

THE RURAL POOR AND ESCAPE FROM POVERTY: THE CASE OF IN-CARE OF THE PEOPLE PROGRAMME (COPE) IN ANAMBRA STATE, NIGERIA

By

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ABSTRACT

COPE is a Federal Government of Nigeria programme, initiated and implemented by its pivot alleviation agency; National Poverty Eradication Programme (NAPEP). COPE is its key product in breaking inter-generational transfer of poverty, among the household-poor, in rural Nigeria. This study focused on three Local Government Areas in Anambra State, purposely selected to reflect the three senatorial zones of the state. The Local Government Areas are Nnewi North, in the South; Idemili South in the Central zone; and Anambra East in the North. Fifty one, mostly, poor-female headed households were sampled. Responses on an interview-guided questionnaire administered by trained enumerators, followed-up by interface-meetings with stakeholders, were employed in sourcing as well as validating the data collected. Descriptive and inferential statistics (means, simple percentages, multiple percentages likert-scale, t-test, chi-square) were used in assessing if COPE was implemented as planned, and if so, whether it made impact in its core-areas: access to basic-child education; access to basic-health care; engagement in the monthly income guarantee (BIG); engagement in the compulsory investment training; and engagement in the Poverty Reduction Accelerator (PRAI), by the poor-headed households involved in the programme. The study recommended proper sensitization of the beneficiaries about COPE; regular payment of BIG; full payment of PRAI immediately after the training on chosen business by the beneficiaries; ensuring the establishment and functioning of the state as well as the community monitoring and evaluation component of the programme.

Key Words: Poor-headed, poverty, BIG, PRAI, Household, COPE

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BACKGROUND INFORMATION

Ehigiamusoe (2001), describes poverty as associated with low income, ill-health, hunger, powerlessness and other forms of deprivation. Endemic poverty as common in most rural communities of developing nations is generated and sustained by the structure and process of economic relations in the society. Indeed, various methods have been used to identify the poor. They include income and consumption status as well as location. The others are non-economic measures such as life expectancy, access to safe drinking water, access to education and health facilities, housing, quantity and quality of food (Zoller, Sharma, Ahmed and Rashidi 2001). According to Ehigiamusoe (2001), Sub-Saharan Africa presents the worst case indicators of poverty among the continents. He states that 216 million Africans are in absolute poverty and that except for South Africa and Mauritius, African countries belong to 50% of the 150 countries ranked poor on the human development index in 1996. Also of the 20 poorest countries in the world, 18 are in Africa.

Poverty reduction is a major challenge facing Nigeria and its people. The poverty rate in Nigeria increased from 27 percent in 1980 to 66 percent in 1996 and by 1999 it was estimated that more than 70 percent of Nigerians lived in poverty (NEEDS, 2005). This phenomenal rise in poverty in Nigeria, largely regarded as paradox, considering the enormous natural resources it is blessed with, has continued to rise. There have been several efforts in the last two decades, through mostly government initiated development programmes, which had largely failed to yield the desired trickle - down effect (Okorie, 1991; Ukpung 1998). The exclusion of the intended beneficiaries is seen as an important factor to its failure (Manufor, 1997; Onugu, 2002). The inadequacies of past efforts prompted the emergence of an involving people and community oriented programme such as COPE ; 'in care of the people programme: It is a key poverty eradication programme of the Nigerian Government, executed through its pivot agency in poverty reduction; the National Poverty Eradication Programme (NAPEP). COPE has as its objectives to: reduce vulnerability of the extreme poor in the society against existing socio-economic risks; and, reducing intergenerational transfer of poverty. In ensuring that the beneficiaries of the COPE programme belong to the poor, the programme targets the following groups: Poor female-headed households with children of

basic school age; Poor aged headed households with children of basic school age; Physically challenged headed households with children of basic school age; and household headed by special groups (victims of VVFs, PLWHA, etc) with children of basic school age (NAPEP, 2009). The mission of COPE is to help achieve the goals of NEEDS, and is in line with the MDG goal of halting the proportions of people living in extreme poverty by 2015. The machinery COPE in achieving its focused on three areas, basic education of children of the poor households, basic health care of the children of the poor households; and, the engagement of the head of the poor-households in income generating activity. Essentially, COPE targets the human capacity development of the poor-households. Three components of COPE are keys to the success of the programme. First is the engagement of the poor headed households in BIG (Basic Income Guarantee). This is a monthly guaranteed income given to the heads of participating households. The amount received by each household is dependent on the number of qualified children in the household. Household with 1 child receives ₦1,500; 2-3 children receive ₦3,000 and 4 children and above, receive ₦5,000. Second is the training of the participating member of the household in a business area. Thirdly, is the engagement of the poor-headed household in PRAI (Poverty Reduction Accelerator Investment). To actualize this, a monthly saving of ₦7000, as the investment, is done for each household. At the end of the year, the saving totaling ₦84,000 is given to the head of household to start the business already trained. In ensuring the sustainability of COPE, its implementation process is designed to ensure strong community participation. There is therefore the establishment of state and community committees; the State Social Assistance Committee (SSAC) at the State level, that selects the participating Local Government Areas, and the Community Social Assistance Committee (CSAC) at community level. The CSAC members comprise of the village head; leading Pastor or Imam; School Principal/Headmaster; CDA Leader; and Technical Assistant from NAPEP (Zubairu, 2009; NAPEP 2010). COPE presently is going on in Local Government Areas in Anambra State. This report, presents finding of a study on the implementation and impact of COPE in Anambra State.

Objectives of the Study

The broad objective of the study is to examine the implementation of COPE, as well as determine its impact in eradicating household poverty in Anambra State. The specific objectives are to:

- Ascertain the socio-economic characteristics of the poor-headed households.
- Find out if the COPE programme led to the access of children of the poor-headed household to basic education and health care programmes
- Ascertain if the poor-headed households were enlisted in the Basic Income Guarantee (BIG) Scheme.
- Determine if the poor headed households were engaged in livelihood training programme.

- Determine if the poor-headed households were engaged in the Poverty Reduction Accelerator Investment (PRAI) Scheme.

LITERATURE REVIEW

The Poverty Concept

Poverty has been defined variedly. The dominant view is its being seen as lack of income. Using income threshold which is most often a reference point, persons on daily income below US\$1, is said to be poor. This is the minimum amount required to buy a basket of food with the minimum number of calories needed by a normal human being. However, indices for measuring poverty has broadened beyond the aforementioned descript. Ehigiamusoe (2000), states that the inadequacy of using income as determinants of poverty line, prompted the development of supplementary non-economic measures such as life expectancy, access to safe drinking water, and access to educational and health facilities. In the same line of thought, Stern (1994) did express the issue of poverty as a case of what people have, which is an economic concept, and on basis of what people are, which is a social concept. Similarly, Robert McNamara (2002), the President of the world bank, defines poverty as a condition of life so degraded by disease, illiteracy, malnutrition, and squalor, as to deny its victim basic human necessities; that is a condition of life limited as to prevent realization of the potential of the genes with which one is born, and that the problem is more severe in the countryside.

Ehigiamusoe (2000), contends that poverty is better understood when it is described, rather than defined. This he added, demands examining what are commonly referred to as 'indicators of poverty'. These indicators according to Quibria (1990) and Ehigiamusoe (2000), are embedded within the 'basic-needs' of humans. The basic-needs perspectives could be seen from meeting the primary (absolute) needs of life and the secondary (relative) needs of life. The primary needs comprise food, clothing, safe water and shelter. Not having these needs, defines one as being in absolute poverty. The secondary needs include non-materials values as freedom of expression, health, security, right to own property, access to productive employment and participation. Having, the primary needs, but not all or some of the secondary needs, puts one in state of relative poverty.

State of poverty in Nigeria

The state of poverty in Nigeria, which is quite high, is a misnomer. Here is a country enormously blessed with abundant economic, natural and human resources of diverse inclinations, but yet in poverty rating. Ehigiamusoe (2000), commenting on state of poverty in Nigeria, describes it as self-inflicted. Indeed, a country ranked amongst the seven most oil producing countries in the world has no business with poverty. The World Bank (1994), in its social sectors strategy review, shows that Nigeria real per capita income fell from \$2900 in 1980 to \$240 in 1997, which is far below Sub-Saharan African average of \$500. Nigerians living below poverty line rose from 18million in 1980 to 67million in 1996. Its life expectancy is mere 51.6 years,

while only 49% of the over 100 million population, could read and write. Comparably, its infant mortality rate of 91% is as against that of 47% and 66% for even less endowed countries such as Zimbabwe and Kenya respectively. The World Bank (1990) noted that poverty in Nigeria, is widespread and severe. Nigeria, it stated, is the only member of the organization of Petroleum Exporting Countries (OPEC) to be categorized among the world poorest 20 countries.

Poverty Alleviation Efforts in Nigeria

Overtime in Nigeria, various governments, has executed programmes meant to address the needs of the poor. Some of these programmes as outlined by Ehigiamusoe (2000) and Titilayo (2001) included the **Structural Adjustment Programme (SAP)**, the **National Economic Empowerment and Development Strategy (NEEDS)** and **National Poverty Eradication Programme (NAPEP)**, **Directorate for Food, Road and Rural Infrastructure (DFRRI)**, the **Petroleum Trust Fund (PTF)**. Other cross-cutting programmes were the **Better Life Programme (BLP)**, **Family Economic Advancement Programme (FEAP)** and the **Child Trust Care** of the first ladies, mostly targeted at rural women and children.

In general, successive governments in Nigeria have not been unaware of the poverty situation in Nigeria. In spite of the aforementioned efforts, poverty is still on the increase (Chukwuemeka and Ezeigwe, 2007). The reason for the rise as opined by Ehigiamusoe (2000), is that the modes of implementation of the programmes were insensitive to the needs of the poor. Their policies for the poor he continued were only seen in policy statements and declarations. Equally an important factor that contributed to the paradox of poverty in midst of plenty in Nigeria, is the very high level of corruption perpetuated by managers of public resources. A case for reference according to Ehigiamusoe (2000), is the recovery of N68 billion, few months after the death of General Sani Abacha, the military head of state in 1998. Half of this amount, by 1998 values, would enhance Nigerians access to safe-drinking water, by over 55%; only three-quarter would be more than enough to bring primary health care services to every Nigerian, while a third would create jobs to reduce unemployment by 75%. This form of looting of public wealth he summarized was replicated at other levels of government.

STUDY METHODS

The study adopted a field survey approach, and the methodology used followed the underlisted sub-heads.

Area of Study

Anambra state is the area of study. Out of 21 Local Government Areas (LGA) in the state, three were chosen in a manner to represent the entire state. To achieve this, one LGA was chosen from each of the senatorial zones in the state. The LGAs are Nnewi North in Anambra South Senatorial Zone, Idemili South in Anambra Central Senatorial Zone, and Anambra East, in Anambra Senatorial Zone. Anambra State is one of the 36 states in Nigeria and is situated in the South-East geopolitical zone of Nigeria. Anambra state is an economically active

state, with the citizenries largely involved in commerce, especially trade. It equally has a highly educated population, who are mostly employees in public service and the private sector.

Population of the study

The population for this study is comprised of the 90 poor-headed households (beneficiaries) from 15 communities in the three LGAs in Anambra State chosen for the study.

Sampling Size and Sample Procedure

The study adopted the judgmental method in the sampling. Fifty one (51) poor-headed households, representing 57% of the population was chosen as sample size. Cluster (communities) sampling was adopted in selecting the beneficiaries, ensuring representativeness of the communities in each of the 3 local government areas chosen.

Research Tools and Quality Control

A personal interview-guided questionnaire targeted at the poor-headed household and the COPE implementation committees was developed. To ensure the validity and reliability of the questionnaire the following steps were taken:

Training of Enumerators/Validation of Questionnaire: Five degree holders and staff of EVA were trained on how to effectively use the questionnaire. The validity of the questionnaire was ensured during interaction with European Union's (EU) officials who were present at the training.

Test-Re-Test/Reliability of the Questionnaire: Following the training of enumerators and validation of the questionnaires, it was tested on some of the beneficiaries and re-tested a week after. The consistency of response proved the reliability of the questionnaire.

Data Collection

Data was collected through two main sources; primary and secondary sources.

Primary sources: This involved the use of questionnaire and information gathered during the 3-interface-meetings held in each of the LGAs. Data collected were on socio-economic characteristics of the beneficiaries; the structure and execution of COPE; and the impact of COPE.

Secondary Data: Information on the concept and operations of COPE which was vital to the study were gotten from secondary sources. Resource materials from NAPEP office as well as on their website were relied on.

Data Analysis

The study made use of descriptive and inferential statistics in data analysis. Statistical tools used include: simple and multiple response percentages, Likert-scale and means for analyzing the specific objectives.

ANALYSIS OF FINDINGS

Socio-Economic Characteristics of the Beneficiaries: The socio-economic profile of the beneficiaries is as shown in table 1. It was found that most of the beneficiaries of the programme are female-headed households of an average age of 45 years. Majority of them are widows, and slightly over half (52.9%) of them attained primary school as their highest educational level. The average family size is found to be 8, whereas in terms of their occupational profile, greater number, were identified to be traders, farmers and service providers (hair dressers, tailors, food and beverages etc.). Their average years of occupational experience are 13 years. These socio-economic attributes of the beneficiaries affirmed that the proper target-group for the programme the poor were engaged.

Table 1: Distribution of Households by Socio-Economic Characteristics of Beneficiaries

Options	Frequency (N=51)	Percentage
Gender		
Male		
)		
)		
)		
)		
and above		
Average years		
Marital Status		
Married		
Single		
Widow		
Highest Educational Level		
Primary		
Secondary		
Tertiary education		
No formal education		
Other education		

age (X) Family Size (Family Members Living Together)

f adult males

f adult females

f male children

f female children

persons

loyment Status

ing

Labourer

an (craft men, poultry, weavers etc)

er

ces (tailor, hairdresser etc)

Servant

orary unskilled worker

orking

ational experience (yrs)

)

)

)

3years

Source: NAPEP /COPE Field Survey, January, 2011

Execution of COPE Activities: The activities of cope is specifically directed at ensuring the enrolment and retention of school aged children of the poor households in basic education; their access to basic-health services; enlisting the heads of the households in the BIG; exposing the beneficiaries to training skills in livelihood areas; and, engaging the head of the household in the PRAI. Details of the execution of these activities were obtained from data collected as revealed in tables 2 to 5. It showed (Table 2) that out of an average of 8 school-aged children per household, 5 were enrolled in schools and on the whole, less than half (41.2%) of the 51 households sampled, had over 80% attendance (retention) rating. In terms of access of their children to free basic-health care, it was confirmed that majority (84.3%) of the children had access to free basic medicare. The enlistment of the head of the household in the BIG was ascertained. The study revealed (Table 3) that most (76.5%) of the households received the monthly stipend. However, further inquiries indicates that the payment was largely irregular, though over half (54.9%) of the beneficiaries

were still satisfied with its delivery, while a reasonable number (64.1%) affirmed that the money assisted in their household responsibilities. Table 4 showed that 74.5% of heads of the household were exposed to livelihood-skill training for 6 months, mostly in business-areas of trade, services and farming. The PRAI component of the programme failed. As shown in table 5, greater number, (60.8%) of the heads of the household were unaware that they were even involved in pre-investment savings for the scheme. In all, only five, (9.8%) out of the 51 households sampled succeeded in starting a business. Also it was observed that, none of the beneficiaries who succeeded in starting a business, found the PRAI fund adequate, however they noted the usefulness of the PRAI pre-investment training in their business.

Table 2: Distribution of Households by Basic-Child Education and Access To Basic Health Care

Options	Frequency (N=51)	Percentage (%)
Children of School-Age in Households		
≤4	7	13.7
5-8	24	47.0
9-12	17	33.3
≥13	3	6.0
X=8		
Children Attending School in Households		
≤4	23	45
5-8	21	41
9-12	7	14
≤13	-	-
X = 5		
Regularity of School Attendance		
Very regular (≥80%)	21	41.2
Regular (60% - 79%)	19	37.2
Fairly Regular (40% - 59%)	6	11.8
Very irregular (30% - 39%)	3	5.9
Don't attend (≤29%)	2	3.9
Receipt of Basic-Health Care		
Yes	43	84.3
No	8	15.7
Type of Basic-Health Care Received		

Polio Vaccination	47	*92.2
Vit. A. supplement	41	*80.3
NPI immunization	36	*70.6

Source: NAPEP: COPE Field Survey, January 2011

*Multiple Responses

Table 3: Distribution of Households by Engagement in the Basic Income Guarantee (BIG)

Options	Frequency (N=51)	Percentage (%)
If Engaged		
Yes	42	82.4
No	9	17.6
Amount Received		
₦1,500	-	-
₦3,000	12	23.5
₦5,000	39	79.5
How Regular		
Very regular	-	-
Regular	14	27.5
Fairly regular	20	39.2
Irregular	17	33.3
Very irregular	-	-
How Satisfied		
Very satisfied	3	5.9
Satisfied	25	49.0
Fairly satisfied	17	33.3
Unsatisfied	6	11.8
Very unsatisfied	-	-
Assistance in Household Responsibilities		
To a very great extent	9	17.6
To a great extent	24	47.1
To some extent	9	11.8
Seldom	6	5.9
Not at all	3	-

Source: NAPEP, COPE Field Survey, January, 2011

Table 4: Distribution of Respondents by Exposure to Training

Options	Frequency (N)	Percentage (%)
Exposure to Training		
Yes	38	61.5
No	13	21.5
1-Areas of training		
Business (Business) Skills	36	58.7
Account book keeping	3	4.8
Entrepreneurship management	-	-
Health-care	3	4.8
Food and Nutrition	4	6.5
Financial management	3	4.8
Business (Business) Skill Trained		
Handicraft farming	2	3.3
Stock farming	7	11.4
Planting	2	3.3
Animal rearing	-	-
Other farming	-	-
Other	13	21.2
Others (pottery, carpentry, vulcanizing etc)	5	8.1
Others (tailoring, food & beverage, hairdressing)	19	30.7
Duration of Training		
Less than 1 year	4	6.5
1-2 years	-	-
3-4 years	-	-
5-6 years	2	3.3
7-8 years	32	52.2
Training Agency		
Government	36	58.7
Private	-	-
Other	-	-
DON	2	3.3

Source: COPE, Field Survey, January, 2011

* Multiple Responses

Table 5: Distribution of Households by Engagement In Poverty Reduction Accelerator Investment (PRAI)

Options	Frequency (N = 51)	Percentage (%)
Engaged in Savings for PRAI		
None	20	9.2
Some	31	0.8
Source of Livelihood (Business) Area		
None	27	3.0
Neighborhood	12	3.6
Neighbour/Friends	-	-
National Government (NAPEP) officials	12	3.5
Local State Government Officials	-	-
Reasons for PRAI		
None	13	5.5
Some	38	4.5
Willingness to Start Business		
None	5	0.8
Some	46	0.2
Adequacy of PRAI fund		
None	-	-
Some	-	-
Not adequate	4	3
Adequate	9	7
Insufficient	-	3
Usefulness of PRAI (Pre-investment) Training		
Useful	4	-
Not	1	-
Not useful	-	-
Useful	-	-
Insufficient	46	-

Source: NAPEP: COPE Field Survey, January, 2011

CONCLUSION AND RECOMMENDATIONS

The COPE programme centers on human capital development and the establishment of a thriving business by the household poor. The sustainability of COPE is built around four of its activities: the educational component; business skill acquisition component, business establishment component; and, the community participation component. The study notes that the educational, health care, and business skill development components of the programme were successful. The level of community participation was found unsatisfactory. Regrettably, two most vital component of the programme; the BIG and particularly PRAI, were poorly implemented. If the beneficiaries at the exit point cannot establish a business that guarantees a steady income to the household, then sustainability of the programme is doubtful. This singular defect led to the programme not having a positive change in the poverty status of the poor-headed households. In line with the findings of this study, the understated recommendations towards strengthening the programme are made.

- Comprehensive sensitization of beneficiaries on concept, structure of implementation, and benefits derivable to the households.
- Sustained information on update about COPE to the stakeholders.
- Broadening of the training component beyond vocational skills, to other areas like small business managements, health issues, home management, food and nutrition, cooperative principles, business networking and marketing.
- NAPEP officials must be concerned with the success of the programme. This they must do by ensuring that the BIG and PRAI component are paid regularly, fully and on time. Equally contract obligations to the local entrepreneurs, who train the beneficiaries, and crucial to the programme, should be kept.
- NAPEP officials should consider preferably providing the beneficiaries with equipment or machineries for their chosen businesses and then the rest (working capital) in cash. This will forestall diversion of the fund.

However, the programme could not continue due to lack of support from the sponsoring agency and the project wind-up. In spite of numerous benefits that emanates from the programme, it was not sustainable and thus resulted in its discontinuity.

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