Dimensions

Multidimensional Poverty Peer Network (MPPN)

ANGOLA:
THE FIRST COUNTRY IN AFRICA TO DEVELOP A MUNICIPAL MPI

THE THREAT OF COVID-19 TO PEOPLE LIVING IN POVERTY

POVERTY IN THE INDIGENOUS POPULATION OF MEXICO

SHAME, HUMILIATION, AND POVERTY

Contents

Editorial

Analysing multidimensional poverty is all the more relevant in the complex context in which we are currently living due to the COVID-19 pandemic. As Maya Evans and Fanni Kovesdi point out in the first article of this issue, this new coronavirus will affect the poorest of the poor most dramatically. We join the authors in inviting you to share ideas and projects to address this new scenario. Also in this issue, a group of researchers, led by Sabina Alkire, show us where those most vulnerable to the pandemic are and how the MPI can help deliver a more targeted response.

In Angola, a recently launched Multidimensional Poverty Index by Municipality (M-MPI) will provide better information for targeting resources to the poorest districts. Camilo Ceita and Henrik Fredborg Larsen provide us with some insights into this new tool, while Eliana Quintas and Lorenzo Mancini describe how it was created.

Colombia also published a municipal-level multidimensional poverty measure using a series of maps with indicator descriptions. You can find more information in the 'Data of the Month' section.

Another important innovation is the measurement of multidimensional poverty in indigenous populations. In this issue, Eleonora Nun shows us the case of Mexico, which has again been a pioneer in measuring poverty – this time in order to obtain information to design more effective public policies that seek to reduce indigenous poverty.

In this issue we also share some conceptual reflections on less-explored aspects of multidimensional poverty, as Diego Zavaleta highlights the importance of considering shame and humiliation as two relevant elements for understanding people's poverty.

We would like to invite you to read *Dimensions*, a new perspective for understanding poverty.

Carolina Moreno

Contributors:

Camilo Ceita
General Director of the National Institute of Statistics (INE) of Angola

Christian Oldiges
OPHI Director of Policy Outreach

Diego Zavaleta
UNDP Senior Advisor for Latin America and the Caribbean

Eleonora Nun
International Consultant

Fanni Kovesdi
OPHI Research Assistant

Henrik Fredborg Larsen
UNDP-Angola Resident Representative

Jakob Dirksen
OPHI Research Assistant

Maya Evans
OPHI Research Communications Officer

Pali Lehohla
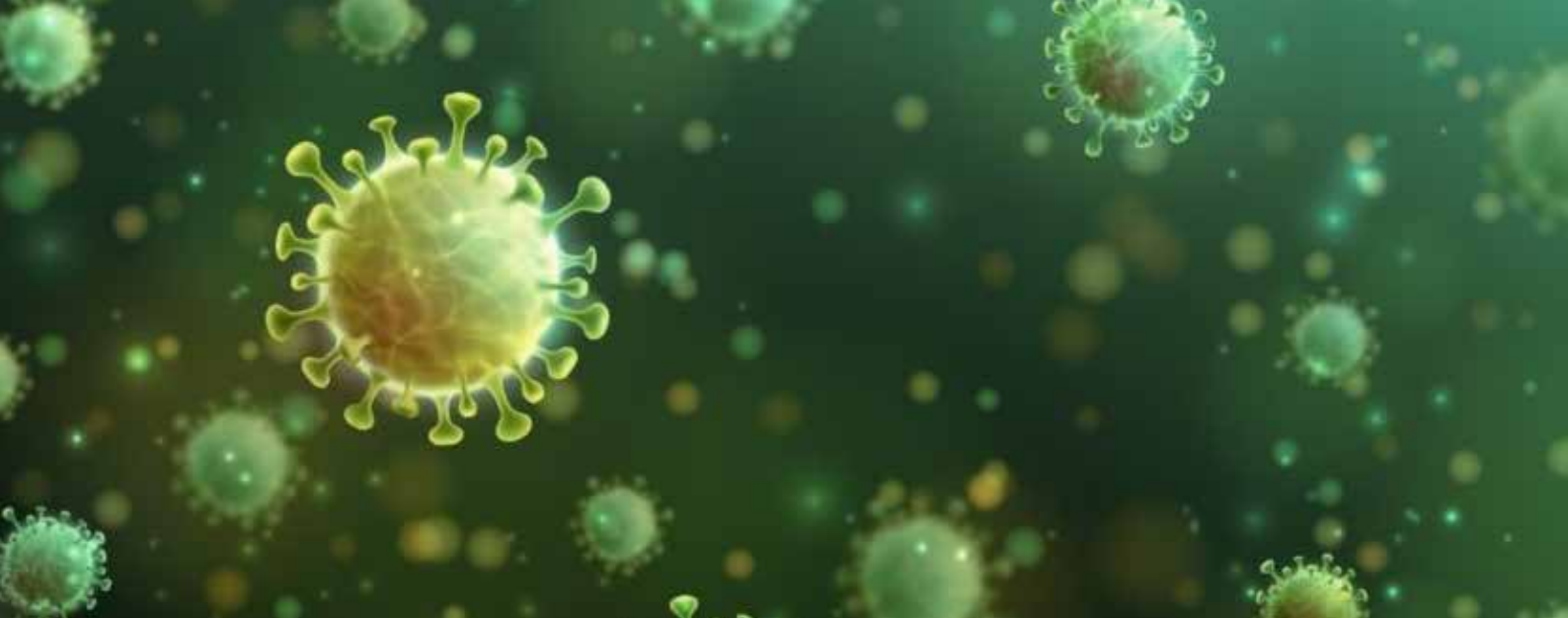Former General Statistician and Former Chief, South African Institute of Statistics.
Associate Researcher at Oxford University and OPHI Consultant

Ricardo Nogales
OPHI Research Officer

Sabina Alkire
OPHI Director

The Threat Posed by COVID-19 to People Living in Poverty

A call to work together to face the pandemic by Maya Evans and Fanni Kovesdi.

Governments and the development community are attempting to respond to the evolving threat of the COVID-19 pandemic. The impact on multidimensional poverty levels around the world is likely to be severe, with the poorest hit hardest.

COVID-19 has the potential to drag people just above the poverty threshold into poverty due to its effect on the global economy, with many countries halting production and shutting down whole sectors of their economies. The virus is providing another sobering example of the stark inequalities in society – both in monetary and multidimensional terms – and exacerbating those inequalities at a speed that few could have predicted.

When the health systems of OECD countries struggle to cope, the situation looks bleak for low- and middle-income countries. Poor performance in common indicators of multidimensional poverty indices such as overcrowding, drinking water, and nutrition directly endanger the health of many communities, leaving them potentially more vulnerable when exposed to infection. In addition, lack of internet access or education may impede efforts to connect people with life-saving information.

Although research remains ongoing, the groups most susceptible to the worst outcomes of COVID-19 appear to be older people and those with underlying health conditions. According to data from the 2019 global Multidimensional Poverty Index (gMPI), there are almost 109 million people aged 60 years or over who are multidimensionally poor, making up over 8% of all people living in multidimensional poverty around the world. In sub-Saharan Africa, this figure is 5.7%, while in Latin America and the Caribbean it is 11.5%.

> There are almost 109 million people aged 60 years or over who are multidimensionally poor.

Other vulnerabilities relate to deprivations in water, which can weaken immune systems and hamper hygiene, and in cooking fuel, which can increase the chances of respiratory disease among households. In sub-Saharan Africa, on average, 44.6% of people live in a household with no access to clean drinking water (in South Asia it's 14.0%, in East Asia and the Pacific it is 20%, and it is 21.7% in the Arab States). These vulnerabilities are explored in more detail in the following article.

The outbreak has negative ramifications for many aspects of everyday life, from the loss of employment to the loss of staffing for basic services and the suspension of education for children. There are already many

poor children who are unable to attend school and are therefore deprived of basic education, which can have adverse effects on their chances of moving out of poverty. With widespread school closures, additional children will be kept at home for an extended period. And while many developed countries resolve this problem by shifting to online education for school-age children and home schooling for younger children, this is not a feasible course of action in all countries. Online education requires a stable internet connection and the availability of a technological devices such as a computer or a smartphone for each child, while home schooling relies on parents' academic abilities. However, across the 101 global MPI countries, almost 15% of people live in a household where no one aged 10 or above has completed at least six years of schooling, while over 17% of people live in households with no electricity.

> As the pandemic unfolds, the multidimensional poverty community is invited to share ideas with the MPPN.

How the MPI can help

As a measurement tool, the MPI enables us to identify locations with large vulnerable populations and helps us track the long-term effects of the outbreak on poverty around the world. More than ever, a multidimensional perspective on poverty reduction will be needed to showcase the effects of the economic downturn across the many overlapping dimensions of people's lives.

The community focused on multidimensional poverty reduction includes actors who range from academics and government officials to people in the private sector and non-profit or international organizations – with expertise spanning measurement, statistical analysis, policy and evaluation. The diverse skills and knowledge of this community can help guide governments through this crisis. By building on an understanding of multidimensional poverty and how to track it, policymakers can deliver swift, integrated, and targeted responses that focus on the interlinkages between poverty and the ongoing global epidemic. For example:
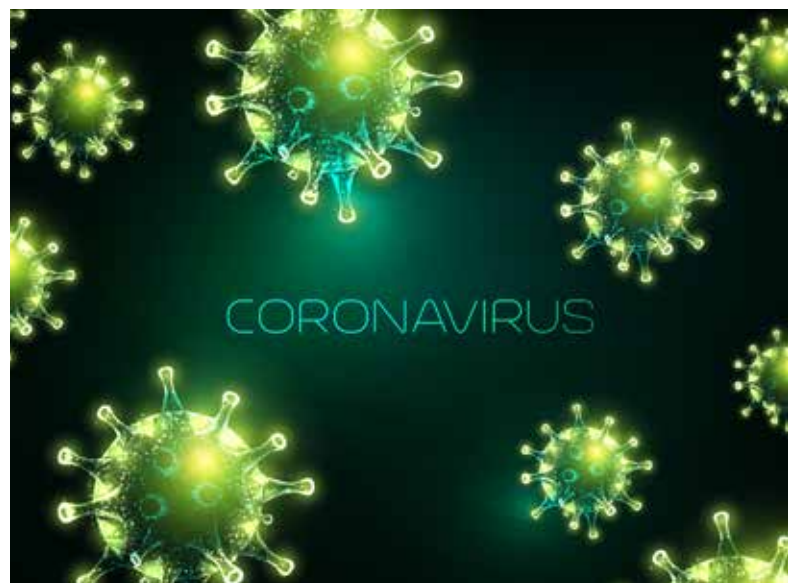
» Adding COVID-19 vulnerability indicators into a Multidimensional Vulnerability Index so that it includes MPI-poor persons and other vulnerable persons.

» Identifying subpopulations who might be particularly vulnerable to the disease or households who might be adversely affected by the physical distancing measures.

» Integrating COVID-19 emergency responses with MPIs based on registry data in order to rapidly identify and target persons likely to be affected by the COVID-19 crisis and its economic repercussions.

» Extending current targeting formulae to develop a Multidimensional Targeting Index that includes the 'new poor' in order to enrol them in new social programmes.

Time to connect

As the pandemic unfolds, the multidimensional poverty community is invited to share ideas with the MPPN.

Please email ophi@qeh.ox.ac.uk with the subject heading 'COVID-19'. Tell us what you are doing or what you would you like to do, but cannot do. Together we can use data, research, and motivated innovation to tackle this latest development in global poverty. ◾

Multidimensional Poverty and the Risk from COVID-19[1]

The MPI is a key source of information to respond to the pandemic according to Sabina Alkire, Jakob Dirksen, Ricardo Nogales, and Christian Oldiges.

As of April, the COVID-19 pandemic is just beginning to spread to developing regions, and ad hoc emergency responses are currently being developed and applied in rapid fashion. These often involve targeted food or cash programmes directed at the poorest and those who are most vulnerable. However, a major obstacle faced by many governments at the moment is how to identify the poorest. One way of doing so is to apply the global Multidimensional Poverty Index (MPI) – which both makes good use of available data and is a well-established concept of poverty. Using ten MPI indicators of acute poverty across three dimensions of health, education, and living standards (see Figure 1), this index identifies the 'MPI poor' – those who are simultaneously deprived in one third or more of the global MPI indicators – and the 'severely MPI poor' – those who are simultaneously deprived in at least one half of the indicators. Across the globe, 1.3 billion people are MPI poor, 600 million severely so.[2]
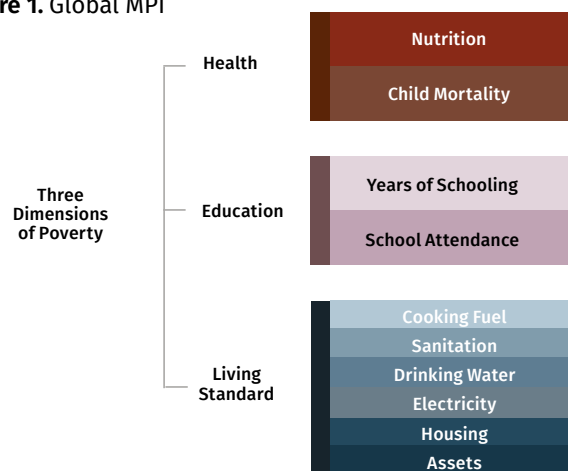
COVID-19 risk indicators

Among the ten global MPI indicators, nutrition, water, and cooking fuel are particularly relevant in the context of the ongoing pandemic. They are COVID-19 risk factors. **Unsafe drinking water** and **undernutrition** are strongly associated with weakened immune systems and morbidity – implying an increased risk of severe or fatal disease courses. Deprivation in clean **cooking fuel** is associated with indoor air pollution and acute respiratory infections – implying an increased risk from COVID-19, which attacks the lungs. Across 5.7 billion people living in 101 developing countries, 62.6% or 3.6 billion are deprived in at least one of the three COVID-19 risk indicators – they are at risk. Moreover, 472 million people in the developing world are deprived in all three COVID-19 risk factors at the same time – they are at high risk (see

Figure 1. Global MPI

Figure 2: People at high risk (in millions) and their additional deprivation

Number of additional deprivations suffered by people who experience all three COVID-19 risk factors
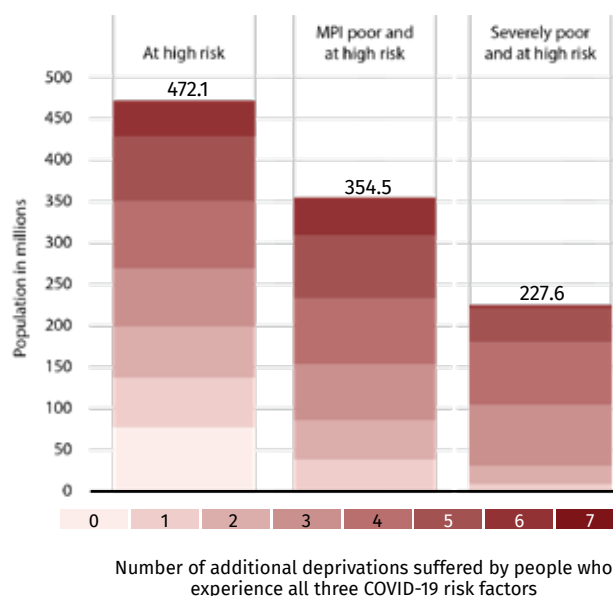
Source: MPI data computed by Alkire, Kanagaratnam, and Suppa (2019).

Figure 2). Most of them (355 million) are MPI poor, and nearly half (228 million) are severely MPI poor.

Regional disaggregation

Across six major world regions, **sub-Saharan Africa** faces the greatest burden in multidimensional poverty and highest risk from COVID-19 (Table 1). Almost 90% of its population, or 882 million people, have at least one COVID-19 risk factor. More than 218 million (21.9%) are at high risk to COVID-19 – they are simultaneously affected by all three COVID-19 risk factors. More than one in five people (21.7%) are MPI-poor and at high risk, and 17% are severely poor and at high risk – an unparalleled prevalence of critical vulnerability, compared to rates between 2.2% for South Asia and 2.7% for the Arab States. Table 1 provides the population-weighted aggregates by major geographic region.

At the time of writing, COVID-19 deaths are being reported for many countries for which global MPI data are available – Figure 3 depicts those from our first global briefing on 6 April. One month later the number of COVID deaths has passed 1000 in seven countries covered by the global MPI, and together these countries have suffered 31,000 deaths out of the global total of 253,000. Unfortunately, the underlying growth rate of COVID-19 deaths is increasing rapidly in Latin America and the Caribbean and across sub-Saharan Africa, South Asia, and East Asia. The top ten countries with the highest number of MPI poor people at high COVID-19 risk are India (60 million), Nigeria (39 million), Ethiopia (38 million), Democratic Republic of Congo (32 million), China (16 million), Tanzania (12 million), Indonesia (11 million), Pakistan (10 million), Afghanistan (10 million), and Uganda (9 million).

Table 1. MPI and COVID-19 risk across world regions

	Population (1,000s)*	At risk	At high risk	MPI-poor & at risk	MPI-poor & at high risk	MPI-severely poor & at risk	MPI-severely poor & at high risk
Arab States	332,469	110,858	12,330	47,297	11,623	22,631	9,115
		(33.3%)**	(3.7%)	(14.2%)	(3.5%)	(6.8%)	(2.7%)
East Asia & Pacific	2,023,888	1,135,094	136,752	108,637	36,098	20,001	7,345
		(56.1%)	(6.8%)	(5.4%)	(1.8%)	(1.0%)	(0.4%)
Europe & Central Asia	108,074	22,973	363	1,121	245	89	43
		(21.3%)	(0.3%)	(1.0%)	(0.2%)	(0.1%)	(0.0%)
Latin America & Caribbean	521,133	141,941	13,644	35,471	7,954	9,825	3,619
		(27.2%)	(2.6%)	(6.8%)	(1.5%)	(1.9%)	(0.7%)
South Asia	1,766,945	1,305,490	90,743	540,089	83,045	198,952	38,724
		(73.9%)	(5.1%)	(30.6%)	(4.7%)	(11.3%)	(2.2%)
Sub-Saharan Africa	995,297	882,120	218,219	569,926	215,564	349,405	168,721
		(88.6%)	(21.9%)	(57.3%)	(21.7%)	(35.1%)	(17.0%)
Total Population Covered	5,747,804	3,598,475	472,051	1,302,540	354,529	600,904	227,567
		(62.6%)	(8.2%)	(22.7%)	(6.2%)	(10.5%)	(4.0%)

*All population figures are presented in thousands and are based on 2017 UN DESA Population Estimates.
** In parentheses: Affected people as a share of the total population within a region.

Figure 3: Map of 472 million poor persons at high risk from COVID-19 overlaid with confirmed COVID-19 deaths
(as of April 6, 2020)
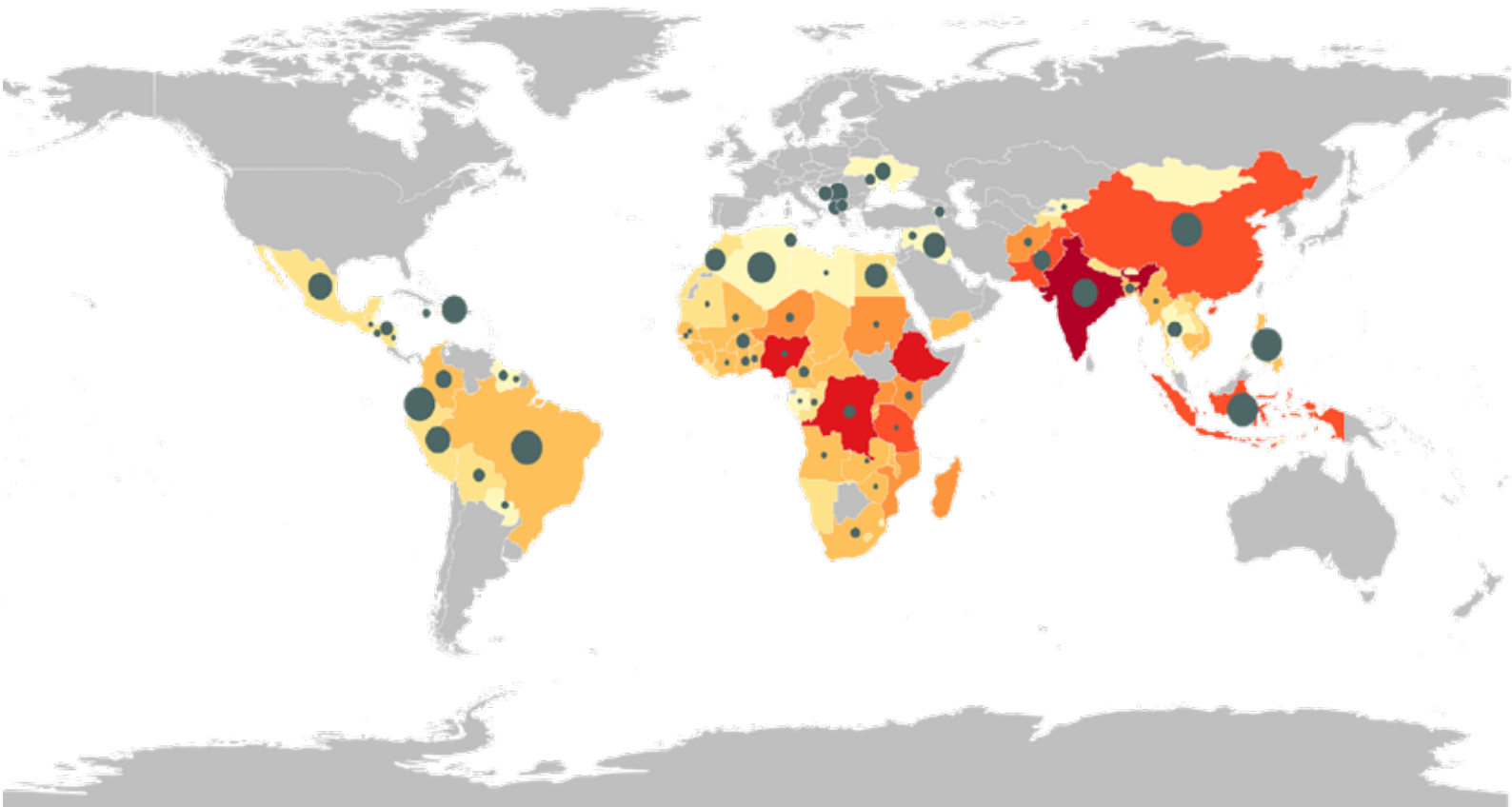
COVID-19 Death (Conf.)

- 20
- 40
- 60
- 80
- 100+

MPI Poor and at High Risk from COVID-19

- 0 – 100
- 100 – 1,000
- 1,000 – 5,000
- 5,000 – 10,000
- 10,000 – 20,000
- 20,000 – 40,000
- 40,000 – 60,000
- No data
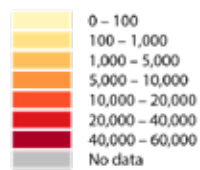
© Christian Oldiges.
Sources: COVID-19 data, European Center for Disease Control (ECDC), 4th April 2020, www.opendata.ecdc.europa.eu/covid19/casedistribution/csv.
MPI data computed by Alkire, Kanagaratnam, and Suppa (2019). ophi.org.uk/b53

Country focus: Nigeria

With a population of almost 200 million, Nigeria is the most populous country in Africa. According to the most prominent monetary poverty measure ($1.90 a day), Nigeria accounts for the highest number of monetary poor people globally. In terms of the global MPI for Nigeria, based on 2016–17 figures, about 100 million people are multidimensionally poor. As Figure 4 below shows, across the 37 Nigerian States, several are at high risk to the unfolding spread of COVID-19. More than 4.1 million people in Borno State alone are multidimensionally poor and at high risk, with similar numbers in Katsina (4 million) and Kano (3.8 million). With COVID-19 cases confirmed in Abuja, Kaduna, and Bauchi, the fear is that if COVID-19 spreads to the poorest states of Northern Nigeria, it would have tremendous human cost.

This rapid overview is a call for urgent action. The global MPI database provides a widely used source of information that can be employed for immediate COVID-19 responses such as regional targeting. Governments, UN agencies, the private sector, and civil society organisations alike are encouraged to make use of the available data in order to protect those most at risk in the unfolding pandemic. ■

Figure 4. Nigerian states: Number of people who are MPI poor and are at high risk from COVID-19 with COVID-19 cases (the map depicts confirmed infections as of April 6, 2020; as of 6 May these exceed 2,800)

Number of MPI Poor at High Risk (in thousands)

- 20 – 100
- 100 – 400
- 400 – 1,000
- 1,000 – 2,000
- 2,000 – 3,000
- 3,000 – 4,200

Confirmed COVID-19 Cases

20 40 80 120
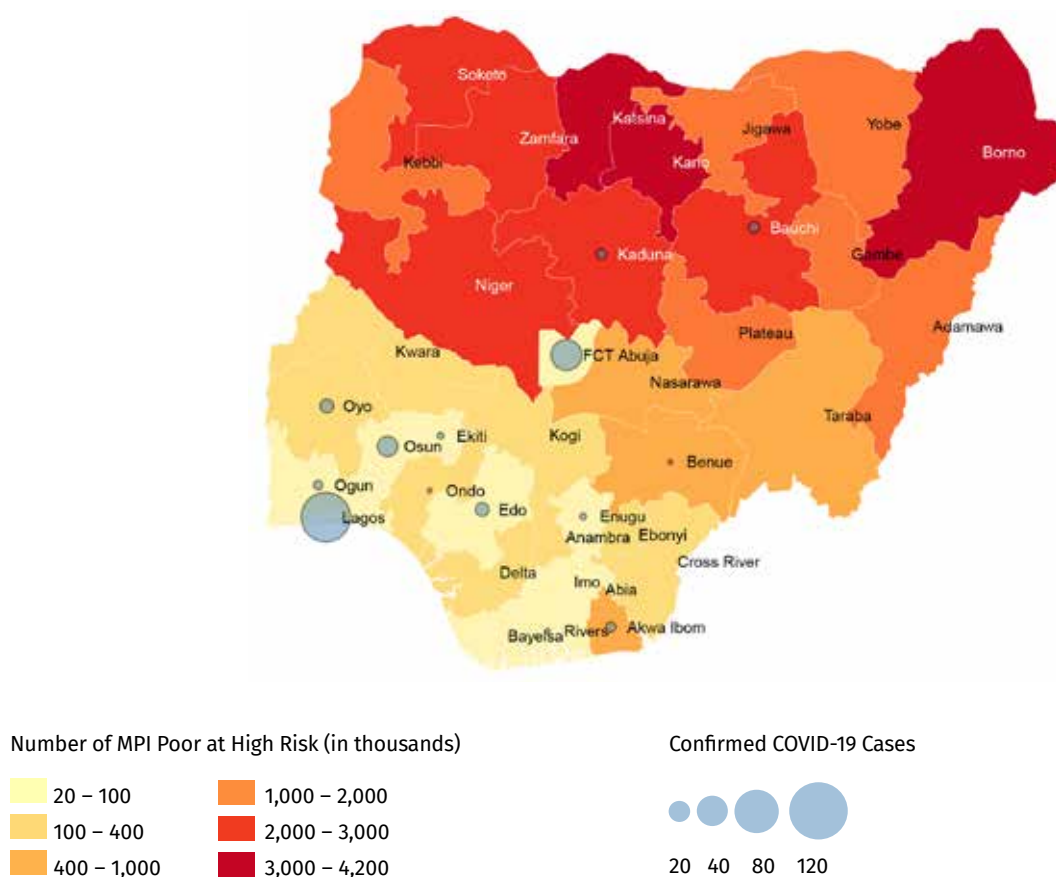
(c) Christian Oldiges; Sources: COVID-19 data, Nigeria Center for Disease Control (NCDC), 4th April 2020, www. covid19.ncdc.gov.ng.
MPI data computed by Alkire, Kanagaratnam, and Suppa (2019).

Angola: The First Country in Africa to Develop a Municipal Multidimensional Poverty Index

By Camilo Ceita and Henrik Fredborg Larsen

Located on the western coast of south-central Africa, the Republic of Angola has a population of approximately 31 million (2020). According to the 2019 global Multidimensional Poverty Index (MPI), 51% of its population lives in multidimensional poverty.

The Angolan National Institute of Statistics (INE), together with the United Nations Development Programme (UNDP) in Angola and the Oxford Poverty and Human Development Initiative (OPHI), has been working on the development of a national MPI. As a first step, INE officially presented the first edition of the Municipal Multidimensional Poverty Index Report (M-MPI) in December 2019.

Angola's M-MPI complements monetary poverty indexes and allows for the identification of those who experience multiple deprivations simultaneously in terms of health, education, quality of housing, and employment for each one of the 164 municipalities in the country. This index was calculated using data from the General Population and Housing Census (2014), because it is the only source of information that is able to capture the nature of multidimensional poverty at a municipal level.

The M-MPI's objective is to identify the level of poverty of each municipality and group them into technically sound and useful classifications. These classifications can then be used to prioritise public budget distributions to municipalities according to their deprivations as well as to assist in the design and development of public policies aimed at fulfilling national, regional, and international commitments (such as the National Development Plan 2018–2022, Agenda 2063, and the 2030 Agenda, respectively).

> The M-MPI's objective is to identify the level of poverty of each municipality and group them into technically sound and useful classifications.

The M-MPI is composed of four dimensions (health, education, quality of housing, and employment) and 11 indicators, which were selected based on the results of technical meetings and public consultations with different sectors of society. This measure uses the same weighting for each dimension and the same relative weighting for each indicator. The dimensions of education, quality of housing, and employment have three indicators each (civil registry, years of schooling, and school attendance; solid fuel for cooking, access to electricity, and type of materials used for the construction of walls, floor, and roof; youth unemployment, unemployment among adults, and dependency), each with a weight of 8.33%. The dimension of health has only two indicators (access to drinking water and access to sanitation), and each of them has an equal weight of 12.5%.

The multidimensional poverty line was set at 35% of the weighted indicators. This multidimensional poverty line corresponds with a situation in which a person or household experiences deprivations equivalent to one dimension plus one indicator with an average weighting.

The results of the municipal estimates for the M-MPI, as well as the incidence and intensity of poverty, show that 65 of the 164 municipalities have an incidence of poverty of over 90% – in other words, at least nine out of ten people in these municipalities are multidimensionally poor. The M-MPI varies from 0.029 in the municipality of the country's capital city (Luanda) to 0.753 in the municipality of Curoca in the Province of Cunene, located in the south of the country. Figure 1 shows the value of the M-MPI for each municipality of Angola.

The results showed important differences in the contribution of each of the 11 indicators to multidimensional poverty in each municipality. In the municipalities with a higher M-MPI, it is clear that the dimensions of health and quality of housing contribute much more. In the municipalities with lower M-MPI levels, there is a significant contribution from indicators related to the dimension of employment.

> 65 of the 164 municipalities have an incidence of poverty of over 90% – in other words, at least nine out of ten people in these municipalities are multidimensionally poor.

Given that the main objective of the M-MPI is to classify municipalities according to their level of poverty in order to prioritise the poorest, three classifications of municipalities in Angola were proposed based on these results.

» The first classification consists of grouping municipalities according to their levels of multidimensional poverty in quintiles (five groups of approximately 33 municipalities each) based on a single criterion: the level of multidimensional poverty.

Figure 1. Incidence of multidimensional poverty in Angola by municipality (%)

0.029–0.366
0.366–0.463
0.463–0.545
0.545–0.608
0.608–0.753

Luanda

Africa
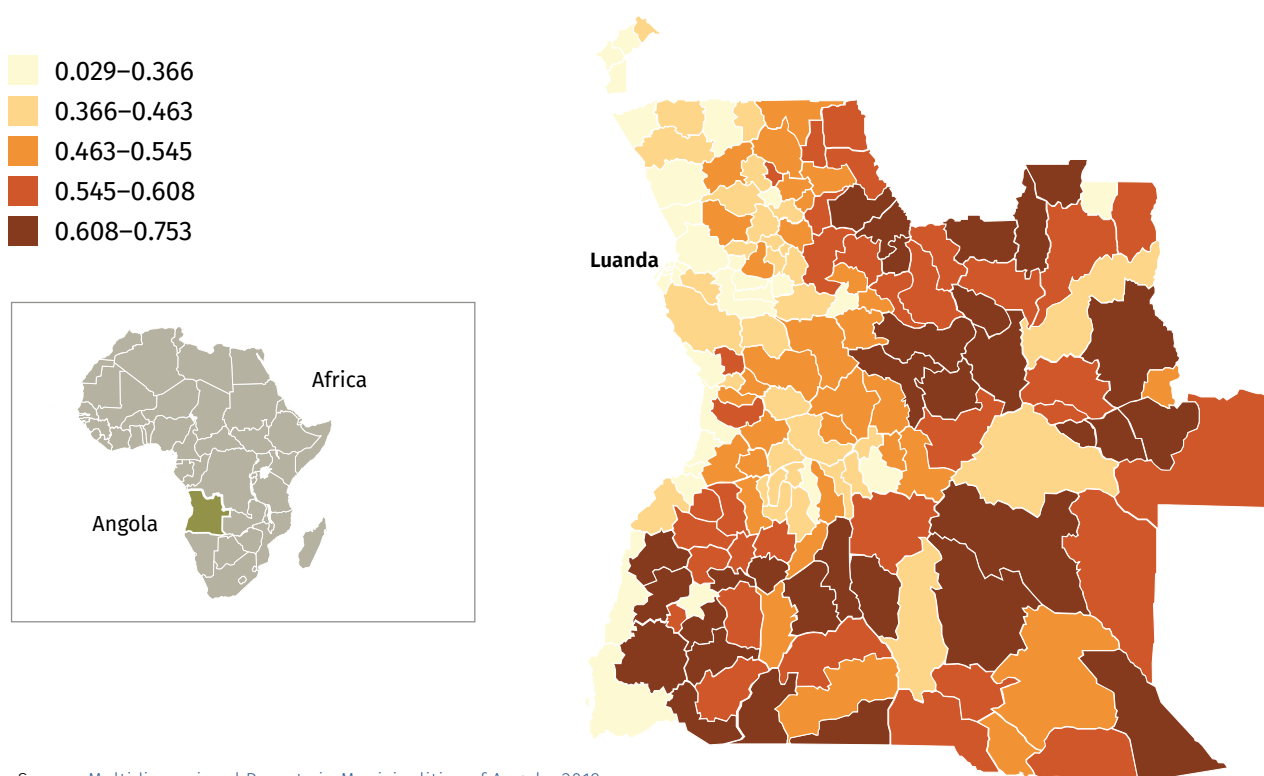
Angola

Source: Multidimensional Poverty in Municipalities of Angola, 2019.

» The second classification consists of maintaining the order by quintiles and prioritising, within each quintile, the municipalities with the highest proportion of multidimensionally poor according to the total population of the municipality.

» The third proposal is to use information about the level of multidimensional poverty and the total multidimensionally poor population while taking into account the size of the municipality's population. To this end, the 164 municipalities were organised into three groups:

i. Large municipalities (more than 500,000 inhabitants);
ii. Medium-sized municipalities (between 50,000 and 500,000 inhabitants);
iii. Small municipalities (less than 50,000 inhabitants).

In this proposal, the levels of poverty and total number of poor in the municipality are decisive factors in the prioritisation of municipalities within each group.

INE and UNDP hope that the results of this report will support:

» Integrated evidence-based decision-making,
» Improvement in social services at a local level,
» Dialogue and decisions about the distribution of the General State Budget,
» Reflection on inequalities between municipalities,
» Reflection on social projections related to population growth,
» Prioritisation, monitoring, and evaluation of public policies.

During 2020, INE, UNDP, and OPHI will work towards the development and publication of a national Multidimensional Poverty Index for Angola (MPI-N) with specific indicators for Angola, with the aim of complementing the global MPI. It is hoped that the partnership between the three institutions can contribute to dialogue and the adoption of evidence-based policies to end poverty in all its dimensions, reduce inequalities, and leave no one behind.

Table 1. Municipal MPI of Angola

Dimension	Indicator	Deprivation threshold. A household is deprived if	Weighting
Health (25%)	Access to drinking water	It does not have access to a source of water suitable for drinking or the water has not been treated.	12.5%
	Access to sanitation	It does not have access to any kind of appropriate sanitation.	12.5%
Education (25%)	Civil registry	At least one member up to the age of 5 does not have a birth certificate.	8.3%
	Years of schooling	No members over the age of 12 have at least 6 years of schooling.	8.3%
	School attendance	At least one child between the age of 5 and 14 does not attend school.	8.3%
Quality of housing (25%)	Solid fuel for cooking	The main fuel for cooking is coal, firewood/scrub, brushwood/grass, cardboard, crop residues, other.	8.3%
	Access to electricity	It does not have access to electricity from a public network.	8.3%
	Type of materials used for the construction of walls, floor, and roof	Poor quality materials were used for at least one of the following structures: floor, roof, walls.	8.3%
Employment (25%)	Youth unemployment	At least one member between the age of 15 and 24 neither works nor studies.	8.3%
	Unemployment among adults	At least one member between the age of 25 and 64 is active and does not work, but is available to work.	8.3%
	Dependency	For every five members of the household, there is not at least one member between the age of 15 and 64 who works.	8.3%

Source: Multidimensional Poverty in Municipalities of Angola, 2019. ■

Interview with Eliana Quintas, senior technician of INE Angola:

'The M-MPI is an Important Tool for Guiding Public Policy'

Why did Angola decide to measure multidimensional poverty at a municipal level?

We hadn't initially planned on measuring multidimensional poverty in Angola at a municipal level. The main objective was to calculate a national Multidimensional Poverty Index, considered the official measurement of multidimensional poverty in the country, with data from the 2015-2016 IIMS Multiple Indicator and Health Survey, which resulted from the combination of the 4th Multiple Indicator Survey (MICS IV) and the 1st Demographic and Health Survey (DHS I).

Due to the need of the Ministries of Finance and Ministry of Territory Administration and State Reform (MAT in Portuguese) to identify the level of poverty of each municipality and group them into technically sound and useful classifications for the distribution of the public budget (OGE in Portuguese), we contacted the National Institute of Statistics (INE) so that we could also calculate poverty on a municipal level. For this reason, a proxy MPI, called the Municipal Multidimensional Poverty Index (M-MPI), was developed for all municipalities.

What was the initial process like? What stakeholders were involved?

The first step consisted of holding several technical meetings and a public consultation with various sectors of civil society. Then we moved on to identifying the

General Population and Housing Census (RGPH), which was carried out in 2014, as the data source, because it is the only source that allows for a classification of the 164 municipalities in the country. At the time the census was taken, the country only had 162 municipalities, but two years later the Political and Administrative Division of the country was updated, bringing the total to 164 municipalities for which the MPI had to be calculated.

Throughout the process, INE had the support of OPHI, the UNDP, and the Ministries of Finance and Territory Administration.

> The M-MPI was primarily calculated with the aim of classifying municipalities according to their level of multidimensional poverty.

How were dimensions and indicators selected?

At first we looked at the dimensions and indicators of the global MPI, then we considered which would be relevant for the country and possible to calculate with the data from the 2014 census. Finally, a public consultation was carried out in March 2019, which, among other things, led to the collection of contri-

butions from society to establish the dimensions and indicators relevant to the composition of the national MPI. For this reason, we incorporated the dimension of employment, for example, as well as indicators concerning water and sanitation in the dimension of health.

Thus, Angola used four dimensions and 11 indicators to measure municipal poverty to provide us with a more accurate image of poverty at a municipal level. For example, one indicator in the dimension of employment is 'dependency', in which a household is considered as deprived if for every five members of the family unit there is not at least one member between the ages of 15 and 64 (working age) who works. This indicator is important because it allows us to understand the vulnerability of the whole household to the negative changes that can result from the loss of work of members who support the household financially.

How are local authorities in Angola going to use this MPI for policy?

The M-MPI was primarily calculated with the aim of classifying municipalities according to their level

of multidimensional poverty, in order to prioritise the poorest municipalities in the allocation of resources.

Angola has a clear commitment to the reduction of poverty in the country, which is reflected in the National Development Plan (NDP) 2018–2022, in Presidential Decree No.163/19, and in Angola's explicit efforts to fulfil the SDGs and comply with the 2030 Agenda. In this context, the creation of the M-MPI is an important tool for guiding public policy, because it provides the Angolan government with an instrument that clearly indicates which municipalities actually need more resources for dealing with poverty. ◼

Eliana Quintas,
Senior technician
of INE Angola

Interview with Lorenzo Mancini, UNDP Angola Economist:

'The Municipal MPI in Angola is a Key Tool for the SDGs at the National and Local Levels'

What has been the role of UNDP in the development of the M-MPI? How did the collaboration materialize?

In Angola, UNDP has established a solid and fruitful partnership with the National Institute of Statistics (INE), which has led to key results such as the first of Angola's SDG baseline indicators reports and technical trainings for local governments on multidimensional poverty. Based on that experience and UNDP's mandate, the two institutions have discussed how to contribute to SDG 1 by focusing more on multidimensional poverty. UNDP provided technical and financial assistance to INE to launch a public consultation with multiple stakeholders to

seek feedback on the indicators to be included in the national MPI. To achieve this goal, the global partnership between UNDP and OPHI was vital. UNDP supported several visits by OPHI to Angola to set up a joint technical team – composed of INE, UNDP, and OPHI. This team has worked very intensely to develop the M-MPI based on data from the 2014 population census. UNDP and INE have also joined forces to engage line ministries and local governments during the creation of the M-MPI. UNDP has also supported the official launch of the report, which was presented in the city of Ondjiva, with the participation of the government of Cunene province.

What are the advantages of the M-MPI as a policy tool in Angola?

The M-MPI had a very positive impact on the national dialogue on multidimensional poverty in Angola. The M-MPI constitutes a powerful policy tool as it is the only measure available in Angola to understand the incidence and intensity of multidimensional poverty across all the 164 municipalities of Angola. The disaggregation at the municipal level represents the strong advantage of using the M-MPI to see, within a specific municipality, the contribution of each indicator to multidimensional poverty. This may also contribute to the local implementation of the National Development Plan 2018–2022, including the establishment of the first-ever elected local governments in Angola. Finally, it is noteworthy that Angola's M-MPI has contributed to defining the baseline for SDG target 1.2, which is related to the proportion of men, women, and children of all ages living in poverty in all its dimensions according to national definitions.

> The M-MPI had a very positive impact on the national dialogue on multidimensional poverty in Angola.

What is the relevance of adopting the MPI in Africa?

Adopting the Multidimensional Poverty Index (MPI) in Africa is key to contributing to the implementation of the 2030 Agenda for Sustainable Development and the SDGs. The global MPI 2019 shows that, on average, one in two people (57.5%) in sub-Saharan Africa live in multidimensional poverty, which corresponds to about 538 million people. Deprivations in health, education, and standard of living continue to affect large shares of the population in different forms across Africa. For example, the global MPI 2019 shows that millions of people in sub-Saharan Africa continue to suffer from simultaneous deprivations in access to electricity, drinking water, and sanitation. The global MPI allows policy actors to identify these overlapping deprivations and see precisely how they affect people.

Adopting the MPI in Africa is also a key tool for understanding multidimensional poverty at the local level and inequalities across regions. For example, the global MPI 2019 revealed that in sub-Saharan Africa the incidence of poverty varies significantly across countries – for example, 6.3% in South Africa and 91.9% in South Sudan – but also within countries – in Angola, the incidence of global MPI in Luanda is 16.0%, whereas in Bie it is 80.8%.

The adoption of national MPIs in Africa may support the design and implementation of policy programmes that consider the interlinkages across different sectors, which is in line with the 2030 Agenda. It is noteworthy that, on 22 January 2020, the UN Secretary-General launched the 'Decade of Action', which calls for accelerating sustainable solutions to deliver the 2030 Agenda and the SDGs. ∎

Lorenzo Mancini,
UNDP Angola
Economist

We thank Ricardo Nogales for the production of the articles from Angola.

Measuring Poverty in the Indigenous Population of Mexico

By Eleonora Nun

The measurement of multidimensional poverty in the indigenous population of Mexico stems from two concerns. The first is a general concern about poverty. It has been established that the prevalence of poverty in the indigenous population – extreme poverty in particular – is consistently greater than in the rest of the population, and that it involves much broader factors than income. The end result is an accumulation of disadvantages that work against equal rights. The second is a concern for what defines this population as 'indigenous'. In this context, the hypotheses are a) that the indigenous population is more than just a group that speaks an indigenous language, which was how it had been defined up to 2010, b) that poverty indices could vary according to the definition of this group, and c) that different dimensions of the Indigenous could be related differently to the experienced deprivations.

How is it that a social attribute becomes an obstacle to the full realisation of rights? The perspective of multidimensional poverty is well-suited to shed light on which aspects of the indigenous condition best explain the phenomenon of poverty. Inversely, this analysis enables the identification of the attributes of 'the Indigenous' that allow the segments of the population that share certain deprivations to be grouped together.

Until 2010, there were a variety of sources of statistical information and ways of defining the indigenous population in Mexico. There was no cohesion among the different state institutions with regard to who should be considered indigenous, and the institutions, in turn, had varied their means of identification on multiple occasions. Therefore, a first step was to standardise the questions about ethnicity on the Population and Housing Census and the Socioeconomic Conditions Module of the National Survey of Household Income and Expenditure (MCS-ENIGH). Thanks to a collaboration between the National Institute of Statistics and Geography (INEGI) and the National Council for the Evaluation of Social Development Policy (CONEVAL), the decision was made for both tools to include a common question about ethnic identification in addition to the questions about spoken language that had, in accordance with the recommendations of international entities, been used for several years to identify the indigenous population.

Multidimensional poverty in Mexico 2008-2018

	2008		2018		2008/2018 Change	
	Million (people)	%	Million (people)	%	Million (people)	Percentage points
Total multidimensional poor population*	41	41.2	44,1	39.0	-3,1	2.2
Multidimensional poor indigenous population**	8,5	71.1	8,4	69.5	0,1	1.6

* A person with one or more social deprivations and an income below the Well-Being Line is considered multidimensional poor (receives insufficient income to satisfy their food and non-food needs)
** These calculations consider as indigenous population all the people who are part of an indigenous household, where the head of the household, his or her spouse and/or one of the ancestors declared to be a speaker of an indigenous language. In addition, people who declared that they speak an indigenous language and who are not part of these households are included.
Source: *Consejo Nacional de Evaluación de la Política de Desarrollo Social* (2019). *"La pobreza en la población indígena de México, 2008–2018"*. México, DF: Coneval. (Poverty in indigenous population of Mexico 2008-2018).

Based on the information gathered in the 2010 Population and Housing Census and the 2008, 2010, and 2012 MCS-ENIGH, five analytical categories were built for the indigenous population: indigenous language speakers (ILS), the population in indigenous households, the population that identifies as indigenous, the indigenous language-speaking population living in non-indigenous households, and the population that speaks an indigenous language but does not consider itself indigenous. Poverty in the general population and the subset of the indigenous population was characterised based on this data, identifying both the specifics of the latter with respect to the rest of the population and heterogeneity among the analytical groups that make it up.

The measurement of multidimensional poverty in Mexico combines income-based poverty and social deprivations. Income is measured on a well-being line that indicates if income is sufficient to cover basic nutritional and non-nutritional needs, and a minimal well-being line that corresponds to people whose incomes allow them to cover nutritional, but not non-nutritional, needs. Well-being in terms of social rights includes the dimensions of education, health, social security, quality of housing spaces, and nutrition, and the number of deprivations experienced therein.

The more structural the ethnic relationship – language to identity, for example – the greater the probability of presenting deprivations in one or more dimensions.

Based on these measurements, a population is classified as poor (if they have one or more social deprivations and an income beneath the well-being line), extremely poor (three or more social deprivations and an income beneath the minimum well-being line, moderately poor (being poor but not extremely poor), vulnerable due to social deprivations (having an income above or equal to the well-being line, but experiencing one or more social deprivations), vulnerable due to income (no social deprivations, but income is beneath the well-being line), and not poor or vulnerable (no social deprivations and income above or equal to the well-being line) (CONEVAL, 2012).

One initial finding about indigenous poverty is that being indigenous is associated with more precarious living conditions. Being indigenous is associated with a higher likelihood of deprivations in all of the dimensions that comprise multidimensional poverty measurement as well as income-based deprivations (Figures 1 and 2).

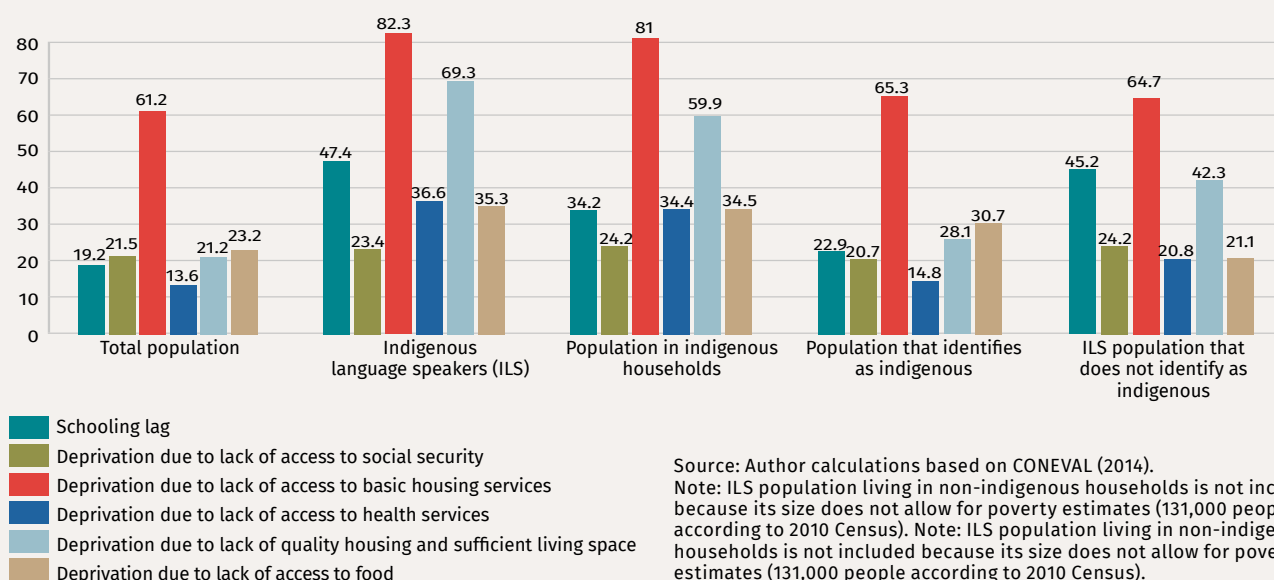**Figure 1.** Indicators of social deprivations by population group in 2012

Schooling lag
Deprivation due to lack of access to social security
Deprivation due to lack of access to basic housing services
Deprivation due to lack of access to health services
Deprivation due to lack of access to quality housing and sufficient living space
Deprivation due to lack of access to food

Source: Author calculations based on CONEVAL (2014).
Note: ILS population living in non-indigenous households is not included because its size does not allow for poverty estimates (131,000 people according to 2010 Census). Note: ILS population living in non-indigenous households is not included because its size does not allow for poverty estimates (131,000 people according to 2010 Census).

Figure 2. Economic well-being indicators by population group (2012

■ Total population	
■ Population in indigenous households	
■ ILS population that does not identify as indigenous	
■ Indigenous language speakers (ILS)	
■ Population that identifies as indigenous	

Source: Author calculations based on CONEVAL (2014).
Note: ILS population living in non-indigenous households is not included because its size does not allow for poverty estimates (131,000 people according to 2010 Census).

With regard to the differences in the experience of poverty between the indigenous population and the general population, it can be observed that, despite presenting greater deprivations across all dimensions, those deprivations have decreased among the indigenous population at a pace similar to that experienced by the rest of the population. This group consistently experiences lower income levels than others in jobs in similar sectors. This would suggest that, while public investment has been effective in its focus on the poorest, certain mechanisms of discrimination work against the indigenous population in the job market that result in restricted access to higher income. This information is of great value to public policy discussions.

With regard to the definition of what constitutes being indigenous, the five analytical categories, based on the break-down of this concept, provide empirical evidence that bring to light important differences among the deprivations experienced within each one. The more structural the ethnic relationship – language to identity, for example – the greater the probability of presenting deprivations in one or more dimensions. In effect, among indigenous language speakers, the prevalence and intensity of poverty is greater, while those who identify as indigenous have characteristics closer to those of rest of the population. This methodology, by including networks and social cohesion indicators, makes it possible also to demonstrate how the environment impacts deprivations experienced in the different dimensions, and reveals the differences between the indigenous populations in rural areas and those who have migrated to the cities.

> One initial finding about indigenous poverty is that being indigenous is associated with more precarious living conditions.

To summarise, having an official measurement of poverty by ethnic affiliation permits specific up-to-date measurements of their situations of poverty, disaggregated by the five categories – all of which contributes to the ongoing debate about what constitutes the indigenous individual. This work informs the design of more effective and focused public policies for the reduction of multidimensional poverty among indigenous groups. ■

Shame, humiliation, and poverty

Diego Zavaleta clarifies why these aspects are relevant to understanding people's poverty.

What do a survivor of the Bangladeshi war of independence, a leprosy sufferer, and a Colombian demobilised FARC member have in common? The answer is that stigma and discrimination –which are related to the emotional states of shame and humiliation – have played a central role in the poverty of these people, as it shows in the three stories published in the Spanish newspaper *El País* that we will see below.

Rajavala Devi is one of the approximately 200,000 women who suffered sexual violence by Pakistani soldiers during the Bangladeshi war of independence. As a result, Rajavala has not only had to bear the physical and psychological consequences of those attacks all her life, but has also faced being ostracised from society and suffered a social stigma that prevented her from fully rebuilding her life after the attacks and the deaths of her husband and son.

Women like Rajavala have been treated as 'infected' and as 'prostitutes', accused of being willing participants in their assaults. The abandonment and stigma generated by this has impacted Rajavala's life in many dimensions, and, like most women who have suffered the same fate, she has been condemned to live a severely impoverished life.

Bekele is one of the residents in the village of Gambo, in the Oromia region of Ethiopia. This village grew up around a leprosarium run by a religious order. Bekele arrived there at the age of 16, when his parents recognised the first symptoms of leprosy in his body, and he never again left the village – not even when they managed to cure him. He is one of approximately 5,000 new cases of leprosy diagnosed

each year in Ethiopia, and one of more than 30,000 people living with permanent disabilities from the disease.

Bekele still lives in the village. There, he says, 'I am like the others; here, I am not different'. Bekele says that he leads a normal life, but that was not always the case. There was a time when 'I was stigmatised and abandoned by my loved ones just because I was sick… [my] family, my pals, all the village rejected me', he says.

> ## Feeling shame and/or humiliation for being poor causes instrumental harm and affects the other dimensions of people's lives.

In Bogotá, Colombia, the vast majority of demobilised FARC guerrilla fighters, who are in the process of reintegration following a 50-year war, live in the areas with the greatest inequality and the highest percentage of victims of the conflict. Trying to reintegrate them into society is one of the biggest challenges of that country's post-conflict reconstruction.

For the Agency for Reincorporation and Normalisation (ARN), the greatest obstacle to overcome is stigmatisation, because there remains a widespread prejudice that the demobilised person is violent. This means that the majority of the population would not like to have a demobilised guerrilla as a neighbour or workmate, and this affects their chances of finding work or migrating to areas with better housing conditions.

What these three cases show is the close relationship between aspects of shame (stigma) and humiliation (discrimination) and poverty.

This is nothing new. In the *Voices of the Poor* study, the largest qualitative study carried out worldwide, people living in poverty were asked how they would define 'poverty'. Their answers leave no room for doubt: 'poverty is not having money, not having health, not having decent housing, not being able to study ... but it also is suffering humiliation by others for being poor, being undermined in our dignity by our poverty, not being able to participate in what is customary in society because of our condition'.

Associating shame and humiliation with poverty is relevant for two reasons. First, there is the intrinsic harm caused by shame and humiliation. In poor people's stories, we see how hurtful both emotions can be and the importance of personal dignity.

Second, feeling shame and/or humiliation for being poor causes instrumental harm and affects the other dimensions of people's lives. For example, they can prevent public policies designed to combat poverty from having positive results (a person decides not to visit a health centre because they know they will experience discrimination); shame and humiliation can stop people from taking actions to improve their lives (like attending an educational centre, applying for a loan, or seeking employment). All of this can also result in poverty traps that perpetuate the situation of people living in that condition.

Shame and humiliation are clearly a central aspect of the poverty experienced by Rajavala Devi and young Bekele, and play a determining role in the chances of those demobilised guerrillas returning to a peaceful life. And yet, shame and humiliation are rarely taken into account in poverty analyses. Moreover, data are certainly not collected at the international level to determine the true scale of the problem, and its relationship with other important variables of people's well-being. Some may argue that these examples are not common and that could be the explanation for the absence of data. But these issues come up again and again in multiple everyday aspects of life: in care at health centres, in the education system, among women, among indigenous and Afro populations, in a variety of dimensions of life, and in the stigma suffered by HIV/AIDS patients, to name but a few.

Solving this data problem does not require huge financial resources or long periods of time. By including a few additional questions in household surveys, we would collect the information needed to identify the people subject to these scourges and could devise interventions to ameliorate their plight. For example, by investing in the training of hospital staff and by defining control mechanisms to diminish potential discrimination, we would significantly reduce people's reluctance to attend a health centre for fear of discrimination.

The cost-benefit ratio of this type of intervention is low and could increase the efficiency of health policies. More importantly and impossible to quantify, it will help maintain people's dignity.

Problems related to shame and humiliation

The effects of shame and humiliation on people's psychological well-being are multiple:
» Shame is closely linked to low self-esteem and poor interpersonal relationships.
» Humiliation has been associated with numerous psychosocial illnesses, such as low self-esteem, school-related difficulties, social phobias, anxiety, depression, paranoia, marital problems, domestic violence, sexual assault, rape, serial murders, torture, and suicide.
» On a macro level, shame and humiliation are related to negative practices of social control, discrimination, numerous forms of oppression, and international conflicts.
» In addition, recent research points to the links between horizontal inequalities – between groups rather than individuals – and conflict, especially when group formation is strong (e.g. on the bases of ethnicity, religion, race, or region). The perception of horizontal inequalities is highly fuelled by the discrimination (and the sense of humiliation) suffered by certain groups within society. ■
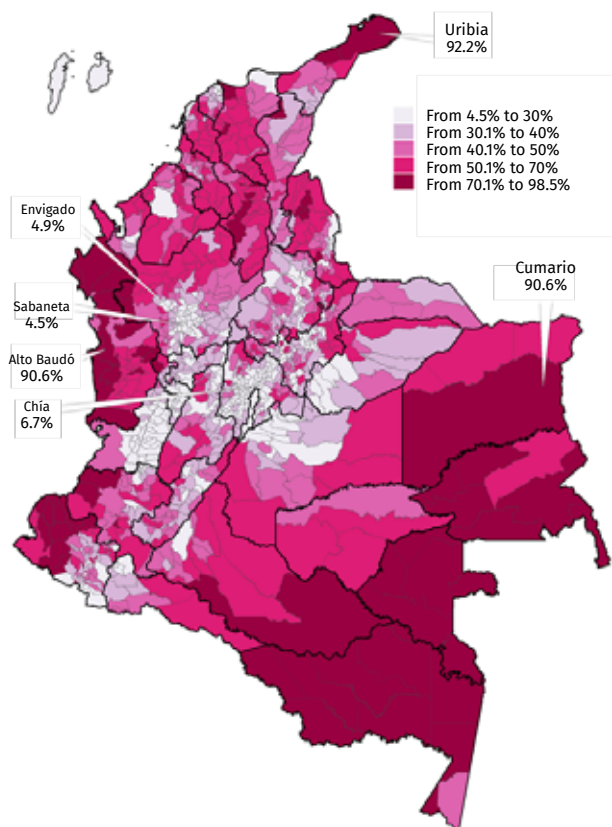
Data of the Month

The National Administrative Department of Statistics (DANE) of Colombia launched its Municipal Multidimensional Poverty Measure from Census Sources. This measure consists of five dimensions: educational conditions of the household, conditions of childhood and youth, health, employment and housing conditions, and access to public services.

Municipalities with the highest levels of municipal multidimensional poverty are located predominantly in the Orinoquía-Amazon and Pacific regions, and municipalities with the lowest percentages are in the Central and Eastern regions of the country.

On the DANE website it is possible to find a series of maps with detailed information on each dimension and indicator at the municipal level. ■

Photo: www.flickr.com/photos/regnatarajan/48261483196

Multidimensional Poverty in Colombia (percentages)

Uribia
92.2%

From 4.5% to 30%
From 30.1% to 40%
From 40.1% to 50%
From 50.1% to 70%
From 70.1% to 98.5%

Envigado
4.9%

Cumario
90.6%

Sabaneta
4.5%

Alto Baudó
90.6%

Chía
6.7%

Source: Medida de pobreza multidimensional municipal de fuente censal 2018 (Municipal Multidimensional Poverty Measure) [in Spanish].

A Day in the Life

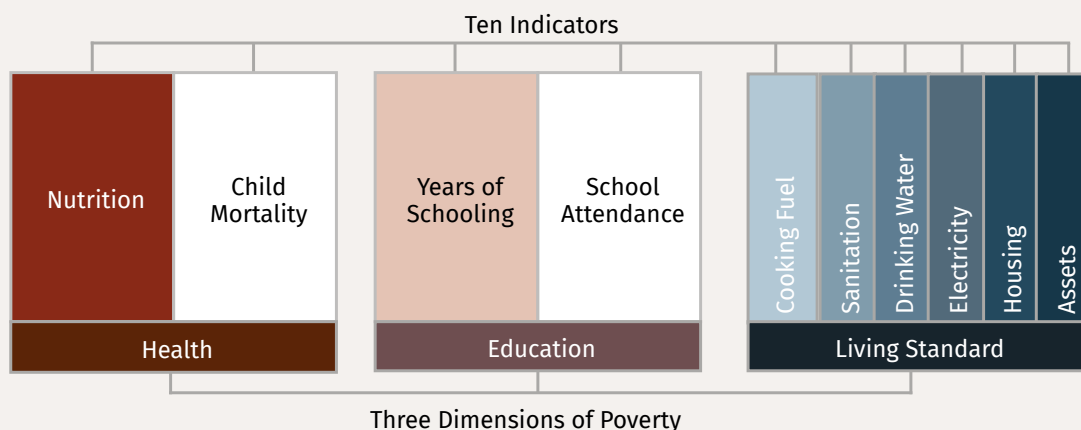## Living in multidimensional poverty in India: Kari's story

Kari is a 45-year-old woman who lives in her birthplace village in Bihar, India. She was married to her husband when she was 13, and they have a son and three daughters. The family is Hindu and belongs to the Musahar caste. During certain seasons, Kari finds agricultural employment related to the crop cycle, often walking 15 kilometres to work.

Over time, her left hand has become partially paralysed. Nonetheless, she strives to work as much as she can. She sows seeds and is occasionally employed by farmers to do weeding, for which she is paid INR 25 a day – much less than the prevailing wage due to her disability. During harvesting, she gathers the paddy and wheat crops. Being seasonal, harvesting work barely lasts for more than four weeks per year. She is paid in kind and can keep one-ninth of the produce that she helps to harvest. Overall, Kari works for less than two months annually, with no guarantee of daily employment. Her husband works half the year in Punjab, and their children have left home. Although proud of their children, Kari and her husband regret being unable to educate any of them due to needing 'all hands on board'.

Kari wakes at 5 am every day, washes at the side of the road, sweeps the house, and then collects firewood for household fuel. An activist, she is also a member of a federation of four women's self-help groups. Boasting over 100 members, they are known for engaging local officials and political leaders on a range of issues affecting the villages. Kari realizes that she is living through interesting times. For years, women like her were stigmatised. Today, thanks to a series of affirmative action steps taken by the Bihar state government, they can access various government schemes. Yet Kari's household is still poor according to the Indian government's Below Poverty Line survey instrument and the MPI. ■

Kari's deprivation chart. The coloured boxes show the deprivations that her household faces across the global MPI.

Ten Indicators

Nutrition	Child Mortality	Years of Schooling	School Attendance	Cooking Fuel	Sanitation	Drinking Water	Electricity	Housing	Assets
Health		Education		Living Standard					

Three Dimensions of Poverty

MPPN Side Event at the United Nations Statistical Commission 2020

On 5 March 2020, the Multidimensional Poverty Peer Network (MPPN) hosted a side event at the 51st United Nations Statistical Commission entitled 'Using a Multidimensional Poverty Index (MPI) to coordinate policies and achieve SDGs'. Statisticians and other stakeholders gathered to discuss and share their experiences of using national MPIs as tools to coordinate policies and track progress towards the Sustainable Development Goals. Of the twelve speakers, ten shared plans to launch or finalise their MPIs, or revise existing MPIs with added dimensions. The side event was chaired by Risenga Maluleke, the Statistician-General of Statistics South Africa.
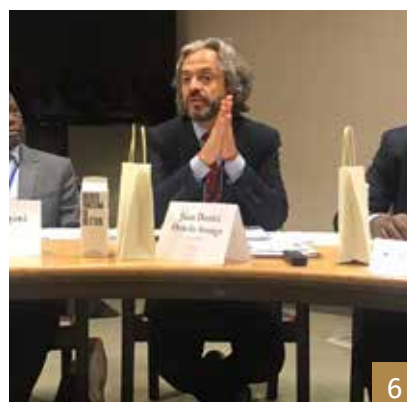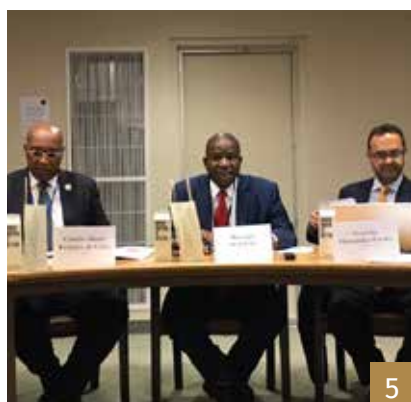
Photos: OPH

1. and **2.** General overview of the room; **3.** Sandra Quijada, INE Director, Chile; **4.** Araba Forson, Deputy Government Statistician, Statistical Service, Ghana; **5.** Camilo Ceita, General Director of the National Statistics Institute, Angola, Risenga Maluleke, General Statistician of Statistics of South Africa and Gonzalo Hérnandez Licona, MPPN Director; **6.** Juan Oviedo Arango, General Director of DANE, Colombia.

Poverty research by OPHI wins the prestigious Queen's Anniversary Prize

On February 20th OPHI was awarded a Queen's Anniversary Prize for its excellence in research and its impact. Sabina Alkire, OPHI Director, accepted this award not only on behalf of OPHI and the University of Oxford, but also on behalf of all their partners. Alkire recognized the support of the MPPN and all its participant governments and international agencies.

'OPHI is so grateful to all members of its extended team and friends for working so hard to blend rigorous research and practical connections that confront the disadvantages that batter poor people's lives in many and various ways', said Alkire. 'No one of us could have done this work alone, but together we are building a new field of techniques, policy routes, management structures, and leadership strategies to end poverty in all its forms'.

Louise Richardson, Vice-Chancellor of the University of Oxford; Sabina Alkire, Director of OPHI; and Lord Patten of Barnes CH, Chancellor of the University of Oxford.

mppn.org/poverty-research-by-ophi-wins-oxford-prestigious-queens-anniversary-prize

Polishing the poverty lens
by Pali Lehohla

South Africa measures poverty using a monetary approach as well as multidimensionally, with the former measure being the official poverty measure. It has been my experience that you can either present complex phenomena such as poverty elegantly with a single composite index or awkwardly with a multiplicity of indices. It is a challenging task to explain the latter to busy policymakers and politicians with the short attention spans of speed-master tweeters. These two positions of simplicity versus complexity are a matter of deep intellectual discourse that spans decades if not centuries.

World Bank economist Gabriel Demombynes in 2010 concluded that 'still, my very practical worry is that the new push for multidimensional poverty indices will soak up much of the oxygen around poverty work'. In similar spirit and around the same time Professor Charles Meth made a similar critique of the Alkire-Foster method of measuring poverty multidimensionally. This group of intellectuals shared the same concerns as Martin Ravallion who advocated measuring the indices of poverty separately instead of lumping them together. These luminaries did not disagree with the fact that poverty is multidimensional. But, they asked, on what basis are the weights assigned? Is this not a question of adding pears and oranges? In the compilation of the consumer price index, for instance, each product that qualifies to be in the basket is based on its price and the quantity of its consumption and the weights are straightforward.

The response by Sabina Alkire (an eminent student of Amartya Sen, the Nobel Laureate and developer of the capability approach) to the critics of her composite indices of multidimensional poverty was 'the added value of the MPI is that it captures the overlap between its various components. But if a quarter of the children in a country are malnourished and a quarter lack access to clean water, to what extent are we talking about the same children? In practice, the correlation between such measures is likely to be high, and the best way to examine the overlap would be to consider it directly, e.g. tabulating child malnourishment versus access to clean water'.

> **Their Royal Highnesses The Prince of Wales and The Duchess of Cornwall presented Dr Sabina Alkire, the Director of OPHI, with an award acknowledging OPHI's contribution to poverty measurement.**

As the debates raged on, I mounted an empirical study of whether there is correspondence between the monetary measures and multidimensional indices in South Africa. The results came pretty close although it was not clear whether these were the same households or the same people in households. The arguments by Alkire were quite convincing.

The Alkire-Foster method of generating composite indices of multidimensional poverty has been peer-reviewed, has been proven scientifically to hold, and has stood the test of time. This March, on the margins of the 51st United Nations Statistics Commission in New York, the Statistician-General of South Africa Risenga Maluleke chaired a side event of the Multidimen-

sional Poverty Peer Network (MPPN), which consists of up to 60 countries, and shared how multidimensional poverty as an approach to development works.

In Colombia, the statistics office through the use of the national ID number of individuals has advanced the method to the level of small area disaggregation enabling policy to target the poor. In instances such as Libya, the method is now applied to include security as a measure of poverty. My presentation at the side event described the possible applications of the MPI in Africa with respect to the Africa Peer Review Mechanism (APRM). Specifically, the APRM, which now encompasses 42 countries, could use the MPI to measure the following: a high standard of living, quality of life, and well-being for all citizens; healthy and well-nourished citizens; modern agriculture for increased productivity and production; and security from violence. The advent of COVID-19 has brought to the fore the question of resilience – a core feature of the multidimensional measurement approach to poverty which is distinctly absent in monetary measures.

OPHI

In November 2019, the University of Oxford was among 22 UK educational institutions announced as winners of Queen's Anniversary Prizes for research carried out by the Oxford Poverty and Human Development Initiative (OPHI). On February 20, 2020, Their Royal Highnesses The Prince of Wales and The Duchess of Cornwall presented Dr Sabina Alkire, the Director of OPHI, with an award acknowledging OPHI's contribution to poverty measurement. This journey of praxis is bearing fruit to many policymakers.

Recently OPHI spawned sOPHIa, a multidimensional poverty lens that businesses can use to understand poverty in their own institutions, and in 2019 I had the privilege of addressing the Johannesburg Stock Exchange on this new frontier of research. This approach can inform the deepening of social cohesion more meaningfully and address the scourge of poverty by constructing more resilient societies.

I wish to congratulate Dr Alkire and the Oxford team for their recognition and their cutting-edge methodologies and praxis on poverty. Through their persistent work, they have made the complexities of poverty clearer and easier to communicate to those policymakers and other actors attempting to end poverty in all its forms. ◼

Check Our Special Issue on the History of OPHI

Available at: mppn.org/dimensions

Handbook:

How to Build a National Multidimensional Poverty Index (MPI)

How to create a national MPI?
What are its purposes?
How to communicate it?
How to select dimensions and indicators?
How to analyse its data?

This handbook, published by UNDP and OPHI, provides a guide to design national MPIs or other multidimensional poverty measures by

• Illustrating the process of creating a multidimensional poverty measure,

• Describing technical and political processes to create sustainable and rigorous measures that are proactively and effectively used in policies to end poverty, and

• Providing examples based on countries' experiences.

This handbook is available for free at mppn.org/handbook-national-mpi.

News

Gonzalo Hernández Licona is the new MPPN Director

The MPPN is delighted to announce that Gonzalo Hernández Licona is assuming a leadership position as the Director of MPPN. Mr. Hernández Licona has significant experience as a leader in social policy evaluation and poverty measurement in Latin America. He was Executive Secretary of the National Council for the Evaluation of Social Development Policy (CONEVAL) in Mexico between 2005 and 2018. More info.

Maldives adopts a national MPI as a poverty assessment tool

President Ibrahim Mohamed Solih has decided to adopt a national multidimensional poverty index as the assessment tool for poverty in Maldives. This index has been developed by the National Bureau of Statistics, with OPHI and UNICEF support. More info.

OPHI Summer School 2020

Due to the Coronavirus pandemic, this year OPHI's Summer School on Multidimensional Poverty Measurement & Analysis has been postponed. Dependent on how Coronavirus outbreak matter progresses, it may be held in December 2020, or given virtually. OPHI will make a further announcement once a final decision has been made.
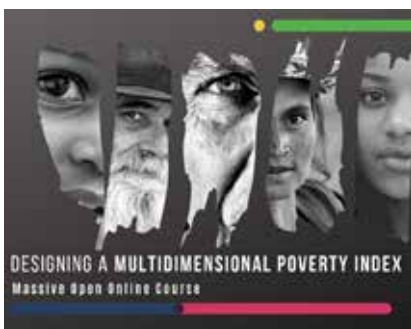
Course: Designing a Multidimensional Poverty Index

OPHI and UNDP held a five-week Massive Open Online Course (MOOC) on multidimensional poverty for practitioners. It included newly recorded case studies from MPPN countries and policy leaders. More than 2400 registered and over 880 completed the course. The videos and materials of this MOOC are available here.

Photos: Ophi | flickr.com/logitmark | Pxhere.com

MPPN

The Multidimensional Poverty Peer Network (MPPN) is a South-South initiative that supports policymakers in developing multidimensional poverty measures.

It promotes the use of such measures for more effective poverty eradication efforts at the global, national, and local levels.
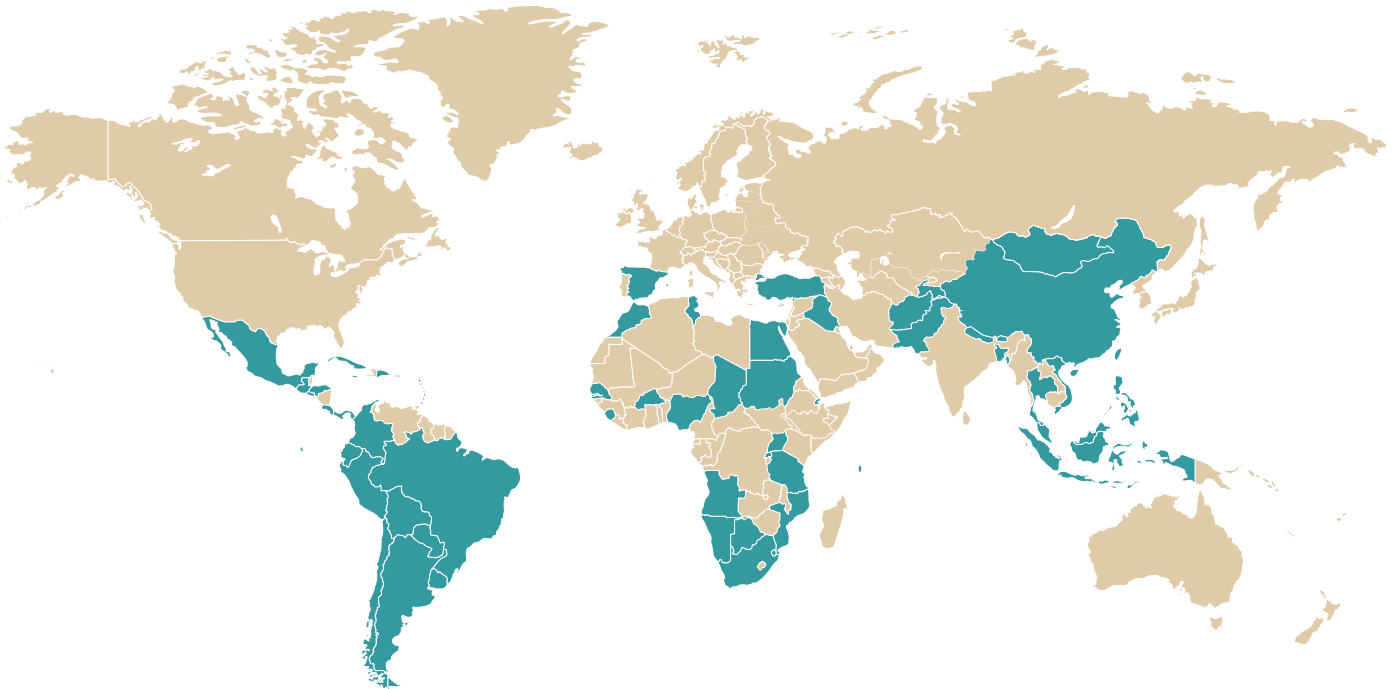
Participants in the network are Ministers and senior officials from:

- Afghanistan
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- Antigua and Barbuda
- Argentina
- Bangladesh
- Bhutan
- Bolivia
- Botswana
- Brazil
- Burkina Faso
- Chad
- Chile
- China
- Colombia
- Costa Rica
- Cuba

- Djibouti
- Dominican Republic
- Ecuador
- Egypt
- El Salvador
- eSwatini
- Gambia
- Grenada
- Guatemala
- Honduras
- Indonesia
- Iraq
- Jamaica
- Malaysia
- Mexico
- Mongolia

- Morocco
- Mozambique
- Namibia
- Nepal
- Nigeria
- Pakistan
- Panama
- Paraguay
- Peru
- Philippines
- Rwanda
- Saint Lucia
- Saint Vincent and the Grenadines
- Senegal
- Seychelles

- Sierra Leone
- South Africa
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