

# Measuring coverage of social protection programmes: Lessons from Kenya, Zimbabwe, Belize and Vietnam

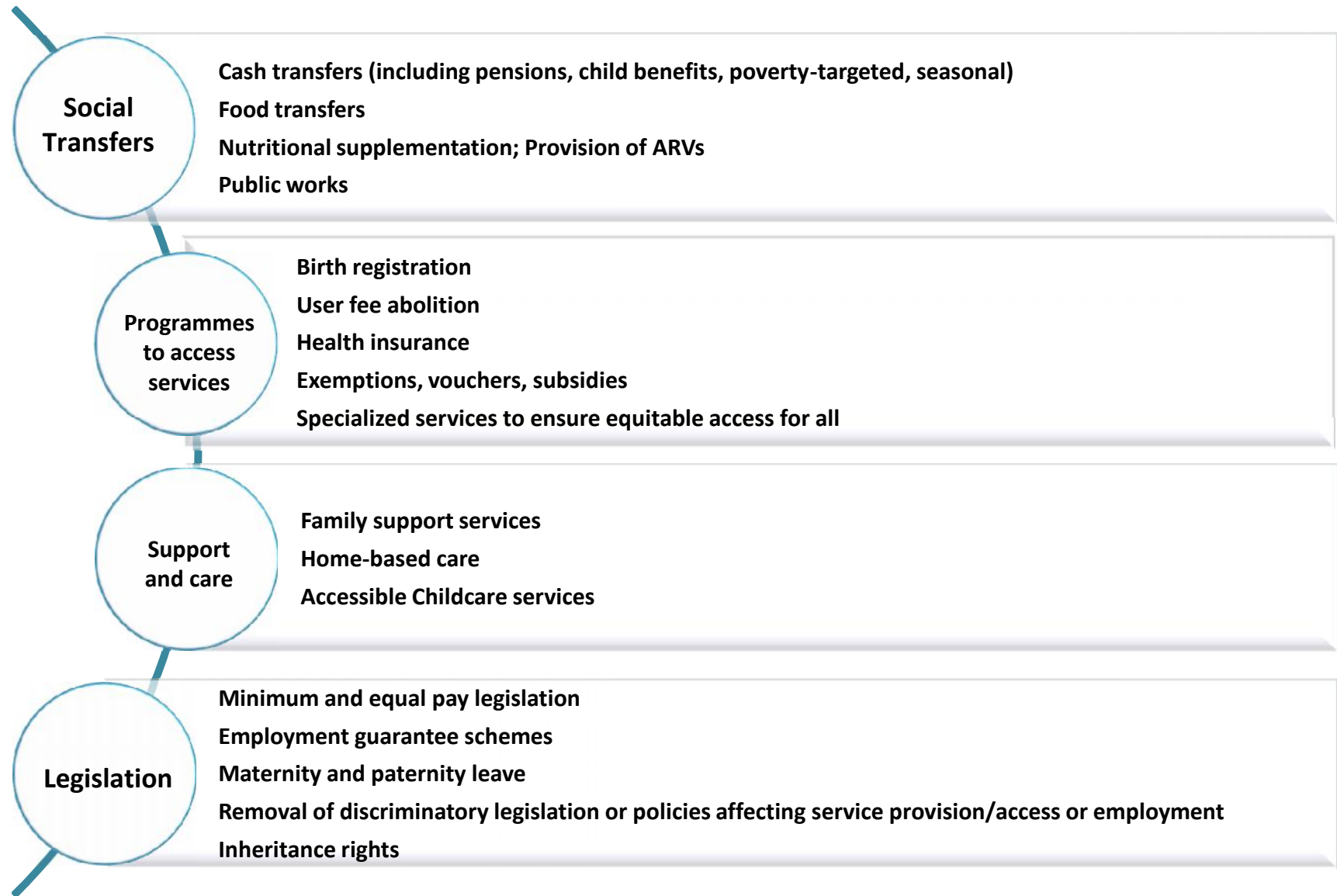


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# UNICEF's Work on Social Protection

- Within UNICEF's equity focused approach to development, social protection is a crucial policy tool for achieving equity and social justice
- UNICEF support 232 social protection programmes in 104 countries
- Of these, 71 are cash transfers in 52 countries
- Reaching over 12 million households

# Social protection components & examples



# Sustainable Development Goal (SDG) 1

- Contribute to monitoring of SDG 1, target 3
  - *Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable*
- Indicator 1.3.1 on social protection:
  - *Percentage of population covered by social protection floors/systems, disaggregated by sex and distinguishing children, the unemployed, old-age persons, persons with disabilities, pregnant women/newborns, work injury victims, the poor and the vulnerable*

# **Importance of social protection survey questionnaire**

- Critical that global and national resources for social protection are reaching those in greatest need.
- Monitoring at the global and national levels is needed using household surveys to assess the extent to which various social protection interventions are reaching the disadvantaged and vulnerable populations
- Household surveys minimize double counting errors, provide statistically sound data, and can be disaggregated by various stratifiers, e.g. age, sex, residence, wealth, sub-national areas, etc.
- Contribute to availability of robust data for assessing progress towards achieving SDG 1, target 3.

# UNICEF's support to robust data collection: Multiple Indicator Cluster Surveys (MICS)

20

Years

108

Countries

275

Surveys



\*As of June 2015

# Objective of the Pilot Test

- Pilot test questionnaire module for data collection of Social Protection indicators using household surveys
- Assess adequacy, clarity, and relevance of questions:
  - the extent to which the draft set of questions are understood by the intended respondents;
  - whether the questions flow, and the structure/skip-patterns work well; and
  - the level of customization needed for each country.

# Countries & partnerships

- **Kenya, April – May 2014**
  - Two Counties - Kakamega & Kisumu
  - Kenya National Bureau of Statistics (KNBS)
  - Department of Social Welfare
- **Zimbabwe, March 2015**
  - Epworth, St Mary's, Bindura, Goromonzi
  - ZIMSTAT (Zimbabwe national statistical agency)
  - Department of Social Welfare
- **Vietnam, Quang Nam Province, Nui Thanh District, December, 2015**
  - Tam Hiep (peri-rural-24 clusters); Tam Tra (mountainous-8 clusters); Nui Thanh (town-23 clusters)
  - General Statistics Office and Ministry of Labour, Invalids and Social Affairs
- **Belize, Stann Creek District), November - December 2015**
  - Statistical Institute of Belize, Ministry of Human Development, Social Transformation and Poverty Alleviation, Ministry of Health
- **UNICEF HQ, regional and country offices**
- **Survey specialist consultant**



# Approach & General Observations



# Approach

- Stand-alone pilots in Kenya, Zimbabwe and Vietnam and integrated into standard Multiple Indicator Cluster Survey (MICS) process in Belize
- In Kenya and Zimbabwe, a list of recipient households obtained from Departments of Social Welfare (areas with high concentration of cash transfer recipients) and interviewed
- In Vietnam and Belize, a standard survey sampling approach was used - randomly selected households were interviewed
- Non-recipient households also interviewed to assess their knowledge of existing social protection schemes and understanding of the questions
- Questionnaire customized to incorporate social protection programmes in each country, taking into account targeting approach for some benefits
- Validation of survey vs administrative data was done in Vietnam to assess their consistency

# Sample Questions included

- Knowledge of social protection programmes/benefits (customized for each country)
- Household/member has ever received any type of benefit (cash or in kind and customized for each country)
- Time since receiving the last benefit
- If anyone in household has health insurance
- If children aged 5-24 years and attending school are receiving any type of school support (fees, food, materials e.g. uniform, books, etc.)

# General observations

- Questions were well understood, except in rural areas in Zimbabwe 'Cash transfer' is not commonly used (rather money for welfare or elderly or disabled or orphans or the poor, etc)
- Non-recipients of cash transfers are also aware of these programmes
- Multiple types of benefits/support exist across countries and tend to be targeted in certain geographical regions, areas, clusters (in response to high numbers of socially and economically disadvantaged or vulnerable households and individuals)
- Main types of support
  - **Predictable cash transfers to households of any type - e.g.** conditional/unconditional); child benefits/grants; disability grants; pension, social grants for food, electricity, etc.
  - **School support in terms of fees or material support e.g. uniform, shoes, books**
- Other less predictable, infrequent or one-time types of support – e.g. start up cash for income generation, public works, health vouchers, shelter, agricultural inputs, and food.

# General Observations

- Support provided by various organizations in the same locality/households—government, NGOs, Foundations, Churches, family, etc.
- Support provided on the basis of certain household characteristics (e.g. cash transfers) as well as on individual characteristics (e.g. school support)
- High likelihood of double counting if only programme data are used to count recipients
- In some countries, some services are free e.g. education up to a certain level (policy) - school support may be low or none (interpretation needs to account for country context)
- Challenge is many players with many interests: children, seniors, disability, HIV, maternity, etc.
- **Customisation** concerns- getting the precise protection systems defined and captured
- Small number of cases, **sampling** concerns esp. in Belize where such schemes are not very widespread



# Recommendations & Next Steps



# Recommendations

- Social protection module to be included in the household survey questionnaire to cover:
  - Cash transfers of any type
  - School support - fees and material support – for each child of school going age (5-24 years)
  - Other support - income generation, public works, health vouchers, shelter, agricultural inputs, food to be included according to country context and specific needs
- Question on health insurance to be included in individual survey questionnaire (male and female questionnaires)
- Question on knowledge of social protection to be asked of all respondents
- Question on timing of support to be asked of recipient households only

# Proposed indicators for global monitoring

- Percentage of the poorest households (lowest 2 wealth quintiles) that received any type of cash transfers in the last 3 months\*
- Percentage of children under age 18 years in the households that received any type of cash transfers in the last 3 months
- Percentage of children in the households that received any type of school-related support in the past/current academic year\*\*
- Percentage of women/men age 15-49 that are covered by health insurance

\***Cash transfers:** conditional/unconditional cash transfers; child benefits/grants; disability grants; pension and other predictable forms of cash transfers

\*\***School-related support includes support for school fees** (scholarships, bursaries) and **for school materials** (uniforms, books, etc)



# Next steps

- Develop sampling considerations, taking into account national geographic coverage or targeting strategies
- Final pilot test in a standard MICS survey process (part of MICS 6)
- Produce and disseminate a synthesis report of pilot test experiences, lessons learnt and recommendations
- Collaborate with partners to integrate the Social Protection questionnaire in other existing survey programmes, e.g. Demographic and Health Surveys (DHS) and Living Standards Measurement Studies (LSMS)

# Thank You

