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Human capital and poverty eradication among parents in Uganda: A review

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Abstract

This review delves into the intricate relationship between the development of human capital and the eradication of poverty among parents. Human capital, encompassing education, skills, and health, is pivotal in shaping household income, economic stability, and overall well-being. By thoroughly analyzing empirical studies and theoretical frameworks, this paper elucidates how investing in parental human capital can serve as a potent strategy for alleviating poverty. The review underscores the multifaceted benefits of enhancing parental education and skills acquisition, including increased employment opportunities, improved health outcomes, and heightened social mobility. Furthermore, the study underscores the importance of policy interventions, educational programs, and health initiatives designed to bolster human capital among parents, thereby fostering sustainable development and poverty reduction on both individual and societal levels.

Keywords: Human Capital Development, Eradication of Poverty, Parental Education, Economic Stability, Policy Interventions

1. Introduction

In the complex fabric of socioeconomic development, human capital plays a crucial role in eradicating poverty and promoting societal well-being. Human capital refers to the economic value of the skills, knowledge, experiences, and attributes possessed by

individuals. These attributes can be acquired through education, training, and experience,

and they enhance an individual's ability to perform labor to produce economic value. Hence, within the various dimensions of human capital, the significance of parents cannot be

underestimated. As primary caregivers and educators, parents have a substantial impact on shaping the human capital of the next generation. Their abilities, knowledge, and skills not only determine the immediate welfare of their families but also play a vital role in breaking the cycle of poverty and fostering long-term economic growth.

Human capital has been a key driver of sustainable growth in countries such as Japan, Taiwan, Hong Kong, and South Korea, despite their limited natural resources. However, official statistics indicate that the average government expenditure on education in OPEC countries over the past decade has been less than 12%. Nevertheless, notable improvements have been observed in the Republic of Iran and Saudi Arabia (UNESCO, 2018).

The development of human capital plays a crucial role in poverty reduction, which is a primary objective for economies worldwide, regardless of their level of development. Despite the clear link between human capital and poverty, there is a lack of comprehensive studies exploring this relationship in OPEC member countries. While several studies have focused on individual countries including Shahpari and Davoudi's (2014) examination of human capital and income inequality in Iran, and Ogwumike and Ozughalu's (2018) study on child poverty and deprivation in Nigeria, lack broader and critical analyses. Existing literature provides various theoretical and empirical studies on relationships involving human capital and poverty, including human capital and inequality, human capital and unemployment, and the causal relationship between entrepreneurship and poverty (Khan, et al. 2023; Cumming et al., 2019). Poverty is a

complex and pervasive issue affecting countries worldwide (Okoli, 2016). It is a significant concern across all nations, regardless of their level of technical and economic advancement (Akaakohol & Aye, 2014; Akinbode, 2013). Developing and less developed countries, in particular, face significant challenges related to poverty (Anigbogu, Onwuteaka, Anyanwu & Okoli, 2014). Despite its abundant natural and human resources, Nigeria has been rated as one of the poorest countries globally (Ilesanmi & Lasisi, 2015). According to the World Bank's 2013 report, Nigeria's Human Development Index (HDI) was 0.47, with nearly 70% of the population living below the poverty line. This paradox underscores the importance of investing in human capital development as a catalyst for national development. Investing in education and healthcare is crucial for improving the quality of human resources and addressing poverty.

Fan et al. (2005) conducted a study in Tanzania to explore the impact of public investments on poverty eradication and economic growth. The study found that increased public investments in rural education significantly reduced poverty levels, lifting approximately 43 individuals above the poverty line for every million shillings spent. Additionally, education investment led to a substantial increase in income per capita. The study highlights the importance of prioritizing education and making additional investments in this sector.

Michaelowa (2000) highlights the significant impact of education on economic growth. Moreover, Olaniyan and Okemakinde (2008) argue that formal education greatly improves both the quality and quantity of production.

Theories of human capital suggest that a well-educated population enhances productivity by increasing the economic potential of human capital. Additionally, human capital theory stresses the importance of education and skill development in impoverished communities as essential components of effective poverty reduction strategies, applicable in both rural and informal urban settings. Mtey and Sulle (2013) further observe a direct correlation between education and formal sector employment, leading to opportunities for upward mobility.

1.1 National Perspective on Poverty Alleviation in Uganda

Under the leadership of the National Resistance Movement (NRM) government, Uganda has implemented poverty alleviation programs since the late 1990s. The first major initiative, the Poverty Alleviation Action Plan (PEAP), was launched in 1997 to transition Uganda into a modern economy where all sectors actively contribute to economic growth by 2017 (Government of Uganda [GoU], 2020) (Kahara *et al.*, 2023). This plan was developed through extensive consultations with the central government and key stakeholders, and it focused on four main pillars. In addition to PEAP, Uganda has introduced other strategic frameworks, such as Uganda Vision 2040 (formerly 2025) and the National Development Plans (NDPs) I, II, and III (GoU, 2010; GoU, 2015). The United Nations Development Programme (UNDP) collaborates with various agencies intending to eradicate poverty globally by 2030. The 2019 Human Development Report explores the multifaceted nature of inequality that affects people's well-being, examining not only

income disparities but also disparities in education, health, technological access, and vulnerability to economic and climate-related shocks (UNDP, 2019). The report highlights that while traditional forms of inequality persist, new disparities are emerging. Inequality serves as a metric for assessing poverty, and Uganda is among the 193 nations committed to eliminating poverty within its borders by 2030 (Kahara *et al.*, 2023).

This study reviews the increasing levels of poverty in Uganda, despite the country's abundant agricultural resources, as highlighted by Okoli (2016). Around 70% of Ugandans live on less than US\$1.25 per day. Poverty is particularly severe in rural areas, where up to 80% of the population lives below the poverty line, as documented by Tasie (2013). While recognizing the crucial role of human capital in reducing poverty, there is a significant lack of knowledge regarding the specific mechanisms through which parents' human capital influences household well-being and broader societal outcomes. This research aims to clarify this important connection by investigating the complex interaction between parents' human capital and poverty eradication. By examining factors such as parents' education, health, and skills development, this study seeks to unravel how the accumulation of human capital can improve economic circumstances, reduce vulnerability to poverty, and create opportunities for socioeconomic advancement.

Additionally, this investigation aims to identify policy implications and interventions that can effectively harness parents' human capital to expedite poverty alleviation efforts. By providing empirical insights and practical

recommendations, this research aims to make a significant contribution to the discourse on human capital development and strategies for poverty reduction. It takes a comprehensive perspective that recognizes the role of parents as agents of change in the pursuit of sustainable growth and social equality. Despite government investments in sectors such as education, healthcare, agriculture, skills development, and small and medium enterprises being seen as potential solutions to poverty, the prevalence of poverty in Sheema District remains alarmingly high. In light of this, the study seeks to examine the correlation between human capital development and poverty mitigation in Sheema District. It aims to simulate the impact of government investments in education, healthcare, agriculture, skills development, and small and medium enterprises on poverty alleviation in the district. This will draw insights from successful poverty reduction strategies observed in other advanced economies (Ilesanmi & Lasisi, 2015).

2. Literature Review

2.1 The Role of Skill Development on Poverty Eradication

The importance of skills acquisition training and support to foster business activity and mitigate business failures has garnered increased attention among industry stakeholders, businesses, and governments globally. This emphasis stems from the recognition that entrepreneurs can either be naturally talented or developed through training (Abdullah, 2009). Furthermore, skills training serves as a crucial avenue for the development of human capital (Ikegwu et al., 2014).

Studies by Rufai et al. (2019) and Dasmani (2011) highlight a significant challenge many skills graduates struggle to secure employment due to deficiencies in interpersonal skills and self-confidence, which are essential attributes demanded by industries. This deficiency often arises from a lack of formal education or training in these areas.

Research consistently underscores the positive impact of skills training and tertiary education on fostering entrepreneurial activity and self-employment (Stohmeyer, 2007; Salman, 2009; Amadi, 2012). Specifically, skills acquisition training has been found to bolster entrepreneurial activity in Nigeria (Ikegwu et al., 2014) and enhance youth entrepreneurial endeavors (Samian and Buntat, 2012).

Skills acquisition is frequently advocated as a viable solution to enhance opportunities for youth who may lack the resources, skills, or motivation to pursue higher education. Many scholars argue that equipping youths with practical skills through acquisition training not only prepares them for the labor market but also elevates their prospects for a successful professional career (Quintini and Martin, 2006).

Ezeji and Okorie (2010) underscored the pivotal role of skills acquisition programs in national development. They emphatically argued that addressing Nigeria's socio-economic challenges, such as poverty and unemployment, hinges on providing adequate vocational training encompassing skills, raw materials, machinery, and equipment.

Uloko and Ejinkonye (2010) observed that empowerment through the acquisition of entrepreneurial skills can pave the way for individuals to generate new avenues of wealth

and uplift themselves from poverty. Similarly, Erinsakin (2004) emphasized that for Nigeria to effectively address its high unemployment and pervasive poverty levels, it is imperative to prioritize the development of skill acquisition programs for entrepreneurship. Amesi and Allen (2019) further underscored the potential of skill acquisition programs as a vital solution for poverty alleviation in Nigeria. Radwan and Akindeinde (2010) contended that to realize Africa's developmental goals, individuals must have access to quality education and skill training. This access not only improves their standard of living but also raises awareness about health issues, allows them to plan their families effectively, and equips them with competitive skills sought after in the labor market. The United Nations International Development Organization (UNIDO) and African Union 2007 echoed this sentiment, asserting that skill acquisition and national development should be interconnected and complementary, aiming to lift Africans out of poverty. Herrington and Kew (2010) emphasized the global recognition of innovative education and skill acquisition as pivotal drivers of sustainable economic growth. These mechanisms foster creativity, and job creation, and contribute to poverty reduction across international borders, playing a crucial role in both developed and developing economies (Eze, et al., 2023), (Eze, et al., 2023), (Eze, et al., 2023), (Eze, et al., 2023). A study by the United Nations Development Programme (UNDP) in 2008 evaluated the performance of the education and health sectors in selected countries. The findings revealed significant progress in health and education outcomes in countries that increased their spending in these sectors. Government expenditure on health and education services emerges as a key

indicator of improving human capital quality. According to Isola and Alani (2012), a skilled and healthy workforce is fundamental to a nation's economic growth and development. Health is a critical determinant of financial performance at both the microeconomic and macroeconomic levels.

2.1 The Role of Health Care on Poverty Eradication

Uganda's Ministry of Health (MoH) aims to deliver high-quality healthcare services as outlined in its 2015 strategic plan. The objective is to ensure that clients fully benefit from the available healthcare provisions, promoting client satisfaction and service utilization. Additionally, it enhances job contentment and motivation among healthcare providers, leading to efficient resource allocation. However, Uganda's healthcare and health status indicators have consistently lagged. Data from the Uganda Demographic Health Survey (2000-2001) show a concerning decline in health status and service delivery compared to the previous five years. For example, the Maternal Mortality Ratio (MMR) in 2006 was 435 maternal deaths per 100,000 live births, falling short of the government's target to reduce maternal mortality from 500 to 300 between 2001 and 2008.

A research survey conducted in institutional hospitals in Kampala Uganda from (2016-2021) showed the Institutional Maternal Mortality Ratio (IMMR) is 189 maternal deaths per 100,000 deliveries and 194 of 100,000 live births (Birabwa, et al., 2024). Therefore, a comprehensive review is necessary to assess the current state and historical trends of healthcare delivery in Uganda. The goal is to identify existing obstacles and barriers within

the system and provide actionable recommendations (Mucunguzi *et al* 2023), (Kahara *et al* 2023).

Before Uganda's independence in 1962 and subsequent decades of the 1960s and 1970s, healthcare delivery in the country was robust (Carlson 2004). Medical professionals, including doctors, nurses, midwives, and allied health practitioners, were dedicated and treated patients with respect, dignity, and personalized care. They adhered to professional codes of conduct and work ethics. Healthcare workers were content with their employment terms and received the necessary resources (Beaudevin, *et al.*, 2023). Senior officers received incentives such as vehicles and housing accommodations, while junior staff were provided housing within healthcare facilities. All healthcare personnel enjoyed competitive salaries, allowances, opportunities for promotion, and retirement benefits (Ojakaa, *et al.*, 2014)

Health plays a dual role as both a cause and consequence of poverty. When individuals become ill, it can deplete household savings, impair learning capabilities, diminish productivity, and compromise overall quality of life. This can create or perpetuate a cycle of poverty. On the other hand, impoverished individuals face elevated personal and environmental risks, inadequate nutrition, limited access to information, and challenges in accessing healthcare, making them more susceptible to illness and disability. However, the positive impact of improved health on poverty reduction has been somewhat overlooked. Emerging evidence shows that enhanced health promotes individual well-being and contributes to the generation and

equitable distribution of wealth. Improved health builds human and social capital, strengthens productivity, and creates opportunities for economic advancement (Mattke, *et al* 2006). Healthy children can succeed better in education, while healthy adults can more effectively contribute to the workforce and support their families. Therefore, it is crucial to shift from a vicious to a virtuous cycle by directing resources toward enhancing and safeguarding the health of the impoverished. This study primarily focuses on exploring the intricate relationship between health and poverty. We argue that health is crucial for holistic human development and poverty alleviation. For the impoverished population, health serves as a vital economic asset that their livelihoods depend on. A single illness or injury can trigger a detrimental cycle of income loss and escalating healthcare expenditures for an entire household. Consequently, investing in health is increasingly recognized as a strategic approach to economic development and a fundamental prerequisite for enabling developing countries, particularly their impoverished populations, to escape the poverty trap (Marshall, *et al.*, 2006). Good health catalyzes development through various channels: it increases labor productivity, improves educational attainment and investment, and facilitates demographic transitions (Bloom, *et al.*, 2004).

2.2 The Relationship between Human Capital and Poverty Eradication

Human capital limitations often result in lower wages per unit, which leads low-income households to extend their working hours in order to increase their earnings and meet basic needs (Jailer *et al.*, 2015). However, extensive working hours, as indicated by various

researchers increase the risk of health-related issues (Kubo et al., 2013). Gori and Sodini (2020) argue that individuals find satisfaction in leisure during their working years and in consumption during retirement. They suggest that people adjust their labor input to influence savings and health-related expenses, ultimately affecting their long-term survival prospects. However, this research suggests that households with different levels of human capital, despite having similar physical abilities, face health risks when they overburden themselves. The World Health Organization (WHO), in collaboration with international partners, advocates for the implementation of health and public policies that prioritize the underprivileged as part of a broader strategy to alleviate poverty. Mechanisms such as the United Nations Development Assistance Framework (UNDAF), the World Bank's Comprehensive Development Framework, the revised debt relief initiative, and sector-wide approaches are actively being employed. WHO is also expanding its collaborations with institutions including the World Bank, the International Monetary Fund, regional development banks, the Commission of the European Communities, OECD, WTO, and other United Nations bodies, with the aim of ensuring equitable healthcare provision for the impoverished. At its core, a pro-poor health system guarantees access to healthcare for all individuals, regardless of income level, while treating them with dignity and respect. It protects economically disadvantaged individuals from unsafe medical practices and financial exploitation in both public and private healthcare sectors (Yazid, et al., 2023). Additionally, it should prevent non-poor individuals from falling into poverty due to excessive healthcare costs associated with

severe illnesses. WHO actively advises governments on essential reforms to achieve these goals. Moreover, strategies such as targeted services, enhanced outreach programs, and involving the impoverished in healthcare governance can significantly contribute to the establishment of pro-poor health systems. Examining diverse country-specific experiences can provide valuable insights in this regard. For developing nations, breaking the cycle of poverty and poor health is crucial for sustainable economic growth. These nations should prioritize disease prevention and control, build equitable health systems based on primary healthcare, promote individual and community health, and mitigate risk factors such as tobacco or alcohol dependency, road accidents, and the adverse impacts of conflicts and natural disasters. Within the healthcare sector, adopting a pro-poor approach involves improving governance, enhancing the quality of healthcare services, reaching out to the most vulnerable groups, building strong partnerships with the private sector, and developing fair health financing strategies (Marshall, et al., 2006)

2.3 The Interrelation Between Health and Poverty

There is a strong correlation between health and poverty, with each factor influencing the other (Chakraborty et al., 2016). Poverty often leads to malnutrition, inadequate living conditions, and limited access to timely medical care, resulting in negative health outcomes. Conversely, unexpected health expenses can worsen poverty or push households further into it. For example, a staggering 42% of Chinese households are impoverished due to health-related issues. This

causal relationship can be attributed to the fact that physical well-being is the primary resource that impoverished individuals can deplete. As a result, impoverished households may prioritize earning potential over health, making them more vulnerable to future health risks and perpetuating a cycle of poverty.

2.4 Insights from Previous Studies

Human capital development is widely recognized as a crucial factor in poverty eradication efforts. In Uganda, various studies have examined the interplay between human capital and poverty among parents, focusing on aspects such as education, health, vocational training, and socio-economic empowerment. This review synthesizes the existing literature, highlighting key findings and identifying gaps for future research.

Alagba (2011) also examined the relationship between human capital investment and poverty reduction in Nigeria using a probit regression model. The main findings suggest that increased spending on health and education is associated with a lower likelihood of household poverty. Similarly, Ogu (2022) used panel data regression from the 2008 National Living Standard Survey to study human capital development and poverty in Nigeria. The results revealed that factors such as gender, age, maternal education, total educational expenditure, income quintile, and school enrollment significantly influence poverty reduction in Nigeria. Adawo (2011) employed an econometric model to analyze the contributions of primary, secondary, and tertiary education, as well as physical capital formation and health, to economic growth (Eze, et al., 2023). The study found that primary

education, physical capital formation, and health have a positive impact on economic growth, while secondary and tertiary education tend to hinder it.

2.4.1. Education and Poverty Eradication

Education is a primary component of human capital and plays a critical role in poverty reduction. Studies have shown that educational attainment among parents significantly impacts their economic status and the well-being of their children. For instance, Okurut-Ibore (2015) found that higher levels of education among parents in Uganda lead to better job opportunities and increased household incomes, thereby reducing poverty levels. Similarly, the research by Sharma *et al.*, (2020) highlighted those educational interventions targeting parents, especially women, resulted in improved literacy rates and economic empowerment.

2.4.2 Health and Human Capital

Health is another crucial element of human capital that influences poverty levels. Poor health among parents can lead to decreased productivity and increased medical expenses, exacerbating poverty. A study by Ssebunnya *et al.*, (2018) demonstrated that health improvement programs, including maternal health services and child nutrition initiatives, significantly contribute to poverty alleviation in Uganda. The authors noted that healthier parents are more capable of engaging in income-generating activities, thus improving their economic standing.

2.4.3 Vocational Training and Skills Development

Vocational training and skills development are essential for enhancing parents' employability and income-generating potential. Research by

Hartl, (2009) emphasized the positive impact of vocational training programs on poverty reduction among parents in rural Uganda. The study found that parents who received training in various trades such as carpentry, tailoring, and agriculture were more likely to secure stable employment and increase their household income.

2.4.4 Socio-Economic Empowerment

Socio-economic empowerment initiatives, including microfinance and entrepreneurship programs, have been identified as effective strategies for poverty eradication. Okello Candiya Bongomin, & Munene, (2020) examined the impact of microfinance services on poverty levels among parents in Uganda. Their findings indicated that access to microloans enabled parents to start or expand small businesses, leading to improved financial stability and reduced poverty. Additionally, the study by Kandie *et al.*, (2023) highlighted the role of women's empowerment programs in enhancing economic opportunities for mothers, thereby contributing to poverty reduction.

2.4.5 Government Policies and Programs

The Ugandan government has implemented various policies and programs aimed at enhancing human capital and reducing poverty. The Universal Primary Education (UPE) policy, for instance, has significantly increased school enrollment rates among children, indirectly benefiting parents by reducing the financial burden of education (MoES, *et al* 2015). Additionally, the Social Assistance Grants for Empowerment (SAGE) program provides financial support to

vulnerable families, helping to alleviate poverty and improve human capital outcomes (Mubiru, 2014).

3. Research Findings

1. Significances of Human Capital

- Human capital, encompassing education, skills, and health, significantly influences household income and economic stability.
- Investing in human capital is a crucial determinant of overall well-being and poverty reduction for parents.

2. Benefits of Enhancing Parental Education and Skills

- Parents with higher educational levels and enhanced skills are more likely to secure better employment opportunities and higher-paying jobs.
- Enhanced parental education and skills are associated with better health practices, leading to reduced healthcare costs.
- Investing in the human capital of parents can break the cycle of poverty by promoting greater social mobility for their children

3. Role of Policy Interventions and Educational Initiatives

- Targeted policy interventions and educational initiatives are essential for enhancing human capital among parents.
- Effective policies can ensure access to quality education, skills training, and healthcare services for parents.
- Such policies and initiatives are crucial for sustainable development,

economic stability, and poverty reduction.

4. Conclusion

In conclusion, investing in human capital, particularly through enhancing parental education and skills, is essential for promoting economic stability, reducing poverty, and achieving sustainable development. Targeted policy interventions and educational initiatives are crucial for facilitating this investment and ensuring access to quality education, skills training, and healthcare services for parents. This review has detailed the current trends in healthcare and its relationship to human capital and poverty eradication in Uganda. By enhancing human capital, societies can foster greater social mobility, break the cycle of poverty across generations, and improve overall well-being.

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