SOCIAL PROTECTION SYSTEMS

TYING THE KNOTS

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Leave nobody behind

Designing systemic poverty/hunger reduction programmes for Least Developed Countries

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List of Abbreviations

AIDS	Acquired Immune Deficiency Syndrome
GDP	Gross Domestic Product
HIV	Human immunodeficiency virus
IHS	Integrated Household Survey
ILO	International Labour Office
LDC	Least Developped Country
LISGIS	Liberia Institute of Statistics and Geo-Information Services
MK	Malawi Kwatcha
MSCTS	Malawi Social Cash Transfer Scheme
ODI	Overseas Development Institute
OVC	Orphans and Vulnerable Children
UNCEF	United Nations Children Fund

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Abstract

In the process of defining and prioritizing target groups for systemic poverty reduction programmes, governments have to choose between programmes with universal targeting and programmes with poverty targeting and between categorical concepts and inclusive concepts. This paper analyses target group options ranging from categorical schemes like social pensions or child grants to inclusive programmes targeting all ultra poor households.

The paper assesses each type of program against a set of criteria including the number of households that would be covered, annual costs in USD and in per cent of GDP, percentage of program funds allocated to ultra poor households[1], percentage of ultra poor households reached and percentage of ultra poor households excluded. All options are also discussed with regard to the danger of creating a dependency syndrome.

When choosing between options for providing effective social protection systems under conditions of severe financial and administrative constraints, LDC governments should opt for a systemic approach that is designed to achieve the following results/benefits:

1. Include all ultra poor households – leave nobody behind. Being excluded from poverty/hunger reduction programmes can mean the difference between life and death for members of ultra poor households (food poor households)
2. Restrict social assistance to households that are ultra poor and consist exclusively or mainly of vulnerable persons (OVC, elderly, disabled, chronically sick, single mothers with many children)
3. Ensure that ultra poor households with labour capacity are not provided with long-term social assistance but with access to labour-based programs. This reduces dependency syndrome fears.

As a result of assessing different options for achieving the results listed above, the author arrives at the conclusion that for LDCs categorical programs are not the best choice for effective systems of poverty/hunger reduction. Categorical programs tend to exclude large groups of ultra needy people and/or exceed the financial and administrative capacities of LDCs. LDC governments can best achieve the above social protection results by implementing inclusive programs that provide social assistance to all ultra poor labour constrained households and access to labour-based activities to all ultra poor labour-endowed households (public works, livelihood programmes) combined with access to basic social services.

Keywords

Inclusive social protection in LDCs; Leave nobody behind; Systemic Social Cash Transfers; Categorical targeting versus inclusive targeting.

[1] Ultra poor households are households living below the food poverty line

1 Introduction

Designing a system for social transfers involves a number of interrelated tasks. One of the main tasks is to define who should receive transfers. Should the beneficiaries be households or individuals? Should the transfers be universal (irrespective of income) or restricted to the needy? Should the beneficiaries be defined by category (e.g. the elderly or orphans) or should cash transfer programs be inclusive (covering all categories of needy persons)? Other tasks are to design the targeting mechanism to be used, the volume of transfers to be provided, the delivery mechanism and a number of administrative and organizational issues.

This paper is focussed on the first task – how to define the target groups. It analyses program options for providing effective social protection under conditions of severe financial and administrative constraints faced by Least Developed Countries (LDCs). Effective social protection means giving priority 1.) to reaching the poorest households and 2.) to reaching all of them. How can LDC governments ensure that their social transfer system covers all ultra needy households and leaves nobody behind?[2]

To answer this question the paper assesses different target group concepts in the context of one country (Malawi). Empirical data on the income distribution and demographic structure of the population in Malawi are used for the assessment of a variety of target group options ranging from categorical schemes like social pensions or child grants to inclusive programs targeting all ultra poor households. All options are assessed against a set of criteria. These criteria include the number of households that would be covered, annual costs in USD and in per cent of GDP, percentage of program funds allocated to ultra poor households, percentage of ultra poor households reached and percentage of ultra poor households excluded. All options are also discussed with regard to the danger of creating a dependency syndrome.

In order to give a practical example the paper describes how the definition of the target groups for social transfers has been addressed in the context of the Malawi Social Cash Transfer Scheme (MSCTS). The MSCTS started in September 2006 in Mchinji District and has since been scaled up. By April 2009 the program covered 7 districts (out of in total 28 districts in Malawi) and reached 23,561 beneficiary households with a population of 92,786, of which 48,036 were OVC; 16,981 were elderly (65+); and 1,951 were people living with disabilities. By December 2015 the MSCTS had scaled up to 18 districts and reached 163,000 households. The volume of the transfer depends on household size and includes a bonus for households with children who attend school. On average, households receive the equivalent of USD 14 per month. The MSCTS is managed by the District Assemblies supported by a National Secretariat hosted in the Ministry of Women and Child Development.

[2] E.g. in Liberia post neonatal mortality (death of children aged 2 to 12 months per 1,000 live birth) for the period 2002 to 2006 is 71 for the poorest quintile compared to 41 for the middle and 39 for the richest quintile. Infant mortality is 100 for the poorest, 81 for the middle and 70 for the richest quintile (LISGIS 2008). In Senegal infant mortality is 183 for the poorest, 136 for the middle and 64 for the richest quintile. In Ghana it is 128 – 111 – 88 (ODI/UNICEF 2009)

2 Defining target groups

There are many options for defining the target groups of a social cash transfer scheme:

- Beneficiaries can be individuals or families/households
- Target groups can be specific vulnerable groups like OVC, elderly persons, people living with disabilities or people affected by HIV and AIDS (these are called categorical schemes because they target a specific category of persons), or target groups can include all persons or households who are poor or ultra poor (these are inclusive schemes because they include all vulnerable groups in the poorest category)
- Categorical schemes can be universal (targeting all OVC or all persons beyond a certain age) or means-tested (targeting only poor persons of the respective category)
- Transfers can be conditional (e.g. given under the condition that children will attend school) or unconditional (no conditions attached to receiving the transfer).

The most common types of cash transfers implemented in developing countries are:

1. Universal categorical programmes like social pensions for all persons beyond a certain age (e.g. the universal social pensions in Mauritius and Lesotho), or a child grant (e.g. all primary school age children in Bolivia)
2. Means-tested categorical programmes like the social pension and the child grant in South Africa
3. Means-tested inclusive social cash transfer programmes targeting ultra poor households unable to fend for themselves because they are labour constrained (e.g. implemented in Zambia, Malawi, Liberia, Zimbabwe and Ethiopia)
4. Means-tested large conditional social cash transfer schemes are found in a number of Latin American countries. They are categorical programmes targeting poor families with children under the condition that the children regularly attend school and health services.

In general, all the various types of social cash transfers listed above provide social protection to their beneficiary households. However, the degree of poverty reduction resulting from various types of cash transfers and the cost-efficiency of the respective schemes differ.

Universal transfers equally benefit poor persons and non-poor persons. This means that only part of the transfer contributes to poverty reduction while a part is paid to people who do not really need it.

Categorical programs – even if they are means-tested – focus on certain categories of vulnerability and exclude all other categories. In order to reach all vulnerable groups, South Africa implements seven means-tested categorical schemes simultaneously[3]. If poor countries, which do not have the financial resources and/or the implementation capacities to run more

[3] An old age pension, a child support grant, a foster child grant, a disability grant, a care dependency grant, a grant-in-aid and a war-veteran's grant

than one scheme, focus on a categorical scheme, they exclude all the ultra needy households from social protection, which do not fit into that specific category.

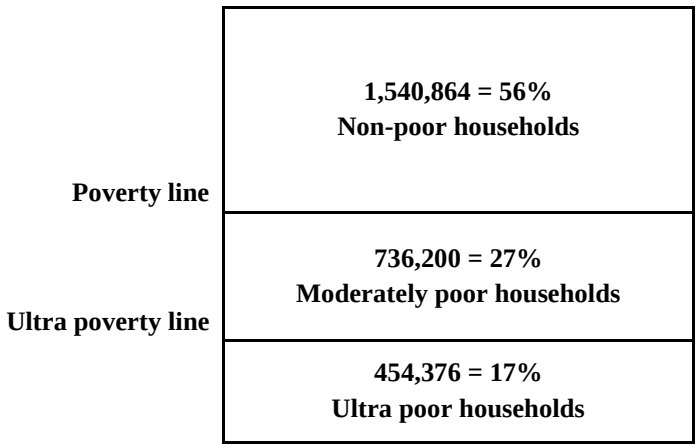
Conditional cash transfer schemes are mostly categorical (they typically target households with children). Most of them penalise those households who are not fulfilling conditions such as regular school attendance. The penalised households are often the poorest households. Reasons for not meeting the conditions could be child-abuse, child pregnancies or domestic child labour, indicating that the respective households require not less but more social protection. In countries where many children are unable to enrol because of supply deficits (e.g. lack of schools), conditional transfers are not appropriate.

2.2 The process of defining target groups for the Malawi Social Cash Transfer Scheme

In 2004 Malawi had a population of 12,328,400 living in 2,731,440 households. According to the 2004/5 Integrated Household Survey (IHS2) 52% of the population were poor and 22% were ultra poor. Because ultra poor households are bigger than average households, the distribution of households is different: 44% of all households were poor and 17% were ultra poor (see Figure 1). The poverty line was defined as MK 44 per person per day (in 2005 prices), equivalent to USD 0.3. The ultra poverty line (food poverty) was defined as MK 27, equivalent to USD 0.2.

The Malawi Social Cash Transfer Scheme is based on the Social Protection Policy and the Malawi Growth and Development Strategy. The main objectives of the Social Protection Policy are to reduce and eventually eliminate ultra poverty and to prevent moderately poor households and non-poor households from falling into ultra poverty. The policy states: “Social Support is defined as all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks, and enhance the social status and the rights of the marginalised, with the overall objective of reducing ultra poverty as well as economic and social vulnerability of the poor and marginalised groups” (Government of Malawi, 2009).

Figure 1: Poverty profile of the 2,731,440 households living in Malawi (2004)



Source: Malawi Integrated Household Survey 2004/2005

In order to reduce and eventually eliminate ultra poverty (food poverty) in the context of scarce financial resources and limited implementation capacity, planners and policy makers had to choose between different types of programmes designed to reach different types of target groups.

2.2.1 Options for defining target groups

This chapter lists the eight options that have been discussed and analysed in the process of defining the target groups for a social cash transfer programme. For each option the following information is provided:

- Total number of households and number of ultra poor households that would be reached
- Number of ultra poor households that would be excluded
- The estimated total costs (cash transfers plus administrative costs) of the respective option
- Other pros and cons of each option.

All estimates given below assume perfect targeting[4]. They also assume that the appropriate average transfer level per household is USD 14 per month. This level is required irrespective if a household or an individual (such as an elderly or an OVC) is targeted because the consumption unit is assumed to be always the whole household[5]. The estimates further assume that the administrative costs of targeting, retargeting, delivery and all overheads are USD 32 per household per year. Total annual costs (transfers and administrative costs) are therefore estimated at USD 200 per beneficiary household.[6]

The estimates of the number of households with one or more elderly persons (65+) and the estimates of the number of households with one or more children aged 0 to 3 as well as the estimates of the number of households that have elderly as well as 0 to 3 aged children have been calculated in cooperation with the National Statistics Office (see Appendix).

2.2.1.1. Universal old age pensions

Approximately 388,000 households (14% of all households) include an elderly person aged 65+. All of these households would receive the pension. Annual costs of the scheme would be USD 78 million. 202,000 of the 388,000 households (51%) are non-poor, 116,000 (30%) are

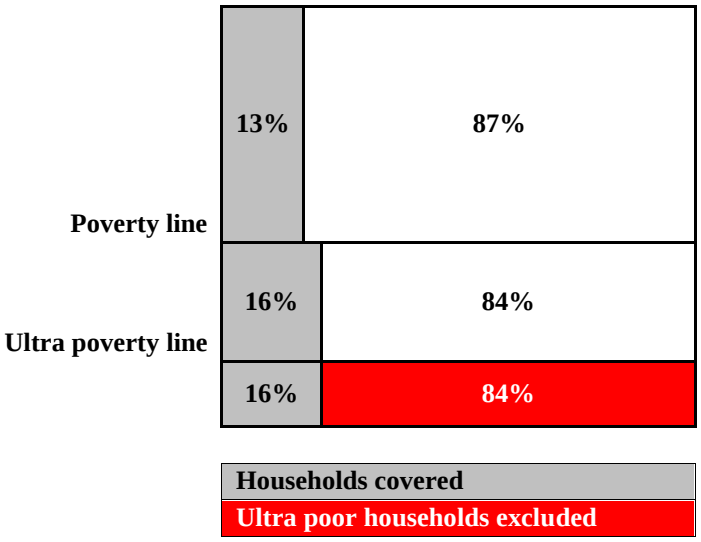
[4] This assumption is unrealistic for all options because no transfer scheme has ever achieved perfect targeting. There is, however, no evidence that would permit to allocate specific targeting error margins to each option analysed below.

[5] "Pension incomes have been shown in numerous studies to be treated by recipients as household income, and are spent to the benefit of all household members" (Ellis et al. 2009)

[6] The parameters for level of transfers and for administrative costs are those used by the Malawi Social Cash Transfer Scheme. To ensure comparability the same parameters have been used for all 8 options analysed below. On average USD 14 per month is required to lift ultra poor households above the ultra poverty line. The annual administration costs of USD 32 correspond to the 15% used by the ILO for their simulations of universal social pensions and child grants (International Labour Office 2008).

moderately poor, and 74,000 (19%) are ultra poor. This means that 19% of the total benefits of the programme would reach the ultra poor households. If this were the only cash transfer scheme in Malawi, 84% (380,000 of 454,000) of the ultra poor households (all those with no elderly person) would be excluded (see Figure 2).

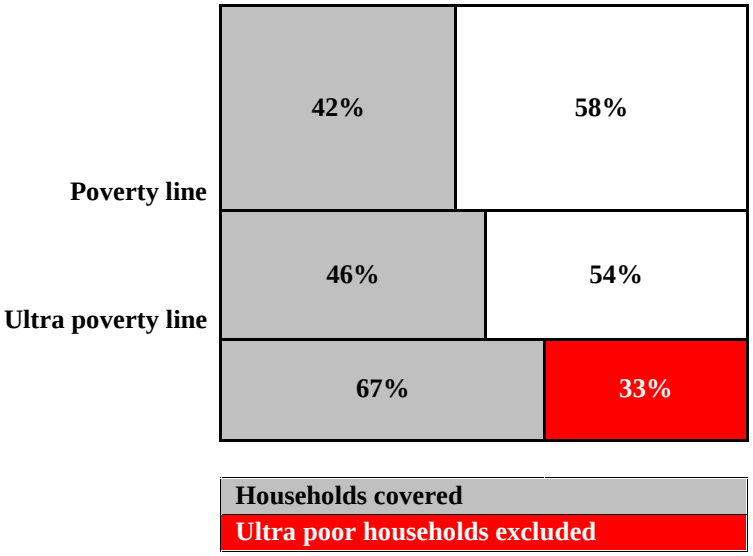
Figure 2: Coverage of ultra poor, moderately poor and non-poor households by a universal old age pension scheme.



2.2.1.2 Universal child grant

Approximately 1,379,000 households (51 % of all households) have a child aged 0 to 3. All of these households would receive the grant. Annual costs of covering these households would be USD 276 million. 654,000 of the 1,379,000 households (47%) are non-poor, 410,000 (31%) are moderately poor and 302,000 (22%) are ultra poor. This means that 22% of the total programme benefits go to the ultra poor. If this were the only cash transfer scheme 33% (152,000 of 454,000) of the ultra poor households (all those who have no child aged 0 to 3) would be excluded (Figure 3).

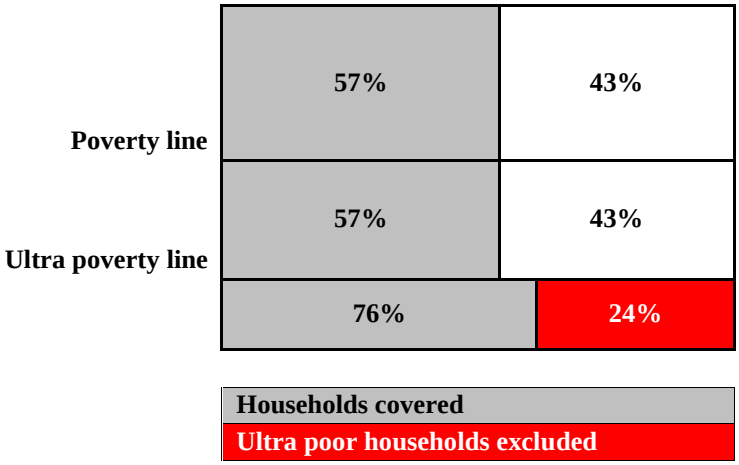
Figure 3: Coverage of ultra poor, moderately poor and non-poor households by a universal child grant.



2.2.1.3 Combination of universal old age pension with auUniversal child grant

Such a programme would reach approximately 1,685,000 households (62% of all households). Annual costs of covering these households would be USD 337 million. 831,000 of the 1,685,000 households (49%) are non-poor, 509,000 (30%) are moderately poor and 345,000 (21%) are ultra poor. If this were the only cash transfer scheme 24% (109,000 of 454,000) of the ultra poor households (all those who neither include an elderly person nor a child aged 0 to 3) would be excluded.

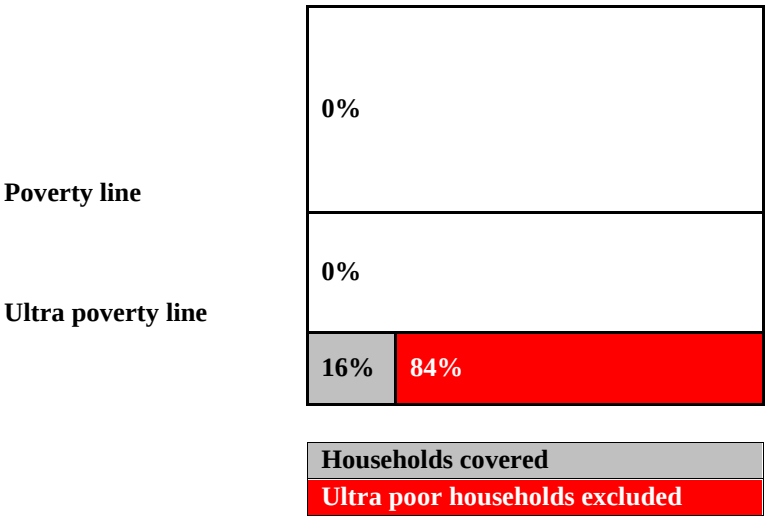
Figure 4: Coverage of ultra poor, moderately poor and non-poor households by a universal old age pension combined with a universal child grant.



2.2.1.4 Means-tested old age pension

Approximately 74,000 ultra poor households include an elderly person 65+ (2.7% of all households). Annual costs of covering these households would be USD 15 million. All programme funds would benefit ultra poor households. But 84% of the ultra poor households (all those who have no elderly person) would be excluded (see Figure 5).

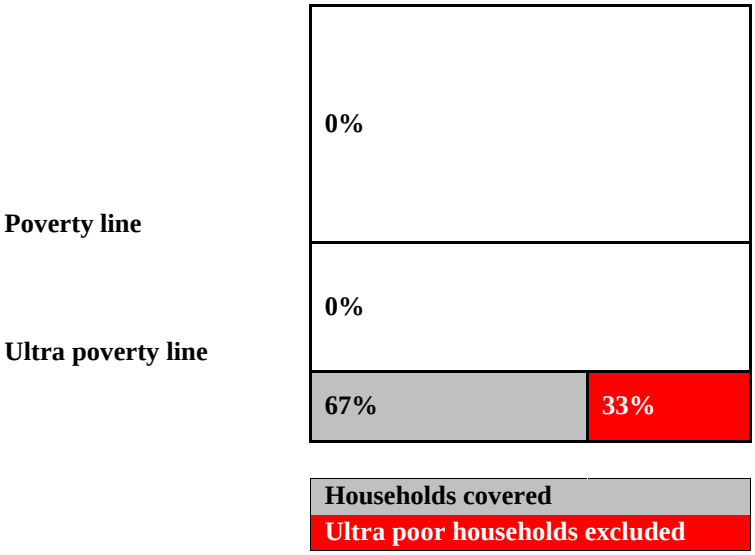
Figure 5: Coverage by a means-tested old age pension scheme.



2.2.1.5 Means-tested child grant

Approximately 302,000 ultra poor households have a child aged 0 to 3 (11 % of all households). Annual costs of covering these households would be USD 60 million. All the programme funds would benefit ultra poor households. However, 33% of the ultra poor households (those who have no child aged 0 to 3) would be excluded (see Figure 6).

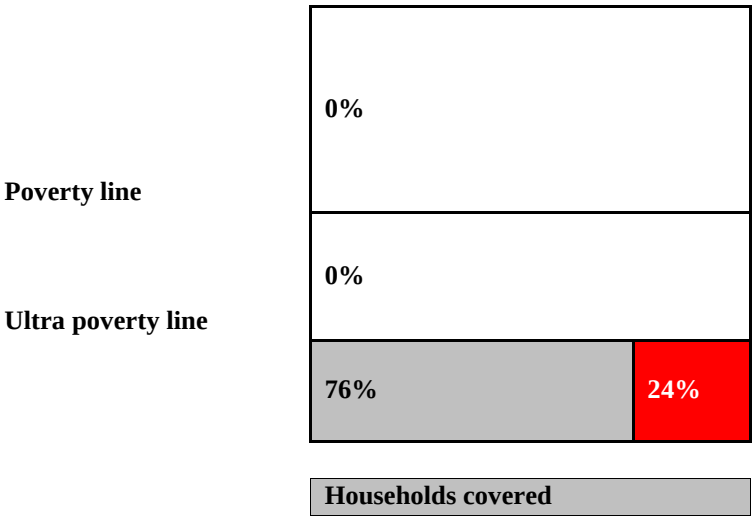
Figure 6: Coverage of by a means-tested child grant.



2.2.1.6 Combination of means-tested old age pension with a means-tested child grant

Such a programme would reach approximately 346,000 households (13% of all households). Annual costs would be USD 69 million. Transfers would benefit exclusively ultra poor households. If these were the only cash transfer schemes, 24% (109,000 of 454,000) of the ultra poor households (those who have no elderly person or no child aged 0 to 3) would be excluded (see Figure 7).

Figure 7: Coverage by a combination of a means-tested old age pension and a means-tested child grant.

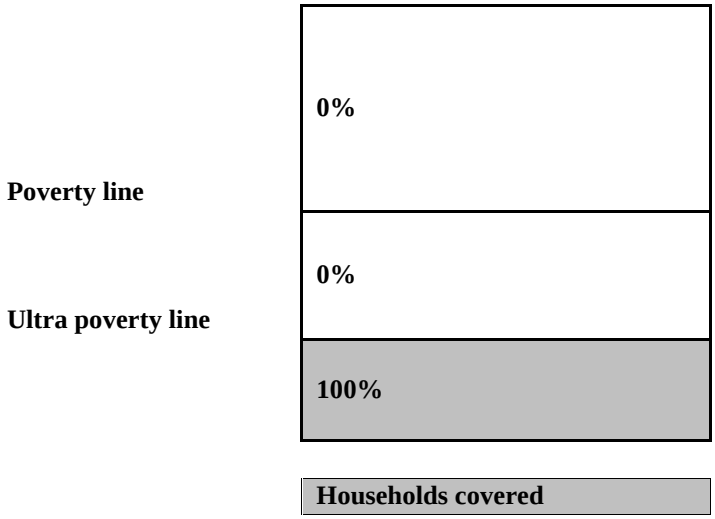


Ultra poor households excluded

2.2.1.7 Programme targeting all ultra poor households

This programme would reach 454,000 households (17% of all households). Annual cost would be USD 91 million. The transfers would benefit exclusively ultra poor households. All ultra poor households would be covered thereby eliminating ultra poverty (see Figure 8). Moderately poor households and non-poor households would be excluded.

Figure 8: Coverage by a programme that targets all ultra poor households.

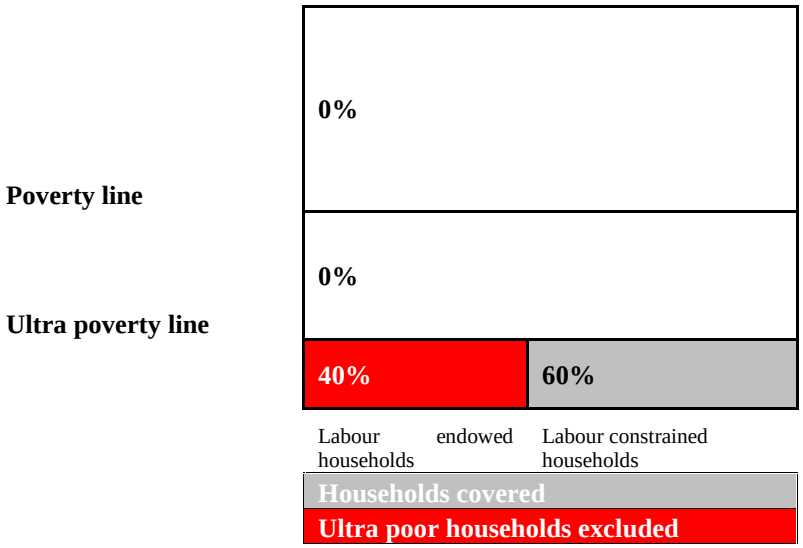


2.2.1.8 Programme targeting all ultra poor households that are at the same time labour constrained

Labour constrained are those households that have no able-bodied adult household member (age group 19 to 64) who is fit for productive work and those households where one able-bodied adult must care for more than three dependents. Labour constrained households consist mainly of children, elderly persons, people living with disabilities and chronically sick persons. They are unable to fend for themselves and depend on outside assistance because they lack the capacity to engage in productive work.

In Malawi approximately 273,000 households (10% of all households) are ultra poor and at the same time labour constrained. Annual costs of covering all of these households are USD 55 million. Programme funds would exclusively benefit the ultra poor. However, the 181,000 ultra poor households that are not labour constrained (40% of all ultra poor households) would be excluded from this scheme (see Figure 9).

Figure 9: Coverage by a programme targeting ultra poor households that are at the same time labour constrained.



2.2.2 Criteria for Choosing between Different Options

1. As the Social Protection Policy gives high priority to reducing and eventually eliminating ultra poverty, funds allocated for social protection should benefit primarily ultra poor households. Being excluded from social transfers can mean the difference between life and death for members of ultra poor households. Therefore preference is given to programmes that reach all or at least a high percentage of the ultra poor households.
2. All members of vulnerable groups living in precarious circumstances (OVC, elderly, disabled, chronically sick, single mothers with many children) should be given equal priority and access to social cash transfers.
3. Stakeholders in Malawi feel strongly that a dependency syndrome has to be avoided. A social cash transfer programme should therefore be designed in such a way as not to create dependency.
4. Total costs of the programme should not exceed a sustainable financed amount. It is assumed that 2% of GDP (USD 80 million) is the upper limit for a social cash transfer scheme in Malawi. This assumption is based on numerous discussions with planners and policy makers in Malawi.

2.2.3 Assessment of different options against criteria

The **universal categorical programmes** (options 1, 2, and 3) transfer between 78% and 81% of programme funds to non-poor and moderately poor households (see Table 1). This means that they are not poverty oriented. Option 1 (universal old age pension) excludes a high number of ultra poor households. Option 2 (universal child grants) and option 3 (combining universal old age pensions with universal child grants) reach a higher number of ultra poor households but still exclude between 39% and 24%. Additionally, option 2 has programme costs of USD 276 million (6.9 % of GDP) while option 3 costs USD 337 million (8.5% of GDP). Both cannot be financed in a sustainable manner.

The **means-tested categorical programmes** (options 4, 5 and 6) concentrate programme funds on ultra poor households. In terms of programme costs they are affordable. However they exclude a large percentage of the ultra poor households.

The **universal child grants and the means-tested child grants** (options 2, 3, 5 and 6) are restricted to households with children aged 0 to 3. This seems to makes sense because at this age a balanced diet and appropriate medical care are essential for health and survival. However, older children living in ultra poor households are also deprived of basic needs. A restriction to only age group 0 to 3 is therefore unsatisfactory. Nevertheless, including all households with children up to an age of 14, 16 or 18 years would increase programme costs to unsustainable levels.

An **inclusive programme for all ultra poor households** (option 7) concentrates programme funds on the ultra poor and reaches all ultra poor households. However, the programme would cost USD 91 million per year, which is 2.3% of GDP.

All the options discussed above (options 1 to 7) could create a **dependency syndrome.** A large proportion of the households reached by programme options 1 through 7 are not labour constrained. Each of these programmes provides social assistance to households that have unused or underused labour capacity. These households could work themselves out of poverty if provided access to labour-based programmes. If they become dependent on long term social transfers they could end up in a poverty trap.

An **inclusive programme for all ultra poor households that are at the same time labour constrained** (option 8) is the only option that does not create dependency. All of these households are already dependent on outside assistance. They cannot fend for themselves – even if they have access to labour-based programmes – because in principle they consist exclusively of children, the elderly, persons living with disabilities and chronically sick people. The programme concentrates its resources on the 273,000 ultra poor and at the same time labour constrained households, and excludes the 181,000 ultra poor households that are not labour constrained. The programme costs USD 55 million, equivalent to 1.4% of the GDP.

Table 1: Comparison of different social cash transfer options

Option	Total number of households reached	Annual costs in million USD	Annual costs in % of GDP	% of funds allocated to the ultra poor	Number of ultra poor households reached	% of ultra poor households reached	% of ultra poor households excluded
1. Universal old age pensions	388,000	78	2.0%	19%	74,000	16%	84%
2. Universal child (0 -3) grant	1,379,000	276	6.9%	22%	302,000	67%	33%
3.Combination of universal old age pension with universal child grant	1,685,000	337	8.5%	21%	345,000	76%	24%
4. Means-tested old age pension	74,000	15	0.4%	100%	74,000	16%	84%
5. Means-tested child grant	302,000	60	1.5%	100%	302,000	67%	33%
6.Combination of means-tested old age pension with means-tested child grant	346,000	69	1.7%	100%	346,000	76%	24%
7. Programme targeting all ultra poor households	454,000	91	2.3%	100%	454,000	100%	0%
8. Programme targeting all ultra poor households that are at the same time labour constrained	273,000	55	1.4%	100%	273,000	60%	40%

Estimates of the number of households per category are based on the Integrated Household Survey 2004/5 (IHS2). For details see Appendiz.
Estimates on annual programme costs have been based on USD 200 per household per year (USD 168 for transfers plus USD 32 for administration).

2.2.4 The most appropriate target group for social cash transfers in Malawi

After considering the pros and cons of all options listed above and accepting as valid the assumptions made, option 8 appeared to be the most appropriate choice for Malawi. This means that cash transfers in the form of long term social assistance should be exclusively targeted to the 273,000 ultra poor households that are at the same time labour constrained (option 8). In the framework of a comprehensive Social Protection Programme the other 181,000 ultra poor households, which are not labour constrained, have to be targeted by labour-based programmes.

By choosing this option and by supplementing social cash transfers for ultra poor households that are labour constrained with labour-based social protection schemes for the labour endowed ultra poor households, planners and policy makers aim at:

- Eliminating ultra poverty and reduce absolute poverty
- Avoiding the creation of a dependency syndrome (because ultra poor labour constrained households are already dependent on external assistance)
- Providing meaningful social protection that can be sustainably funded.

Human rights considerations justify this choice: Ultra poor households are denied the most essential social and economic human rights – the right to food, clothing, shelter, basic health care, education, and even survival. Social transfers focused on the ultra poor provide access to basic needs for the most deprived section of the population. Targeting the ultra poor ensures the highest possible welfare impact per financial unit spent by a cash-based social assistance programme.

3. Conclusions

Least Developed Countries are burdened with a large number of poor and vulnerable households. At the same time their financial and administrative capacity to implement social protection programmes is severely limited. This forces them to set clear priorities when defining target groups for social protection programs. To achieve maximum welfare gains from each Dollar spent on social protection they should focus their limited resources on the poorest households and leave nobody of the poorest behind.

The analysis of the Malawi example shows that this cannot be achieved by implementing a categorical cash transfer program. A means tested social pension or a means tested child grant excludes a large share of ultra poor households. Implementing two or more categorical programs simultaneously with full geographical coverage is not feasible due to resource constraints and would still exclude a substantial number of the poorest households. Implementing categorical programs in a LDC leads to large social protection gaps among the poorest households.

For these reasons LDCs should chose an inclusive approach to social protection. They should restrict unconditional cash transfers to ultra poor households that are at the same time labour constrained while providing labour endowed ultra poor households with access to labour based programmes. In this way they provide social assistance to all vulnerable persons (elderly, OVC, handicapped, disabled and chronically sick persons) who live in households, which are unable to care for them. Ultra poor households, which are labour endowed should be provided with labour based programmes (public works, livelihood programmes, productive assets, etc.) that increase their productivity and avoid a dependency syndrome. In order to leave nobody behind in ultra poverty, these two components of systemic social protection need to be given absolute priority.

A second task of systemic social protection is to safeguard moderately poor households from sliding into extreme poverty by strengthening their resilience (insurance, drought resistant

varieties, irrigation, etc.). This requires the cooperation between sector ministries (social protection, agriculture, economy, finance) in order to achieve synergy effects.

A third task of systemic social protection is to link transfers to access to social services. While cash transfers are essential for the survival and welfare of ultra poor people, cash only is not sufficient to meet basic needs. In order to achieve synergies the provision of cash transfers should be integrated with the provision of basic social services in the field of health, nutrition, water and sanitation and education wherever these services are available or can be made available under the constraints faced by LDCs.

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Appendix: Population and households by poverty status and household structure, Malawi 2004

Poverty status	Population	Households	Households with elderly (65+)	Households with children aged 0-3	Households with elderly and children (o-3)
Non-poor	5,870,097 52%	1,540,864 56%	51.6%	47.4%	49.3%
Moderately poor	3,700,101 30%	736,200 27%	29.7%	30.7%	30.2%
Ultra poor	2,760,648 22%	454,376 17%	18.7%	21.9%	20.5%
All	12,328,480 100%	2,731,440 100%	100%	100%	100%

Source: Calculated from data of the Malawi Integrated Household Survey 2004/2005