



**ADDIS ABABA UNIVERSITY
SCHOOL OF GRADUATE STUDIES
COLLEGE OF DEVELOPMENT STUDIES
(CDS)**

**AN ASSESSEMENT OF HOUSEHOLD POVERTY IN ADDIS ABABA:
THE CASE OF TWO
KEBELES IN ADDIS KETEMA SUB-CITY**

KIDIST YIBELTAL YIZENGAW

MAY 2010



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Acronyms

CBO=Community Based Organizations

USD=United States Dollar

MoFED=Ministry of Finance and Economic Development

MOH= Ministry of Health

UN= United Nation

UNDP=United Nations Development Program

PPP=Purchasing Power Parity

GNP=Gross Domestic Product

HDI=Human Development Index

NGO=Non Governmental Organization

DFID=Department for International Development

CBN=Cost of Basic Needs

FEI=Food Energy Intake

EEA=Ethiopian Economic Association

CSA=Central Statistics Authority

ETB=Ethiopian Birr

SPSS=Statistical Package for Social Scientists

HH= Household

WB=World Bank

ADLI= Agriculture Development Lead Industrialization

Abstract

As we all know urban poverty is one of the major problems of Ethiopia. The main objective of this study was to assess household poverty in Addis Ababa by taking two kebeles of Addis ketema sub-city.

In order to achieve the objective of the study from the study population of 55,762 household heads 200 samples were selected through random sampling method. The study used both primary and secondary data sources. Data was analyzed and interpreted mainly through quantitative method and it was supported by qualitative method.

The two dominant approaches of poverty analysis- income and welfare were adopted. Income and expenditure of the household were viewed from the perspective of household size, education, age, marital status, and employment. Welfare is also analyzed through the nature of the house (wall type, construction material for floor and material of roof), house tenure, renting, number of rooms, supply of drinking water, main source of light, use of kitchen, energy consumption, toilet, bathing facility, and health condition. Coping strategies like saving, aid, migration, and cutting down meals per day were identified in the study.

The result of the study in general showed that households in the selected areas have quite low income and most of them depend on one source of income. 51.9 percent of the surveyed population is employed themselves in petty trade. 32.5 percent of the households earn with a gap of 401-700 per month. More than 34.4 percent of the households' income couldn't cover their monthly expenditure. Divorced and widowed which accounted 22.5 and 19.0 percent, respectively, sections of the society experience more poverty than those who are not. Besides, 40.0 percent categorized themselves as very poor when compared with other community. Most of the respondents (50.0 percent) have experience of food shortage and out of this food insecure households (50.9 percent) of the respondents use cutting down the amount of their meal (frequency at two times per day is a dominant means) in order to cope up the food shortage.

Based on the findings, the study recommended that investment on infrastructure is highly recommendable for the problems like housing shortage, overcrowding, rents affordable relative to income and the quality of houses. Health coverage, water and sanitation facilities also need to get immediate attention by the development sector.

CHAPTER ONE

1. Introduction

1.1 Background of the Study

Poverty is a multi-dimensional phenomenon whose underlying causes are varied, complex and quite cumbersome to quantitatively measure. Globally, poverty as a phenomenon has a variety of political, economic and social meanings and manifestations. In the economic sense, poverty is a by-product of an inequitable distribution and use of resources. If seen socially, it is a reflection of inadequacies in the realm of basic needs and facilities. Politically, it is regarded as an articulation of insufficient participation in the decision-making processes and inadequate translation of competing societal interests (Abebe, 2001). Poverty is a world-wide issue and a social ill which affects economical, educational, health and environmental aspects of the society (World Bank, 2002).

Different writers described it in different ways. Todaro and Smith (2009) reviewed different countries experience and made an attempt to define poverty as follows:

Poverty suffer from under nutrition and poor health, have little or no literacy, live in environmentally degraded areas, have little political voice, are socially excluded and attempt to earn a meager living on small and marginal farms or in dilapidated urban slums.

Poverty refers to the inability to attain a minimum standard of living. This minimum standard of living (poverty line) is estimated by the World Bank to be obtained by an annual income of \$370. Accordingly, it is estimated that one billion people in LDC's one fifth of the world population—are living in poverty. Therefore, there are more hungry people

in the world today than ever before in humane history, and their numbers are growing (OSSREA, 1994:2)

Each year the number of human beings increases, but the amount of natural resources with which to sustain this population, to improve the quality of human lives, and eliminate poverty remains finite. The high poverty levels which occurred in the last two decades are therefore, likely to increase in the 1999's for many reasons. First, LDC's prospects of economic recovery in 1999's are gloomy (debt problems, world recession, political instability, etc.)(OSSREA, 1994:2).

Poverty is also understood as a state of individual or household having an income or consumption below a certain standard, usually known as poverty line. In this sense, what exists in Africa is chronic mass poverty. Mass poverty as it exists in Africa is a process whereby the bulk of the population is surviving at the daily subsistence local dietary requirement; houses in squatter type shelters; clothed with bare minimum protective clothing; without the means to acquire productive assets; with very- low organizational capabilities and participatory role, and with inadequate endowment of energy supplies for productive and other uses (Lamin 2000 cited in Workneh, 2005).

Urbanization is an expression of a progressive process of development. It represents a shaft of workers to higher productivity sectors and occupations as services, commerce and manufacturing sectors which exhibit greater productivity than low surplus agriculture. It also allows people to enjoy better services, education etc.

Through urban centers provide opportunities, they also create formidable problems to their residents. Problems of deprivation, lack of access to essential needs of human begin inadequate income etc., which are all

manifestations of urban poverty, are quite common in urban areas. These problems are more intense and highly changed and can often lead to social and political instability (Mills and Perenia, 1994). The world bank policy paper refers to the problem as “even if poverty is still largely rural in many countries, urban poverty will become the most significant and politically explosive problem in the next century”(Diereg, 1999).

Unable to cope with the demand for services and faced with severe resource constraints, many cities in developing nations are beleaguered by widespread and fast spreading urban poverty gripping residents. There is now increasing awareness that extensive poverty can engender social and political instability and bring havoc to urban communities. In addition, there is also the admission that urban poverty has become so deep and severe that a coalition of stakeholders is necessary to solve the problem. As a result, most city governments are now keen to create partnerships with different stakeholders and civil society organizations (such as NGOs, community-based organizations (CBOs), the private sector and the poor to fight multi-dimensional poverty afflicting urban populations (Meheret, 2002).

Addis Ababa, the capital city of Ethiopia, shows a paradoxical situation. On one hand, with the highest concentration of facilities per population than other centers in the country, it enjoys a privileged position. On the other hand, the city is not capable of accommodating the increasing population that is being attracted by the luring facilities and seemingly employment opportunities. Hence poverty is rampant and widespread in the city. In 1992 it was found that 60 percent of the city’s residents were below the poverty line (World Bank, 1992). Recent estimates are not different from the past According to one study in 1997, 49.5 percent of the population is below food poverty line while some 51.4 percent of the population lie below total poverty line. The absolute number of people lying below poverty line was increased during the period 1995-97 (Mekonen, 1997).

Poverty in Ethiopia is manifested in various forms, but is mainly chronic, this is due to small land-holdings compounded by environmental degrading, backward farming practice, lack of agricultural input in rural areas, and high unemployment rate in urban (people growth) put lot of pressure on the already depleted economy of the country. Poverty has been experienced in Ethiopia every now and then, due to recurrent drought, civil wars displacements (MOH, 2003).

Over the past many years, urban poverty in Ethiopia has been fast growing and measures are urgently needed to avoid an impending crisis in urban life. Its visible manifestations include widespread beggary and prostitution; a growing urban population of houseless and street children; and high youth and adult unemployment (Meheret, 2003).

For some cities, such as Addis Ababa, the poverty figure is a frightening 60 percent, which would imply that nearly 1.7 Million of the city's 2.8 million residents are categorized as below the poverty line and are thus experiencing a life of squalor and deprivation (Abebe, 2000).

In urban context, poverty can be related to various distinctive characteristics of urban life and set of issues distinct from the general poverty situation (Bigsten, 1996b; Mulumbet, 2002; Shewaye, 2002).

In the context of Addis Ababa, it is a phenomenon involving issues related to income, labor market, public infrastructure and services, shelter, social exclusion, etc. In this regard, a comprehensive view of these dimensions is requisite for obtaining a better understanding about the magnetite of poverty in the city (Abebe, 2001).

Generally, the extent of poverty appears differently among the various groups of society and it affects people in various ways. To that end, this paper assessed household poverty in Addis Ababa by taking two *kebeles* from Addis *ketema* sub-city i.e 10/11/12 and 13/15 *kebeles*.

1.2 Statement of the Problem

In Ethiopia, poverty was highly recognized from the rural perspective for along period of time. Studies also show only recently urban poverty has been recognized as an important area of concern (World Bank, 2009). Previous analyses of poverty in Ethiopia have generally focused on rural rather urban areas. This is understandable in light of the fact that around 85 percent of the population lives in rural areas. Although urban Ethiopians generally enjoy a higher standard of living when compared to their rural counterparts, poverty remains a problem in urban areas (Tadesse, 1999).

Recently urban poverty is becoming a research agenda among researchers (Tadesse, 1999). The focus primary has so far been on the aggregate level of urban poverty and considered the lifting of subsidies on basic goods and services, public expenditure cuts, tax reform measures and monetary contraction as a main cause for the persistence of poverty amongst urban Ethiopians (Tesfaye, 2006). However, understanding of the micro level association between different socioeconomic characteristics of the households and their poverty level is vital in order to increase the understanding of the nature of urban poverty in Ethiopia and in devising appropriate policies to mitigate the problem. To this effect, this paper has attempted to assess urban poverty level by focusing on the socioeconomic characteristics of the households in the study area.

1.3 Objective of the Study

1.3.1 General Objective

The principal objective of this study is assessing household poverty in Addis Ababa by taking two *kebeles* of Addis *ketema* sub-city.

1.3.2 Specific Objectives

- Identifying the various socio- economic factors that determine the poverty status of a household.
- Investigating the perception of the poor on poverty.
- Determining the coping strategies of the poor.

1.3.3 Significance of the Study

Though we know that various researches have been done on urban poverty, it is still important to look in to the proportion of the population adversely affected by deprivations among the poor a critical factor in understanding the depth and cause of poverty.

Therefore, the study contributes much to indicate the nature of poverty dimension to urban areas particularly on the Addis *Ketema* Sub-city.

It can give a full picture to show the extent of urban poverty and to provide more understanding about the severity of poverty in urban areas for CBOs, NGOs, or any interested stakeholders/actors who in one or another way are engaged in the development of the cities. Besides, it adds knowledge for the researchers who are interested to study related issues.

1.3.4 Limitation of the study

No research, per se, is complete and free from limitations. This paper has shown some limitations that occurred at time of data collection.

1. One of the difficulties faced during the fieldwork include that it was a time pre-election and the study population put doubt about the researcher considering among one of the political practices.

2. The study plan was intended to select three *kebeles* of sub-city, however; some sub-*kebeles* were included under this three *kebeles* and it becomes unmanageable. Due to this reason the study is limited into two *kebeles*.
3. Some sensitive variables such as income and properties (assets) may not be correctly obtained and valued since few respondents were not willing to tell the exact amount. The responses therefore are not 100 percent perfect.
4. The budget provided to undertake the research is small. The study would be more comprehensive, had it been adequate.

Chapter Two

Review of Literature

2. Concepts and Measurements of Poverty

2.1 Concept of Poverty

According to the growing literature, poverty is said to exist in a given society when one or more persons do not attain a level of material well-being deemed to constitute a reasonable minimum by the standards of that society. Hence, the starting point in any poverty study is the question of how one measures or assesses well-being and at what level of measured well-being does one say that a person is poor or non-poor (Yohannes, 1996:32).

Ideally, there are quite a number of alternative indicators that one may use to quantify well-being or welfare at individual and household levels. These include per capita or per household income, consumption, and food expenditures; nutritional and anthropometric indicators, proportion of household budget spent on food, known as food ratio, basic needs and so on. Given the strength and set-backs of each indicator as a measure of welfare, the choice of a particular procedure largely depends on the nature of the source of data and the objectives of the study. But still, selection of a particular welfare indicator does not by itself give a definition of poverty. Since defining poverty consists of classifying the population into poor and non-poor, one must also decide where to draw the poverty line to transform welfare indicators into definitions of poverty (Yohannes, 1996:32).

Poverty is multi-dimensional and has to be looked at through a variety of indicators such as levels of income and consumption, social indicators and indicators of vulnerability to risks and socio-political access and participation. The most common approach to the measurement of

poverty is based on incomes or consumption levels. It is widely understood that an individual is considered poor if consumption or income level falls below some minimum level necessary to meet basic needs i.e. poverty line. The nature and level of basic need satisfaction varies along with time and societies and the poverty line to be established should be appropriate to the level of development, societal norms and values (World Bank Poverty Net).

Poverty is generally considered as a situation in which the underprivileged do not have adequate food and shelter, lack access to education and health services, are exposed to violence, and find themselves in a state of unemployment, vulnerability and powerlessness (Asmamaw, 2004:5).

Conceptualization of poverty also differs from country to country. For instance chronic poverty, mass poverty, etc are used to characterize poverty in developing countries. Chronic poverty refers to the state of being poor and failure to move out of it. Chronic poverty is characteristics of both rural and urban areas. A family without basic needs of survival, low quality of land, productive asset on rural areas and low access to education, health and urban facilities in urban areas is identified with chronic poverty. The view towards chronic poverty identifies the poor as inheriting poverty and passes it to the next generation e.g children (Tizita, 2001:29).

Poverty can be defined in broader or narrower sense. In the broader or narrower sense poverty is deprivation of well-being, which include not only lack of income but also other dimensions important for well being. These other dimensions of poverty include physical social, economic, physiological & political failure. In the narrower sense poverty describes as insufficient income & consumption. In this sense the focus is only on the low level of income ignoring other dimension of poverty (Sosa, 1997).

2.2 Poverty Measurement

Poverty line is a cut-off living standard level below which a person is classified as poor (World Bank, 1993). In setting a poverty line three alternative approaches can be followed. These are absolute, relative and subjective poverty levels.

2.2.1 An Absolute poverty

An Absolute poverty level is one which is fixed in terms of the living standard indicator being used and fixed over the entire domain of the poverty comparison (Ravallion, 1992). The most usual practice in defining an absolute poverty level involves estimation of the cost of a bundle of goods (both food and non-food) deemed to assure that basic needs are met in the specific domain of the poverty comparison. In most developing countries, absolute poverty lines have been set based on food expenditure necessary to attain some recommended food energy intake plus, in few cases, essential non-food requirements. Similar procedure was, for instance, followed by Dercon, Krishnana and Abdulhamid, (1994) in their study of rural poverty in Ethiopia. The method, however, has some shortcomings. According to Ravallion (1992), the major pitfall relates to determining the minimum food energy requirement, which can vary across individuals and over time for a single individual. In addition, the procedure is more of measuring food poverty. But, as noted by several writers, attaining adequate nutrition is not the sole motive for human behavior, even for the most poor; nor is it the sole motive in food consumption (Yohannes, 1996; Workneh, 2005).

Poverty is a situation where a population or section of a population is at most able to meet only its bare subsistence essentials of food, clothing and shelter to maintain minimum levels of living. Similarly, Theodore and Smith explain that it is a poverty thresh-hold below which living becomes mere physical survival, it is a state of existence in which the

overall needs of the individual is not satisfied due to lack of enough purchasing power or means of self-provisioning (food, shelter, clothing, health, etc). It is a condition where deprivation is so severe that the basic needs of life can scarcely be met at the minimum level required for survival (Workneh, 2005 ; Theodore and Smith, 2008).

2.2.2 Relative poverty

‘Poverty has always had several not entirely separable meanings and is always defined according to the conventions of the society in which occurs.’ That poverty is a relative concept appears only to require an appeal to common sense. For it is apparent that the poverty of an Indian peasant who may today die from starvation is a qualitatively different state from that which afflicts those who may call poor in European countries or in North America (Drothy, 1974:1).

In addition to this, Workneh also explain that it is a state of having welfare level (measured in income or expenditures or other well-being indicators) less than others. This does not involve those people who live a life standard of below the poverty line. Thus the relatively poor are those whose incomes are low compared to others even if they secure adequate level of survival. Thus relative poverty is a global phenomenon reflecting the existence of inequality. It is recognized as a problem when the difference between the richest and the poorest is intolerable in the sense that, the poor while not actually destitute or starving, are nevertheless deprived of many of the goods and services which others take for granted (Workneh, 2005:15).

2.2.3 Subjective poverty

The concept of subjective poverty is based on the premise that people are the best judges of their own situation and that their opinions should ultimately be the decisive factor in defining welfare and poverty. It

implies that poverty is subjective judgments people place on what constitutes a socially acceptable minimum standard of living in their own societies. Poverty in the voice of poor when they respond in attitudinal questions on household income and welfare can express subjective poverty (Workneh, 2005:16).

The poverty level set on the basis of such an approach is called the subjective poverty line. This approach explicitly recognizes that poverty lines are inherently subjective judgments people make about what constitutes a socially acceptable minimum standard of living in their own societies (Yohannes, 1996:33).

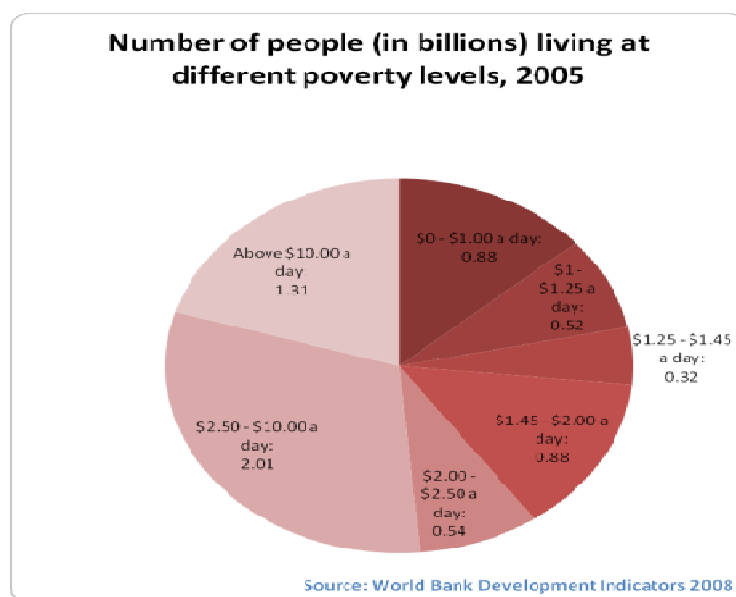
Subjective poverty which aims to elicit local people's conception of poverty deprivation and to harness their own priorities in the complex and heterogeneous societies in which they live. This approach explicitly recognized that poverty is inherently subjective judgment in individuals make up about what constitutes socially acceptable minimum standard of living in a particular society. The amount of income and expenditure individuals believe to sustain this minimum standard of living is subjective poverty (Townsend, 1997 cited in Tizita, 2001:32).

2.3 Global Poverty and Urbanization

Poverty affects large proportion of the world's population. There are many part of each country of the world including the richest in spite of their wealth where poverty is the problem. It was estimated that about quarter of the world's population live in absolute poverty with out adequate basic need (UN, 1996).

According to the World Bank Report of 2005 the following information gathered related to global poverty (Figure 2.1):

Figure 2.1 Number of People living at different poverty levels, 2005.



The World Bank’s long-held estimate of the number of people living on the equivalent of \$1 a day has now been changed to \$1.25 a day. The World Bank also adds that the previous \$1 a day estimate for the international poverty line would have been \$1.45 a day at 2005 prices if only inflation was accounted for (World Bank, 2008).

The revised estimates include a lot more recalculations and the \$1 a day measure used in some of the charts below are therefore not to be confused with the old \$1 a day measure, and where available, a \$1.45 measure is also provided as well as a more current \$1 a day measure. (Because some developing countries also have poverty lines at \$2 and \$2.50 a day, those are also shown, where available) (World Bank, 2008).

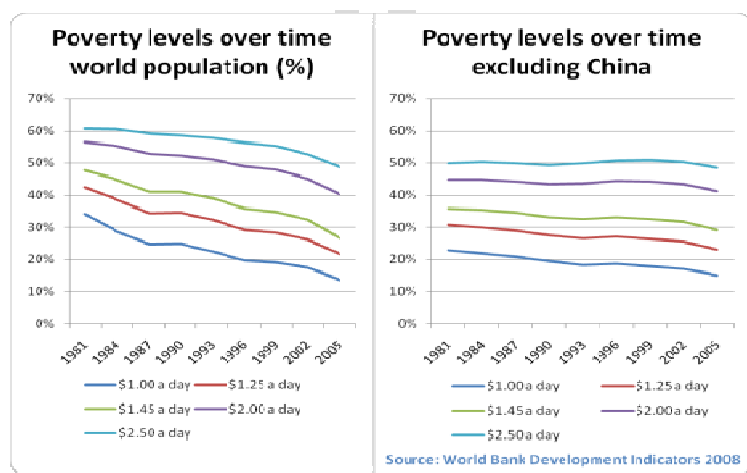
At a poverty line of \$1.25 a day, the revised estimates find 1.4 billion people live at this poverty line or below. This is more than the previous estimate of 984 million with the older measure of a \$1 a day in 2004. In 1981, the estimated number of poor was also revised upward, from 1.5 billion to 1.9 billion (World Bank, 2008).

The World Bank notes that “the incidence of poverty in the world is higher than past estimates have suggested. The main reason is that

[previous data] had implicitly underestimated the cost of living in most developing countries.” (World Bank, 2008).

The data also does not reflect the recent global food crisis and rising cost of energy, which is feared will bring another 100 million into poverty. Accounting for the increased population between 1981 and 2005, the poverty rate has, however, fallen by about 25%. While this at least sounds encouraging, it masks regional variations and perhaps most glaringly the impact of China: China’s poverty rate fell from 85% to 15.9%, or by over 600 million people. China accounts for nearly all the world’s reduction in poverty, and excluding China, poverty fell only by around 10%(world bank,2008).

Figure 2.2 Estimates of Global Poverty



Source: (world Bank, 2008).

The development of cities has led to significant improvements in living condition for many people all over the world by facilitating the provision of services to residents, by encouraging the proliferation of businesses and industries and by increasing modernization. In spite of these advantages, however there are times when cities have become place where the quality of life is deteriorating and opportunities are denied, particularly for the urban poor. In the light of the broader conceptualization of poverty, which is a many sided phenomenon in

which people encounter various kinds of deprivations, including lack of access to education, employment, health service, adequate housing, infrastructural facilities, social protection and personal security (Masika, Haan and Baden, 1997).

Similarly, urban people in poverty are those without sufficient education, secured employment, stable incomes, savings, proper housing and important networks, They are the people that are vulnerable to changes in demand in prices of basic goods and services, in unanticipated natural and human made disasters, and who can not afford adequate housing (Racelis, 2003).

2.4 Urban Poverty in Developing Countries

Poverty in developing countries is characterized by mass poverty, which is explained as a situation where more than half of the total populations of the country lives in poverty, as the reality shows in any standard the majority of the population of the countries are unable to win their daily breads (Tizita, 2001:29).

Urban poverty is usually tied to the growth of urban population. Rural poverty undoubtedly contributes to urban population growth; an effort to improve living conditions for urban poor may be to stimulate migration Lepton and Ravallion (1993) have pointed out that among other things, typically the highest incidence and severity of poverty are still found in rural areas. For many of the rural poor the only immediate route out of poverty is migration to obtain a higher expected although often a more uncertain one.

For the past three decades, much of the developing world has witnessed unprecedented levels of urbanization with more people flocking to urban centers in search of better economic opportunities and improved standards of living. Several interrelated factors including political

instabilities, civil wars and ethnic conflicts, deteriorating rural economics and living condition in the country side, push an increasing number of people to cities (FSS, 2003).

2.5 An Overview of Urban Poverty in Ethiopia

The multi-dimensional character of poverty in Ethiopia is reflected in many respects, such as destitution of assets, vulnerability and human development. The World Bank's definition of poverty indicates that poverty is "...a pronounced deprivation of well-being related to lack of material income or consumption, low levels of education and health, vulnerability and exposure to risk and voicelessness and powerlessness (World Bank, 2001).

Understanding poverty in the Ethiopian context also needs to consider its multidimensional characteristics which go beyond mere income and food provision. Such characteristic includes aspects of human capabilities, assets and activities necessary for sustainable livelihoods. (Carney, 1998).

Ethiopia is one of the world's poorest countries by any standard. According to a recent World Development Report, the country has the lowest GNP per head in the world, and its purchasing power parity adjusted GNP is ranked 200th out of 206 countries World Bank (2000). Human Development indicators of the United Nations Development Program (UNDP) also attest to the seriousness and extent of poverty in the country. For instance, the Human Development Index (HDI) of Ethiopia is the sixth lowest out of 175 countries in the world. Similarly, the Human Poverty Index (HPI) ranks Ethiopia 91st out of 94 developing countries (UNDP, 2003).

The poverty experienced by many Ethiopians is reflected in a range of well being measures of the population. For example, the life expectancy

at birth in the country is approximately 46 years, which is substantially lower than the average 77 and 67 years recorded for countries with highland medium human development indices, respectively. Moreover, three quarters of the population do not have access to an adequate water source, a figure that is amongst the highest for countries experiencing a low measure of human development. The percentage of population with access to suitable sanitation, which stands at 12 per cent, is significantly lower than the 53 per cent average for the sub-Saharan Africa (UNDP, 2003).

According to the USAID Report of 2002, 23% of the country's poor live in urban areas while 77% of the poor live in rural part of Ethiopia. And also 47% of the urban population is poor while the rest 53% are non poor (USAID, 2002).

Recent estimate of poverty indicate that Ethiopia is one of the poorest nations on earth. Social and welfare indicators of the country is the worst even by African standards. With per capital income of 115 USD (World Bank, 1999) Ethiopia ranked 170 out of 175. According to UNDP (1998), the human development index (HDI) for Ethiopia is one of the least 0.244 compared to HDI of 0.380 for Sub-Saharan Africa. Health, education and wafer indicators are indeed depressing, infant mortality is about 110/1000 live birth, morbidity 212 percent/1000 and nearly 40% of children under five show symptoms of malnutrition, only 45% of population has access to health services, primary school enrolment ratio may not be higher than 21% (Ermias, 2001 cited in Abebaw 2005).

Ethiopia, which is ranked 200th out of 206 countries according to the World Bank's GNP per capita (PPP) World Bank (2005), and 169th out of 177 countries based on UNDP's human devolvement index UNDP (2007/08), is one of the poorest nations in the world. Poverty is a deep rooted phenomenon in the country and is reflected in a range of well-being measures. For instance, life expectancy at birth is 51.8 years,

which is significantly lower than the least developed countries (54.5 years). The population with improved sanitation facility is only 13 percent, the second lowest under the group of low human development index. It is also only about the fifth of the population who have access to improved water sources, a very marginal proportion even as compared to the sub-Saharan Africa's average 55 % (UNDP, 2007/08).

The proportion of poor in Ethiopia whose total consumption expenditure was less than the total poverty line during the year 1990/00 was 44%. The proportions of people who are classified as poor are 37% in urban areas and assignment of income, urban poverty has become a serious phenomenon for Ethiopia, among which rural-urban migration, high rate of national increase, displaced people are prominent (Yassin, 1997).

2.6 Factors Contributing to Urban Poverty

A. Fast Urban Population Growth

Last year, Ethiopia has carried out its third national population and housing census to determine demographic trends in the country (CSA, 2007). According to the census result, Ethiopia is the second most populous country in Africa with a estimated population of 77.1million people.

Urban poverty in Ethiopia is exaggerated by high rate of urban population growth. The main factors underlying rising urban population revolve around natural population growth and rural-urban migration. The rural-urban migration is a result of the scarcity of land as compared to the growing rural population and the need for employment and income generating opportunities to support their livelihood. Urban poverty has, thus, been aggravated by the increase in population that is beyond what the urban economy supportes (CSA, 1997).

According to the census data only 15 percent of the Ethiopia population lives in urban settlements and this makes the country the least urbanized in sub-Saharan Africa where the comparable average figure is 34 percent. This suggests that rural to urban migration is not taking place on a large scale as is the case in some African countries. Nevertheless, there is a steady flow of rural people to the urban areas. While the evidence may be rather inadequate, there is reason to believe that the rate of rural to urban migration has not changed significantly in the last four to five decades (ibid).

B. Unemployment and Lack of Income

According to Ethiopia's Sustainable Development and Poverty Reduction Paper of 2002, unemployment and lack of income account for the poverty situation in urban areas. Studies conducted clearly revealed that urban unemployment increased from 7.9% in 1984 to 26.4% in 1999 which is a significant increase of three and half times over the 15 years period, particularly the highest increase in unemployment recorded for the youth in the 15-29 age range (CSA, 1994).

C. Weak Urban Governance

Urban poverty is exacerbated by absence of capable urban administration that could provide adequate social services and infrastructure to urban dwellers (Meheret, 1998).

2.7 Features of Poverty in Addis Ababa

Hosting 30 percent of the urban population of Ethiopia, Addis Ababa, the capital of Ethiopia and the diplomatic centre of Africa, is one of the fastest growing cities on the continent. Their population have nearly doubled every decade. In 1984 the population was 1, 412, 575, in 1994 it was 2,112, 737, and it is currently thought to be 4 million. UN Habitat

estimates that this number will continue to rise, reaching 12 million in 2024. Its geographic location, combined with its political and socio-economic status have made it a melting pot to hundreds of thousands of people coming from all corners of the country in search of employment opportunities and services. High rate of unemployment (31%), concentration of slum dwellings, and poor housing, infrastructure and sanitary development, characterize Addis Ababa more than the few good features it possesses. The challenge is not only to reverse current situation through balancing the economic growth with the population increase, but also to catch up with decades of neglect (UN-Habitat, 2008:7).

2.7.1 Employment

With its 4 million populations Addis Ababa is not only the primate city, but also a city where the greatest development challenges lie. Poverty aggravating factors, such as poor housing and unemployment, are becoming growing concerns. The unemployment rate in Addis Ababa has reached 31.4 percent. Even more worrisome is the continually growing population, outpacing by far job creation. Unemployment will therefore increase rather than decrease in the future. The monthly income of the majority of the employed households (60%) does not exceed USD \$ 68. This low income is aggravated by a dependency ratio of 28 percent. This means that for every 10 employed, there are nearly three dependent persons of age less than 15 years or older than 65 years of age. Cognizant of this challenge, the city government of Addis Ababa has been working towards creating employment in a multiple of directions. Initiatives include improving the investment climate, developing an integrated housing program with integrated employment creation and skills development), supporting the development of micro and small scale enterprises, and making micro-finance more available. The city administration plans to create 100 000 jobs through provision of credit, land and helping in the preparation of business plans. This may still be insufficient, as many of the jobs, especially in construction, are

temporary. Therefore unemployment in Addis Ababa remains a threat to the socioeconomic development at least in the short term (UN Habitat, 2008:8).

In context of Addis Ababa, has large unemployment as continuing immigration floods the local job market. Unemployment is a major contributor to poverty in the city: a third of the city's adults are unemployed—women more than men, youth more than middle-aged persons. A large part of the 30% of unemployed residents is involved in street vending occupations (USAID, 2002).

2.7.2 Housing Conditions in Addis Ababa

The differences in housing conditions in different developing countries are a function of differing level of per capita income, the distribution of wealth, the rate of urban growth and the form of societal organization. However, they also reflect difference in the responses of the poor in each city. Such responses vary dramatically according to the poor own expansion of their life chances, their own view, reasonable or what kind of housing they want and the degree to which they are organized to improve their housing situation. It is difficult for the poor to escape their poverty given the poor to escape their poverty given the economic and social situation, in most developing countries (Gilbert and Gugler, 1992).

The 1994 population and housing census indicated that there were about 380,307 residential housing units. The number of rooms in these housing units was 978,880, which give an average of 2.1 persons per room. Considering the materials of construction of housing units out of the total residential housing units the wall of 82.6 percent are made of wood and mud, 34 percent of stone and 8.5 percent of brick and the rest from other materials. With regard to the availability of housing amenities 70 percent, have radio sets. 16 percent have television sets and 18 percent have telephone sets (CSA, 1994).

2.7.3 Health condition

Health service provisions in Ethiopia, and Addis Ababa, have been improving the last five years. The current health coverage in the capital has increased to 85 percent, the distance traveled to find a health facility is less than 2 kilometers, vaccination coverage is 95 percent, and the rate of HIV/AIDS infections have started to decline. For instance, for the age groups 15 to 19, the rate of new infections of HIV/AIDS for women have declined to 7.7 percent, yet still nearly double that of men, at 3 percent (EDHS, 2005 cited in UN Habitat, 2008). This encouraging result has not only been achieved by the government. The private sector has also been playing a substantial role in improving the physical coverage. Practical access remains a challenge, as the private health institutions are not affordable for the majority of the population. Municipal authorities and government health facilities have tried to ameliorate the situation by offering to pay the cost, either in part or in full, for those who can prove that they are too poor to pay. In view of the high rate of poverty, and the lack of documentation for such, the central and city government needs to do more. A basic recommendation is increasing the number of health posts. These are smaller units closer to the community, and are important in distributing basic health information, and providing essential services. These include reducing the spread of infectious and water-borne diseases, preventing new infections, and treatment of, HIV/AIDS, decrease child mortality, and increase assisted delivery (currently at 50%) (UN Habitat, 2008:9).

2.7.4 Education

The education sector has, similarly to health, also improved in recent years. Gross Enrollment Ratios have reached 116.4 percent. The enrollment of girls has been better than that of boys, perhaps accounting for an earlier bias, and was 123 and 109 percent, respectively. Addis Ababa also out performs other regions of the country. The proportion of boys finishing secondary school was in 2005 19 percent in the capital,

while for all urban, Dire Dawa, and Oromia, the percentage was 13, 7, and 1.5 percent, respectively (UN Habitat, 2008).

2.7.5 Water Supply

Poor maintenance and lack of new facilities combined with rapid population growth has been causing water shortages in Addis Ababa. This shortage particularly affects the low income section of the city dwellers (UN Habitat, 2008).

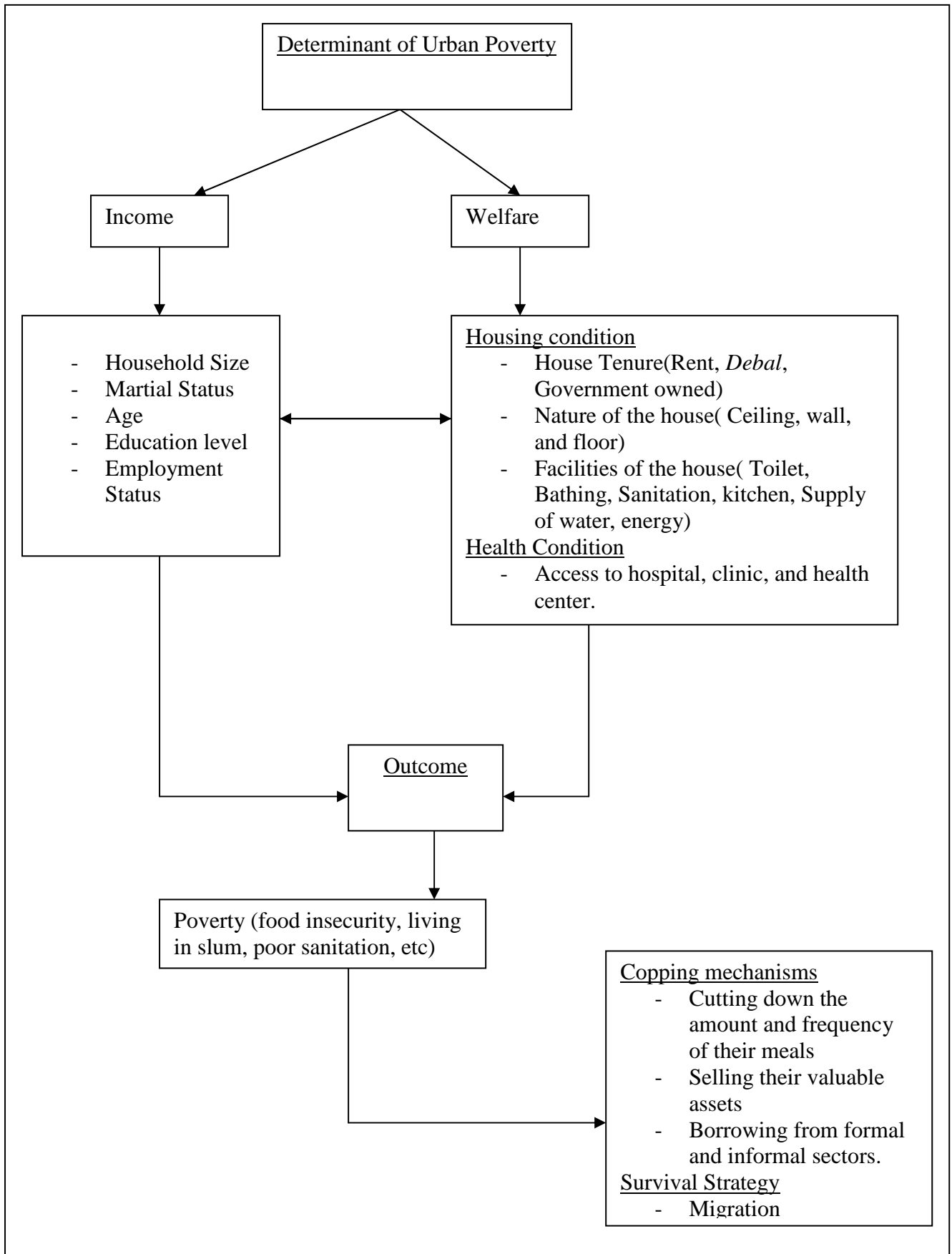
The majority of slum dwellings have no easy access to water supply. For instance, 34 percent of the residents get water from public taps, which are frequently interrupted. High volume of wastage due to faulty piping (as high as 35 percent), and needs priority given to industries, also contribute to the shortage. In order to address the water supply problem of the city, the Addis Ababa Water and Sewage Authority has planned to increase its production by 16 percent, and reduce wastage by 2 percent in this budget year (ibid).

2.7.6 Sanitation

The sanitation problem of Addis Ababa is one of the worst in the country. For instance 26 percent of the houses 47- and the majority of slum-dwellers, have no toilet facility, and thus use rivers, ditches and open spaces. A shortage of water-supply, ensure that the same areas are used for public baths and washing (UN Habitat, 2008:9).

The existing sewerage system is inadequate, and sucking by trucks is common. Hence, the sanitary situation may get worse in the coming few years, unless extensive funding and participatory urban plans are developed (ibid).

Figure 2.3 Analytical Frame work of Urban Poverty



Source: own construction

CHAPTER THREE

3. Research Methodology

3.1. Description of Study Area

According to the new city administration classification, Addis Ababa is divided into ten *kifle ketemas* (sub-cities). Among the Ten-*kifle ketemas*, Addis *Ketema*, *Arada*, *Kirkos* and *Kolfe* are the most disadvantaged, that is to say majority of the inhabitants are poor. The majority of population (60-70%) of such disadvantaged areas suffered from food insecurity (Tizita, 2001:7). Out of these disadvantaged areas, Addis *Ketema* sub city has been selected purposively.

Addis *Ketema* sub city is located in the northern part of Addis Ababa. *Gullele* borders in the north, *Arada* in the east, *Kolfe Keranio* in the west and *Lideta* in the south. It has area coverage of 742 hectares with a total population size of 255,092 (Addis Ababa City Administration, 2007).

3.2 Study Method

The study utilized both qualitative and quantitative methods.

3.2.1. Quantitative method

Quantitative measures are chosen in poverty research because of their scale and their anonymity. If the samples of respondents are large enough and carefully chosen, then quantitative measures are believed to provide an objective and relatively scientific picture of the sample selected (Tizita, 2001:33).

The main purpose of using quantitative data is to get households information like socio-economic data, income and expenditure profile,

relationship of different variables with income and expenditure, welfare indicators and change, and coping strategies of the household.

3.2.2 Qualitative Method

Qualitative standard cannot claim to be representative of poverty in any scientific service. Thus, critical academics mostly discarded them however; qualitative data can be linked directly to quantitative measures to increase the strength of quantitative measurement & description (Tizita, 2001:34).

Qualitative data consist of a range of behavioral traits such as beliefs, customs, values, knowledge and experiences and resulting structures, which cannot be accounted for in numerical terms (Degefa, 2005).

Qualitative measurement of poverty is known as giving life and meaning to the formally dry table groups of the arithmetic tradition of quantitative data.

Qualitative data has also been mainly used to investigate diversified housing conditions and facilities, coping strategies, course & dynamics of poverty & vulnerability, as well as people's perception & experience on poverty. The researcher uses qualitative data collection instruments such as focused group discussion and direct observation to support the quantitative one.

3.3 Research Design and Sampling Procedure

The data collection has been focused on gathering data from various sources so as to have the capacity of yielding pertinent baseline information indicative of measuring the situation of urban poverty. The data collection tools are outlined here below.

3.4 Primary Data Collection

Questionnaires focus group discussion, and direct observations have been used to gather primary data from households under the sample, community, respective office and stakeholders (GO's and NGO's).

3.4.1. Questionnaire

It has been used to gather the quantitative data from the sample households to get households information like socio-economic data, income and expenditure profile, relationship of different variables with income and expenditure, welfare indicators and change, and coping strategies of the household.

3.4. 2. Focus Group Discussion

This is one of data collection instruments of the study in question, which is used to acquire qualitative data from various groups of people such as women, men, youth representatives, *kebele* workers, elders and influential people.

Two separate FGDs were conducted in 10/11/12 and 13/15 *kebeles*. Issues focusing on poverty like the severity of housing related problems, toilet and coping strategies were discussed. FGD discussants have been selected from different categories according to sex and age. Each group consists of twelve members from various groups of people such as young, elder, sex worker, housewife, and *kebele* officials living in the sampled *kebeles*.

The necessary preparation was made to facilitate the discussion and motivate the group members to share their experience about the subject in question. The checklists were used to stream line the discussion and audiotape also used to record speech of the participants. Participants

were also probed by the mediator/team leader, to air out the information relevant to the study.

3.4. 2. Observation

Among the primary data collection techniques, observation is crucial to understand people's activity on the basis of how, what, and why are doing something.

It is one of the most important sources of information in a qualitative research. The researcher observed the physical condition of houses, furniture, sanitation aspects of the environment in each household, and other household related things in the natural setting, without bothering the interviewee by asking what can be easily observed.

3.5. Secondary Data collection

Secondary data / poverty profile and total population of Addis *Ketema* sub-city specifically at *kebele* level / have been obtained from different office documents, published and unpublished books, magazines, bulletins, research woks, and websites.

3.6. Sampling Procedure

Addis *Ketema* Sub City has been selected for the study because it is one of the most disadvantaged areas in Addis Ababa with the highest population concentration. The sub city is highly populated comparing with other sub cities in Addis Ababa.

Table: 3.1 Area, population density and List of *Kebeles* found in Addis *Ketema* Sub- City

Sub-city	Area in Hectare	Household Heads	Density	Number of <i>Keble</i>
Addis <i>Ketema</i>	742	255,092	343.79	01/02/03,04/05,06/07,08/09/18,10/11/12,13/15,16/17,14/21,19/20

Source: (Addis Ababa city Administration; 2007)

Addis *Ketema* sub-city has nine *kebeles*. Out of these *kebeles*, *kebele* 13/15, and 10/11/12 are purposively selected. According to the officials in the sub-city, these *kebeles* are among the *kebeles* where large numbers of poor people are residing. Random sampling technique is applied in order to select 200 sample households from 55,762 total sample populations of two *kebeles*.

3.7. Data Analysis and Interpretation

The collected data has been analyzed and interpreted both qualitatively and quantitatively. When using quantitative methods data has been analyzed through different statistical techniques and descriptive statistics (such as percentage, mean, minimum, and maximum) have also been used to analyze quantitative data. The qualitative data from FGD and observation has been contextually analyzed and it has been triangulated. The summarized data has been displayed in diagrams or tables to look for possible relations between variables.

Chapter Four

4. Description and Analysis of Data

4.1 Social –Economic Characteristics of the Study Population

4.1.1 Age of the Respondents

The age of the respondents classified by age group depicts uniformity with slight difference that excepting in the lower and higher ages 18 and 70 respectively. Large proportion of the respondents lies in the age group 31-40, which account for 30.7 % and the lowest below 21 ages (1%). The data on age is very important for the description and analysis of socio economic characteristics and income generating capabilities. The age structure of study population is indicated in the Table 4.1.1.

Table 4.1.1 Age and Sex Composition of the Household

Characteristics		Frequency	Percent
Age	Below 21	2	1.0
	21-30	50	25.1
	31-40	61	30.7
	41-50	40	20.1
	51-60	33	16.6
	Above 60	14	6.5
	Total	200	100
Sex	Male	70	35.0
	Female	130	65.0
	Total	200	100.0

Source: (Own fieldwork, 2010)

Quite several studies have discussed the phenomena of feminizing poverty which assumed that the prevalence of poverty is higher to female-headed households than male-headed ones. Different scholars support this assumption by providing various justifications. This could be due to the presence of discrimination against women in the labor

market, or it might be because women tend to have lower education than men do and therefore they are paid less salaries. Or else, they are in general deprived the opportunities of exercising when compared to men in many respects.

The total number of target respondents were 200 households, of these 130(65%) were female and 70(35%) were male. The numbers' variation is almost twice between male and female. This is because samples taken through random sampling method unfortunately most of the respondents were females. In addition to that the study area livelihood is manifested by commercial sex workers and this is also one of the factors to have a variation in sex.

4.1.2 Marital Status

Table 4.1.2 shows the percentage of respondents by marital status. With respect to martial status, 81(40.5%) of the respondents are married, 45(22.5 %) were divorced, 38(19.0%) were widowed, 30(15.0%) were never married and 6(3.0%) were separated from their spouse.

Table 4.1.2 Martial Status

Martial Status	M	F	N	Percent
Never married	12	18	30	15.0
Married	37	44	81	40.5
Widowed	11	27	38	19.0
Divorced	10	41	51	25.5
Total	70	130	200	100

Source: (Own fieldwork, 2010)

4.1.3 Ethnicity and Religion

Regarding the ethnic composition of the respondents, Amhara took the majority 45.2 %, Oromo 21.6%, Gurage 17.1 % and the rest 1.5% other ethnic composition. As regards religion orthodox Christians comprise

69%, Muslim 26.5%, Protestants 3.5% and others took the rest 1 % (Table 4.1.3).

Table 4.1.3 Ethnic and Religion Composition

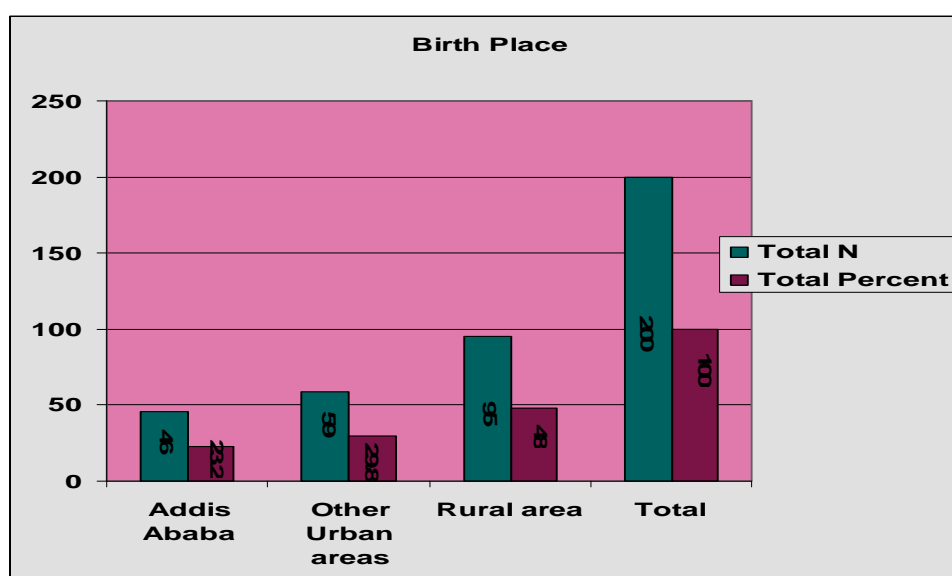
Ethnicity	N	Percent	Religion	N	Percent
Amhara	90	45.2	Orthodox	138	69.0
Oromo	43	21.6	Protestant	7	3.5
Tigra	29	14.6	Muslim	53	26.5
Gurage	34	17.1	Other	2	1.0
Other	4	1.5	Total	200	100.0
Total	200	100			

Source: (Own fieldwork, 2010)

4.1.4 Birth Place

Most of the respondents 91(45.5%) were born in rural area, 59(29.5%) of them were born in other urban areas and 46(23.0%) were born in Addis Ababa (Figure4.1). It might show the rate of migration from other urban and rural areas of Ethiopia in to Addis Ababa.

Figure 4.1: Birth Place



Source: (Own fieldwork, 2010)

4.1.5 Educational Level

The data shows that 25(12.5%) never attended in school, 55(27.6) of the respondents can read and write, 19(9.5%) attended in religious school, 18(9.0%) and 17(8.5) attended in secondary and primary school but they did not complete their education level, respectively (Table 4.1.4)

Table 4.1.4 Educational level

Education	M		F		Total	Percent
	N	Per	Total	Per		
Never attend school	7	10	18	13.8	25	12.5
Literate(Read & Write)	14	20	41	31.5	55	27.5
Traditional(Religious)	19	27.1	0	0	19	9.5
Primary school incomplete	5	7.1	12	9.2	17	8.5
Primary school complete	4	5.7	7	5.4	11	5.5
Junior school incomplete	4	5.7	11	8.5	15	7.5
Junior school complete	3	4.3	7	5.4	10	5.0
Secondary school incomplete	5	7.1	13	10	18	9.0
Secondary school complete	3	4.3	9	6.9	12	6.0
Vocational/Technical	4	5.7	10	7.7	14	7.0
College diploma	2	3	1	0.8	3	1.5
No response	0	0	1	0.8	1	0.5
Total	70	100	130	100	200	100.0

Source: (Own fieldwork, 2010)

4.2 Income Aspects of Poverty and Poverty Line Measurement

4.2.1 Income Status

It is very difficult to create association between different socio-economic variables and income of the households. However, in this study an attempt has been made to make poverty analysis based on income and expenditure of the households. Income has been traditionally used as a

measure of material deprivation. Moreover, in developing countries' settings, the households are likely underreporting their income.

Holding other variables constant, there is no need to debate that income directly or indirectly dictates the well/bad/ being of an individual. It has, indeed, a multiplier effect on the living standard of people and as a result, many countries still use income as a single most important proxy of poverty (Esubalew, 2006).

Distribution of respondents by income is one of the central analyses of poverty of the urban societies. Therefore, in this part an attempt is made to assess the income distribution of the respondents in Addis *Ketema kefle ketema kebele* 10/11/12 and 13/15 of Addis Ababa. It is observed that out of 200 household respondents 43(21.5%) lay below the income level of 400 birr per month, the majority 65(32.5%) lies between 401-700, 42(21.0%) earn 701-1100 birr per month, 30(15.0%) of them included on the gap of 1101-1600 and the rest 20(10.0 %) earn above 1600 birr.

When we come to *kebeles* disaggregate data, In the case of *kebele* 13/15; 24.7% of the respondents have total monthly incomes of less than Birr 400, almost 35.7% have total monthly incomes between Birr 400 and Birr 700 While only 4.9 % of households report total monthly incomes of Birr 1600 or above .

The distribution of *kebele* 10/11/12 households by income group is similar to that of *kebele* 13/15 households. Almost 18.2% of the *kebele* 10/11/12 households earn monthly income less than Birr 400 and 29.3% earn monthly income between 401-700 while only 15.1% have total monthly income of Birr 1600 and above. Thus, all the sample households have high proportions of low income groups and live in absolute poverty but when we compared to the two *kebeles* (10/11/12 and 13/15), *kebele* 10/11/12 is better than that of *kebele* 13/15 (Table 4.2.1).

Table 4.2.1 Income category per month

Income category per month	<i>Kebele</i> 10/11/12		<i>Kebele</i> 13/15		N	Percent
	N	Percent	N	Percent		
Below 401	18	18.2	25	24.7	43	21.5
401-700	29	29.3	36	35.7	65	32.5
701-1100	20	20.2	22	21.8	42	21.0
1101-1600	17	17.2	13	12.9	30	15.0
Above 1600	15	15.1	5	4.9	20	10.0
Total	99	100	101	100	200	100

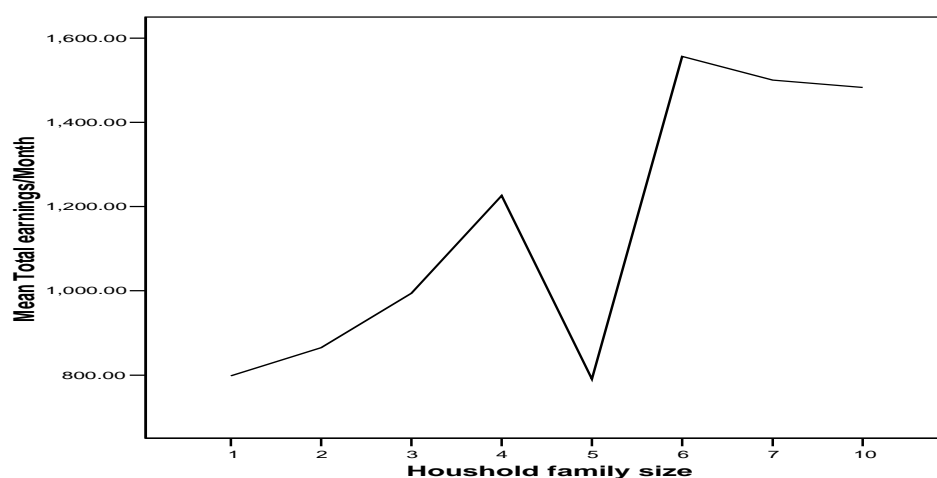
Source: (Own fieldwork, 2010)

4.2.2 Household Size and Income Level

It is very difficult to create a kind of strong association between different socio economic variables and income of the households. However, in this study an attempt has made to make poverty analysis based on income and expenditure of the households. Income has traditionally used as a measure of material deprivation.

Household size can be taken as one of the factors that affect the well being of households. Table 4.2.2 clearly shows the average monthly income and per capita income of the household interims of household size. When the size of household increases, household income increases too (household size increases from 5-6 person to 7-8 person average income also increase from 1,072.89 to 1,500.00). As the combined income of household members explains there is positive relationship between household income and household size (0.28, correlation, Figure 4.2). However, it is known that the number of dependents in a single household have adverse effect on income. While if the household members are capable, the income of the household will increase. So that sometimes the increment of household members contributes for generating income and sometimes it has negative effect.

Figure 4.2 Correlation between income and family size



Source: own field work

Related with this Esubalew (2006) also argues that the relationship of productive household and non-productive families members to the income generation. In developing countries, often times, not all household members of a given family are under normal circumstance productive. There are some who are dependent either because they are too young to be employed, retired, or are unable to participate because of disability. It is, therefore, imperative that knowing the number of productive citizens within a family and the way out of poverty is very much contingent upon these household members. A priori knowledge tells us that the more economically active household members in a family, *ceterus paribus*, the less likely the family falls into poverty.

Table 4.2.2 Income level according to household size

Category of HH size	N	Percent	Average Monthly Income	Per Capita Income
1-2 Person	81	40.5	828.1	552.1
3-4 Person	82	41.0	1,086.7	310.4
5-6 Person	28	14.0	1,072.8	195.0
7-8 Person	8	4.0	1,500.0	200.0
9 and above	1	0.5	1,483.0	156.1
Total	200	100	993.1	386.7

Source: (Own fieldwork, 2010)

4.2.3 Expenditure Level of the Household

As it has been known respondents refuse to give proper response for their income whereas they have positive attitude to give the profile of expenditure. According to Table 4.2.3 shows that the monthly expenditure of the household ranges from less than 400 up to above 1600 birr. In general 31.5% of the respondents have spent with the range of 700 -1100 birr in a month. 27.5 % of the respondents also have spent with the gap of 400-700 birr per month. 20% of the respondents have spent of 1100-1600 birr per month. 9% of the household spent less than 400 birr. Even though the household do not respond their income properly, the expenditure data is well reported.

The expenditure of households has been found to depend mainly on income levels of the most households.

When we come to *kebeles* disaggregate data, in the case of *kebele* 13/15, 8.4% of households have total monthly expenditure of less than Birr 400, almost 29.5 % have total monthly expenditure between Birr 400 and Birr 700, While only 4.9 % of households report total monthly expenditure of Birr 1600 or above .

The distribution of *kebele* 10/11/12 households by expenditure is similar to that of *kebele* 13/15 households. Almost 9.5% of the *kebele* 10/11/12 households spent monthly expenditure less than Birr 400 and 25.7% earn monthly expenditure between 401-700 while only 9.5% have total monthly expenditure of Birr 1600 and above. Thus, all the sample households have high proportions of expenditure but when we compared to the *kebeles* (10/11/12 and 13/15), *kebele* 10/11/12 is better than that of *kebele* 13/15. This indicates that most of *kebele* 10/11/12 and *kebele* 13/15 households are unable to meet the minimum expenditure level.

Table 4.2.3 Expenditure profile

Expenditure	<i>Kebele</i> 10/11/12		<i>kebele</i> 13/15		N	percent
	N	percent	N	percent		
Below 401	10	9.5	8	8.4	18	9.0
401-700	27	25.7	28	29.5	55	27.5
701-1100	36	34.3	27	28.4	63	31.5
1101-1600	22	21.0	18	19.0	40	20.0
Above 1600	10	9.5	14	14.7	24	12.0
Total	105	100	95	100	200	100

Source: (Own fieldwork, 2010)

4.2.4 Monthly Expenditure and Household Size

As presented in Table 4.2.4 the general monthly expenditure of households increases as their household size increases. This is the general effect of combined household members' income. As the household size increases the combined income of the household has also increased if they are productive.

Table 4.2.4 Expenditure and household size

Category of HH size	N	Percent	Average Monthly Expenditure
1-2 Person	81	40.5	629.6
3-4 Person	82	41.0	963.9
5-6 Person	28	14.0	1268.6
7-8 Person	8	4.0	1129.2
9 and above	1	0.5	876.6
Total	200	100	973.6

Source: (Own fieldwork, 2010)

4.2.5 Age of the Household and Average Income

Some scholars argue that poverty increases at old age. This is because productivity of the individual decreases and the individual has few savings to compensate for the decrease of productivity and income. This is, of course, more likely to be the case in developing countries where savings are low because of low income and at the old age being mostly dependent. Others contend that age is correlated with higher productivity and hence impacts welfare positively. A third view that could be worthy of note to see is that neither of the two approaches be correct. This is because the relationship between age and poverty might not be linear, as we would expect that incomes would be low at relatively young age, increases at middle age and then decreases again. Therefore, according to life theories we would expect to find that poverty is relatively high at young ages, decreases during middle age and then increases again at old age (Szekely, 1998 cited in Mekonnen, 2002).

According to the Table 4.2.5, the incomes of household increases in the age category of 21-50 which mean active age have a positive role with income generation of the household.

Table 4.2.5 Age of household head and income level

Age category of household head	N	Percent	Average Monthly Income	Per Capita Income
Below 21	2	1.5	973.0	648.6
21-30	50	25.0	852.2	461.1
31-40	61	30.5	957.6	400.8
41-50	40	20.0	949.6	310.0
51-60	33	16.5	1265.6	352.9
above 60	13	6.5	964.2	292.7
Total	200	100	993.1	386.7

Source: (Own fieldwork, 2010)

4.2.6 Martial status, Income Earning and Expenditure

Marital status of the household head is an important ingredient of the demographic variables. Economic theory and most empirical literatures support the notion that the chance of falling into poverty increases as one is married. This is due to when people get married household size will increase as new children are born and expenditures increase which in turn leads to searching for mechanisms of fulfilling additional needs and necessities for the family. On the other hand as one is married the probability of falling into poverty decreases, as there would be more labor forces in the household (Esubalew, 2006).

The result of the survey here also shows that (Table 4.2.6) monthly income of the households is higher in the cases of both married and single household heads. It is; however, lower in the cases of divorced and widowed household heads. And also in case of expenditure the same result was found, single and married households have got higher expenditure while in case of widowed and divorced households have got the decline of expenditure.

Table 4.2.6 Martial status by Income Earning and Expenditure

Martial Status	N	Percent	Average Income Earning/month	Average Expenditure/month
Single	30	15.0	919.2	1195.9
Married	81	40.5	1,195.7	1013.0
Widowed	38	19.0	910.0	833.0
Divorced	45	22.5	737.6	444.4
Separated	6	3.0	1,000.0	955.0
Total	200	100	993.1	876.6

Source: (Own fieldwork, 2010)

4.2.7 Educational level and Income and Expenditure of the households

Education increases the stock of human capital which in turn increases labor productivity and wages. Since labor is by far the most important asset of the poor, increasing education of the poor will tend to reduce poverty.

Access to education is one of the factors that indicate the economic wellbeing of households. When household's have an access to better education mean there is direct or indirect relation with the demand and need of the household and better consumption and expenditure.

Even though the average income of the total households is low, their educational attainment has its own impact on their income. For instance as Table 4.2.7 shows except for illiterates the average income of most households is above 700 birr. Educational status might have positive role for increment of household income. In addition to this low education leads to poverty and poverty leads to low education. Our interest is not to discuss the vicious circle of poverty but to see the effect of education on poverty.

Table 4.2.7 Educational level by Income and Expenditure of the Households

Educational level	Average combined monthly income of households		
	N	Average Income	Average expenditure
Never attend school	25	695.8	595.3
Read and write	74	1022.7	779.8
1-8 grade	53	919.3	1011.0
9-12 grade	30	1288.4	850.1
College +	18	942.4	1309.1
Total	200	973.7	909.1

Source: (Own fieldwork, 2010)

4.2.8 Type of Household Head Occupation

As far as employment activities are concerned, the majority of the respondents are engaged in petty trade (50.1%). House wife (16.6%), civil servant (13.8%), 11.6% bar girl and 10.5% are pensioner (Table 4.2.8). From this the respondent's main occupation is petty trade because the study area, Addis *Kifle ketema*, is surrounded by the biggest market *Merkato*. So this might help the respondents as good opportunity. In addition, bar girl accounts large numbers of women occupation this is because the area is exposed to sex workers particularly *Sebategne and Fasile Pharmacy* area.

Table 4.2.8 Household Head Employment Status

Household head Occupation Type	<i>Kebele</i> 10/11/12		<i>Kebele</i> 13/15		Total	Percent
	N	Percent	N	Percent		
Civil servant	17	15.7	8	8.7	25	13.8
International organization employee	3	2.8	1	1.0	4	2.2
Petty trade	52	48.2	42	45.7	94	51.9
Casual worker	4	3.7	0	0	4	2.2
Home maker(house wife)	12	11.1	18	19.6	30	16.6
Employer	2	1.8	0	0	2	1.1
Pensioned	11	10.2	8	8.7	19	10.5
Bar girl	7	6.5	15	16.3	22	12.2
Total	108	100	92	100	200	100.0

Source: (Own field work, 2010)

4.3 Poverty Analysis of Welfare Indicators

4.3.1 The Main Asset You Have

As shown in Table 4.3.1 most of households (52%) have only bed as an asset. 27% of the respondents have house and bed as an asset. 1.5% of the respondents are clothes as asset. Only 7.0% of the respondents are having a house as an asset. The remaining 12% of the respondents have no any asset (Table 4.3.1).

Table 4.3.1 The Main Asset You Have

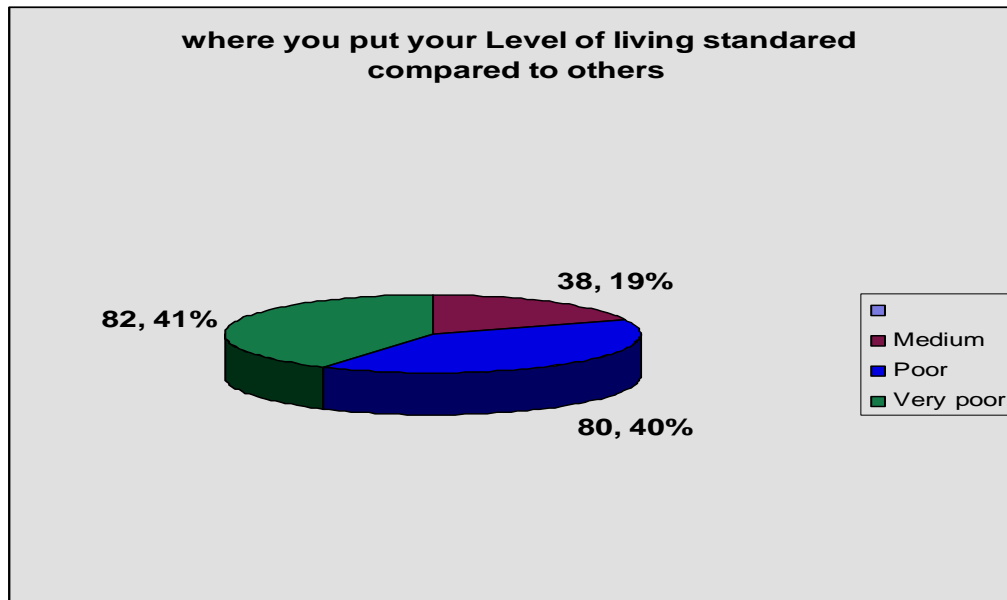
The main asset you have	N	Percent
House	14	7
Bed	104	52
House furniture like table, chair	1	0.5
wearing	3	1.5
1 to 3	54	27
Have no any asset	24	12
Total	200	100.0

Source: (Own field work, 2010)

4.3.2 Comparison to community your level of living standard

There are different welfare indicators said as that help analyze the levels of households well being. Based on households' perception about access to different social services some attempt of welfare analysis has been made. Accordingly respondents were asked about where they categorize themselves in terms of income level. About 41.0% of the respondents reported that they see themselves as belonging to very poor. About 40% reported that they belonged to poor category. Whereas 19% of the respondents perceive themselves as medium category (Figure 4.3).

Figure 4.3 where you put your level of living standard compared to others



Source: (Own field work, 2010)

4.3.3 Income changes over the years 2005-2010

Regarding to the income change over the period 2005-2010, 36.5 % of the respondents stated that their income did not change, 26% of the respondents decreased and 11% did not know the change of income over time while 21% of the respondents' income increased, the remaining 11% of the respondent said did not remember the change. It shows that the majority (62.2%) of the respondent's income either decreased or remain the same (Table 4.3.2). Besides, the participants of FGDs also clearly stated the income change of the society who lives in the study area as follows:

Most of the households are losing their income generating capacity and become poorer and poorer than the previous decades. This is because of inflation/ the price every items consumed by the household has continually increased without considering income of the household/. As a result, people who live in this area suffer much

from this problem and poverty becomes highly manifested from time to time.

(Source: FGD, held at *kebele* 10/11/12, 2010)

Table 4.3.2 Income change over the period 2005-2010

Income change	N	Percent
Decreased	52	26
Increased	42	21
Unchanged	73	36.5
Don't know	22	11
Did not remember	11	5.5
Total	200	100

Source: (Own field work, 2010)

4.3.4 Change in expenditure on basic needs

Regarding expenditure of basic needs, 44% of respondents argued that expenditure of basic needs is unchanged, 36.5% increased and 14% decreased ,the remaining 11% of the respondent said did not remember the change(Table 4.3.3).

Table 4.3.3 How do you see change in expenditure on basic needs?

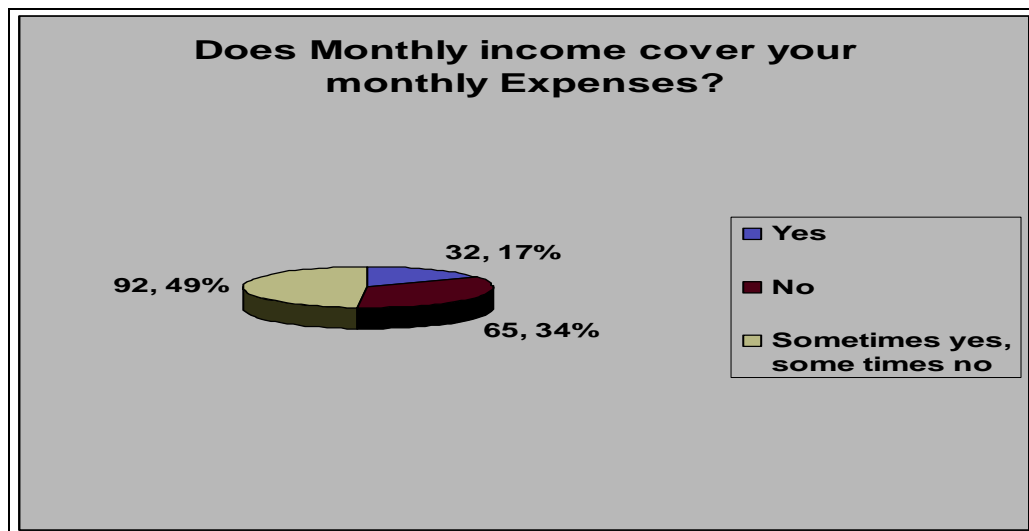
Change in expenditure	N	Percent
Decreased	28	14
Increased	73	36.5
Unchanged	88	44
Did not remember	11	5.5
Total	200	100.0

Source: (Own field work, 2010)

4.3.5 Does your monthly income cover your monthly expenses?

34.4% of the respondents reported that their monthly incomes could not cover their monthly expenditures. 48.7% claimed that their monthly income sometimes covered their monthly expenditures and sometimes did not. 16.9% of the respondents responded that income cover expenditure. This shows that there income of the most households is not enough to cover their expenditure (Figure 4.4).

Figure 4.4 Does monthly income cover your monthly expenses?

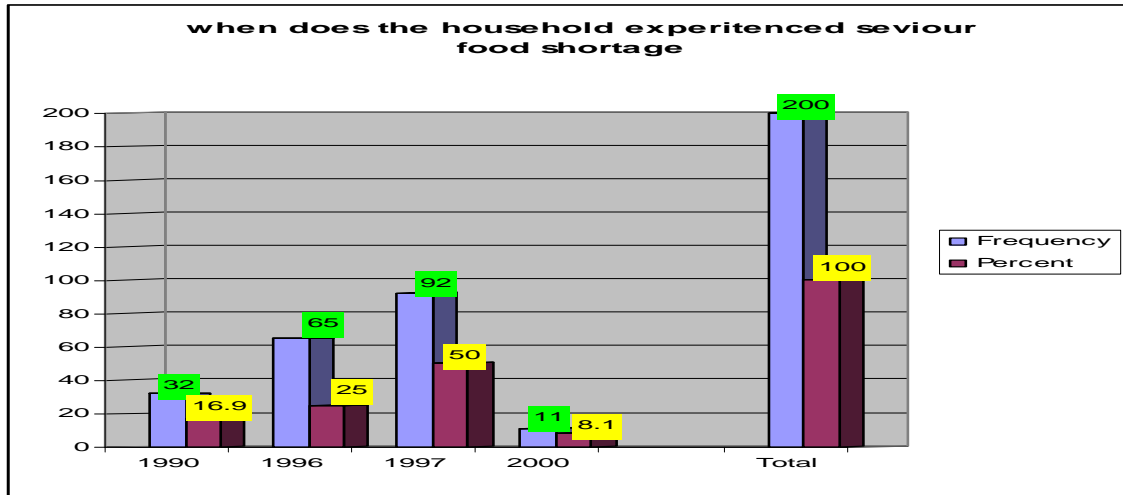


Source: (Own fieldwork, 2010)

4.3.6 Food Security

As it is seen in Figure 4.5, during the period of 1997 E.C most of the respondents (50.0%) had experienced of food shortage. 25.0% of the respondents had experienced food shortage during the period of 1996. 16.9% of the respondent also have experienced of food shortage in 1990. 8.1% of the respondents had experienced food shortage in 2000.

Figure 4.5 When does the household experienced sever food shortage?



Source: (Own fieldwork, 2010)

4.4 Housing Conditions

4.4.1 Nature of the house (Wall type, Construction material for floor and material of roof)

The emergence and growth of informal settlement in Addis Ababa dates back a century, but has become acute in the last 25 years. The Derg military regime succeeding Haile Selassie nationalized all land and rental houses shortly after taking power in 1974. Rental houses were given to the *kebele* (or dweller association) for administration, but having cut rent by as much as 70 percent, and passing all revenue to the central government, there was not much left for maintenance and construction. As a result, half of the *kebele* houses, accounting for 40 percent of the total housing stock, need replacement (UN Habitat, 2008).

Measuring housing quality by major indicators that are availability of adequate space for privacy and mobility and physical condition of the houses, most of the dwellings in the city are termed as low level of quality. About 31% of the housing stock had only one room and the average number of households in one-room house is 1.1 (CSA, 1999). Therefore, about 24.8% of all Addis Ababa household are living in overcrowded dwellings. (USAID 2002) with regard to physical condition, the feature of most of the units is in need of replacement because, 82.3%

of the total housing stocks are built up of mud and wood and served for more than 40 years (Ibid).

Similarly, study investigated the housing condition like building materials (like mud 35.5% followed by wood which is only 6%, Bricks 2%, stone 5.5%, wood and mud 46.5%). Houses made of stone and bricks are of the better quality, but in the study area, it is the lowest (less than 8%).

As indicated in Table 4.4.1. the floor of the houses is made from different materials: Earth (57.8%), cement (37.5%), wood (1.6%) and only 0.5 percent of the houses have plastic tile and other materials of floor takes 6.6%.

As regard type of roofs, about 44.4% of housing unit's roof is constructed from corrugated iron sheet and 34.9% is from thatch/ wooden materials. Even- though the highest percentage of households' roof type is corrugated iron sheet, most of them are old and leaking. About 19% of the houses are constructed from other material that clearly indicates poor well- being of some households. In addition to this, most of the houses have no ceiling (32%), some of houses has ceiling that is made from fabrics or textile materials (33%) and also 28% of the house ceiling is made from other materials like *Joniya*, *Kartoni* and *madberia* (*packing materials*).

Figure 4.6 Wall, Ceiling and Floor of the house found in Addis *Ketema* Sub-city, *kebele* 13/15



Wall



Ceiling



Floor



Furniture

Table 4.4.1 Nature of the house (Wall type, Construction material for floor and material of roof)

Wall type	N	%	Construction material for floor	N	%	Materials of roof	N	%	Construction material for ceiling	N	%
Mud	71	35.5	Earth	111	57.8	Corrugated Sheet	84	44.4	Has no ceiling	64	32
Wood	12	6	Cement	72	37.5	Plastics	13	6.8	Fabrics	66	33
Bricks	4	2	Wood	3	1.6	Reed/Bamboo	1	0.5	Chip wood/hard board	8	4
Stone	11	5.5	Plastic tile	1	.5	Thatch/wooden material	66	34.9	Wooden	5	2
Wood & Mud	93	46.5	Other	13	6.6	Other	36	19.0	Concrete	2	1
Other	9	4.5	Total	200	100	Total	200	100	Other	56	28
Total	200	100							Total	200	100

Source

e: (Own field work, 2010)

4.4.2 House Tenure System, Renting, and Number of Rooms

The housing of the study area is classified based on tenure system. Table 4.4.2 shows that the tenure types are: private (7%), rented from kebele (61.4%), rented from private owners (17.5%), rented from Addis Ababa Administration of Rented Houses /AARH (2.5%), rented (from kebele house owners 2.6%), *Debale* (shared with others 5.5%), and other 5.5%. Of course, it is clear that poor housing conditions and availability of facilities are among the indicators of poverty. The majority of houses in the study area are constructed from poor materials. Therefore, housing as an indicator may represent individual's status, level of income and considerable degree of self-image. In other words, the poor quality of housing is the direct indicator of poverty in urban areas.

As shown in tabel4.4.2, majority of the households live in rented *kebele* houses. This issue was also discussed by the participants of FGD: and they described as follows:

As it has been known kebele houses are relatively cheaper than private houses and cost on average Birr 10 to 15 per month, but many households could not to afford pay their rents regularly.

In addition to this, the private rented house users have complained that the rent is far beyond what they can afford and repeatedly applied for kebele houses, even though they did not get positive response from the kebele administration.

(Source: FGD held at *kebele* 13/15, 2010)

Table 4.4.2 House Ownership type

House Ownership type	N	percent
Owned (private)	14	7
Rented from <i>Kebele</i>	116	58
Rented from private owners	35	17.5
Rented from administration of rented houses(AARH)	5	2.5
Rented from <i>Kebele</i> house owners	5	2.5
<i>Debal</i> (Share with others)	14	7
Others	11	5.5
Total	200	100

Source: (Own field work, 2010)

As shown in Table 4.4.2, the most of the respondents (85.2%) live in rented houses. This indicates that there is high problem of housing and unable to pay house rent timely and (88.2%) of respondents also reported that they did not pay the house rent regularly, while 11.8% made the payment of the rented house timely. The major reason stated by the respondents (96.7%) is inability to pay the rent due to lack of enough money, whereas 3.3% only raised the problem of housing condition not for pay the rent.

Table 4.4.3 House Renting and related problem

Are you paying regularly	N	Percent	Reason for not Paying Regularly	N	percent
Yes	150	88.2	I haven't enough money	88	96.7
No	20	11.8	The house is too old and not repaired	3	3.3
Total	170	100.0	Total	91	100.0

Source: (Own field work, 2010)

As depicted in Table 4.4.4, 69.1 % of the respondents reported that housing units is have no enough rooms for the family members, whereas the rest 30.9% of the respondents mentioned that their houses are sufficient for their family. Moreover, most of the respondents (55.3%) stated that families have crowded in single, and 22.1% have two class rooms. This shows that majority of the respondents live in a single and overcrowded room/the ratio of room to person is high and overcrowded so this is one of the manifestation of urban poverty.

During the discussion time of FGD, participants live in 13/15 *kebele* (the so called *Fassil pharmacy area*) expressed the severity of housing problem in the following way:

The family members including small children are forced to leave the house during the night time. This is because during the night time their room rented for travellers. At that time, children play foot ball at the main road this indicates that children cost the sleeping time in order to generate income.

Table 4.4.4 Housing and number of rooms

Is the house enough for your family	N	Percent	How many rooms does your house have?	N	Percent
Yes	59	30.9	One	105	55.3
No	132	69.1	Two	42	22.1
Total	191	100.0	Three	29	15.3
			Four	6	3.2
			Above four	8	4.2
			Total	189	100

Source: (Own field work, 2010)

Observations of the selected areas uphold the belief that these areas were indeed the poorest. In most cases, a lot of small houses are attached together in a compound where the sanitation is horrific; sewage and waste disposal systems are out of question and, in some

cases, liquid waste flows out on to the streets. Most of the houses where questionnaires were administered lacked basic furniture, toilet, bathing facilities, kitchen, bed, and communication equipment (telephone, radio, television). In many places a single room serves as a living room, a bedroom, bathing room, and a kitchen, all in one (Figure 4.7). In addition, sometimes this room serve as means of generating income. Some houses are converted into two-storey structures, where the space above the ceiling serves as extra room, which is climbed into using a ladder attached to one side of the wall. The ceiling area which serve as either a living room for the family member or rented for outsiders.

Figure 4.7 Housing Condition in Addis Ketema Sub-city of 13/15 *kebele*.



4.4.3 Supply of drinking water

Urban areas of Ethiopia are still constrained by sufficient quantity and quality of water services. It becomes common that water related diseases like *Jardia*, *Diarrhea* and *Ameba* are affecting most people due in part to lack of pure water. Improved water sources can make the

population safer and healthier for all its children. Of course, the importance of water in poor people’s lives goes far beyond the significant health-related outcome to broader issues of livelihoods and wellbeing.

The numbers of households who have tap water inside their home or compound are believed to be too small. Households either share pipes far from their homes or buy drinking water from their neighbors at a much higher cost than the recommended rate. Thus, water is the mandatory component for life, households of urban Ethiopia face acute problems (UN Habitat, 2008).

The distribution of the housing unit by the source of water supply is presented in Table 4.4.5. The highest proportion, 33.5 % of the household use water from public tap outside the compound, 20.7 % use shared tap in compound, 13.3% use water inside the house, 12.8% of them use outside compound shared tap while only 19.7 % of them use private tap in the compound privately.

4.4.5 Distribution of household by source of drinking water

Supply of drinking water	N	Percent
Tap inside the house	25	13.3
Tap in compound, private	37	19.7
Tap in compound, shared	39	20.7
Outside compound shared tap	24	12.8
Outside compound public tap	63	33.5
Total	188	100.0

Source: (Own field work, 2010)

4.4.4 Main source of light

Regarding to lighting facilities, 50 % and 42.5 % of the respondents use electricity in shared and private manner respectively and only 7% of the households use other source of light (Table 4.4.6). It shows there

is a better condition in use of electricity and the use of kerosene lamp as a source of light decrease.

Table 4.4.6 Main source of light

Main source of light	N	Percent
Electricity (meter private)	85	45.7
Electricity (meter shared)	100	53.8
Kerosene lamp	1	0.5
Total	186	100.0

Source: (Own field work, 2010)

4.4.5 Use of Kitchen

The result of the survey also shows that there are similar types of kitchens owned by the households. The only difference emanates largely from tenure type and age of units. As shown earlier, most of the houses in the study area are *Kebele* owned. Although they were built decades ago, they have not seen any meaningful repair so far. Therefore, the quality of their kitchens in most cases is very low. About 67 % of the surveyed households use traditional kitchens and 23 % have no kitchen at all. The fact that the proportion of households using modern kitchen is very low, only 10 % have modern kitchens This is because most households either failed to build new kitchens or failed to repair what they have (Table 4.4.7). This is directly related to the income levels of the households. Respondents argue that if they have enough income to build modern housing facilities, they want to have modern kitchen. However, their low level of income prevented them to be users of modern kitchen.

Table 4.4.7 Use of Kitchen

Kitchen	N	Percent
No kitchen	46	23
Shared kitchen(Traditional kitchen)	134	67
Private kitchen (Modern kitchen)	20	10
Total	200	100.0

Source: (Own field work, 2010)

4.4.6 Energy Consumption

The energy consumption pattern of the household is dependent on the income level. Households have used various sources for energy for cooking purpose like electricity, wood, dung, charcoal, etc. Currently, energy provision is the majority problem of household in urban and rural part of Ethiopia, even- though it has different nature. This is because of various reasons like population growth, deforestation problem and any other. Related with this, the survey result shows that a large proportion of households 35.5% use of firewood as a source of energy for cooking, 29% use gas and kerosene, 21.5% of the households used animal dung as the main source of energy for cooking and only 1% of them use electricity. From this, the majority use animal dung and wood as main source of energy. It shows that shortage and unaffordability of the other energy sources like electricity and cylinders are also inaccessible to the poor (Table 4.4.8).

Table 4.4.8 Sources of energy used for cooking

Sources of energy used for cooking	Frequency	Percent
Wood	71	35.5
Gas and kerosene	58	29
Electricity	2	1
Animal dung	43	21.5
Other Specify	26	13
Total	200	100

Source: (Own field work, 2010)

4.4.7 Toilet

According to IRIN 20 April, (2010) reports almost a quarter of Addis Ababa residents have no access to toilets. “We estimate that some three million people live in Addis Ababa. Out of this nearly 25 percent of the population have no access to toilets and defecate in rivers crossing the city”.

The report also indicated that “the outbreak of acute watery diarrhea (AWD) which hit most parts of the city in August 2009, was the result of poor sanitation and hygiene, coupled with solid waste from the city”. (IRIN,2010)

As indicated, Table 4.4.9 (5 %) of the housing unit have no toilet at all and the residents use open spaces. (81%) of the respondents have shared toilet, while the remaining (6.5%) of the respondents use flush shared toilet. This issue was also raised during focus group discussion time. And the participant of the FGDs clarify the toilet problem as follows:

Those who use open space really suffer a lot in disposing their wastes. Some of the respondents told that they collect it in plastic materials and put it in open space during night times and early in the morning. They chose this time in order to being free from sight. This condition creates some psychological and social problems in their day- to- day interaction.

(FGDs held at 13/ 15kebele,2010)

Figure 4.8 Sanitation and Toilet in Addis *ketema* Sub- city in *kebele*
10/11/12



Sanitation



Shared Toilet

Table 4.4.9 Use of Toilet

Use of Toilet	Frequency	Percent
No toilet	10	5
Shared (pit)	162	81
Flush toilet (shared)	15	7.5
Use other means	13	6.5
Total	200	100.0

Source: (Own field work, 2010)

4.4.8 Bathing facility

Bathing is one of the facilities that should be available in one house. In this regard, the survey result shows that 80.5% of the respondents have no access to facilities bathing. Only 5% of the respondents have private shower at home (Table 4.4.10). This shows the severity of bathing problem at urban household level.

Table 4.4.10 Bathing facility

Bathing facility	Frequency	Percent
None	161	80.5
Shower (private)	10	5
Bathtub (private)	2	1
Shower (shared)	3	1.5
Bathtub (shared)	7	3.5
Use other means	17	8.5
Total	200	100.0

Source: (Own field work, 2010)

4.5. Health Condition

Even- though health status is a result and an outcome of the interplay of multitude of factors, poverty and ill- health tend to occur together. Poverty is detrimental to health, because it restricts access to medical care and healthy living conditions.

Within the period of three months prior to the survey, 22% of the respondents were sick and their monthly income decreased due to their sickness. During the same time, the interview was held about the health condition of the respondents within the periods of one month and accordingly about 7.5% of the respondents were sick. In comparison to the previous three months, there is a slight improvement in the health condition of the respondents. Among the health status of the family members about 70.5% of the respondents replied that within the three month gap they did not get sickness (Table 4.5.1).

In response to sickness, some of them reported to have been treated in hospitals, health centre and clinics but owing to the low income category, a significant number (44 %) of the respondents did not get treatment. Instead of this, 6% of the respondents had used traditional

medicines to cure themselves, and family members of 13.0% went to health centre. Concerning to the physical endurance about percent of the interviewees were not strong enough and some of them even failed to work regularly and generating income to the households (Table 4.5.1).

Participants of the FGDs also reported that, due to financial problems, some people are unable to have medical support when they had health problems. Very few households said that they had a chance of getting free medical service with the help of the *kebele*, but complained that the process of getting letter of support from *kebele* is discouraging. Moreover, they were unable to get medical care because of economic reasons.

Table 4.5.1 Health Conditions

Respondents' sickness during the last three months.			Did any of your HH members get sick in the last one month?			Did you get medical treatment?			Where did you get treatment? (for your self and family members)			Was there a time that you were not working?			Your sickness contributes to low income?		
	N	%		N	%		N	%		N	%		N	%		N	%
Yes	44	22	Yes	15	7.5	Yes	36	18	Hospital	6	3	Yes	29	14.5	Yes	30	15
No	141	70.5	No	160	80	No	88	44	Traditional healers	12	6	No	95	47.5	No	85	42.5
No response	15	7.5	No response	25	12.5	No response	76	38	Clinic	7	3.5	No response	76	38	No response	85	42.5
Total	200	100	Total	200	100	Total	200	100	Health centre	26	13	Total	200	100	Total	115	100.0
									Other Specify	149	74.5						
									Total	200	100.0						

Source:
(Own field work, 2010)

5. Coping and Survival Mechanisms of Poverty

5.1 Copping Mechanisms

It is important to explain the similarities and differences between coping mechanisms (responses) and survival (adapting) strategies. Coping strategies are the bundle of producer responses to declining food availability and entitlements in abnormal seasons or years, while adapting strategies involve a permanent change in the mix of ways in which food is acquired, irrespective of the year in question.' (Davies 1996, cited in Degfa, 2008). Although this is constructed in the context of food security, there are certain points that can be drawn between the two. First, time dimension is an issue because coping entails short-term and immediate response that an individual or household takes against changes of context due to various shocks, whereas survival strategies refer to long – term adjustment (Degfa, 2008).

In the absence of a well functioning coverage of credit institutions and credit markets, households often resort to a combination of different self-coverage strategies and informal credit institutions in order to mitigate the impact of unforeseen calamities. This section attempts to investigate the various coping strategies adopted by the sample households so as to deal with the hardship caused by the shocks.

The sample households have been using a combination of behaviour, asset and assistant-based coping strategies so as to protect their consumption level. Some sample households were used the asset-based coping strategies by a very marginal proportion. 68.6% of the respondents are filling the gap from their own saving, 5.9% of the respondents filling the gap by selling their assets and, borrowing accounted for 16.1% of the asset-based strategies, and it is mainly from the informal sector (i.e., from friends, relatives and neighbours).

In addition to that, 2.5% households borrowed from formal sectors (i.e credit associations like Bank, money lenders). 6.8% of the respondents used different asset-based strategies. (Table 5.1.1)

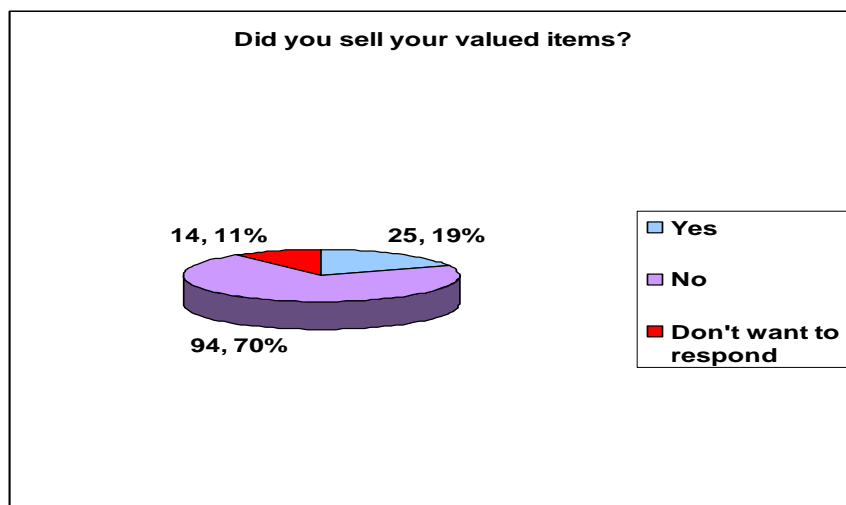
Table 5.1.1 How do you fill the gap of financial constraints?

How do you fill the gap	N	Percent
Your own saving	81	68.6
Sale of asset	7	5.9
Loan from family, neighbourhood or relative	19	16.1
Loan from credit associations like Bank, money lender	3	2.5
Other	8	6.8
Total	118	100

Source: (Own field work, 2010)

As it has been discussed in the above notion there are various means of coping strategies of households for worst periods. Respondents also asked about means of overcoming of worst period. 70.7% said that valued household items have not been sold for the propose of reducing risks or worst periods while 18.8% have an experience of selling the most valued items found in the home (Figure 5.1). It shows that they might have other coping strategies in order to tackle the worst period.

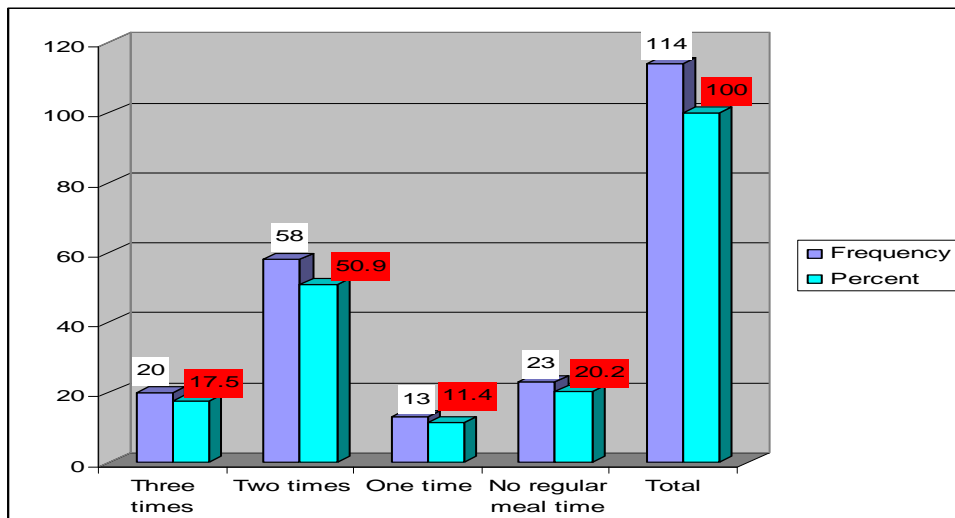
Figure 5.1 Did you sell your valued items during the worst period?



Source: (Own field work, 2010)

The households have also used behaviour-based coping strategies during the worst period. The number of meals taken per day also serves as an indicator of the wellbeing of households. Most of the respondents (50.9%) said cutting down the amount of their meal and the frequency of their eating at two times per day, 20.2% of them do not have regular meal time and 11.4% have got meal one time per day whereas only 17.5% have a rate of three times per day (Figure 5.2). This indicates that the majority of the respondents cope up with the food shortage they faced by cutting down the numbers of meals per day.

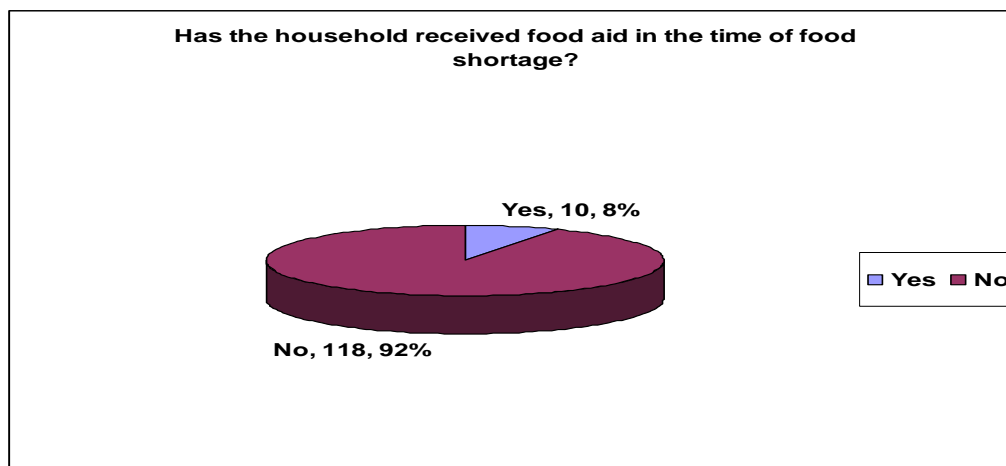
Figure 5.2 No. of meals/day at the worst time of recent food shortage



Source: (Own field work, 2010)

The assistant-based strategies were relatively important for poor households than they were for the non-poor households. As shown in Figure 5.3 food shortage encountered in majority of households so how households fill this gap this question was raised and 92.2% of the respondents replied that have not received food aid from any one else while 7.8% of the respondents have got food aid during their shortage time.

Figure 5.3 Has the household received food aid in the time of food shortage?



Source: (Own field work, 2010)

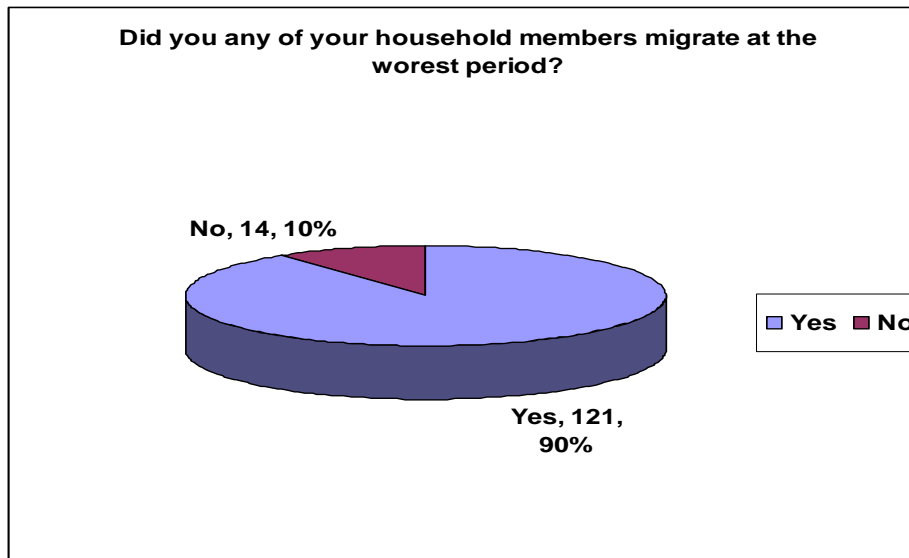
5.2 Survival strategies of households

Household live on mix of strategies to sustain their livelihoods like migration, living slum community, diversification of livelihood activities, rented houses, etc (Degefa, 2008). As mentioned above, migration is one of those survival strategies of the household.

5.2.1 Migration

Most households' breadwinners who have originated from other areas are the first generations to the community they live in. It was through migration that they ended up in both communities. They migrated to Addis Ababa and to their respective communities in order to improve their own livelihoods. Likewise, the wave of the migration of the youth (the second generation) is also on going, which is out of the communities. Remittances that households secure from those migrants are quite significant in sustaining the life at home (Degefa, 2008). Regarding on migration the majority (89.6%) of the respondents have an experience to migrate to other areas whereas 10.4% did not migrate to other areas (Figure 5.4).

Figure 5.4 Did you any of your household members migrate at the worst period?



Source: (Own field work, 2010)

The aforementioned data also triangulated by the FGD as follows: participants of the FGD summarised both the survival and coping strategies of the shocked period like using cheap food items, cut down the amount of their energy consumption, engaging in additional income generating activities, engaging children in work (small children participated in plastic collection at a day time in *merkato* market centre to be sold the plastic to petty traders), and eating foods that were not usually eaten were also the other behaviour-based coping strategies adopted by the households. The decomposition by the households poverty status indicates that the relatively better off resorted to less expensive food items and clothing as their primary coping strategies while the poor needed to be engaged in additional income generating activities, sending daughters to middle east countries, and pull their children out of school. In addition, participants discussed the use of social network and support from governmental and non-governmental institutions were equally important while poor households tended to rely more on their social network.

6. Summary, Conclusion and Recommendation

6.1 Summary of Major Findings

The objective of the study was to assess the household poverty in Addis Ababa by taking two *kebeles* of Addis *ketema* sub-city. To achieve this objective the study employed household survey, focus group discussion, and observation as data collection tools. Study samples were taken from a total of 55,762 Household head 200 samples were drawn through random sampling method. Data has been analyzed and interpreted mainly through quantitative approach and it was supported by qualitative method. Finally, the study comes up with the following major findings:

Income and Expenditure of the household related with various variable:

- The combined households' monthly incomes were found not enough. The findings of the study showed that only 32.5 percent of the households earn with a gap of 401-700 per month.
- As the household size increases, the combined income of the household has also increased, if they are productive.
- More than 34.4 percent of the households'(income) couldn't cover their monthly expenditure. And also 48.7 percent of the respondents said that sometimes cover the expenditure and sometimes not. Most of them were found leading meager life with the existing income, and some of them received remittance from abroad or are supported by their relatives, particularly, of the old household heads.

- As regards household age, incomes of household increases in the age rang of 21-50 which mean active age has a positive role with income generation of the household.
- Marital status is the other important indicator of well-being of a household. In the study married households take the main share of which it is 40.5 percent of the sample. The findings of the study showed that the divorced and widowed 22.5 and 19.0 percent, respectively,(sections of the society) experienced more poverty than those who are not. Married households have a better income and expenditure than the other households.
- The other determinant that played key roles in the incidence of poverty in the city is employment. 51.9 percent of the surveyed population are employed themselves in petty trade and yet most of them couldn't escape from falling into poverty. This is because the return they get from being participated in petty trade is not sufficient to have effect on their life standard.
- Access to education is one of the factors that indicate the economic well being of households. When households have an access to better education mean there is direct or indirect relation with the demand and need of the household and better consumption and expenditure.

Welfare and welfare change indicators

- The majority of the household respondents (40.0%) categorized themselves as very poor when compared with other community members.
- Regarding to the income change over the period 2005-2010, the majority of respondents' (66.2%) income decreased or do not have change.

- Most of the respondents (50.0%) have experience of food shortage during the year 1997 E.C.
- Some points regarding housing condition :
 - The majority of the respondents (48.4 %) house was built by wood and mud, the floor of the house is earth (57.8%), roof is constructed from corrugated iron sheet (44.4%).
 - House tenure: (92.0%) of the respondents live in rented house either from kebele, *Debal* and private owners. (88.2%) of respondents also reported that they did not pay the house fee regularly. 69.1 % of the respondents housing condition is not enough for the family members, and (55.3%) stated that families have crowded in single room.
- The highest proportion of 33.5 % of the household use water from public tap outside the compound.
- 53.8% and 45.7% of the respondents use electricity in shared and private manner, respectively. It shows there is a better condition in use of electricity and the use of kerosene lamp as a source of light decrease.
- Almost 70.5% of the surveyed household use traditional kitchens.
- A large proportion of households (37.4 %) use of fire wood as a source of energy for cooking.
- (86.6%) of the respondents have shared toilet. It shows the severity of toilet problem in the majority of the household.
- 88% of the respondents have no the access of bathing facilities.

Health condition of the households:

- Among the family members, about 76.2% of the respondents replied that within the three month gap did not get sickness.
- A significant number (71.0 %) of the respondents they did not get any treatment during their sickness.

Coping Mechanisms of Poverty:

- 68.6% of the respondents are filling the gap from their own saving.
- 70.7% said that valued household items have not been sold for reducing risks at the worst periods.
- Most of the respondents (50.9%) said that cutting down the amount of their meal and the frequency of their eating at two times per day is the means of coping at food shortage.
- 92.2% of the respondents replied that have not received food aid from any one else.
- The majority (89.6 %) of the respondents have an experience to migrate to other areas for better life.

6.2 Conclusion

Generally income and welfare approaches of poverty were adapted for the study. Income and expenditure of the household were viewed from the perspective of household size, education, age, marital status, and employment. Welfare is also analyzed through the nature of the house (wall type, construction material for floor and roof), house tenure, renting, number of rooms, supply of drinking water, main source of light, use of kitchen, energy consumption, toilet, bathing facility, and health condition. Coping strategies like saving, aid, migration, and cutting down meals per day were identified and discussed so far in the study.

The aforementioned variables were analyzed and determinants of poverty were investigated intensively. Based on the findings, the depth and severity of poverty are quite high and most of the households who live in these *kebeles* are in absolute poverty. So that the two mentioned *kebeles* need more attention from different stakeholders such as government and non-government organization.

6.3 Recommendation

The above findings highly support the fact that the incidence and magnitude of poverty in the study area is high and increasing. Based on the findings above the researcher recommended the following important points:

- To reduce the urban poverty of Addis Ababa development stakeholders should participate in different development sectors. Investment on infrastructure:
 - ✓ Efforts should be made to reduce housing shortage; overcrowding, rents affordable relative to income and the quality of houses should be improved by constructing condominium.
 - ✓ Health coverage, water and sanitation facilities must be improved by reallocating and increasing funds.
- Invest on employment creation, especially for house makers and lower (class societies).
- Adjusting saving and credit mechanisms for petty trade participants.
- Wage and salary should be adjusted consistently with the rise in the standard of living for civil servants and casual workers.
- The availability of urban area safety net programs/food- for- work/ should be strengthened especially in Addis Ketema sub-city in order to solve the food insecurity problem.
- Different development actors should work collaboratively. Since collaboration enhances chance for the effective development.

Even if the above mentioned recommendations have been implemented by government and non governmental actors, t the stated programs and projects have to be continued in more strengthened manner to alleviate the problem of the impoverished community. Particularly, Addis *ketema* sub-city (*Kebele* 10/11/12 and 13/15) badly needs the attention of the government, NGOs, CBOs, and other concerned bodies.

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Addis Ababa University

Questionnaire.

An Assessment of households poverty in Addis Ababa: The case of two kebeles in Addis ketema sub city

General Information

Interviewer number _____ Date _____ 2010

Kebele _____ House number _____

Name of Area _____

Objective

The objective of the questionnaire is to know the demographic and social economic situation of households in two kebeles of Addis Ketema Sub –city (10/11//12 &13/15)

Instruction

1. You do not need to write your name.
2. For questions which choices are given please indicate your answer by circling the number besides appropriate answer.

- | | | | |
|-------------------|--|--------------------|-------------------------|
| 1. Code (A) | Code(B) | Code (C) | Code (D) |
| 1 Head | 1. Never any schooling | 1. Never married | 1. Employed |
| 1. Husband | 2. Literate (writing & reading) | 2. Married | 2. Own account Worker |
| 2. Wife | 3. Traditional (religious) | 3. Widows | 3. Unpaid family Worker |
| 3. Son | 4. Primary school incomplete | 4. divorcees | 4. Unemployed |
| 4. Daughter | 5. Primary school complete | | 5. Pensioner |
| 5. Servant | 6. Junior school income | | |
| 6. Guard | 7. Junior school complete | | |
| 7. Other relative | 8. secondary school income secondary school complete | | |
| 8. Other specify | 9. secondary school complete | | |
| | 10. Vocational /technical graduated | 13. Post graduated | |
| | 11. College diploma | 12 First degree | |
| | 14. other specify | | |

- | | | |
|-----------|------------------|----------------------|
| Code (E) | Code (F) | Code (G) |
| 1. Amhara | 1. Orthodox | 1. Addis Ababa |
| 2. Oromo | 2. Catholic | 2. Other urban areas |
| 3. Tigra | 3. Protestant | 3. Rural area |
| 4. Gurage | 4. Muslim | 4. Other specify |
| 5. Other | 5. Other specify | |

2 What is the reason for your school aged children not attending school?

1. Services not available 2. To assist in house hold work 3. Cannot afford to send all
 4. Don't want to send to school daughter 5. It is not important 6. The children are disabled 7. Other, specify _____

II. HOUSEHOLD INCOME

Major source of income code (H)	Amount of income for the last month	Have you any other source of income a part from the main		Is there a change in your monthly income for the last 5 year	
		If yes		If yes	
		Income per month	Source of income code (H)	How much was in 2005	What is the percent

Code (H)

1. Wage /salary 2. Pensions 3. Own business: Formal 4. Own business: Informal
 5. Own land 6. Rent part of house 7. Rent Vehicle, equipment

8. Investment interest transfer 9. Support from relative
10. Support from government or non government 11. Other specify
2. How many meals does your household eat on average in a day?
 - 1.1 2.2 3.3 4. Over 3 5. No regular meal time
3. Are there any household members who have had their meals out of the house during the days of last month?
 1. Yes 2. No 3. I don't know (if yes refer question number 51)
4. Does your household tend to purchase less of some cereals during certain time of the year?
 1. Yes 2. No (if no skip to number 12, 13)
5. More of which cereals?
 1. Teft 2. Wheat 3. Maize 4. Sorghum 5. Barely 6. Other
6. Why the sift in cereal eating habits?
 1. Price change 2. Income change 3. Availability 4. Other
- 7 During the last one year have you ever given out a loan in kind or in cash, to another household?
 1. Yes 2. No (If yes refer question number 59)
8. What is the job of head of the household?
 1. Civil servant 2. Employed by public sector enterprise
 3. Employed by cooperative farm trade 4. Employed by private
 5. Organization International organization employee 6. Casual worker
 7. Employed by private households maid/guard 8. Employed in family business
 9. Self employed (Informational trade, firm, trade etc) 10. paid family worker
 11. Employer (having employees working in his grocery) 12. Home maker (house wife)
 - 13 Farmer 14. Pensioned 15. Bar girl 16. Other specify _____

III. MIGRATION

- 1 .Place of birth _____
2. For how long did you live here? ___
3. If you migrant what was the reason for coming to Addis Ababa?
 1. Look for employment 2. Transfer of family 3. Education 4. To live with spouse
 5. To look after other realties 5. War 6 Famine 7. Marriage 9. Demobilized soldier
 - 8 To follow other relative 9 Other specify

IV. HOUSEHOLDS EXPNDITURE

1. Food expenditure

Food and beverage	How much was purchased and spent in the last thirty days (month)	
1. Cereal (milled/unmilled)	Amount (quintal, liter & kilogram)	Monthly expenditure(Birr)
Maze		
- Teff		
- Sorghum		
- Wheat		
- Barley		
2. Spices		
3. Milk and milk products		
4. Meat and other animal products		
5. Pasta (Rice)		
6. Bread		
7. Fruit		
8. Vegetable		
9. Butter		
10. Editable cooking oil		
11. Beverage (excluding tea & coffee)		
12. Stimulants (coffee, cheat, tea etc)		
13. Drinks (soft drinks, alcohol etc)		
14. Sugar		
15. Salt		
16. Other related consumption		

2. Non food expenditure

Item	Total expenditure for the last 30 days (Birr)
------	---

<ol style="list-style-type: none"> 1. Rent for house (average of six month) 2. Water bill (average of six months) 3. Electric bill 4. Telephone bill (Average of six months) 5. Fuel wood & charcoal 6. Kerosene 7. Building Materials 8. Housing loan (interest & capital) 9. Cloths 10. Shoes/fabric services 11. Education 12. Health 13. Transport 14. Domestic sPerervice (guard, cleaning etc) 15. Transfer to others 16. Ceremonial expense 17. Entertainment 18. Tax & contribution 19. Saving (jkub, jdir, bank deposit etc) 20. Other specify 	
---	--

V. HOUSING AND HOUSING SERVICES

1. Owner ship

1. Owned 2. Rented from Kebele 3. Rented from private owners

4. Rented from administration of ranted houses (AARH) 5. Rented from Kebele house owners

6. Senator, rent free without permission 7. Debal (Share with others) 8. Other

2. If rented or paying difference in rent indicate monthly amount of rent in Birr _____

3. If it is rent are you paying regularly? 1 Yes 2.No

4. If you are not paying monthly what is your reason?

1. I have no enough money 2. The house is too old and not repaired

5. The house in which you live is separate or common with other people?

1. Separate 2. Common

6. Is the house enough for your family? 1. Yes 2.no

7. How many rooms does your house have?

1. 1 2. 2 3. 3 4. 4 5. Above 4

8. Wall type?

1. Mud 2. Wood 3. briks 4. Stone 5. Wood & mud
6. Reed and bamboo 7. blocket 8. Others _____

9. Construction material for floor? 1. Earth 2. Cement 3. Wood 4. Plastic tile
5. others _____

10. Materials of roof? 1. Corrugated sheets 2. Plastics 3. Reed/bamboo
4. Thatch 5 concert 6. Other _____

11. Construction materials for ceiling? 1. Has no ceiling 2. Fabrics 3.
Chipwood/hard board

4. Wooden 5. Concrete 6. Others

VI. ACCESS TO BASIC HOUSING SERVICE

1. Supply of drink water

1. Tap inside the house 2. Tap in compound, private
3. Tap in compound, shard 4. Outside compound, shard taps
5. Outside compound public tap
6. Unprotected water source (well, spring, river, etc) 7. Others _____

2. Main source of light

1. Electricity (meter private) 2. Electricity (Meter shared)
3. Kerosene lamp 4. Others _____

3. Kitchen

1. No kitchen 2. shared kitchen (Traditional kitchen)
3. shared kitchen (modern kitchen)
4. Private kitchen (modern kitchen)
5. Private kitchen (traditional kitchen)

4. Which one is source of energy use for cooking

1. Wood 2. Gas and kerosene 3. Electricity 4. Animal dung 5. Other specify _

5. Toilet

1. No toilet 2. Shared (pit) 3. Flush toilet (shared) 4. Private
5. Private (flush) 6. Other _____

6. Bathing facility

1. None 2. Shower (private) 3. Bathtub (private)
4. Shower (shared) 5. Bathtub (shared)

7. Which one is available at your home?

1. Radio 2. Television 3. Telephone 4. Other specify _____

8. The main asset you have

1. House
2. Bed
3. House furniture like table, chair
4. Sewing machine
5. Wearing
6. Other specify _____

9. In comparison to community the level of your living standard?

1. Rich
2. Medium
3. Poor
4. Very poor
5. Specify other

VII. VULNERABILITY

1. Has this household ever experienced food shortage?

1. Yes
2. No
3. Don't remember (If yes refer questions number 56 and 57)

2. How many meals did you eat per day at the worst time of most recent food shortage?

1. three times
2. Two times
3. One time
4. No regular meal time

3. Did you sell any of your most valued possessions in the worst year? (For example, jeweler, furniture, etc)?

1. Yes
2. No
3. I don't want to respond

4. Has the household received food aid in times of food shortages?

1. Yes
2. No
3. I don't want to responds

5. Do you any of your household members migrate at the worst period? 1. Yes 2. No

III. WELFARE AND WELFARE CHANGE INDICATOR

1. How do you see your income change over the period 2005-2010?

1. Decreased
2. Increased
3. Unchanged
4. Don't known

2. How do you see change in expenditure on basic needs (food, clothing, health, education, etc) over the period 2005-2010?

1. Decreased
2. Increased
3. Unchanged

3. How has access to fuel (fire wood) for cooking and to lighting changed over the period 2000-2010? 1. The same 2. Deteriorated 3. Improved 4. Other

4. Does your monthly income cover your monthly expenses?

1. Yes
2. No
3. Some times yes some times no

5. If no, how do you fill the gap?

1. Your own saving
2. Sale of assets
3. Loan from family, neighborhood or relatives
4. Loan from credit associations like Bank, money Leander
5. Other__

VIII. Health Condition

1. Did you get ill for the past three months? 1. Yes 2. No

2. If your response is yes was there a time that you were not working? 1. Yes 2. No

3. If you said I was sick in question number 1 & 2 did you gets medical treatment?

1. Yes
2. No

4. If your answer is yes in question number 4, where did you get treatment?

1. Hospital
2. Traditional
3. Clinic
4. Health center
5. Specify other

5 Was there any time that your sickness contributes to low income? 1. Yes 2. No

6. Did one of your household members sick in the last one monthly?

1. Yes 2. No

7. If your answer is yes in question 7, was there any time that you were not working in order to take care of the sick person. 1. Yes 2. No

Declaration

I, the undersigned, declare that this thesis is my original work and has not been presented for a degree in any University. All resources of materials used for the thesis have been dully acknowledged.

Name: Kidist Yibeltal

Signature_____

Place: Addis Ababa University

Date: June, 2010

The thesis has been submitted for the examination with my approval as a University advisor.

Degefa Tolossa (Ph.D)

June, 2010