from the poor-

est households. This result held regardless of whether the country's adolescent fertility rate was high or low.

STEP 3.2

USE A HOUSEHOLD WEALTH MEASURE TO DEVELOP SOCIAL VULNERABILITY PROFILES OF YOUNG PEOPLE

Readily accessible data can also be used to compile social vulnerability profiles for different groups of young people to help identify appropriate policy options and program interventions. Carefully targeted investments based on these social vulnerability profiles of young people can offer, for only modest expenditures, the prospect of substantial gains in poverty reduction. If, for example, it can be shown for a particular country that substantial differences exist in relation to maternal death rates for adolescents and, within this age group, by household wealth, resources can be better directed and so have a greater impact on reducing poverty in a shorter time.

It was noted above that national level data can be used to show what share adolescent mothers, aged 19 years and below, accounted for in total births. It is possible, using DHS results, to further unpack this national average to see whether there are major differences between socio-economic subgroups

Attachment 7, Table A7.1 presents data on the proportion of poorest, middle and richest adolescents aged 15-19 years giving birth in one year in 53 countries, based on the DHS results for various years.

Countries are ranked on the proportion of the poorest adolescents giving birth. Country specific data from Table A6.1 can be used to highlight whether a country needs a pro-

poor focus in its policy to reduce the adolescent birth rate.

Table A7.1 shows several broad trends. First, adolescents in the richest quintile have a much lower adolescent birth rate in most countries, with a small number of exceptions (Chad, Central African Republic, Malawi and Mozambique). Furthermore, in 30 countries, only 5 per cent or less of adolescents in the richest quintile have given birth. In contrast, adolescents in the poorest quintile have the highest birth rate in 23 out of the 53 countries. Third, in another 23 countries, the poorest and middle quintiles have the same or similar birth rates (within two percentage points) of each other.

The implications of these profiles for policy makers are several. In many countries, a pro-poor approach is required to lower the birth rates of adolescents. Relying on a universal approach could only be justified as a cost effective option in the small number of countries where there is little difference in adolescent birth rates between the poorest and the richest quintiles. As noted above, these countries are: Chad, Central African Republic, Malawi and Mozambique.

The high number of countries with low adolescent birth rates in the richest households has implications for program design as well. Programs that have a focus on adolescents in urban areas in general will have less impact than focusing on parts of urban and rural areas where the poorer households are to be found. These data, however, do not show where the poorest households are geographically located. Other data may be available in-country from the Demographic and Health Surveys to provide more location specific information.

Adolescents with high birth rates are also likely to have lower education levels than other adolescents. This means that school-based life skills programs aimed at informing adolescents about the risks of early pregnancy may not be cost effective, as the target group may have already left school or never attended school in the first place.

Other wealth linked indicators for young people

Data on household wealth differences are available but these relate to larger age groups. Data are also available on differences in education and health status, access to services and risk profiles related to health by gender, urban/rural location and maternal educational attainment.

Data produced for the World Bank's World Development Report 2007 on young people and development provide information about the access of young mothers to ante-natal care and vaccinations for 31 countries. These data are reported in Attachment 8 of the brochure. Country specific data can be used to highlight whether there is a need for a pro-poor targeting in how ante-natal services are provided.

Scrutiny of the data shows that in nearly all countries, there is a large gap between young mothers from richest and poorest households in terms of whether or not they received ante natal care. The national averages also presented in the table do not give any insight into who is benefiting and who is not. There is clearly a need in nearly all countries for a pro-poor bias in how antenatal care is provided.

However, in relation to vaccinations for young mothers the pattern across countries

is more mixed. A bias towards vaccinations for young mothers from the richest households is evident in 23 of the 31 countries. In 8 countries, the difference between young mothers from the richest and poorest households was not marked. The latter results suggest what a pro-poor profile of health

service delivery might look like. However, only in the case of Namibia was successful pro-poor targeting achieved, where more young mothers from the poorest households benefited from the vaccinations than those from the richest households.



V.CONCLUSION

The purpose of the guide has been to show how a relatively sophisticated picture of how poverty affects young people can be built up from the use of simple statistics that are readily available from the Internet, some of which have been reproduced in this guide. The guide has identified the data sources and affirmed their 'best available' status. It is possible for an analyst, using this guide, to provide a comprehensive picture of the current and future significance of young people in the economy and society within a short period of time – perhaps only requiring a week's work.

Data are available for most countries now in relation to the MDG indicators and more effort is being made by countries to provide these data. In addition, the guide,

on a number of occasions, has pointed to a widely overlooked data source - the results of the Demographics and Health Surveys. These results for a large number of countries overcome many of the limitations of the MDG indicators. They enable national averages used in the MDG indicators to be further unpacked to show usually that not all young people are the same; in most instances large differences exist between those from poor and better-off households. It is these social vulnerability profiles of young people that hold the best prospect of influencing governments to adopt pro-poor strategies; because they are based on wealth /poverty status, they can show, in a clear and straight forward way, the need to invest more in higher quality resources in the poorest young people.

Annex 2: HIV and AIDS estimates and data, 2005 and 2003, columns V and X, 2006 Report on the global AIDS epidemic, UNAIDS/WHO, May 2006, http://data.unaids.org/pub/GlobalReport/2006/Annex2_Data_en.xls

The World's Youth 2006 Data Sheet is also available in French and Spanish, and is to found on Population Reference Bureau's website along with a related policy brief at www.prb.org/youth2006. Data from The World's Youth is searchable in PRB's DataFinder, www.prb.org/datafinder <http://www.prb.org/pdf06/WorldsYouth-2006DataSheet.pdf>

Bankole A et al., 2004, 'Risk and Protection: Youth and HIV/AIDS in Sub-Saharan Africa', The Alan Guttmacher Institute, New York:

The DHS STATcompiler is an innovative online database tool that allows users to select numerous countries and hundreds of indicators to create customised tables that serve their specific data needs. STATcompiler allows access via a website to nearly all of the population and health indicators that are published in DHS final reports. <http://www.statcompiler.com/statcompiler/examples.cfm?userid=i85111&usertabid=202127>

See Note 54.

Population Reference Bureau, 2004, The Wealth Gap in Health: data on women and children in 53 developing countries. http://www.prb.org/pdf04/TheWealth-GapInHealth_Eng.pdf

World Bank, 2004, Making Services Work

for the Poor. World Development Report 2004. The World Bank, Washington DC; Anuradha Joshi, 2006, 'Institutions and Service Delivery in Asia', IDS Bulletin, Volume 37 Number 3, Institute for Development Studies, Sussex University, UK, May.

Jamison Dean et al; 2006, Priorities in Health: Disease Control Priorities Project. The World Bank, Washington DC, p7.

See Note 61, p 8.

Ashford, L; & Kashiwase, H; 2004, The Wealth Gap in Health: data on women and children in 53 developing countries; Population Reference Bureau p 7.

See Rani and Lule, 2004. 'Exploring the socioeconomic dimension of adolescent reproductive health: a multi-country analysis', International Family Planning Perspectives, Volume 30, Number 3, September.

These data are available from the Poverty and Health website of the World Bank <http://siteresources.worldbank.org/INTPAH/Resources/Publications/Tables-and-Figures/agefertil.xls>

See also Round II Country Reports on Health, Nutrition, Population Conditions among Poor and Better-Off in 56 Countries (2004) <http://tinyurl.com/34k8rm>

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