TB REACH

Guidance to applicants on targeting poverty pockets

Why is it important to target poverty pockets?

There is a well documented association between poverty and tuberculosis. Not only are the poor more likely to get TB disease, but they are also more likely to face barriers in accessing care.
In addition, the economic burden of TB (loss of wages, out-of-pocket expenses for seeking care and loss of productive years of life) makes the poor people even poorer.

The vision of the TB and Poverty Sub-group of the Stop TB Partnership is: "A world where the poor and most vulnerable are protected from TB and have easy and equitable access to quality care".
As an initiative of the Stop TB Partnership, TB REACH is focussed on the poor and vulnerable.

In addition to focussing on countries with per capita GNI of $2000, or less, TB REACH also welcomes applications that target poverty pockets within countries that have a per capita GNI between $2000 and $3000 and poverty pockets within the remaining high TB burden countries.

TB REACH recognizes that due to socio-economic disparities there are often well known sub-national population that live under substantially higher levels of poverty in these countries. These poverty pockets are vulnerable to TB and often face limited access to TB care.

What is poverty?

Poverty is the lack of basic human needs, such as clean water, nutrition, health care, education, clothing and shelter, because of the inability to afford them.

In 1998 a UN Statement on poverty, signed by the heads of all UN agencies stated:
 "Fundamentally, poverty is a denial of choices and opportunities, a violation of human dignity. It means lack of basic capacity to participate effectively in society. It means not having enough to feed and cloth a family, not having a school or clinic to go to, not having the land on which to grow one's food or a job to earn one's living, not having access to credit. It means insecurity, powerlessness and exclusion of individuals, households and communities. It means susceptibility to violence, and it often implies living on marginal or fragile environments, without access to clean water or sanitation".

How is poverty measured?

The UN has established the following indicators[1] to measure progress towards the Millennium Development Goals (MDG) number-1, i.e. "Eradicate extreme poverty and hunger":

- Proportion of population below $1 (PPP) per day
- Poverty gap ratio
- Share of poorest quintile in national consumption
- Growth rate of GDP per person employed
- Employment-to-population ratio
- Proportion of employed people living below $1 (PPP) per day
- Proportion of own-account and contributing family workers in total employment
- Prevalence of underweight children under-five years of age
- Proportion of population below minimum level of dietary energy consumption
- Prevalence of underweight children under-five years of age
- Proportion of population below minimum level of dietary energy consumption

MDG progress reports at global[2] and country levels provide the information on these indicators. A number of country reports are available for download from the UN MDG website[3]. Other country reports may be available from their respective Ministries and in-country partner agencies. Large countries often track progress against some of these indicators at sub-national levels.

In addition, the World Bank periodically prepares poverty assessments[4] of countries in which it has an active program. Data in these assessments generally includes measures of population living below the national poverty line as well as the international poverty line.

What are poverty pockets?

Poverty pockets are pockets of poor people within countries. The poverty levels of such populations and communities exceed by far the national average. At the national level, such population and communities are widely considered as socio-economically weak and they are often well delineated by the government for the purpose of social welfare measures.

---

[1] Official list of MDG indicators
http://mdgs.un.org/unsd/mdg/Resources/Attach/Indicators/OfficialList2008.pdf

[2] The Millennium Development Goals Report 2010. United Nations, New York, 2010.
http://www.un.org/millenniumgoals/pdf/MDG%20Report%202010%20En%20r15%20-low%20res%2020100615%20-.pdf

[3] http://www.undp.org/mdg/countries.shtml

[4] http://data.worldbank.org/topic/poverty

Depending on the country context these pockets could be: urban slum dwellers, migrants, homeless, internally displaced population, victims of natural disasters, indigenous and tribal communities, unskilled daily wage earners, informal labourers in the organized and unorganized sectors, etc.

How to identify sub-national level poverty pockets?

Sub-national level poverty pockets are often widely known to the concerned government departments and NGOs working on poverty and equitable access to health care.

A pragmatic starting point for identification of such pockets would be consultations with the National TB Programme, and NGOs and Government Departments dealing with poverty reduction, social welfare, social security schemes, indigenous people, internally displaced people, migrants, slums, statistics, etc.

The next step is to gather information and data on shortlisted poverty pockets in order to decide the target population. Examples for sources of data and information on poverty with sub-national disaggregation include the following:
1. The World Bank periodic poverty assessments for countries. These individual country reports, which can be downloaded from the World Bank website[5], include a variety of poverty related data disaggregated by urban and rural areas and by province.
2. National and sub-national level household income and expenditure surveys, household budget surveys and standard of living surveys conducted by the respective Government.
3. Sub-national poverty maps for a number of countries are available from the World Resource Centre[6], Washington DC, USA.
4. Census reports of countries

In addition to the information on poverty, TB notification data and TB prevalence surveys (if available) could also identify pockets of very high prevalence or very high notification rates which could be a pointer to the existence of a pocket of poor and vulnerable population. A pocket of low TB notification rate could also be a pointer to a population pocket with limited access to care and therefore needs to be interpreted carefully.

_____

[5] http://web.worldbank.org/archive/website01022A/WEB/0__CO-13.HTMl

[6] http://earthtrends.wri.org/povlinks/poverty_map.php?poverty_map_type_ID=1