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Determinants of Poverty Perceptions in Uzbekistan: A Mixed-Methods Approach

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Abstract

This study investigates perceptions of poverty and its underlying determinants among a purposively sampled population of social-benefit recipients in Uzbekistan. For this purpose, a survey was conducted with 1949 respondents who receive social benefits. The collected data were analyzed using an exploratory sequential mixed-methods approach. Initially, thematic analysis was conducted to identify perceptions of poverty. The output of the thematic analysis was the emergence of nine themes that illustrate the characteristics of individualistic, structural, fatalistic, and cultural attributions of poverty perceptions. Based on the output of the thematic analysis, multinomial logistic regression was conducted. The selection of the base category was based on both the theoretical framework and survey output. The regression results indicated that age, regional poverty cluster and place of residence were the most statistically significant demographic factors influencing perceptions of poverty. Among the monetary variables, personal income demonstrated the strongest explanatory power. Overall, the findings suggest that, within this sampled population, perceptions of poverty are predominantly shaped by individualistic attributions rather than structural, fatalistic or cultural ones. However, these results should be considered with caution as they may reflect internalized poverty stigma.

Keywords: poverty; sustainability; exploratory sequential mixed-methods approach; thematic analysis; multinomial logistic regression; poverty attributions

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1. Introduction

Poverty is one of the biggest challenges worldwide. According to the United Nations' Report, more than a third of the world's population live on $2.15 to $6.85 per day [1]. To address this issue, the United Nations set the elimination of poverty everywhere and in all its forms as the first of the Sustainable Development Goals [2]. In line with these goals, Uzbekistan also adopted the "Uzbekistan-2030" Strategy, which identifies poverty reduction as its primary objective.

To effectively address poverty, its causes must first be identified. There is no single cause of poverty; rather, it results from a combination of factors that vary across countries. Blank categorized six theoretical frameworks explaining the causes of poverty, three of which are related to market functioning and the other three to factors outside the market. Among market-related factors, Blank identified the absence of effective market relationships and insufficient preparedness or inability among participants to engage in market relations. It was also proposed that the market itself may be inherently dysfunctional and may generate poverty [3].

Beyond market-related factors, various social determinants can also exacerbate poverty. Education is widely acknowledged as a key determinant, with limited access to education recognized as one dimension of poverty [4,5]. Research has shown that lower educational attainment of the household head is associated with a higher probability of falling into a poverty trap [6,7]. Household size is another relevant characteristic, with larger households facing higher poverty risks [6,8]. Another factor is access to adequate infrastructure and housing [4,5]. It should be noted that inadequate investment in infrastructure constrains economic growth and fosters poverty [9]. Furthermore, social exclusion and discrimination can be sources of poverty, as they restrict people from having access to employment [10], education [11], healthcare [12], and so on.

Economic conditions are another important driver of poverty. Unemployment is widely accepted as one of the major causes of poverty [13], and studies across countries at different development levels have found that unemployment makes a statistically significant contribution to higher poverty rates [13–15]. The effect of inflation on poverty is more ambiguous: research from Nigeria suggests that, in the short term, inflation may reduce poverty [14], while evidence from Pakistan indicates that inflation increases poverty [16].

Individual-level explanations of poverty also feature prominently in the literature. The tendency to attribute poverty to personal characteristics such as laziness, lack of effort, poor financial management, or low ability is referred to as poverty stigma [17–20]. Research has further found that attributions differ by gender, with men more often blamed for their individual characteristics than women when explaining poverty [20].

As can be seen, poverty can be defined and explained through different approaches. The majority of the previously conducted research were carried out across South-Asian, African, European and American countries; however, research on people's perceptions of poverty in Uzbekistan remains scarce. In 2011, a study analyzed public beliefs among nine post-Soviet countries, including Uzbekistan, finding that the majority of Uzbekistani respondents attributed poverty to individualistic explanations, followed by fatalistic and structural ones [21].

It should be noted that no subsequent research investigating poverty perceptions in Uzbekistan has been published. Moreover, to our knowledge, there is no research focused on the poverty perceptions of people receiving social benefits. To fill this gap, a survey was conducted between February and May 2024 among 1949 respondents in receipt of social benefits, and their answers were analyzed using thematic analysis, followed by multinomial logistic regression. To achieve our objectives, we set the following research questions:

Research question 1: How do social-benefit recipients in Uzbekistan define and explain poverty?

Research question 2: Which underlying attribution frames predominate in these per-ceptions?

Research question 3: Which demographic and monetary characteristics are associat-ed with holding particular attributions of poverty?

2. Literature Review

2.1. Poverty as a Multidimensional Phenomenon

Poverty, in its widest interpretation, refers to a condition of deprivation that extends beyond a mere lack of income. It reflects a multifaceted reality shaped by interrelated social, economic, and structural factors that hinder individuals and communities from satisfying their basic needs and attaining a decent standard of living. Over time, the concept of poverty has developed considerably, moving away from a limited, income-based perspective toward a broader analysis of the complex set of forces that sustain and reproduce poverty. So, poverty is no longer understood solely as income deprivation but as a multidimensional condition encompassing limited access to education, healthcare, housing, infrastructure, and social participation. The United Nations Development Programme formalized this approach through the Multidimensional Poverty Index (MPI), which incorporates deprivations in health, education, and living standards [22]. Empirical evidence suggests that income-based measures alone fail to capture persistent and intergenerational poverty, particularly in developing and transition economies.

Furthermore, income-based measures frequently overlook variations in the cost of living across regions and among different social groups [23]. Using a uniform income threshold does not sufficiently capture the diverse needs and constraints experienced by individuals in varying contexts. For instance, expenses related to housing or healthcare can differ substantially between urban and rural settings, which makes it challenging to accurately evaluate poverty levels when relying only on income-based indicators.

Another prominent scholar, Peter Townsend, focused on the social dimensions of poverty. His work underscored the significance of social exclusion, interpersonal relationships, and social networks in shaping how poverty is experienced [24]. Townsend's research demonstrated the close connection between poverty and social factors, highlighting the importance of addressing poverty within its wider social context.

In post-socialist and developing countries, multidimensional poverty is often exacerbated by structural constraints such as weak labor markets, uneven regional development, and limited institutional capacity [25]. In Uzbekistan, poverty reduction has been prioritized within the national development agenda, emphasizing employment creation, social protection reform, and regional equality under the "Uzbekistan-2030" Strategy [26].

2.2. Economic and Structural Determinants of Poverty

Poverty is a multifaceted issue, and a clear understanding of its economic drivers is essential for identifying its root causes and designing effective interventions. This section explores the economic dimensions of poverty, such as income inequality, unemployment, and limited access to resources. It is informed by recent studies that examine these factors and their effects on individuals and society, highlighting the wide-ranging and complex nature of poverty.

Classical economic theories emphasize market participation and income from labor as the main mechanisms for reducing poverty. Blank [3] distinguishes between poverty resulting from market failures, individual constraints, and institutional deficiencies, arguing that dysfunctional labor markets and inadequate human capital can trap people in poverty. In addition, income inequality, defined as the uneven distribution of income within a society, has profound consequences for poverty [27]. A wide disparity between the earnings of the wealthy and those of low-income groups creates conditions in which some individuals enjoy abundant resources and opportunities, while others struggle to satisfy basic needs. The concentration of wealth in the hands of a small number of individuals or groups further intensifies this imbalance and deepens the divide between rich and poor [28]. Consequently, people with lower incomes often face restricted access to quality education, healthcare,

housing, and other essential services, which limits their ability to improve their economic circumstances and escape poverty.

Unemployment represents another key economic contributor to poverty [29]. The absence of stable employment or prolonged joblessness not only results in income loss but also restricts individuals' capacity to meet basic needs and maintain an acceptable standard of living. Without a dependable source of income, people often struggle to cover everyday expenses, access essential services, or plan for the future. Moreover, long-term unemployment can negatively affect self-esteem, mental health, and overall well-being, thereby intensifying the difficulties associated with escaping poverty [30].

Limited access to resources such as education, healthcare, and basic services constitutes another important dimension of poverty with serious economic consequences [31]. Education is widely acknowledged as a vital pathway out of poverty, as it equips individuals with the skills and knowledge necessary for employment and career progression. However, restricted access to high-quality education, especially in disadvantaged communities, reinforces educational inequalities and constrains opportunities for individuals to break free from poverty [32]. Likewise, insufficient access to healthcare and essential services represents a major obstacle for individuals living in poverty, as it undermines their ability to maintain good health and overall well-being, which in turn contributes to a further decline in their economic circumstances [33].

2.3. Poverty Perceptions and Stigma

In addition to objective measures, subjective assessments of poverty and well-being play an important role in shaping perceptions of poverty. People's self-assessment of poverty varies depending on their cultural, social, and economic context, and these perceptions can influence stigmatization, social isolation, and attitudes toward social assistance recipients. While subjective measures provide valuable information about life experiences, they also require careful interpretation to avoid reinforcing cultural biases or distortions [34].

Poverty stigma is a condition whereby a society disapproves of a group of people living in poverty. There are two types of poverty stigma. The first is how society perceives poverty, and the second concerns how people living in poverty perceive poverty (internalized stigma) [35]. In poverty stigma, attribution theory plays an important role. It distinguishes between dispositional explanations (laziness, lack of effort) and structural explanations (unemployment, low wages, institutional failure) for poverty [34].

Considering that Uzbekistan is a post-Soviet Union country, investigating poverty perceptions in post-communistic countries is crucial. Poverty perceptions in post-socialistic countries had distinctive features. Poor people had a negative image in socialist ideology, which blamed them for failing to earn a living [36]. Furthermore, it was found that, during the transition period, the presence of a pensioner in the family reduced the risk of poverty in Armenia [37], Moldova, Russia, Bulgaria, Ukraine [38] and Azerbaijan [39].

Another study, focusing on post-communist countries, found that there is a considerable difference in support for structural attribution across the observed countries. Researchers relied on repeated cross-sectional survey data spanning the Caucasus, Central Asia, and the Balkans and conducted both individual-level and country-level analyses. They found that individual-level variables can explain structural attribution better than country-level ones. Interestingly, it was found that wealthier individuals were less likely to support the structural attribution. In this study, Uzbekistan was not included in the sample [40].

Furthermore, research conducted by the World Bank across four Central Asian countries (Kazakhstan, Kyrgyzstan, Tajikistan and Uzbekistan) revealed that there are regional

disparities in the poverty rate. The level of poverty was found to be higher in more sparsely populated regions, mountainous regions, and rural areas [41].

Public stigma becomes internalized through the incorporation of externally imposed negative stereotypes into self-evaluation [42]. In collectivist and post-socialist societies, the internalization of stigma may be more pronounced than in individualistic ones [43]. Internalized stigma is more common than externally experienced stigma among vulnerable populations, manifesting as self-depreciation, shame, and guilt [44]. A self-serving bias leads people in lower social positions to view their poverty as a personal failure and favor external causes, while privileged observers ascribe internal causality to the poor [45]. It should be noted that poor individuals deploy cognitive and behavioral strategies to reconcile perceived social and personal identities, including cognitive distancing, concealment of their financial situation, and withdrawal [46].

Accurate measurement of poverty remains a challenge due to its multidimensional nature and the diverse forms in which individuals and communities experience deprivation [47]. Traditional income-based indicators, while widely used, reflect only the monetary aspects of poverty and omit important dimensions such as education, health, housing, and participation in community life. This narrow approach can distort the public understanding of poverty and reinforce stigmatizing narratives that frame poverty primarily as an individual financial failure rather than a complex social phenomenon [48].

Contemporary approaches, such as the Multidimensional Poverty Index (MPI) developed by the United Nations Development Programme, combine objective indicators in the areas of education, health, and living standards, offering a more nuanced understanding of poverty and its causes [49]. Similarly, Sen's capability-based approach emphasizes the freedoms and opportunities of individuals, rather than just income, reframing poverty as a deprivation of opportunities rather than a personal failure [50]. Such approaches help reduce the stigma of poverty by shifting the focus from individual blame to structural constraints.

Recent advances in data analysis, including big data and satellite imagery, have further expanded opportunities to understand the dynamics of poverty and spatial inequality [51,52]. In addition, approaches that include people experiencing poverty in defining and assessing deprivation help to incorporate local perspectives and challenge dominant stereotypes [53]. Furthermore, the effect of government digitalization on the poverty rate was analyzed using both absolute and multidimensional measures of poverty. It was found that improvements in countries' levels of e-government development decreases both absolute and multidimensional poverty [54,55].

Overall, how poverty is measured has important implications for how it is perceived. Measurement frameworks that acknowledge multidimensional and subjective aspects of poverty can contribute to more accurate representations and help reduce stigma by emphasizing structural and contextual factors rather than individual shortcomings.

3. Materials and Methods

This chapter describes the research design, data collection and analysis tools applied in this research.

3.1. Research Design

This paper applies an exploratory sequential mixed-methods design, in which a qualitative phase precedes and informs a subsequent quantitative phase [56]. The application of the mixed-methods approach allows for a thorough exploration of the social phenomena [57]. This is a valuable aspect for investigating such a complex phenomenon as poverty. The combination of these methods can contribute to well-informed policy decisions, ensuring generality and representativeness with greater validity and reliability [58].

In this paper, the sample is the same for both methods, with all participants answering questions of both a quantitative and qualitative nature in the survey. In this exploratory sequential design, the qualitative component informs the development of the quantitative instrument [56,59]. For this purpose, answers from the open-ended questions are coded and transformed into quantitative data [60]. Qualitative data serve to develop the generalizable theories [61].

3.2. Data Collection

The primary data for this study were obtained through a survey conducted in Uzbekistan between February and May 2024, in partnership with the Association of Uzbekistan mahallas. "Mahalla" is an Uzbek word that can be translated as a neighborhood, yet with much wider functions. It is the smallest regional unit, the heads of which are elected by the people living in the neighborhood. The administration of the mahalla serves to improve neighborhood life, provide social support and solve problems: "... in a community like this, people are interconnected not only geographically and through neighborhood ties, but also by their internal attitudes, moral norms..." [62].

In this research, purposive sampling was applied and the survey was conducted among individuals in receipt of social benefits. It should be highlighted that, in the survey, references to the respondents' own socioeconomic status were deliberately avoided to minimize the risk of social desirability bias and framing bias [63]. Participants were presented with an open-ended question requesting a generalized, abstract definition of a 'poor person'. This design allowed researchers to capture spontaneous conceptualizations of poverty without directly triggering personal defensive mechanisms during the data collection phase. The sample size consisted of 1949 respondents. The data were collected by trained interviewers.

When conducting the survey, the following requirements were imposed: respondents had to answer the questions using a separate portable mobile device; a response had to be obtained from at least seven people in one mahalla; respondents needed to be over 18 years of age; and no influence could be exerted on the respondents when they were answering the questions.

It should be noted that, in total, there were twenty questions in the questionnaire, including information on demographics, education, health conditions, income, indebtedness, and food expenditures. The questionnaire included 18 closed-ended and 2 open-ended questions. Open-ended questions were included to understand the respondents' opinions regarding the definition and causes of poverty.

3.3. Methods

In this research, a mixed-methods approach was applied both to understand the feelings of the respondents and to be able to measure their perceptions. The choice of the mixed-method approach is based on the rationale that it can answer complex questions compared to the usage of quantitative or qualitative methods in isolation [53]. In this study, the thematic approach was initially applied, based on the outcome of which the multinomial logistic regression model was created.

3.3.1. Thematic Analysis

Thematic analysis is a qualitative method of analysis that helps to detect patterns in the dataset [64]. In this research, thematic analysis was used to identify common patterns in respondents' answers and understand their perception of the definition of poor people. The advantage of the thematic analysis is that it is flexible and can be modified for the needs of many studies [65].

For this purpose, the framework of the thematic analysis proposed by Braun and Clarke was applied [66]. This theoretical framework consists of six stages and has an inductive character, with the results being driven by data [67].

The first stage of the thematic analysis was immersion into the data. Three researchers were involved in the coding process, working independently. When reading the answers, it was noted that the respondents answered the questions briefly, mainly using only one word.

The second stage involved generating initial codes. Initial codes were generated manually in the Excel file by the researchers independently. Disagreements between researchers were resolved through the majority rule [68]. From the answers of the 1949 respondents, 61 codes were generated. The sentences for the formulation of the initial codes and their division into themes are provided in Table 1.

Table 1. Final themes of the thematic analysis.

#	Theme	Initial Codes
1	Lazy	-Poor person is a person who is lazy -Poor person is a person who does not have the willingness to work -Poor person is a person who is able to work but does not work and depends on others' income -Poor person is a person who avoids work -Poor person is a person who does not want to work on themselves -Poor person is a person who does not work and just relies on social support -Poor person is a person who does not try any work -Poor person is a person who does not make any effort to live a good life -Poor person is a person who does not care about work -Poor person is a person who never learned any work skills -Poor person is a person who does not have any aims in life
2	Unemployed	-Poor person is a person who is unemployed -Poor person is a person who does not have a source of income -Poor person is a person who wants to work but cannot find a job -Poor person is a person who does not have a permanent workplace -Poor person is a person who does not have a permanent source of income -Poor person is a person who does not have a business -Poor person is a person who does not have a job because of family conditions -Poor person is a person who does not have the required skills to work
3	Health	-Poor person is a person who has problems with health -Poor person is a person who has a physical disability -Poor person is a person who has a mental disability -Poor person is a person whose health does not allow them to work -Poor person is a person whose family member has a disability -Poor person is a person who spends all his money on medicine
4	Low income	-Poor person is a person who has a low income -Poor person is a person whose income is lower than average -Poor person is a person whose income cannot cover his/her own or his/her family's needs -Poor person is a person who has a bank loan -Poor person is a person who does not have savings -Poor person is a person who does not have food -Poor person is a person whose income is not enough to last until the next month's income -Poor person is a person whose income cannot cover his/her minimal needs -Poor person is a person whose expenditures are higher than their income -Poor person is a person who does not have an additional source of money -Poor person is a person who does not have enough money

Table 1. *Cont.*

#	Theme	Initial Codes
5	Dependence	-Poor person is a person who has lost a breadwinner -Poor person is a person who has lost their parents -Poor person is a person who has lost support -Poor person is a person who does not have good living conditions -Poor person is a person who has got into trouble -Poor person is a person who needs social support -Poor person is a person who is already receiving social support -Poor person is a person who has many children -Poor person is a person who has a big family -Poor person is a person who does not have a house
6	Uneducated	-Poor person is a person without knowledge -Poor person is a person who cannot think independently -Poor person is a person who is not smart
7	Ungrateful	-Poor person is a person who has a low cultural level -Poor person is a person who is ungrateful -Poor person is a person who is not confident -Poor person is a person who is mentally poor
8	Poverty does not exist	-In our modern life, poverty does not exist -There is no poor family -In Uzbekistan, there is no poverty -No one is poor; everyone should just try -Nowadays, all opportunities are available
9	No answer	I do not know

The third stage involved generating themes. In this stage, the codes were divided into potential themes. Initially, 12 themes were formulated, namely, "lazy"," unemployed", "disabled", "having health problems", "low income", "no source of income", "dependence", "losing a breadwinner", "uneducated", "ungrateful", "poverty does not exist", and "no answer".

The fourth stage involved reviewing the created themes. In this stage, both the content and the context of the answers were revised to ensure that the themes appeared as a coherent pattern. During this stage, some generated themes were merged into one bigger theme. Thus, "disabled" and "having health problems" created a theme "health", "no source of income" was included in the theme "unemployed", and "losing a breadwinner" was added to the theme "dependence".

The fifth stage involved defining and naming the themes. After a thorough analysis, nine themes were formulated and named. The final themes and the respondents' answers are set out in Table 1.

The sixth stage of the thematic analysis involved producing the report. In this stage, the results were written up and interpreted for inclusion in this paper.

It should be noted that the themes identified through this process represent analytically distinct perceptual categories. For example, the distinction between "lazy" and "unemployed" reflects a theoretically meaningful difference between individualistic and situational attributions of poverty rooted in attribution theory [34]: the former locates the cause of poverty within the individual's character, while the latter acknowledges structural barriers to employment. Similarly, themes such as "ungrateful" reflect culturally specific stigmatizing frames that go beyond a mere description of economic circumstances. These distinctions carry analytical significance because they correspond to different mechanisms

through which poverty stigma operates and, as shown by subsequent regression results, are differentially distributed across demographic and socioeconomic groups.

3.3.2. Multinomial Logistic Regression Analysis

In this paper, multinomial logistic regression is conducted to understand the determinants of poverty perceptions in Uzbekistan. Multinomial logistic regression is an appropriate model for predicting a dependent variable that is nominal in character and has more than two levels [69]. It helps to analyze mutually exclusive response categories without overlapping reference categories [70,71].

In this research, the codes and themes are considered as mutually exclusive to conduct further quantitative analysis [72]. This is because, in the survey, respondents were asked to identify the single most salient characteristic of a poor person and the single most important cause of poverty. This single-response format means that the dependent variable captures the respondent's primary or dominant perception rather than the full complexity of their views, and it is this dominant perception that the model seeks to explain. This approach is consistent with prior research on poverty attributions that uses categorical survey items to identify the predominant explanatory frame employed by a respondent [34,73]. While this necessarily simplifies the complexity of individual beliefs, it enables systematic comparison of attribution patterns across demographic groups.

It should be noted that the nine consolidated themes reported in Table 1 describe the qualitative output of the definition question at the most aggregated level, whereas the multinomial model retains a finer set of outcome categories. In this paper, the theme "lazy" is selected as the base category in multinomial logistic regression. The reason for the selection of this theme is grounded in both the theoretical framework and survey output. In their research, Inglis et al. analyzed twenty-two papers on the topic of poverty stigma. Their results revealed that, in the majority of previously conducted research, "laziness" was the perceived poverty stigma [46]. Furthermore, in the study conducted by Habibov in 2011, it was found that respondents from Uzbekistan supported individualistic explanations of poverty [21]. The thematic analysis in this paper illustrates that the theme "lazy", which reflects the individualistic approach, is the modal answer to both the poverty definition and poverty causes questions, making it the natural reference category. According to Kogen, recurrence indicates that a theme is prominent and strong [74].

The formula of the model is as follows [69]:

$$\ln\left(\frac{p_i[Y_j]}{p_i[UN]}\right) = \mu_{Y_j} + \alpha_{Y_{ji}}$$

where:

$p_i[Y_j]$—the likelihood of the dependent variable being in the j-category
$p_i[UN]$—the likelihood of the occurrence of the baseline category
μ_{Y_j}—a constant
$\alpha_{Y_{ji}}$ —explanatory variables

It should be noted that the analysis was conducted using the software Stata version 17. The output of the multinomial logistic regression was provided through the relative risk ratio (RRR). The dependent variable is the single most salient response category, with "lazy" as the base outcome. The predictors are grouped into demographic factors (gender, age, region, and place of residence), monetary factors (reported personal income, monthly food expenditure, and indebtedness), and education and healthcare factors (education level and self-reported health status). Detailed information on the variables' characteristics is provided in Table 2.

Table 2. Descriptive statistics and coding information.

Variable	Coding	Freq.	Percent	Cum.
Gender				
Male	0	1486	76.24	76.24
Female	1	463	23.76	100.00
Total		1949	100.00	
Age				
18–29	1	140	7.18	7.18
30–39	2	468	24.01	31.20
40- and above	3	1341	68.80	100.00
Total		1949	100.00	
Region				
Low-poverty level	1	336	17.24	17.24
Medium-poverty level	2	822	42.18	59.42
High-poverty level	3	791	40.58	100.00
Total		1949	100.00	
Residence				
Rural	0	1184	60.75	60.75
Urban	1	765	39.25	100.00
Total		1949	100.00	
Education				
Secondary education	1	345	17.70	17.70
Bachelor's degree	2	1457	74.76	92.46
Master's degree and above	3	147	7.54	100.00
Total		1949	100.00	
Health status				
Sometimes requiring medical services	1	650	33.35	33.35
Healthy; never visited a doctor	2	380	19.50	52.85
Healthy; regularly checks their health	3	739	37.92	90.76
Has a chronic disease	4	180	9.24	100.00
Total		1949	100.00	
Personal income				
Below 1 million soum	1	135	6.93	6.93
1–5 million soum	2	1335	68.50	75.42
5–9 milllion soum	3	406	20.83	96.25
Above 10 million soum	4	73	3.75	100.00
Total		1949	100.00	

Table 2. *Cont.*

Variable	Coding	Freq.	Percent	Cum.
Food expenditures, monthly				
Below 1 million soum	1	184	9.44	9.44
1–2 million soum	2	675	34.63	44.07
2–4 milllion soum	3	759	38.94	83.02
Above 4 million soum	4	331	16.98	100.00
Total		1949	100.00	
Indebtedness				
No	0	540	27.71	27.71
Yes	1	1409	72.29	100.00
Total		1949	100.00	

4. Results and Discussion

The survey data were analyzed to investigate the factors associated with perceptions of poverty in Uzbekistan. Initially, descriptive statistical analysis was conducted to explore the demographic profile of the respondents. Next, the results of the thematic analysis were provided, followed by multinomial logistic regression to assess the influence of demographic and socioeconomic characteristics on respondents' views regarding the definitions of poverty.

4.1. Demographic Profile of the Respondents

The total number of respondents that participated in the survey was 1949. Table 2 presents the variables included in the analysis, along with their respective components and coding scheme. It is noteworthy that, although the survey included respondents from all 14 administrative regions of Uzbekistan, the regional distribution of the sample was uneven. To capture regional variation in the socioeconomic context, the 14 regions were grouped into three clusters (high-, medium-and low-poverty level) according to their poverty rates [75,76]. Since the survey was conducted in early 2024, the clustering procedure utilized the most recent available official poverty statistics, corresponding to 2023 [77]. The resulting clusters comprised regions with poverty rates ranging from 7.6% to 7.9% for the low-poverty cluster, from 10.1% to 11.9% for the medium-poverty cluster, and from 13.6% to 14.2% for the high-poverty cluster.

Moreover, the majority of the participants were from rural areas (60.75). In terms of gender composition, males accounted for 76.24% of the total sample, indicating a predominance of male respondents. Another notable finding is the high concentration of participants above the age of 40 (68.80%), as well as individuals holding a bachelor's degree (74.76%). The comparatively high educational attainment observed in the sample can largely be attributed to the age composition of the respondents. In particular, 1114 participants aged 40 years and above possessed at least a bachelor's degree. This pattern likely reflects historical differences in access to higher education, as many respondents in this age group completed their studies during the Soviet period or the early years of Uzbekistan's independence, when higher education was publicly funded. Therefore, the educational profile of the survey sample should not be considered representative of the overall educational attainment of the national population. Furthermore, the respondents were asked to assess their health status. Overall, 37.92% of participants reported maintaining optimal health alongside regular medical check-ups, whereas 9.24% indicated the presence of chronic illness.

The model also incorporates three monetary variables: personal income, monthly food expenditures, and indebtedness. The majority of participants (68.50%) reported a monthly income between 1 and 5 million UZS. Converted at the historical exchange rate of the Central Bank of Uzbekistan at the onset of data collection ($1 = 12,420.24 UZS on 1 February 2024), this range equates to approximately $80.51–$402.57. Concurrently, the largest share of respondents (38.94%) allocated 2–4 million UZS ($161.03–$322.05) specifically to food expenditures. Finally, credit engagement was remarkably high, with 72.29% of the sample holding active bank loans.

4.2. Output of the Thematic Analysis

In the survey, the respondents were asked to write their opinion in response to the following descriptive open-ended question: "What kind of person do you consider as poor?".

Different views regarding the definition of a poor person were given. Based on the given definitions, nine themes were generated. The frequency of the themes is provided in Figure 1. It can be seen that the majority of the respondents (602) define poverty as laziness and unwillingness to work. The next most widespread opinions regarding whom to consider poor are unemployed people (328) and people with low incomes (307). Based on the results of this thematic analysis, the multinomial logistic regression analysis was conducted, and the theme "lazy" was chosen as a base variable for the analysis.

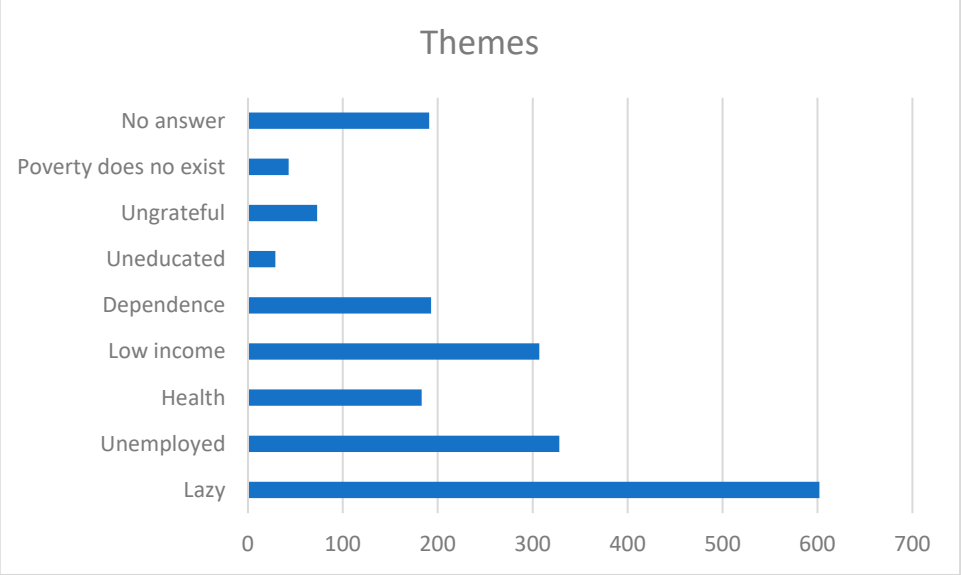


Figure 1. The frequency of the themes.

It should be noted that the respondents to the survey were beneficiaries of state support, and, despite avoiding mentioning their status in the survey, participants may have subconsciously created a symbolic boundary between their own identity (as temporary or justified welfare recipients) and the 'poor other', thereby protecting themselves from poverty stigma [78].

4.2.1. Poverty Perceptions: Individualistic Attributions

In the literature on poverty stigma, laziness is defined as a factor controllable by the individual [79]. Laziness exemplifies the individualistic attribution of poverty, which accentuates the role of individuals in their own poverty [80]. Approximately 35% of the respondents supported this approach to defining poverty. This poverty stigma can also be observed in other countries, such as Canada [73], China [81], and the USA [17]. Furthermore, in countries with higher levels of inequality, there is an assumption that

rich people are worth more than poor people [82]. In this regard, it should be noted that Uzbekistan has a moderate inequality level (34.6%) [83].

It is interesting to note that, according to Reutter et.al., demographics have a significant impact on adherence to individualistic attributions [73]. It was found that men were prone to blaming poor people [84,85]. Moreover, individuals who have a low income and do not receive social support are also inclined to individualistic attributes, considering that, if they are managing to live without support, others can too [86].

4.2.2. Poverty Perceptions: Structural Attributions

The supporters of the structural approach focus on the socioeconomic factors that create poverty [44,73,87]. This includes unemployment, low levels of education, and low wages [88]. Three themes in this research represent structural attributions: "unemployed", "uneducated", and "low income". It should be noted that people's perceptions regarding poverty attributions can shift from individualistic and fatalistic attributions to structural ones. In this case, the role of education and the media is vital [82]. In Canada, awareness-raising initiatives changed attitudes to issues related to poverty [89]. Also, social marketing campaigns can also help change attitudes to poverty [90].

4.2.3. Poverty Perceptions: Fatalistic Attributions

Fatalistic attributions include unfortunate situations, illness or bad luck [80]. Two themes, "health" and "dependence", are examples of this attribution. The theme "health" is related to the health problems of the poor person or his/her family members. The theme "dependence" covers situations of dependence within the family, where either the family depends on the breadwinner or a person has many dependents. Based on the previous literature, people with lower levels of education and lower incomes were likely to explain poverty through the lens of the fatalistic approach [73].

4.2.4. Poverty Perceptions: Cultural Attributions

Poverty perceptions may also be shaped by the national culture [90]. Culture is the combination of ideas, values, norms and beliefs common to the majority of the country's population [91]. Three predominant values related to cultural attributions can be distinguished: dominant religion, dominant political ideology, and work ethic [45]. The impact of religion was ambiguous in the analysis of European countries [90]. Government policy also has an impact on poverty perceptions: supporters of the more conservative policies are prone to individualistic attributions, whereas supporters of more liberal policies prefer to explain poverty in structural terms [86]. Societies that encourage hard work are prone to have a negative attitude towards the poor [92,93].

There are two themes that characterize cultural attributions. The first theme is "ungratefulness", which appears to be closely associated with cultural and religious values prevalent in Uzbekistan. Respondents frequently suggested that individuals who are spiritually dissatisfied or fail to appreciate what they possess can be considered genuinely poor, regardless of their material circumstances. Such perceptions may be rooted in both religious beliefs and deeply embedded work ethics. The vast majority of Uzbekistan's population adheres to Islam [94], where the concept of "*Shukr*" (gratitude) plays a central role. *Shukr* refers to the acknowledgment and appreciation of God's blessings under all circumstances, including adverse or challenging situations [95]. Accordingly, Muslims are encouraged to express gratitude regardless of their life conditions [96].

In addition to religious influences, cultural norms related to work and self-reliance may also shape these perceptions. In many Uzbek families, children are socialized from an early age to value hard work and personal responsibility, contributing to a strong work ethic within society [97]. These cultural and religious values may help explain the emergence

of the theme "ungratefulness" in respondents' perceptions of poverty. Furthermore, they may also contribute to the identification of the theme "poverty does not exist," reflecting the belief that poverty is less a consequence of material deprivation than of individual attitudes, effort, and appreciation of one's circumstances.

4.3. Output of the Multinomial Logistic Regression

This subsection describes and discusses the output of the created model using the multinomial logistic regression analysis.

Table 3 illustrates the classification of the responses to the question "What kind of person do you consider as poor?" using the multinomial logistic regression model. The category "lazy" was specified as the reference outcome. The overall model was statistically significant (χ^2 = 322.529, $p < 0.001$), suggesting that the explanatory variables jointly contributed to distinguishing among respondents' perceptions of poverty.

The findings reveal that demographic factors have an influence on poverty perceptions. The most significant determinant was age. Compared with respondents aged 18–29 years, individuals aged 40 years and above were significantly less likely to attribute poverty to unemployment rather than laziness (RRR = 0.349), low income (RRR = 0.443), dependence (RRR = 0.449), lack of education (RRR = 0.109), or ingratitude (RRR = 0.142), or to choose no answer (RRR = 0.168). Similarly, respondents aged 30–39 years were significantly less likely to identify ingratitude (RRR = 0.22) or lack of education (RRR = 0.26), or to provide no answer (RRR = 0.297). In contrast, respondents aged 30–39 were almost eight times as likely (RRR = 7.979) to select health over the laziness as the determinant of poverty.

Another significant variable is the regional poverty cluster. It is interesting to note that those residing in high-poverty regions were more likely to attribute poverty to themes other than laziness. Compared with respondents from medium-poverty regions, those living in high-poverty regions were notably more likely to select unemployment (RRR = 1.738), health (RRR = 2.113), low income (RRR = 2.931), dependence (RRR = 2.162), or ingratitude (RRR = 2.54), or to give no answer (RRR = 1.639), rather than laziness. As regards the low-poverty cluster, it demonstrates considerable associations primarily with unemployment (RRR = 1.77) and low income (RRR = 2.33).

Place of residence also significantly impacted poverty perceptions. Urban residents were more likely than rural residents to determine unemployment (RRR = 1.402) and low income (RRR = 1.673) as characteristics of poverty instead of laziness. This finding suggests that structural and labor-market factors have greater emphasis among urban populations.

It is interesting to note that neither gender nor educational attainment demonstrated consistent influences across the majority of poverty perceptions. Gender significantly affected only the probability of selecting no answer, with women being less likely to refrain from expressing an opinion (RRR = 0.581). Educational attainment was generally insignificant, except that respondents holding a bachelor's degree were less likely to choose no answer (RRR = 0.591).

Self-reported health status exhibited several significant associations with poverty perceptions. Compared with respondents reporting poor health (reference category), individuals who considered themselves healthy and regularly monitored their health were less likely to identify low income (RRR = 0.616) as the determinant of poverty. They were also less likely to believe that poverty does not exist (RRR = 0.435). Interestingly, respondents with chronic diseases were significantly less likely to attribute poverty to dependence (RRR = 0.382). Overall, these results suggest that respondents with better perceived health were comparatively more inclined to view poverty as resulting from individual characteristics such as laziness rather than structural circumstances.

As regards monetary factors, personal income significantly influenced several poverty perceptions. Compared with respondents in the lowest income category, individuals earning 5–9 million soum were less likely to attribute poverty to dependence (RRR = 0.408), while those earning more than 10 million soum were substantially likely to associate poverty with health (RRR = 0.156) or dependence (RRR = 0.251). These findings suggest that higher-income individuals were comparatively more likely to maintain individualistic explanations of poverty, particularly emphasizing personal responsibility over external circumstances.

In contrast, monthly food expenditures showed relatively limited effects. Both categories of respondents spending 2–4 million soum and above 4 million soum on food were less likely to characterize poor people as ungrateful (RRR = 0.413 and RRR = 0.262, respectively).

Finally, indebtedness emerged as a notable predictor only for unemployment. Individuals having bank loans were approximately 43.7% more likely to perceive unemployment rather than laziness as the definition of poverty (RRR = 1.437), indicating that personal financial vulnerability may strengthen awareness of labor-market constraints.

Overall, the results indicate that demographic characteristics, particularly age, regional poverty tier and place of residence, together with selected socioeconomic variables such as indebtedness and personal income, significantly shape perceptions regarding the characteristics of poverty. Older respondents consistently exhibited a stronger tendency to attribute poverty to individual characteristics, especially laziness, whereas urban residents were more likely to emphasize structural explanations, including unemployment and insufficient income. Also, the regional poverty context is systematically associated with the way in which poverty is conceptualized. The output of the model shows that perceptions of poverty are not formed exclusively at the individual level but are also associated with the broader socioeconomic environment in which respondents live. In particular, the stronger association of high-poverty regional contexts with unemployment and low income suggests a greater recognition of structural and economic dimensions of poverty. At the same time, the significant associations with dependence and ingratitude indicate that individualistic interpretations of poverty remain present even in high-poverty settings.

These age and residence differences are consistent with expectations grounded in Uzbekistan's socioeconomic and historical context, rather than surprising findings. Older respondents came of age under the Soviet system of guaranteed employment and centrally organized social protection, in which poverty was framed primarily as a consequence of specific, recognized circumstances (disability, loss of a breadwinner, old age) rather than as a general failure of individual effort; this may explain why older respondents were more likely to select health issues. Younger respondents, who came of age entirely within the post-independence market economy, may be more exposed to individualistic and meritocratic framings of economic success and failure, consistent with their greater tendency to select individualizing categories. Similarly, the rural–urban differences plausibly reflect differences in local labor market structure and the visibility of informal, family-based safety nets: rural respondents, who more often live within extended-family and mahalla-based support networks, may be more inclined to frame poverty in relational and moral terms than in narrowly economic terms, whereas urban respondents facing more monetized labor markets may be more likely to frame poverty around income and unemployment. These interpretations are offered as plausible explanations consistent with the Uzbekistani context rather than as findings directly tested by the data, and they point to specific hypotheses that future qualitative or life-course research could examine directly.

Table 3. Multinomial logistic regression model on the characteristics of the poor people.

Theme		RRR.	St. Err.	t-Value	*p*-Value	[95% Conf	Interval]	Sig
1.	**Lazy** (base outcome)							
2.	**Unemployed**							
	gender	0.825	0.143	−1.11	0.269	0.587	1.16	
	age							
	30–39	0.52	0.18	−1.89	0.059	0.264	1.024	*
	40 and above	0.349	0.116	−3.18	0.001	0.182	0.668	***
	residence							
	urban	1.402	0.212	2.23	0.026	1.042	1.887	**
	region							
	low-poverty level	1.77	0.354	2.86	0.004	1.196	2.62	***
	high-poverty level	1.738	0.276	3.49	0	1.274	2.372	***
	health status							
	healthy; never visited a doctor	0.725	0.151	−1.54	0.124	0.482	1.092	
	healthy; regularly checks their health	0.734	0.12	−1.89	0.059	0.533	1.011	*
	has a chronic disease	0.707	0.183	−1.34	0.182	0.425	1.176	
	education							
	Bachelor's degree	0.887	0.175	−0.61	0.543	0.602	1.306	
	Master's degree and above	0.697	0.249	−1.01	0.313	0.345	1.405	
	food_expenditures							
	1–2 million soum	0.926	0.249	−0.29	0.775	0.547	1.568	
	2–4 milllion soum	0.786	0.211	−0.90	0.369	0.465	1.329	
	Above 4 million soum	1.088	0.319	0.29	0.773	0.612	1.933	
	Indebtedness	1.437	0.241	2.16	0.031	1.034	1.997	**
	Personal income							
	1–5 million soum	1.09	0.361	0.26	0.794	0.57	2.085	
	5–9 milllion soum	1.077	0.39	0.20	0.839	0.529	2.191	
	Above 10 million soum	0.647	0.335	−0.84	0.4	0.235	1.783	
	Constant	1.01	0.478	0.02	0.983	0.4	2.552	
3.	**Health**							
	gender	0.805	0.174	−1.01	0.314	0.527	1.228	
	age							
	30–39	7.979	8.355	1.98	0.047	1.025	62.123	**
	40 and above	6.993	7.269	1.87	0.061	0.912	53.633	*
	residence							
	urban	1.157	0.217	0.78	0.436	0.801	1.671	
	region							
	low-poverty level	1.581	0.41	1.77	0.077	0.951	2.628	*
	high-poverty level	2.113	0.405	3.91	0	1.452	3.077	***
	health status							
	healthy; never visited a doctor	1.012	0.249	0.05	0.961	0.624	1.641	
	healthy; regularly checks their health	0.724	0.149	−1.57	0.117	0.483	1.085	
	has a chronic disease	0.994	0.292	−0.02	0.984	0.559	1.77	
	education							
	Bachelor's degree	1.002	0.247	0.01	0.992	0.618	1.626	
	Master's degree and above	0.838	0.411	−0.36	0.718	0.321	2.19	
	food_expenditures							
	1–2 million soum	1.129	0.379	0.36	0.717	0.585	2.18	
	2–4 milllion soum	0.988	0.332	−0.04	0.971	0.511	1.908	
	Above 4 million soum	0.882	0.336	−0.33	0.741	0.418	1.859	
	Indebtedness	1.216	0.248	0.96	0.338	0.815	1.814	
	Personal income							
	1–5 million soum	0.521	0.191	−1.78	0.075	0.254	1.068	*
	5–9 milllion soum	0.671	.271	−0.99	0.324	0.304	1.482	
	Above 10 million soum	0.156	0.13	−2.23	0.026	0.03	0.799	**
	Constant	0.052	0.058	−2.67	0.008	0.006	0.457	***

Table 3. *Cont.*

Theme		RRR.	St. Err.	t-Value	*p*-Value	[95% Conf	Interval]	Sig
4.	**Low income**							
	gender	0.777	0.138	−1.42	0.155	0.548	1.1	
	age							
	30–39	0.593	0.209	−1.48	0.138	0.297	1.182	
	40 and above	0.443	0.149	−2.42	0.016	0.229	0.858	**
	residence							
	urban	1.673	0.261	3.30	0.001	1.233	2.27	***
	region							
	low-poverty level	2.33	0.488	4.04	0	1.546	3.513	***
	high-poverty level	2.931	0.491	6.42	0	2.111	4.07	***
	health status							
	healthy; never visited a doctor	0.72	0.152	−1.55	0.12	0.476	1.09	
	healthy; regularly checks their health	0.616	0.106	−2.83	0.005	0.44	0.862	***
	has a chronic disease	0.863	0.217	−0.59	0.558	0.528	1.412	
	education							
	Bachelor's degree	0.971	0.202	−0.14	0.887	0.645	1.461	
	Master's degree and above	1.784	0.593	1.74	0.082	0.93	3.424	*
	food_expenditures							
	1–2 million soum	0.857	0.228	−0.58	0.561	0.508	1.444	
	2–4 milllion soum	0.695	0.185	−1.37	0.171	0.412	1.171	
	Above 4 million soum	0.61	0.185	−1.63	0.103	0.337	1.105	
	Indebtedness	1.038	0.173	0.22	0.822	0.749	1.439	
	Personal income							
	1–5 million soum	0.944	0.306	−0.18	0.858	0.5	1.781	
	5–9 milllion soum	1.036	0.371	0.10	0.922	0.513	2.09	
	Above 10 million soum	0.722	0.359	−0.66	0.512	0.273	1.911	
	Constant	0.835	0.397	−0.38	0.704	0.329	2.118	
5.	**Dependence**							
	gender	0.716	0.155	−1.55	0.122	0.468	1.094	
	age							
	30–39	0.809	0.316	−0.54	0.587	0.376	1.74	
	40 and above	0.449	0.171	−2.11	0.035	0.214	0.945	**
	residence							
	urban	1.052	0.196	0.27	0.783	0.731	1.515	
	region							
	low-poverty level	1.582	0.406	1.78	0.074	0.956	2.617	*
	high-poverty level	2.162	0.41	4.07	0	1.491	3.135	***
	health status							
	healthy, never visited doctor	1.175	0.272	0.70	0.486	0.747	1.849	
	healthy, regularly checks the health	0.759	0.153	−1.37	0.172	0.512	1.127	
	has a chronical disease	0.382	0.149	−2.46	0.014	0.178	0.821	**
	education							
	Bachelor degree	0.85	0.201	−0.68	0.493	0.535	1.352	
	Master's degree and above	1.237	0.495	0.53	0.596	0.564	2.709	
	food_expenditures							
	1–2 million soum	1.301	0.437	0.78	0.433	0.674	2.512	
	2–4 milllion soum	1.268	0.425	0.71	0.479	0.657	2.447	
	Above 4 million soum	0.904	0.352	−0.26	0.796	0.421	1.94	
	Indebtedness	1.156	0.228	0.73	0.464	0.785	1.703	
	Personal income							
	1–5 million soum	0.561	0.19	−1.71	0.088	0.289	1.089	*
	5–9 milllion soum	0.408	0.161	−2.27	0.023	0.189	0.884	**
	Above 10 million soum	0.251	0.165	−2.10	0.036	0.069	0.911	**
	Constant	0.768	0.412	−0.49	0.623	0.268	2.2	

Table 3. *Cont.*

Theme	RRR.	St. Err.	t-Value	*p*-Value	[95% Conf	Interval]	Sig
6. **Uneducated**							
gender	1.31	0.623	0.57	0.57	0.516	3.327	
age							
30–39	0.26	0.163	−2.15	0.032	0.076	0.888	**
40 and above	0.109	0.065	−3.71	0	0.034	0.351	***
residence							
urban	0.658	0.297	−0.93	0.354	0.271	1.595	
region							
low-poverty level	1.683	0.898	0.98	0.33	0.591	4.788	
high-poverty level	1.369	0.633	0.68	0.498	0.553	3.389	
health status							
healthy; never visited a doctor	2.716	1.568	1.73	0.083	0.876	8.418	*
healthy; regularly checks their health	1.827	0.989	1.11	0.265	0.633	5.279	
has a chronic disease	0.722	0.807	−0.29	0.771	0.081	6.458	
education							
Bachelor's degree	5.465	5.719	1.62	0.105	0.703	42.503	
Master's degree and above	7.258	8.634	1.67	0.096	0.705	74.713	*
food_expenditures							
1–2 million soum	0.663	0.409	−0.67	0.505	0.198	2.219	
2–4 milllion soum	0.297	0.195	−1.85	0.064	0.082	1.073	*
Above 4 million soum	0.31	0.242	−1.50	0.134	0.067	1.432	
Indebtedness	0.834	0.365	−0.41	0.679	0.354	1.968	
Personal income							
1–5 million soum	2.808	3.158	0.92	0.359	0.31	25.444	
5–9 milllion soum	3.225	3.844	0.98	0.326	0.312	33.35	
Above 10 million soum	4.888	6.74	1.15	0.25	0.328	72.923	
Constant	0.026	0.04	−2.37	0.018	0.001	0.53	**
7. **Ungrateful**							
gender	1.207	0.361	0.63	0.53	0.671	2.17	
age							
30–39	0.22	0.103	−3.25	0.001	0.088	0.549	***
40 and above	0.142	0.061	−4.53	0	0.061	0.331	***
residence							
urban	1.025	0.285	0.09	0.93	0.594	1.766	
region							
low-poverty level	1.191	0.499	0.42	0.676	0.524	2.706	
high-poverty level	2.54	0.719	3.29	0.001	1.458	4.424	***
health status							
healthy; never visited a doctor	0.993	0.361	−0.02	0.985	0.487	2.025	
healthy; regularly checks their health	0.959	0.29	−0.14	0.89	0.53	1.734	
has a chronic disease	0.626	0.332	−0.88	0.377	0.222	1.77	
education							
Bachelor's degree	1.217	0.447	0.54	0.592	0.593	2.5	
Master's degree and above	1.203	0.721	0.31	0.758	0.372	3.892	
food_expenditures							
1–2 million soum	0.598	0.239	−1.28	0.199	0.273	1.31	
2–4 milllion soum	0.413	0.168	−2.17	0.03	0.186	0.916	**
Above 4 million soum	0.262	0.137	−2.56	0.01	0.094	0.729	**
Indebtedness	0.869	0.247	−0.49	0.621	0.497	1.517	
Personal income							
1–5 million soum	1.437	0.824	0.63	0.527	0.467	4.424	
5–9 milllion soum	2.804	1.73	1.67	0.095	0.837	9.394	*
Above 10 million soum	3.15	2.546	1.42	0.156	0.646	15.357	
Constant	0.481	0.341	−1.03	0.301	0.12	1.929	

Table 3. *Cont.*

Theme		RRR.	St. Err.	t-Value	*p*-Value	[95% Conf	Interval]	Sig
8.	**Poverty does not exist**							
	gender	1.453	0.537	1.01	0.312	0.704	2.998	
	age							
	30–39	0.511	0.44	−0.78	0.436	0.094	2.77	
	40 and above	0.575	0.464	−0.69	0.493	0.118	2.799	
	residence							
	urban	0.825	0.3	−0.53	0.596	0.405	1.681	
	region							
	low-poverty level	1.212	0.6	0.39	0.697	0.46	3.198	
	high-poverty level	1.619	0.571	1.37	0.172	0.811	3.231	
	health status							
	healthy; never visited doctor	0.568	0.262	−1.23	0.22	0.23	1.403	
	healthy; regularly checks their health	0.435	0.161	−2.25	0.024	0.211	0.898	**
	has a chronic disease	0.306	0.232	−1.56	0.119	0.069	1.354	
	education							
	Bachelor's degree	1.549	0.796	0.85	0.395	0.565	4.244	
	Master's degree and above	1.478	1.348	0.43	0.668	0.247	8.831	
	food_expenditures							
	1–2 million soum	1.57	1.02	0.70	0.487	0.44	5.605	
	2–4 milllion soum	1.033	0.68	0.05	0.961	0.284	3.754	
	Above 4 million soum	0.461	0.392	−0.91	0.362	0.087	2.438	
	Indebtedness	0.973	0.354	−0.07	0.941	0.477	1.987	
	Personal income							
	1–5 million soum	2.219	2.393	0.74	0.46	0.268	18.377	
	5–9 milllion soum	3.438	3.846	1.10	0.27	0.384	30.793	
	Above 10 million soum	0	0.005	−0.03	0.978	0	.	
	Constant	0.043	0.058	−2.32	0.02	0.003	0.611	**
9.	**No answer**							
	gender	0.581	0.132	−2.40	0.017	0.373	0.906	**
	age							
	30–39	0.297	0.101	−3.58	0	0.153	0.578	***
	40 and above	0.168	0.054	−5.53	0	0.09	0.317	***
	residence							
	urban	1.17	0.219	0.84	0.403	0.81	1.689	
	region							
	low-poverty level	1.398	0.354	1.33	0.185	0.852	2.295	
	high-poverty level	1.639	0.319	2.54	0.011	1.119	2.402	**
	health status							
	healthy; never visited a doctor	1.211	0.299	0.78	0.438	0.746	1.965	
	healthy; regularly checks their health	1.043	0.219	0.20	0.84	0.691	1.575	
	has a chronic disease	0.988	0.323	−0.04	0.97	0.521	1.874	
	education							
	Bachelor's degree	0.591	0.133	−2.34	0.019	0.38	0.919	**
	Master's degree and above	0.961	0.346	−0.11	0.912	0.474	1.947	
	food_expenditures							
	1–2 million soum	0.667	0.201	−1.34	0.18	0.369	1.205	
	2–4 milllion soum	0.574	0.173	−1.84	0.065	0.318	1.036	*
	Above 4 million soum	0.674	0.228	−1.17	0.243	0.347	1.307	
	Indebtedness	0.857	0.163	−0.81	0.418	0.59	1.245	
	Personal income							
	1–5 million soum	0.895	0.315	−0.31	0.754	0.449	1.786	
	5–9 milllion soum	1.162	0.453	0.38	0.701	0.541	2.496	
	Above 10 million soum	1.138	0.593	0.25	0.804	0.41	3.161	
	Constant	2.835	1.381	2.14	0.032	1.091	7.366	**
	Mean dependent var		3.462			SD dependent var	2.561	
	Pseudo r-squared		0.043			Number of obs	1949	
	Chi-square		322.529			Prob > chi2	0.000	
	Akaike crit. (AIC)		7397.077			Bayesian crit. (BIC)	8244.488	

*** $p < 0.01$, ** $p < 0.05$, * $p < 0.1$.

Overall, the findings should be read in light of the composition of the sample. Because respondents were purposively drawn from social-benefit recipients, the study captures how poverty is perceived by people who are themselves experiencing or proximate to poverty, rather than the attitudes of the general public. Prior research on poverty stigma indicates that self-attribution among people experiencing poverty is a distinct phenomenon from stigmatizing attitudes expressed by non-poor observers, with different psychological mechanisms and different implications for well-being and policy [64]. Accordingly, the finding that individualistic attributions dominate should not be read as evidence that Uzbekistani society at large blames the poor for their circumstances; it instead suggests that individualistic framings have been internalized by many of the people directly affected by poverty. Thus, the findings are described throughout as perceptions among the sampled population and are not generalized to nationwide or public perceptions of poverty in Uzbekistan.

5. Conclusions

Poverty is a complex problem that requires different approaches to understand and measure it. This paper seeks to understand how social-benefit recipients perceive and define poverty in Uzbekistan. For this purpose, three research questions were put forward. To answer the research questions, 1949 respondents were asked to participate in the survey. The survey included both closed-ended and open-ended questions. Based on the respondents' answers, a mixed-methods approach was applied for the analysis. Initially, open-ended questions were coded and the answers were divided into topics in order to conduct the thematic analysis. Next, based on the output of the thematic analysis, the multinomial logistic regression model was constructed.

The results of the thematic analysis addressed the two research questions. In response to research question 1 ("How do social-benefit recipients in Uzbekistan define and explain poverty?"), the findings indicate that the majority of participants defined poverty as being lazy or unwilling to work, followed by being unemployed and having a low income. Regarding research question 2 ("Which underlying attribution frames predominate in these perceptions?"), it was found that the individualistic attribution frame predominated in the poverty perceptions of the sampled group.

In order to find an answer to the third research question ("Which demographic and monetary characteristics are associated with holding particular attributions of poverty?"), the multinomial logistic regression model was constructed. This model used the theme of "laziness" as a base outcome. The output of the model indicated that the most statistically significant demographic factors explaining the determinants of poverty perceptions were age, regional poverty clusters and residence, while personal income had the highest explanatory effect among monetary factors.

This study makes several contributions. First, it presents the first systematic, mixed-methods assessment of how social assistance recipients in Uzbekistan perceive and define poverty. Second, it demonstrates that thematically derived qualitative categories can be meaningfully integrated into a multinomial regression framework, offering a methodological model applicable to other survey-based perception studies. Third, the findings extend attribution theory research to Central Asia, a region that remains underrepresented in this literature.

It should be noted that this study has several limitations. First, the sample of 1949 respondents, drawn from recipients of social benefits, cannot be generalized to the full Uzbekistani population. Second, because respondents are themselves largely people receiving social benefits, the perceptions reported here are self-referential and may reflect internalized stigma rather than the stigmatizing attitudes of the general public; they should

not be read as nationwide or public perceptions. Third, as respondents completed the survey independently, some degree of subjective response bias cannot be excluded. Fourth, although the qualitative responses were independently reviewed and coded by three researchers, formal inter-coder reliability statistics, such as Cohen's kappa or Krippendorff's alpha, were not calculated, and, therefore, some degree of coder subjectivity cannot be entirely excluded. Finally, the results of the multinomial logistic regression are sensitive to the choice of base outcome; alternative reference categories would yield different coefficient estimates, though the overall pattern of findings is unlikely to change substantially.

Future research could increase the diversity of the sample, incorporate objective living condition indicators alongside perceptual measures, and include culturally specific items relevant to Uzbekistani conceptions of poverty and social obligation. It could also survey a general-population comparison sample so that self-referential and public perceptions can be distinguished. A promising complementary avenue is a discourse-analytic examination of public, news-media, policy, and educational discourses, which could help explain the sources of Uzbek households' beliefs about poverty.

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