

# Child Poverty and Vulnerability Mapping for Mauritania

Daniela Gregr, Latifa Mohamed Vall

UNICEF Mauritania

# Initial objectives

- Programming guidance (first and foremost!): Improved geographical focus, integrated + disaster sensitive approach in new UNICEF Country Programme Document
- Advocacy for multi-dimensional poverty and child poverty: Alignment of national 2017-2030 development strategy indicators on SDG 1
- Advocacy for a child-sensitive poverty reduction strategy: Recognition of the importance of reducing child poverty as pre-condition for inclusive growth in the SCAPP 2017-2030
- Child sensitive and adaptive social protection: taking into account age specific vulnerabilities in social protection interventions, building integrated social protection systems, building resilience

# Overview of final product

- Overlap of child deprivations (child poverty) with hazard exposure (child poverty = proxy for vulnerability)
- Map (at a glance visualization)
- Census data: max. disaggregation (*commune*)
- Maps by individual deprivation, multiple deprivations as well as both number and % of deprived children (equity)
- Dimensions and definition of deprivations = Gordon et al.  
(subject to data availability)

# Child poverty measure at a glance

From: UNICEF study (2000), Gordon et al. (2003)

To: SGD 1, Target 1.2. + indicator

Multi-dimensional (child experience of poverty!)

Human rights based

- WSSD 1995 definition of poverty
- Material deprivations
- Constitutive rights
- Equal weights

Severe deprivations (threshold definition)

# Definition of deprivations (1)

Basic human need	Severe deprivation (Bristol)	Severe deprivation (Mauritania)
Food	Malnutrition (severe anthropometric failure)	Data not available in census; deprivation analysis supplemented by SMART survey data (mapping)
Safe drinking water	Long walk to water source (more than 200 meters or 15 minutes) or unsafe drinking water (surface water)	Use of surface water adopted as definition of severe deprivation; distance to water source could potentially be derived by combining HH data with GPS data collected
Sanitation facilities	No access to sanitation of any kind in or near dwelling	Data available in census; same definition of severe deprivation used
Health	No immunisation against any diseases	Data not available in census; this deprivation has not been covered in the analysis

# Definition of deprivations (2)

Basic human need	Severe deprivation (Bristol)	Severe deprivation (Mauritania)
Shelter	More than five people per room (severe overcrowding) or with no flooring material	Data available in census; same definition of severe deprivation used
Education	School age children who have never been to school and who are currently not attending school	Data available in census; but adaptation of definition (“OR”) to fit OOSC definition
Information	Children aged between 3 and 18 with no access to radio, television, telephone or newspapers at home	Data available in census; same definition of severe deprivation used (+ computer)
Basic social services	Children living 20km or more from any type of school or 50km or more from any medical facility with doctors	Data not collected at HH level in the census, but could potentially be derived by combining HH data with GPS data collected

Total population:  
3 537 368

Nomadic: 1.8%

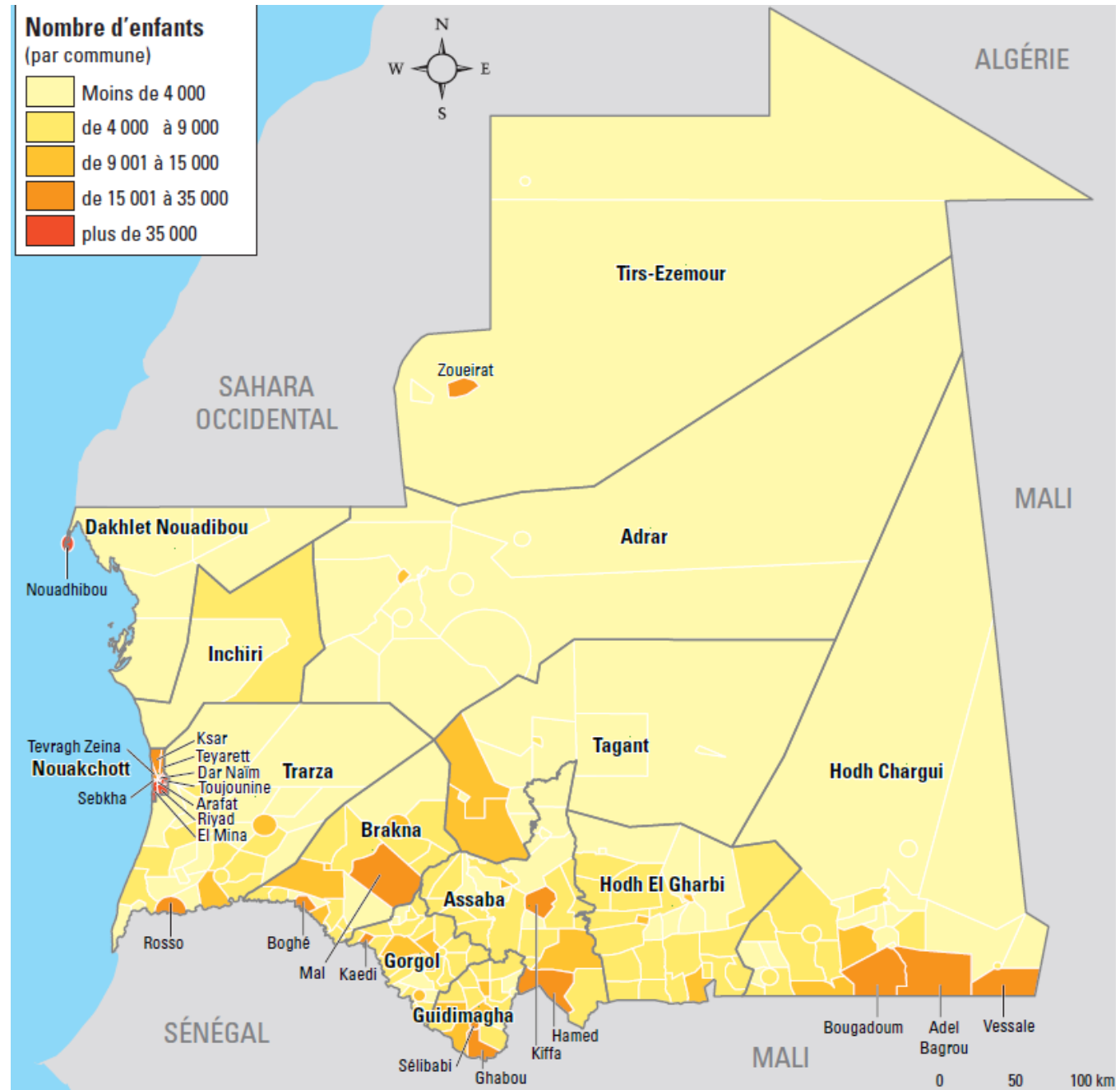
Child population  
(< 18 years): 50.5%

Total child  
population (not  
nomadic): 1 753 151  
(49.5%)

Nouakchott  
(capital): 27% of the  
population

Admin. structure:

- 225 communes
- 55 *moughataa* (districts)
- 13 *wilaya* (regions)



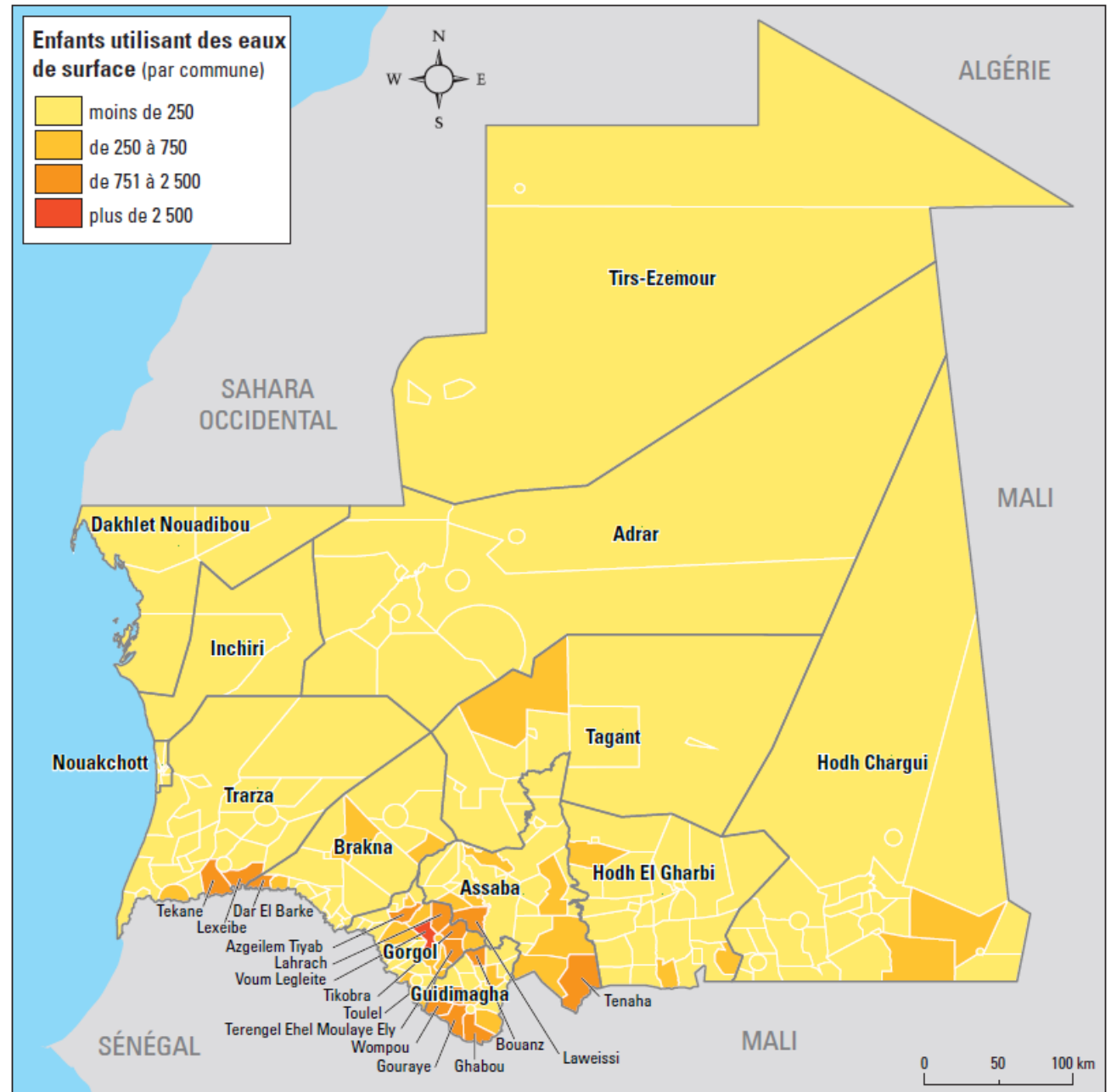
## Single deprivation mapping:

- Water
- Sanitation
- Housing
- Education
- Access to information

Different thresholds of # of severely deprived children for single deprivations (mapping)  
-> equal consideration given to all rights

Ex.: Access to water

Deprived children: 5%  
85 007 children  
10 communes  
represent 35% of all deprived children





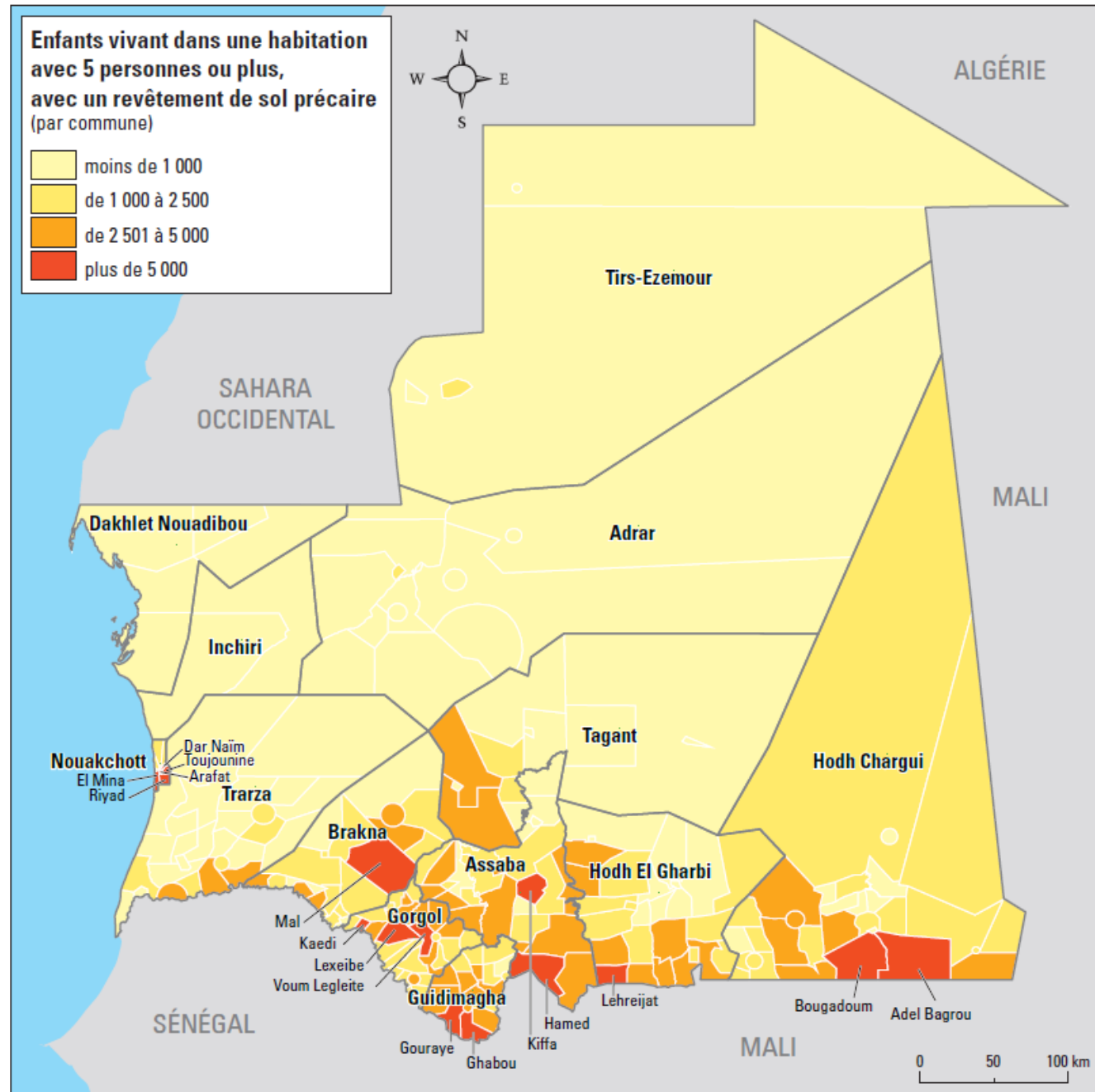
## Ex. Housing

Deprived children:  
27.4% = 474 287  
children

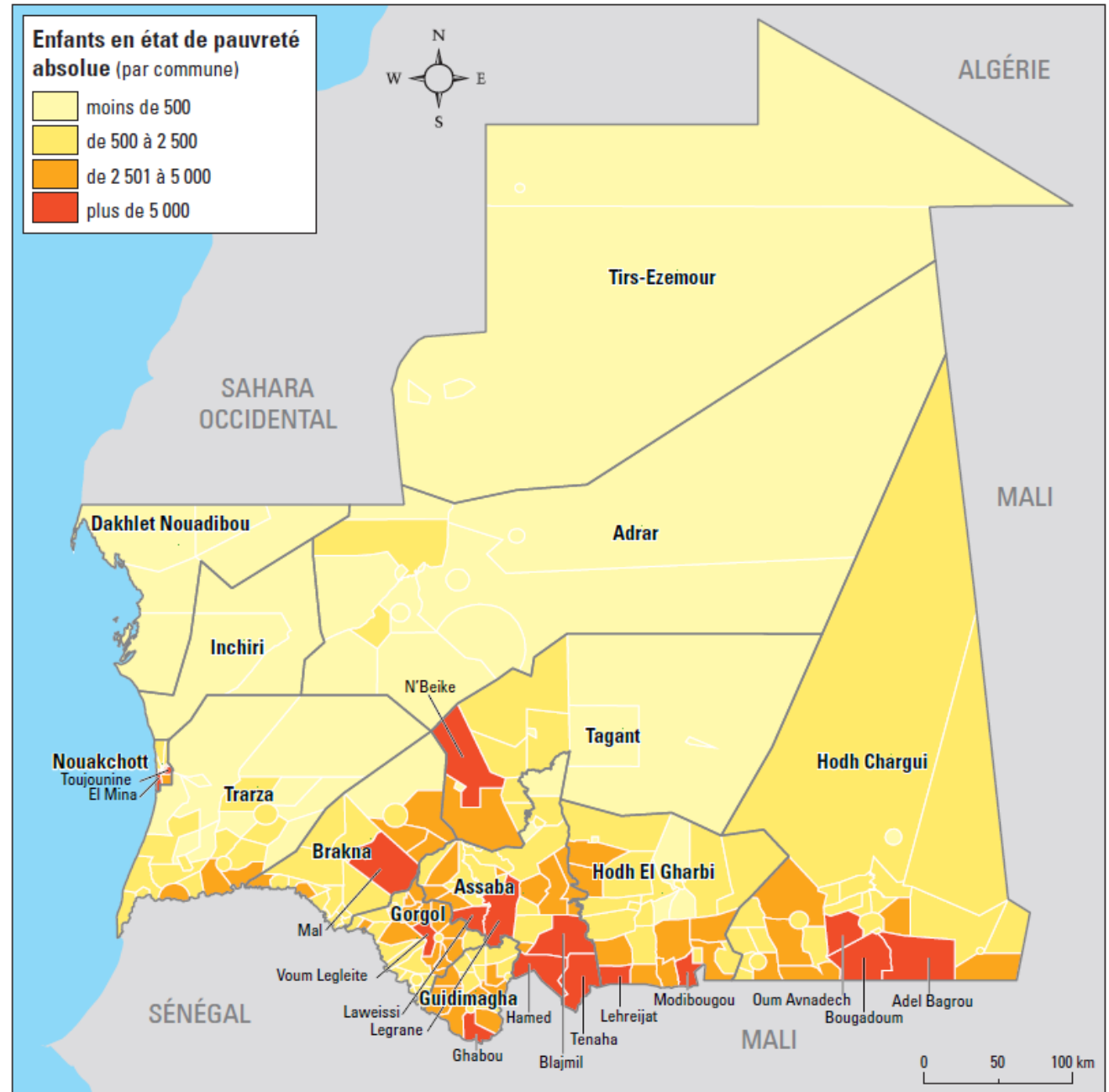
37% in rural areas  
15% in urban areas

0-4 years – 34%  
5-9 years – 29%  
10-14 years – 24%  
15-17 years – 12%

10 communes represent  
20% of deprived  
children



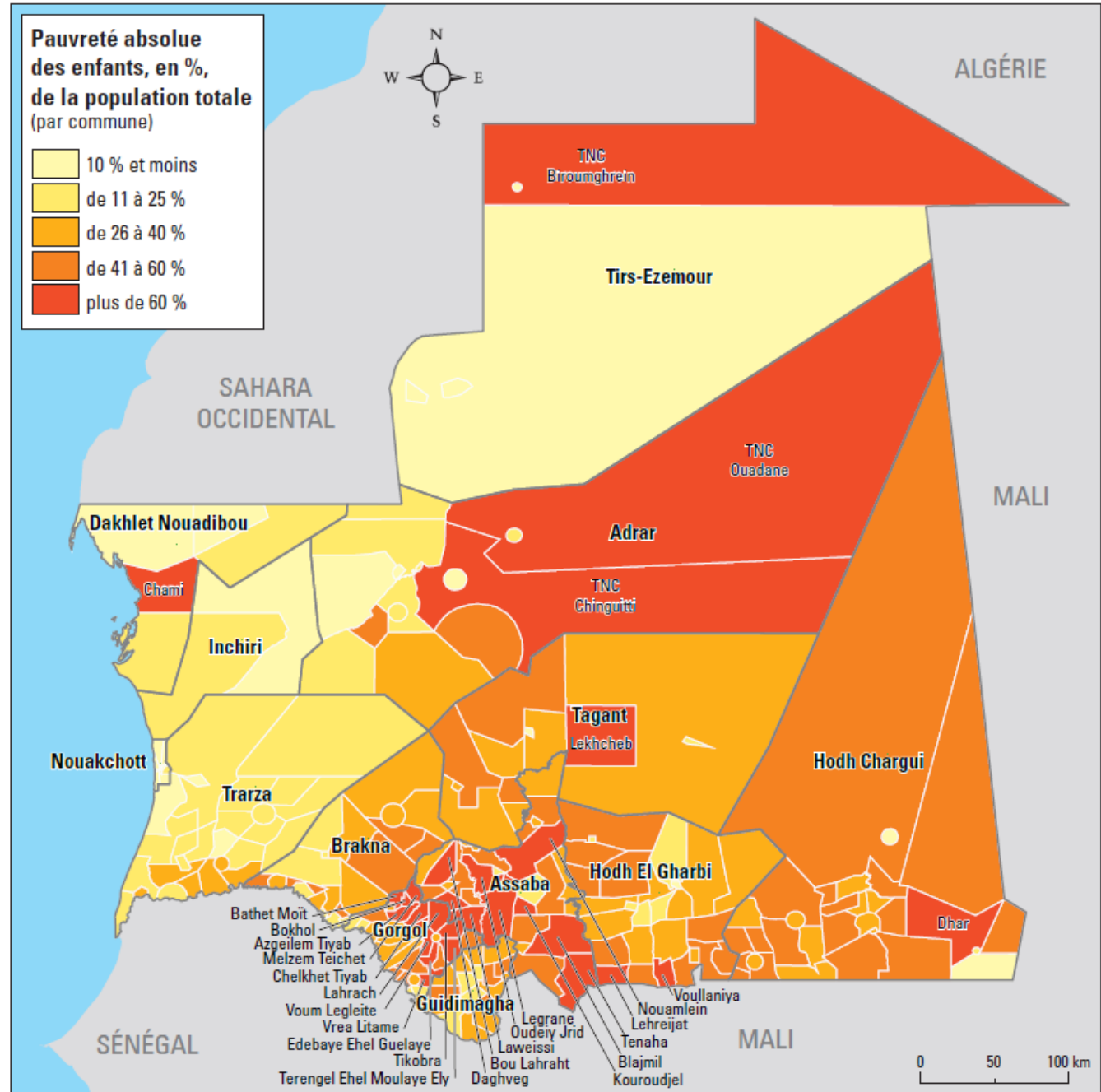
- 27% of children in Mauritania live in “absolute poverty” (two or more severe deprivations)  
= 472 184 children
- 19,000 (1%) of children suffer from 4 severe deprivations or more
- 106,000 (6%) suffer from 3 severe deprivations or more
- 4 communes represent each > 20.000 children with at least one severe deprivation



## EQUITY ANALYSIS

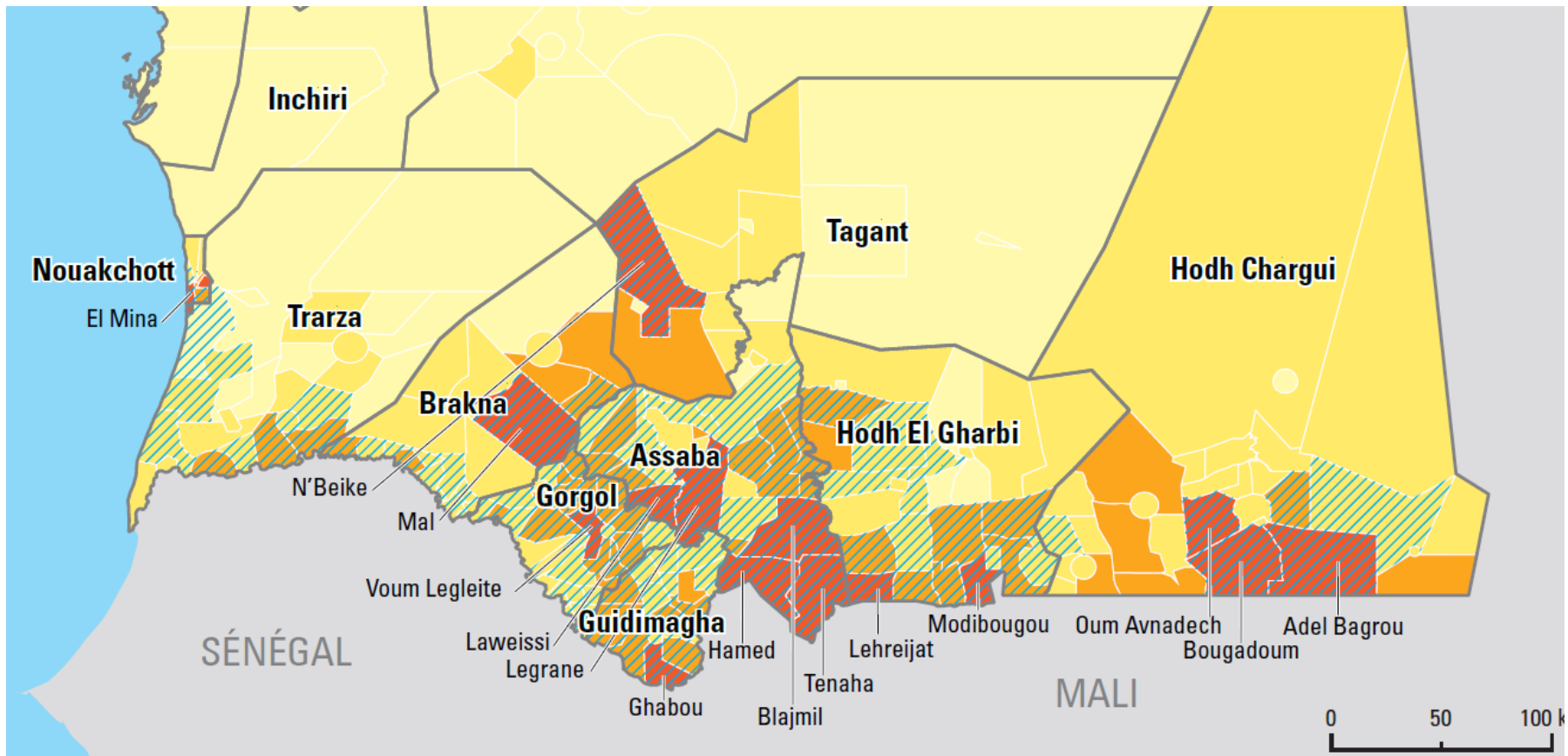
5 municipalities have over 70% of children living in absolute poverty :

- Chelkhet Tiyyab (70 %)
- Lahrach (71 %)
- Bokhol (71 %)
- Ouadane (79 %)
- Chami (100%, 3 children)



# Maps overlapping deprivation & risk of shocks

Example: Flooding risk & children with two severe deprivations (absolute poverty)



# Socio-demographic analysis of HH with deprived children

- Equal number of HH with deprived children headed by men and women, except in the South
- Among female headed households, the marital status of HoH is married for the majority (60%), widowed (20%) and divorced (20%)
- Strong prevalence of child marriage in regions with most deprived children (4% national, 15-20% in the most deprived areas)
- Larger HH size (> 7 people or more), over 90% in deprived areas
- Hassanya predominant language in deprived HH

# Advantages

- ✓ Children are particularly vulnerable to disaster (Sendai!)
- ✓ Long-term effects of shocks
- ✓ Both vulnerability & child poverty are forward-looking concepts (-> policy, HD investments)
- ✓ Human development inputs (-> policy, HD investments)
- ✓ Intra-HH dynamics (-> coping strategies, policy)
- ✓ Human rights based approach (methodology)
- ✓ Most conservative measure of HH consumption smoothing?
- ✓ Availability of disaggregated data (census, MICS...)

# Looking ahead

## On the mapping:

- Systematic disaggregation by age and sex for more targeted life-cycle approach programming (also: “critical period” in child development!)
- Distance to basic services derived from census GPS data
- ODA/Public investment “layer”?
- Adaptation of child poverty indicators to type of hazard?

## Avenues for further research:

- Investigation into areas with lack of overlap between hazard & child deprivation (community adaptation)
- Child poverty in the nomadic community
- Causality analyses: inclusion of different underlying factors
- Impact on children living in high-risk areas (ex-ante HH coping)

*Thank you!*