

Barriers to Poverty Reduction in Russia: Participatory Qualitative Assessment. Oxfam GB Case Study

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"Poverty is like punishment for a crime you didn't commit." ~Eli Khamarov

Abstract

This article provides a participatory poverty analyses based on experience gained from EU-Oxfam GB project "Empowering Municipalities to Effectively Address Poverty" carried out in five small towns, including Ostashkov town in Tver oblast, in Central Russia. Research on participatory assessment was carried out through focus group discussions (FGDs) among the people living in poverty, namely: single mothers; people with disabilities; families with many children; families with disabled children; and pensioners. In this article, the participatory results are given on the example of the qualitative analyses of FGDs in Ostashkov town. One of the results of cluster qualitative analyses is identification of institutional and behavioral barriers as structural factors for better life that could be considered for policy decisions. For example, better information channels on health services or an awareness campaign on social benefits for the elderly or people with disabilities may reduce behavior barriers, while improved doctor's appointment system at health clinic may reduce institutional barriers in access to public services for those vulnerable groups of population. Official figures may simply omit those living in poverty as they may just not be seen in the public eyes and their needs remain unmet at policy level. We argue that a participatory understanding of community barriers can help local municipalities to develop more targeted community programs on poverty reduction.

Keywords: Poverty; Small towns; Oxfam GB; Participatory poverty assessment; Poverty barriers

Background Poverty in Russia

Poverty in Russia is in great part inherited from the Soviet era. Market reforms led to a rise in unemployment and subsequently increased the number of people living in poverty. On one hand, the collapse of the old system gave an impetus to small and medium businesses and led to an increase in the well-being of entrepreneurs and business owners. On the other hand, many people could not meet the new requirements of the market economy and fell into unemployment and poverty. A large number of papers have been written on the problem of poverty. The poverty level ratings vary greatly depending on who you consider to be poor and from what perspective the analyses are done. Scholars provide a range of definitions of poverty that define poverty as an economic condition of lacking both money and basic necessities such as food, water, education, healthcare and shelter. A national poverty line reflects the country's economic and social circumstances and cannot be compared with other national figures. Inability to buy a car or pay mortgage, or not being able to provide a separate bedroom for each child – this family would be considered poor in developed countries, such as Canada [1]. In the developing world the poverty line would be defined at survival level. In Russia the poverty line would be defined as food and non-food supplies, so called "consumer basket", at the level of living wage [2].

Under Putin's administration Russians have benefited economic growth. At the same time, studies indicate growth of inequality [3] and new phenomena, such as the appearance of so-called "new poor" who were skilled specialists and blue-collar workers, and relatively well-off and belonged to the "middle class" in the Soviet era. Russia's inequality has risen to a such degree, that several studies ranked it to be the highest among the world's leading countries, with incomes of the very richest 15 times those of the poorest and in Moscow, this difference is 53-fold [4]. You are 3 times more likely to be poor in the Daghestan Oblast or in Tuva Republic compared with the rich Tumen Oblast or in Moscow City [5]. In 2008, 52 % of Russians limited their food buying due to high prices while in developed countries, expenses on food do not exceed 15% [6].

Lack of health and education are two major factors that further disadvantage those living in poverty. In spite of free health care services declared by the Russian government, out-of-pocket payments are a regular practice in health centers. The poor also have worse health condition. Illness may have a substantial impact on income and may even make a difference between being above the poverty line or below. Recent Russia health care reforms failed to provide quality health care services for free to all, and as a result "patients faced a two- to three-month wait for a free doctor's appointment, while fee-based appointments were usually available the next day" [7].

Low income is a barrier to getting high quality high school and university education. The World Bank argues that in Russia in 2004 the number of students from better-off families admitted to the Universities were 5.5 times high than that of children from poor families [8]. Still no real measures for equal access to education for excluded children have been implemented in Russia [9]. In spite of reforms undertaken by the government, introduction of system of Unified State Examination that aims to provide equal access, poverty still limits access to quality college education in Russia [10].

Needless to say, the government in 2005 took actions to try to alleviate such disparities and increased social spending. In spite of their efforts "the non-poor remain the most active recipients of benefits in cash and in kind" [11]. Benefits and transfers failed to reduce poverty levels in the targeted groups. The money isn't going to the people that

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it's supposed to [12]. In 2003 the poorest 20% of the population received only 10% of the total amount of in 2003. In 2005 only 35% of child welfare payments and living subsidies went to the poor. And according to N Gassman and G Notten, the benefits did little to prevent poverty [13]. Poverty is multi-faceted picture and pertains to a large part of Russia's population covering the elderly, one-parent as well as two parent families with children, people with disabilities, the working population with low income and people with university education. Those who live in poverty report poor health status, difficulties in providing their families with healthy food, lack of recreational activities and lack of state support. Poverty categorises almost all regions of Russia. Move beyond the urbanised city centers and one finds another Russia - small and medium towns with aging and decreasing population and neglected industry. World Bank predicts increase in poverty up to 14% in 2015-2016 [14]. As the WB suggests "The impact of sanctions is likely to linger for a long time" leading to impoverishment of Russia's society [15]. Today, governments are scaling up programs to reduce poverty, but they have difficulties in reaching the poor, especially the poorest. Better knowledge of poverty characteristics through the voice of people living in poverty may help cost-effectiveness of local programming.

Participatory Approach in Poverty Reduction: Oxfam GB Case Study. Qualitative Insights

The soviet generation would say that they were not poor in childhood. The Russians would describe their life in Soviet times as a "normal" one. "Normal life" in the Soviet era could be described as "having a regular job with a good, regular salary, and the possibility to buy food, new clothes, and medicine. One could go South (to the Black Sea) for vacation, that is not possible now" [16], "A good life is when you drink coffee every morning, butter your bread and buy sugar to make your life sweet" [17]. Under the socialist regime, poverty was attributed to those who represented the so called "social stigma": unemployed, alcoholics and disabled single people.

In the fight against poverty, international development arena adapted participatory approaches. This was supported by the Asian Development Bank and approved in some countries including those of former Soviet Union (FSU) such as Kyrgyzstan and Uzbekistan [18]. A Participatory Poverty (PA) approach can be defined as an instrument for including poor people's views in the analysis of vulnerability and the formulation of strategies to reduce it through public policy [19]. From the PA perspective, projects on poverty reduction deal with questions such as: What are the priorities of the poor? What actions are needed to improve their lives? The purpose of PA is to improve the effectiveness of public actions aimed at reducing vulnerability. Today, governments are scaling up programs to reduce poverty, but they have difficulties in reaching the poor, especially the poorest.

Yet, neither governments nor donors are accustomed to asking the poor for advice. The participatory decisions require a bottom-up approach. A bottom-up approach includes involvement all stakeholders, for example, those living in poverty, community groups, nongovernment organizations (NGOs), local governments and the private sectors. Only the very poor know these extreme consequences due to the exclusion, injustice and lack of human rights. It is important to understand why people have no decent housing, good quality food and why they are unable to approach the government benefits. Citizens may influence governments through their voice and elections, subsequently governments influence service providers and they in turn act as the agents for policymakers in governments.

Good example and lessons learnt are brought by Oxfam GB [20]

that carries out poverty reduction programmes in more than 70 countries around the world. Oxfam GB has been working in Russia since 2003 on developing economic opportunities for poor people. The project "Empowering Municipalities to Effectively Address Poverty" carried out in 2007-2009 under EU-Russia Civil Society Grants Program, Institution Building Partnership Program (IBPP) included the opportunity to integrate participatory poverty assessment as a major methodological tool used in the project. The project focused on enhancing local municipalities and civil society organizations' response to poverty in their social policies and practices in five medium and small sized towns in Russia including: Ostashkov town in Tver oblast, central Russia's region. The town of Ostashkov has a population of 19,700 people and is situated on Lake Seliger, where a government backed and expensive All-Russia youth union forum is held every year [21,22]. Unfortunately, the town gets little state attention [23] and remains impoverished and depressive. At the beginning of market reforms the closure of the town's core industry, cotton factory, had a devastating impact on the region's economy, leaving Ostashkov inhabitants, struggling to survive on a low income.

The analyses of focus groups discussions with people with disabilities, single mothers, and elderly in the town gave a better picture and understanding of a community's life, more specifically .of barriers to poverty reduction through the eyes of the people who live in poverty. The approach provides a comprehensive poverty picture from narrative and qualitative prospective, that could be extrapolated to the rest of Russia where numerous small and medium towns stretch out over the vast territory of the country, three times the size (or even more), than Canada, China, USA.

Institutional and behavioural barriers as structural poverty factors

Qualitative analyses highlighted the main structural factors that frame poverty, and communicate them for prioritisation in municipal programming. Structural factors are circumstances that create or result in institutional and personal and group behavioral barriers. Institutional barriers are policies, budgets, procedures, practices and municipal programs that systematically disadvantage people who are vulnerable and poor. Behavioural barriers are attitudes and beliefs that prevent disadvantaged people from having full access to public and other services, which may alleviate poverty by addressing those factors. Very often municipalities in Russia do not consult with their communities by not giving full attention to people's concerns, and leading their programs to being detached from community needs. Addressing institutional and behavior barriers as structural poverty factors in local programming help in the identification of cost-effective intervention by local governments. Some of the barriers simply require municipal attention, that wasn't given before, or a refocusing of a management intervention.

Oxfam uses methodology that suggests narratives qualitative analyses through clustering into institutional and behavioural barriers within three important life domains: Health; Safety and Security; and Respect and Realization of Potential. Respondents in Ostashkov town in Tver Oblast (5 hours by road from Moscow) identified institutional barriers within the three domains several of which can be addressed by managerial intervention with little investment. Table 1 outlines several issues that help municipal poverty programs to better understand their local situation and thereby provide better services.

For example, in the health system, improvement of the doctor's appointment process could greatly aid their patients, e.g., making an

Health Domain	
Institutional(Narratives):	Behavioural (Narratives):
<ul style="list-style-type: none"> • There is a lack of doctors. • People have to come to the hospital reception at 5 a.m. to make an appointment with a doctor, his/her office lasting only 3 hours, • The visiting specialists from the region charge 200–300 roubles per examination • Emergency doctors—they don't have enough medications • Medicines needed (and on prescriptions) are not available or affordable 	<ul style="list-style-type: none"> • Lack of information on health services • Lack of empathy from health care providers • Lack of information on healthy type of life/diet • We used to have a garden. Now I and my husband are old and don't have enough health to work in it
Safety and Security Domain	
<ul style="list-style-type: none"> • Discrimination against disabled, elderly, single mothers and mothers with many children in the job market. One can't get a job because of this status and lack of job positions available. • The houses are falling into decay and are crumbled with age, they are like 100–200 years old, sometimes no running water, one just can't live in such houses • The town is not lit, roads are just terrible • Here prices are higher and pension amount is much lower than in Moscow 	<ul style="list-style-type: none"> • The rich people have stolen everything. They are in power and use their rights. They know how to cheat. • People are no more as kind and decent as they used to be, people have become aggressive
Respect and Realisation of the Potential Domain	
<ul style="list-style-type: none"> • Local authorities treat us in arrogant and disrespectful ways • There are no attractions, no sport facilities for children and youth in the town anymore. • No playground for children. 	<ul style="list-style-type: none"> • Poverty is inherited • Many people did not show up at our focus group, they might have felt confused that they did not have anything nice to wear • People don't feel confident, they don't believe that they can achieve anything • Lack of information about rights and benefits

Table 1: The institutional and behavioral barriers in health, safety and security, respect and realisation of the potential domains identified by the people with disabilities in Ostashkov town (Tver Oblast, Central Russia).

appointment on the phone can address the barrier “People have to come to the hospital reception at 5 a.m. to make an appointment with a doctor, his / her office only open for 3 hours”. Behavioral barriers can be addressed by awareness, education and knowledge sharing interventions. For example, distributing information leaflets, or any other appropriate awareness campaigns, like discussion groups of doctors and patients, may address the barrier “Lack of information of health services; Lack of information on healthy type of life/diet”.

The barriers can help target planning for improving quality of life of people with disabilities in Ostashkov town. Of course, overcoming some barriers require financial investments and longer planning. For example, in the Safety and Security domain, the barrier: “The town is not lit, roads are just terrible”, as well as “There are no attractions, no sport facilities for children and youth in the town anymore” in Respect and Realisation of the Potential may require longer planning and larger investments. But, this approach can greatly serve better targeted planning. Creative thinking and further public participation could help reduce the needed investments.

Conclusion

Poverty characterises Russia all over the country. The analysis of structure and dynamics of poverty reveals low effectiveness of government policy in its reduction and in reducing inequalities. Benefits and transfers fail to reduce poverty levels in the targeted groups. Lack of access to health services and education are two major factors that disproportionately affect people in poverty. Poor people have worse health condition than better-off people. The working poor are the largest group of those living in relative poverty, which in the Soviet time never lived in poor conditions and is purely a Russian phenomenon.

The participatory approach has increasingly been introduced into public policy making all over the world. The analysis of qualitative data gives a better picture and understanding of community life, most specifically institutional and behavioural barriers to poverty reduction... The participatory approach that Oxfam GB introduced through its programs and projects contributed new perspectives to find assets and

better the lives of their communities.. The identification of institutional and behavioural barriers in Health, Safety and Security, Respect and Realisation of the Potential domains conceptualises system gaps can be addressed by local programs and policies

Small and middle sized towns such Ostashkov, where Oxfam GB implemented its projects, with impoverished environment, closed factories and high level of unemployment still resembles the late Soviet time and nowadays vast Russia remote areas. People with disabilities in the town identified the barriers such as spending longer hours waiting for doctor's appointment or lack of information on health services (Health domain), poor road conditions (Safety and Security domain), and the absence of recreation facilities for children and youth (Respect and Realisation of the Potential domain), all of which can be addressed by local municipalities.

Participatory approaches introduced in Russia have been actively embraced by communities, engaging citizens into decision making processes. As some of the FGD participants expressed: “It is the first time someone is asking us for our opinions and about our everyday problems and challenges. We may provide better solutions for the local planning. But they (politicians) would approach us only when they need our votes for the election.”

One of the major challenges is social spending that supposed to support people living in poverty, but in reality isn't reaching the target population. Participatory approach could help increase the cost-effectiveness of budget planning and spending. In spite of obvious efficacy, the participatory approach is still not practiced in budget planning in Russia. Such lessons learnt worldwide, including the Oxfam experience in Russia would be of benefit to government reforms, and should be considered as another important planning tool.

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