

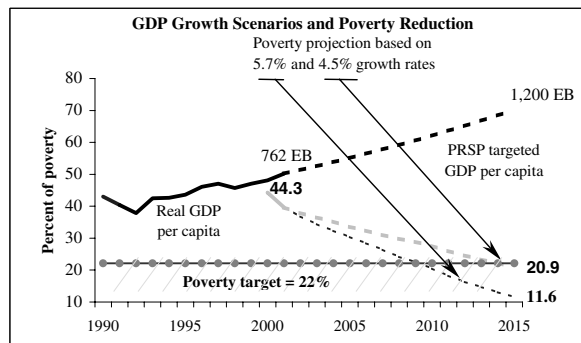
The *Standardized Survey Bulletin* presents key welfare outcome indicators extracted from surveys conducted by African National Statistical Offices (NSOs). The survey data files have been reformat- ted and “standardized” by the Operational Quality and Knowledge Services Unit of the World Bank’s Africa Region to facilitate comparisons across and within data sets.

## Ethiopia Welfare Monitoring Survey, 2000

**E**thiopia accounts for 9.7 percent of Sub-Saharan Africa’s population. Economically and socially, Ethiopia ranks among the bottom of the least developed countries. A large proportion of its population lives in poverty and is vulnerable to famine. The HIV/AIDS prevalence is estimated at 11 percent and life expectancy is 42 years.

### Poverty reduction

Using results from the Welfare Monitoring Survey (WMS), poverty in the year 2000 is estimated at 44.3 percent. The Millennium Development Goals (MDG) call for cutting poverty in half between 1990 and 2015. In our poverty simulation, 2000 was chosen as the base year for poverty estimates for two reasons: (1) poverty head count apparently did not change much during the 1990s, although it probably fell somewhat in the earlier part of the decade and (2) the 2000 survey provides the most recent income distribution, on which the simulation of poverty trends critically depends. The simulation shows that, assuming the current income distribution remains the same for the years to come, an annual GDP growth of 4.5 percent will cut poverty in half to 21 percent by 2015. If a growth rate of 5.7 percent were to be achieved—as targeted by the country’s Poverty Reduction Strategy Paper (PRSP)—then poverty could be halved by 2008, and drop substantially to 12 percent by 2015.



Data sources: Staff calculation based on WMS 99/2000 and World Bank Africa LDB.

\*Ethiopia birr (EB); Poverty Reduction Rate (PRR)

Ethiopia became a democracy only recently and is in the process of shifting from a command to a market economy. To address the broad issues of poverty, the government has adopted a new development strategy. It seeks to promote rapid, broad based, and equitable growth by focusing on rural development, improving physical and human capital, deepening the devolution process to empower the people, and expanding the choices that people have over their lives.

### About the Survey

<i>Survey sample size</i>	16,672 households 78,962 respondents The WMS sample size is larger; however, only households with matching HICES records have been included.
<i>Year of survey</i>	2000
<i>Survey administration</i>	Central Statistical Authority, Federal Democratic Republic of Ethiopia. The data were collected in 15 states.
<i>Contact</i>	Central Statistical Authority P.O. Box 1143, Addis Ababa Tel. (251) (1) 11 51 31 <a href="mailto:csa@telecom.net.et">csa@telecom.net.et</a>

## The Africa Household Survey Databank and Standardized Survey Files

The Africa Household Survey Databank (AHSDB) contains one of the largest collection of household surveys on Africa in the World. It is maintained by the Bank, but the surveys remain the property of the relevant National Statistical Office (NSO) that carried out the survey. The AHSDB currently contains Household Budget Surveys (HBS), Living Standards Measurement Surveys (LSMS), Integrated and Priority Surveys (IS and PS), Demographic and Health Surveys (DHS), and the Core Welfare Indicators Questionnaire (CWIQ) surveys. The surveys vary greatly in scope and structure, the need to make the data more accessible and available in user friendly formats has led to the establishment of the Standard Files and Standard Indicators (SFSI) Project. For more information, visit <http://www.worldbank.org/afr/poverty/databank> on the web.

### What are Standard Files and Standard Indicators?

The objective of the SFSI program is to facilitate the monitoring of social and economic outcomes of national development programs, such as Poverty Reduction Strategy Papers. Standard files, extracted from household survey data, comprise a common set of core variables. These variables have common definitions and can be used to produce needed indicators in real time. Two standard files are produced for each survey,

one household level and one individual level data. They provide readily accessible social and living standards at the national level, as well as at sub-national levels for different income groups. Once survey data files have been "standardized," they can be accessed and queried through the World Bank's Intranet. The program is still in its development stage, but once completed, the standardized files and indicators will be directly accessible on the Internet.

This Standardized Survey Bulletin is one of the products from the SFSI program. It provides a description of the key survey findings, which can be used to facilitate the monitoring of a country's progress towards the Millennium Development Goals (MDGs). To find out more, visit <http://www.worldbank.org/afr/stats> on the web.

### What are the Millennium Development Goals?

The Millennium Development Goals (MDG) have been commonly accepted as a framework for measuring development progress. The goals focus efforts on achieving significant, measurable improvements in people's lives. The first seven goals are directed at reducing poverty in all its forms. The last goal is about global partnership for development. For information, visit: <http://www.developmentgoals.org>

### What are the characteristics of a typical Ethiopian household?

- The average household size in Ethiopia is about five people: household size of the poor is close to six while that of the rich is less than four. Not surprisingly, a high age dependency ratio is prevalent among the poorest households: one working age person (15–64 years) must support 1.3 nonworking age persons. In contrast, among the urban rich, one working age person only supports 0.5 nonworking age persons.
- Most households are headed by a monogamous-married male—68 percent—followed by households headed by a *de jure* female (a woman who has never been mar-

ried, or is divorced, separated, or widowed). In urban areas, *de jure* female-headed households account for more than one-third of all households.

- Households headed by monogamous—or polygamous-married males are more often found in the poorest category. This is mainly because of higher than average age dependency ratios for these households, indicating perhaps a certain demographic trend rather than economic disadvantages.
- The education level of household heads is extremely low—71 percent of household heads have no education at all. But this figure varies considerably by income group and area of residence: nationally, 82 percent of the poor but

only 60 percent of the rich households are headed by a person without education. While differences of education levels in rural areas between the poorest and richest households are relatively small—83 vs. 71 percent of household heads have no education, respectively—differences are significant in urban centers, where corresponding figures are 60 and 24 percent. Greater access to education and higher income levels in urban areas account for improved levels of education, but also for greater disparity between high and low income households. Providing better access to education for the poor and improving school facilities in rural areas should be of high priority.

## How much do Ethiopians spend?

- *Disparity in total household expenditures.* Average per capita household income is approximately Birr 103 per month, however there are identifiable variations between income groups and regions. The richest 20 percent of households spent more than four times that of the poorest households, with the greatest level of inequality between the urban poor and the

urban rich. On the other hand, the poorest rural households spent Birr 42 per month, compared with the poorest urban households, who spent Birr 49, almost the same amount.

- *Food security.* Poor households allocate a higher share of their expenditures to food than non-poor households—71 vs. 58 percent, respectively—differences across wealth groups are more pronounced in urban than in rural

areas: rural households spent nearly 68 percent of their income on food while urban households spent only 55 percent.

- *Education expenditure.* Nationally, households spent only 0.6 percent of their expenditures on education. There are, however, some differences by area of residence—urban households spent 1.6 percent compared with 0.4 percent for rural households.

Indicators	Unit of Measure	Expenditure Quintile								
		National			Rural			Urban		
		All	Poorest 20%	Richest 20%	All	Poorest 20%	Richest 20%	All	Poorest 20%	Richest 20%
<b>Demographic Indicators</b>										
Sample size (households)	Number	16,672	2,186	6,521	8,459	1,469	2,411	8,213	1,118	2,348
Total Population	000s	54,756	10,952	10,965	47,531	9,502	9,505	7,225	1,446	1,445
Age dependency ratio	Number	1.0	1.3	0.7	1.1	1.3	0.8	0.7	1.0	0.5
Average household size	Number	4.9	5.9	3.8	4.9	5.9	3.8	4.5	5.6	3.5
<b>Head Of Household Characteristics</b>										
<b>Age Dependency by household structure</b>										
Monogamous male	Number	1.0	1.3	0.7	1.1	1.3	0.8	0.8	1.0	0.5
Polygamous male	Number	1.0	1.4	0.6	1.0	1.4	0.5	0.6	0.5	0.5
Single male	Number	0.6	1.0	0.4	0.6	1.0	0.4	0.5	1.0	0.3
De facto female	Number	0.8	1.0	0.5	0.8	1.1	0.5	0.7	0.8	0.5
De jure female	Number	1.0	1.4	0.7	1.1	1.4	0.8	0.7	1.0	0.5
<b>Education level of head</b>										
No level	Percent	70.9	81.7	59.7	75.7	83.3	71.2	41.7	60.3	24.0
Primary, not completed	Percent	10.8	7.4	11.2	10.5	6.9	12.0	12.9	13.4	6.8
Primary completed, no secondary	Percent	2.7	1.9	3.7	2.3	1.7	2.9	4.6	4.5	4.6
Secondary not completed	Percent	5.2	2.3	9.3	3.4	1.8	5.1	16.2	11.5	21.1
Secondary completed	Percent	1.9	0.2	5.3	0.6	0.1	1.6	9.7	2.1	18.4
Tertiary	Percent	1.7	0.0	5.4	0.4	..	1.3	9.5	1.1	21.6
Pre-school	Percent	6.0	5.7	4.7	6.3	5.5	5.2	4.1	5.9	2.7
Undefined	Percent	0.8	0.8	0.8	0.8	0.7	0.6	1.1	1.2	0.7
<b>Marital Status of head</b>										
Monogamous male	Percent	67.8	73.7	58.1	71.1	74.8	63.5	47.8	52.5	40.9
Polygamous male	Percent	0.6	0.6	0.5	0.7	0.7	0.6	0.1	0.2	0.0
Single male	Percent	5.9	3.4	11.1	5.0	3.4	8.5	11.1	5.9	23.1
De facto female	Percent	0.9	0.7	1.3	0.6	0.6	0.7	3.0	2.3	2.4
De jure female	Percent	24.8	21.6	29.0	22.6	20.5	26.7	38.0	39.1	33.6
<b>Labor Market</b>										
Proportion aged 15-64 in population	Percent	49.8	43.3	59.7	48.6	42.9	57.0	58.1	49.8	68.1
Proportion employed (aged 15 to 64)	Percent	43.0	43.1	47.2	41.9	42.9	44.9	48.9	46.8	55.3
Females among employed (aged 15 to 64)	Percent	28.5	31.6	31.6	24.5	30.4	25.1	47.5	49.6	46.3
<b>Employment Ratios (among labor force)</b>										
Employment Ratio	Percent	89.1	90.0	88.2	91.4	90.9	92.4	79.7	81.4	82.3
Formal Employment among Employed	Percent	71.3	68.8	67.7	79.1	73.0	79.4	34.4	22.0	46.1
Public Employed among Formal Employment	Percent	6.9	1.7	17.3	1.8	0.5	4.4	61.7	44.4	65.1
Informal Employment among Employed	Percent	24.2	28.4	25.5	17.4	24.2	16.6	56.5	73.7	38.3
Self-Employed among Informal Employed	Percent	24.8	14.3	33.3	24.9	13.2	35.4	24.7	17.0	39.3
Employers among Employed	Percent	2.5	1.8	2.6	2.7	2.0	3.0	1.5	0.7	2.6
Proportion Employed in Agriculture	Percent	..	..	..	..	..	..	..	..	..
<b>MDG1: Eradicate Extreme Poverty and Hunger</b>										
Mean monthly per capita expenditure	Ethiopian birr	103	42	191	93	42	161	162	49	346
Mean monthly share on food	Percent	66.1	71.4	57.8	67.9	71.8	61.9	55.2	65.9	42.9
Mean monthly share on health	Percent	0.9	0.8	1.2	0.8	0.7	1.1	1.2	0.8	1.4
Mean monthly share on education	Percent	0.6	0.5	0.7	0.4	0.4	0.3	1.6	1.6	1.8

- *Health care.* Ethiopian households spent an insignificant 0.9 percent of overall household expenditures on health. Rural households spent somewhat less than urban ones—0.8 vs. 1.2 percent, respectively. The richest quintile of households spent a slightly higher proportion of their budget on health care than the poorest quintile, similarly in rural and urban areas.
- Educational services in Ethiopia are basically free, especially in rural areas where there are no private schools. Similarly, public health services are mostly free—people seeking health care are charged only small fees, mostly for drugs. Thus, the proportions of income paid for both services are not directly indicative of the level of social services.

**Who can read and write? What are the education opportunities for rural children and for females?**

- There is a large gender gap in adult literacy. While 41 percent of men countrywide are literate, only 17 percent of women are. Literacy is extremely low in rural areas, where less than 9 percent of females and 34 percent of males can read and write. In contrast, adult literacy is relatively high in urban centers, with 81 percent of men and 56 percent of women being literate. In the rich urban households, literacy reaches 91 percent among men and 69 percent among women. Improving literacy in rural areas, particularly among the woman and poor, is a policy challenge that must be addressed.
- Net primary enrollment rates (NPER) are discouragingly low—30 percent, nationally—and most severe among rural residents. The NPER for urban children is 75 percent. Significant differences in primary enrollment also exist between the poor and the rich—22

and 46 percent, respectively—whereas the difference between boys and girls is relatively small—32 to 29 percent, respectively—and observed only in rural areas. The most significant enrollment gap is between rural and urban areas, which points to an urgent need to promote primary education in rural areas.

- Secondary school education is nearly nonexistent in rural areas—3 percent—whereas in urban areas secondary enrollment is as high as 40 percent. Urban secondary enrollment ranges from 30 percent for the poorest quintile to 47 percent for the richest.

**Who is more likely to report illness? What health service providers are chosen?**

- The rural population reports significantly more illness than the urban population—28 vs. 20 percent, respectively. However, when feeling sick, people in rural areas are much less likely to seek health care than are urban dwellers—39 vs. 67 percent, respectively.
- The gap between the rich and the poor in seeking health treatment is wider in rural than in urban areas—71 percent of the urban rich sought health care, while 60 percent among the urban poor did so. In rural areas 46 percent of the rich sought medical treatment, while 30 percent of the poor did.
  - When seeking medical treatment more than 90 percent of the population chose modern health care services. Public facilities provided about 45 percent of health services demanded. Rich individuals proved more likely to use private than public services—49 to 41 percent, respectively—while the poor equally public and private providers. The challenge for the health sector in Ethiopia is to enhance health services for the rural population.

**How does poverty affect child survival and malnutrition?**

- The MDGs stress that the proportion of one-year-olds immunized against measles should reach 90 percent by 2015—2000 estimates show 51 percent of all children immunized against measles in Ethiopia. Measles immunization rates vary by location—90 percent of urban one-year-olds were immunized, compared to 47 percent of rural one-year-olds. If Ethiopia is to achieve this MDG goal, measles coverage rates must increase rapidly for the rural poor.
- Only 45 percent of one-year-olds are *fully* immunized. The low coverage of inoculation is predominantly due income and area of residence. Those fully immunized range from 35 percent of the rural poor to 88 percent of the urban rich.
- The degree of malnutrition among children is alarming. According to survey findings, the national prevalence of wasting, an indicator for acute malnutrition, is 10.5 percent (the WHO lists prevalence between 10 and 14 percent as serious). Stunting, an indicator for long-term nutritional deprivation, is estimated at 60 percent for the country. The prevalence of malnutrition is higher among rural children than urban. Suboptimal health and nutritional conditions have severely restricted linear human and economic growth potential in Ethiopia. Health and food security issues must be of top priority if the government is to mitigate the harmful long-term consequences of malnutrition on its population.

**Who has access to safe drinking water?**

- Access to safe drinking water is extremely low in rural areas: less

## Ethiopia Welfare Monitoring Survey, 2000

Unit of Measure	Expenditure Quintile									
	National			Rural			Urban			
	All	Poorest 20%	Richest 20%	All	Poorest 20%	Richest 20%	All	Poorest 20%	Richest 20%	
<b>Indicators</b>										
<b>MDG2: Education and Literacy; MDG3: Promote Gender Equality</b>										
Access to primary school (within 30 minutes)	Percent	..	..	..	..	..	..	..	..	
<b>Net primary enrollment rate</b>										
Total	Percent	30.4	21.6	46.3	24.7	18.7	31.7	74.6	66.2	84.9
Male	Percent	31.9	22.9	48.6	26.8	19.8	34.7	74.6	67.8	86.3
Female	Percent	28.8	20.1	44.3	22.5	17.6	28.8	74.7	64.4	84.1
<b>Net secondary enrollment rate</b>										
Total	Percent	9.1	5.0	17.9	3.3	2.5	4.9	40.4	29.6	47.3
Male	Percent	10.0	5.7	19.4	4.5	3.8	6.7	43.1	28.8	54.1
Female	Percent	8.2	4.1	16.5	2.0	0.9	3.1	38.1	30.3	42.5
<b>Tertiary enrolment rate per 10,000</b>										
Total	per 10,000	9.8	..	..	..	..	..	..	..	..
<b>Adult literacy rate</b>										
Total	Percent	28.0	18.6	39.8	21.0	15.2	25.0	66.9	54.5	78.5
Male	Percent	40.7	29.4	52.7	34.1	25.8	39.0	81.2	69.9	90.6
Female	Percent	16.5	9.0	28.2	8.7	5.7	11.5	56.0	42.6	68.7
<b>Youth literacy rate</b>										
Total	Percent	38.7	30.4	47.6	29.5	23.7	30.9	84.2	80.1	86.3
Male	Percent	49.7	40.8	57.0	42.6	35.0	42.2	90.2	84.4	94.9
Female	Percent	28.4	19.5	39.9	16.6	11.7	20.2	79.7	76.2	80.8
<b>MDG4: Reduce Child Mortality; MDG5: Improve Maternal Health</b>										
Proportion with distance to Health Center less than 5 km	Percent	46.5	41.8	53.3	38.0	37.2	36.9	98.0	96.8	97.9
Morbidity	Percent	26.5	26.3	28.2	27.5	26.6	30.9	19.7	20.5	19.9
Action taken when sick	Percent	41.5	31.3	50.6	38.8	30.1	45.6	66.6	60.1	70.9
<b>Health provider ownership</b>										
Public	Percent	45.1	45.2	41.3	43.9	44.3	40.8	51.6	56.4	42.7
Private - Modern Medicine	Percent	44.8	44.6	49.2	45.4	45.7	48.5	41.7	35.9	51.2
Private - Traditional Healers	Percent	0.9	0.4	1.1	0.9	0.1	0.9	0.9	0.1	1.1
Other	Percent	6.1	5.2	5.3	6.6	5.5	6.5	3.6	4.1	3.8
<b>Child survival and malnutrition</b>										
Birth assisted by trained staff	Percent	..	..	..	..	..	..	..	..	..
1-year-olds immunisation coverage	Percent	45.0	38.2	51.5	41.4	35.4	44.7	85.4	81.5	87.5
1-year-olds immunized against measles	Percent	50.5	46.5	53.0	47.1	43.7	45.6	90.2	84.3	94.0
Stunting (6-59 months)	Percent	59.5	63.8	50.3	60.6	64.1	55.1	47.3	56.3	29.5
Wasting (6-59 months)	Percent	10.5	11.4	9.9	10.9	12.0	11.0	6.9	7.6	7.2
Underweight (6-59 months)	Percent	44.6	51.8	37.7	46.3	52.6	42.6	26.9	35.6	13.7
<b>MDG7: Ensure Environmental Sustainability</b>										
Owner occupancy rate	Percent	86.2	90.4	78.5	92.5	94.1	90.1	48.2	45.6	46.8
Access to sanitation facilities	Percent	18.3	10.8	30.8	9.3	7.8	11.3	72.9	49.5	87.1
Proportion with distance to Water Source less than 2 km	Percent	90.2	90.2	90.3	88.9	89.6	87.5	98.0	97.2	98.7
Proportion with distance to Market less than 5 km	Percent	58.5	58.0	62.7	51.9	54.4	50.3	98.2	98.1	97.2
<b>Access to improved water source</b>										
Pipe (own tap)	Percent	0.3	0.1	0.6	0.1	0.1	0.1	1.3	0.6	2.0
Pipe borne	Percent	17.5	12.3	28.4	6.8	7.0	7.5	82.4	73.6	88.1
Well (Protected)	Percent	11.1	8.4	11.7	11.6	8.0	13.3	8.0	9.3	5.9
Total	Percent	28.9	20.8	40.7	18.5	15.1	21.0	91.7	83.5	95.9
<b>Access to unimproved water source</b>										
Surface Water	Percent	33.7	39.4	27.9	38.5	42.1	36.5	4.6	8.3	2.2
Other	Percent	37.4	39.8	31.4	43.0	42.8	42.6	3.7	8.2	1.9
Total	Percent	71.1	79.2	59.3	81.5	84.9	79.0	8.3	16.5	4.1
<b>Traditional Fuel Use</b>										
Firewood	Percent	75.5	81.7	68.6	78.3	82.2	76.7	58.0	74.8	40.3
Charcoal	Percent	1.2	0.5	2.7	0.0	0.1	0.0	8.3	5.2	10.8
Total	Percent	76.7	82.2	71.3	78.4	82.2	76.7	66.3	79.9	51.1
<b>Nontraditional Fuel Use</b>										
Kerosene	Percent	3.3	0.7	8.6	0.3	0.4	0.8	21.5	7.0	36.0
Electricity	Percent	0.4	0.1	1.0	0.1	0.1	0.1	2.2	0.3	4.3
Gas	Percent	0.2	0.0	0.7	0.1	..	0.1	1.2	0.2	3.0
Other	Percent	19.5	16.9	18.4	21.2	17.3	22.3	8.8	12.6	5.5
Total	Percent	23.3	17.8	28.7	21.6	17.8	23.3	33.7	20.1	48.9

than 20 percent, respectively. The rural rich have slightly higher access to safe drinking water than the rural poor—21 vs. 15 percent, respectively. Only 12 percent of rural households have access to a protected well, the main source of affordable safe drinking water in rural areas.

- Access to safe drinking water in urban areas is above 90 percent: 84 percent of poor households and 96 percent of rich households using safe water. The gap between clean water access in rural and urban areas could contribute to the higher levels of illness in rural areas. Policy measures are needed to improve access to safe water in rural areas, which is needed to improve the health of rural inhabitants.

#### How does poverty affect environmental sustainability?

- Access to sanitation is extremely low in rural areas, less than 10 percent, with little difference between the poor and the non-poor. At 73 percent, access to sanitation relatively high in urban areas. However, there is a gap between the urban poor and the urban rich—50 vs. 87 percent, respectively.
- About three quarters of households use traditional fuel for cooking (firewood and charcoal). The majority of rural households and urban rich households are dependent on traditional means of energy—78 percent of rural households and 80 percent of urban poor. Rich urban households have diversified energy consumption, using 51 percent traditional fuel and 49 percent nontraditional fuel (kerosene, electricity, gas, other).

## Definitions

**Household.** Defined as a person or group of people living in the same compound (fenced or unfenced), answerable to the same head, and sharing a common source of food and/or income. In polygamous unions, if each household makes its own decisions, they are then considered different households.

**Expenditure quintiles** are derived by ranking weighted sample individuals according to annual deflated per capita expenditure. Individuals are used as the basis for estimating quintiles. Quintiles are constructed such that the first quintile represents the poorest 20 percent, the second quintile the next poorest 20 percent (less poor), and so on; the fifth quintile represents the richest 20 percent.

**Price deflators** are used to adjust expenditures for regional price differences.

#### Demographic indicators

**Number of households in each quintile** varies due to differences in household size, although the total number of individuals in each quintile is the same.

**Total population.** Sampled population weighted by the cluster weights to give the actual estimated population size.

**Age dependency ratio.** Ratio of people below 15 years and above 64 years old over people between 15 and 64 years old.

#### Education indicators (enrollments rates based on UNESCO definitions)

**Net primary enrollment rate.** The total number of children of primary school age (7 to 10 years) enrolled as a proportion of the total number of children of primary school age.

**Net secondary enrollment rate.** The total number of children of secondary school age (11–18 years) enrolled as a proportion of the total number of children of secondary school age.

#### Literacy indicators

**Literacy (adult).** The percentage of people aged 15 and above who can read and write a short, simple statement on everyday life. The survey did not actually do any testing to confirm respondent's ability to read and write.

**Literacy (youth).** The percentage of people aged 15–24 who can read and write a short, simple statement on everyday life. The survey did not actually do any testing to confirm respondent's ability to read and write.

#### Head of household indicators

**Monogamous male-headed.** Male-headed household having no more than one spouse.

**Polygamous male-headed.** Male-headed household with more than one spouse. However, differences exist in the way in polygamous households are defined. Wives do not have to live under the same roof.

**Single male-headed.** Male-headed household where the head is either divorced or has never been married.

**De facto female-headed household**

- without a resident male-head or where the husband is not present and the wife is the head by default and the main decision-maker in his absence;

- may include a household where the resident male head has lost most of his functions as the economic provider due to infirmity, inability to work, etc.

**De jure female-headed single female-headed household,** where the head has never been married, or is divorced or separated or widowed.

#### Household expenditure indicators

These indicators provide informa-

tion on per capita expenditure in local currency (including the value of own-produced food consumed in the household) and the share of food in household expenditures.

*Mean per capita expenditure*, in local currency, is estimated as the weighted average per capita household expenditure. It includes both food (value of own-produced food and purchased) and non-food consumed in the household.

*Food share in total expenditure*. A weighted estimate of total per capita household expenditure allocated to food, including a valuation of own-produced food consumed by the household.

### Household amenities indicators

*Type of fuel for cooking* includes firewood, gas and kerosene, charcoal, and electricity.

*Access to safe sanitation* refers to households equipped with a flush toilet or simple but protected pit latrine.

*Access to improved safe water* indicates the percentage of households with access to safe sources of safe drinking water.

### Child survival indicators

Births assisted by trained staff include doctors, nurses, midwives and trained traditional birth attendants (TTBA). A trained traditional birth attendant (TTBA) is one who has undergone a course conducted by the modern healthcare sector.

*One-year-olds immunization* refers to children aged 12–23 months.

### Anthropometrics indicators

*Stunting* refers to children 6–59 months of age who have height-for-age Z-scores below minus two standard deviations from the median of the reference population.

*Wasting* refers to children 6–59 months of age who have weight-for-

### How to interpret the Table of Key Indicators

The indicators shown in this bulletin are presented by consumption (expenditure plus own produced consumption) quintiles. First, the survey data are used to calculate household consumption (consumption is used in favor of income because it is considered easier to measure).

This household consumption variable is then adjusted using regional price deflators so that the expenditure levels of urban households (who face different prices from rural households) can be compared with those of the rural households.

The adjusted household expenditure variable is then used to rank the households from poorest to richest, and split into five equal sized quintiles. (The table only shows figures for the top and bottom quintiles.)

For the purpose of this report, the poor are defined as the households in the lowest quintile (i.e., those households that contain the bottom 20 percent of the population). The non-poor are taken to be those in the top quintile. This “relative” concept of poverty should not be confused with an absolute concept based on the percentage of the population living below an absolute poverty line (such as a dollar a day). In addition to showing national quintiles, the table also shows urban and rural quintiles. In order to calculate these, the population is first divided into urban and rural households; each group is then ranked and split into quintiles as described above.

height Z-scores below minus two standard deviations from the median of the reference population.

*Underweight* refers to children 6–59 months of age who have weight-for-age Z-scores below minus two standard deviations from the median of the reference population.

### Employment indicators

*Employment ratio* includes only persons who are employed and the unemployed in the age categories 15–64. Excludes homemakers, retired, dependent, student and other.

### Formal/informal sector

*Formal private sector* includes business units that are well organized, structured, and legally registered.

Employed by *informal sector* is anyone employed in a semi-organized unit; can be legally registered or not. Informal sector employment includes all a) own-account workers, b) unpaid family workers who work for 7+ hours per day, and c) employers and employees in small establishments (< 5 workers).

---

This bulletin has been prepared by James Keough (AFTR1) and Xiao Ye (AFRCE) and cleared by the appropriate members of the Ethiopia country team.

---

**Contact**

The World Bank, Africa Region  
Operational Quality and Knowledge Services  
Africa Household Survey Databank  
MSN J8-811  
1818 H Street NW  
Washington, DC 20433  
USA

**Internet**

<http://www.worldbank.org/afr/stats>  
<http://www.worldbank.org/afr/poverty/databank>

**E-mail**

[AFRDatabank@worldbank.org](mailto:AFRDatabank@worldbank.org)

