Session VII: Anti-poverty policies focusing on families: Regional Overview: Africa
Introductory remarks

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Introduction

Africa has, in the last decade, made significant strides in certain areas of social and economic development. For example, in addition to increasing literacy rates, the continent has witnessed increasing democratisation and reduction of civil strife while economically there has been recovery and sustainability in the rates of economic growth[1]. Notwithstanding this progress, and despite the wealth of natural resources in the continent, African countries in the sub-Saharan region regularly fill the bottom 25 spots on the United Nations (UN) quality of life index. Indeed, it is now universal knowledge that a third of Sub-Saharan Africans are underfed and that more than half of the population lives in extreme poverty as measured by the poverty threshold of less than US$1.25 per day.[2]

The key challenges that shape Africans' vulnerability to poverty include food insecurity. Millions in the continent remain vulnerable to famines, and much of the population is dependent on small-scale subsistence agriculture which offers insecure livelihoods and is increasingly affected by environmental and climate change risks.[3] Africa is also the region most affected by HIV and AIDS, accounting for 72% of all new infections in 2008, and for 68% of the global number of people living with HIV in 2009[4]. UNAIDS data shows that during 2009 alone an estimated 1.3 million adults and children died as a result of AIDS in sub-Saharan Africa and that more than 15 million people have died in the region since the beginning of the epidemic in the early 1980s.[5] In consequence child mortality rates in the continent remain extremely high[6]; there is a growing number of children orphaned and made vulnerable by the epidemic; and older persons are increasingly responsible for the care of orphaned grandchildren. The HIV and AIDS epidemic has also created new shocks aggravating historical threats posed by malaria, reproductive health challenges and a range of other vulnerabilities, stretching and sometimes exhausting the informal coping mechanisms that were traditionally offered by the African extended family system[7].

It is largely against this background that a new focus of the vulnerability of families, and threats to the human capital of children with lifelong and intergenerational consequences, has accelerated international, regional, and national commitments to social protection programmes[8]. Described as "policies and programmes that protect people against risk and vulnerability, mitigate the impact of shocks, and support people from chronic incapacities to secure basic livelihoods"[9], social protection policies involve five major kinds of activities—labour market policies and programs, social insurance programs, social assistance, micro and area-based schemes, and child protection[10]. They have been shown to have wide-ranging benefits that include: promoting access to nutrition, health services and education; protecting the most vulnerable from sinking into poverty; achieving economic growth; assisting in building social cohesion; and promoting political stability.[11] With specific regard to the family, social protection can, in the short term, help provide relief to affected families and prevent them from falling into destitution. In the longer term, the promotive and transformational functions of social protection programmes address some of the underlying causes of inter-generational poverty.

A growing number of African governments are designing and developing national social protection strategies, often in the context of more comprehensive versions of poverty reduction strategy papers aimed at achieving economic growth, poverty reduction, and sustainable development.[12] The increasing African interest in social protection as anti-poverty strategies against family poverty is also evident at the continental level, as manifested by various blueprints such as:

- *The Ouagadougou Declaration and Plan of Action:* Considered the blueprint of the African Union (AU) strategy on social development, this declaration has the overall aim of empowering African people, opening opportunities and creating social protection and security for workers by building a people-oriented environment for development and national growth[13];
- *The Livingstone Call for Action on Social Protection:* This was adopted at a meeting – spearheaded by the African Union and other stakeholders – held in Livingstone, Zambia, in March 2006 where significant consensus was reached on the need for African governments to strengthen social protection and social transfer interventions; develop costed plans for social protection; engage in capacity building and experience sharing on social protection; adopt comprehensive social protection schemes for older people; and introduce universal social pensions; and
- *The Social Policy Framework for Africa:* Agreed at the first ever conference of African ministers in charge of social development in Windhoek, Namibia, in 2008, and adopted by the African Heads of States in Addis Ababa, Ethiopia, in 2009. Among other things the framework includes a series of policy recommendations to help African Union Member States to develop their national social policies to promote human empowerment and development, within the broader framework of social protection. The framework identifies 15 key thematic social issues and others that deserve attention, with "the family" being one of them.

Despite these commitments, social protection policies and programme in Africa are far from comprehensive, and they tend to focus on social security programmes of the contributory types that apply to salaried workers only. Table 1 (in annex) illustrates this diversity with information for 39 sub-Saharan African countries for which relevant data were available in 2009. The most salient points from the table are that:

- All the listed countries have some form of benefits for old age, disability, work injury, sickness and maternity – all of which derive their finances from three possible sources: a percentage of covered wages or salaries paid by the worker; a percentage of covered payroll paid by the employer; and/or a government contribution[14]. In essence therefore, these benefits are available only to formal sector waged workers, in either the public or private sectors, who are able to contribute to social insurance – and who actually constitute the minority of the economically active population in the region. Informal sector workers, who account for 72% of all non-agricultural workers in the region[15] do not have access to these benefits.
- Given that African men have higher formal employment rates than their female counterparts, and that the majority of women in wage employment are in the informal sector[16], the predominance of contributory social insurance schemes in the region tends to discriminate against women. This means, among other things, that in the event of family break-ups or the death of the husband, affected women are often not entitled to present or future unemployment or pension benefits.[17] Overall, the current social security landscape aggravates aspects of gender bias, which in turn can leave families, particularly those headed by women, vulnerable to poverty and social exclusion.
- Although more than half of the countries reviewed do have some form of family allowance—defined as programmes or regular cash payment meant to provide additional income for families with young children to meet at least part of the added costs of their support,[18]--it is noteworthy that many of these allowances are means-tested. That is, eligibility for benefits is established by measuring individual or family resources against a calculated standard usually based on subsistence needs. It is well-documented, however, that while effective targeting may reduce governments' direct costs for providing relief, there are often errors of exclusion of those who should be receiving the transfer and errors of inclusion of those who should not be receiving it.[19] An additional limitation of targeting in Africa is that many governments lack administrative capacity, resulting in the means tests and categorical targeting being costly and inefficient in reaching the poorest.[20]

All in all, wide-ranging non-contributory social protection provided by the state seems to be rudimentary and have been restricted so far to a few countries mainly in East and Southern Africa. A social protection scoping study funded by the Ford Foundation[21] found that "the social protection debate has been slower to start in West Africa than elsewhere, and there appears to be little political will to engage seriously with social protection in the region …" and similarly, that "there is little discussion of social protection in the East Africa region, either among the public or in the media, and little political appetite for serious engagement with social protection, beyond an ongoing preoccupation with national and household food security". To this end two main models of social protection policies in Africa—: the Southern African and the Middle African models—have been identified.[22] The former relies on child support grants and social pensions in the form of non-contributory, unconditional, and regular income transfers that target older persons (Table 2). They have their roots in the South African social pension scheme introduced in the 1920s to protect the minority white population against poverty in old age. More recently HIV and AIDS has highlighted the role of older persons in households left without members of working ages. The old age pensions in Southern Africa are providing effective policy responses to the epidemic. The programmes are largely enshrined in legislation and are delivered by government agencies.

Table 2: Social transfer programmes in selected Southern African countries

Country	Programme	Agencies
Botswana	- Old age Pension - Destitute Support - Orphan Care programme	- Government - Government - Government
Lesotho	- Cash & Food Transfers Pilot Project - Ola age pension	- NGO (World Vision) - Government
Mauritius	- Old age pension	- Government
Namibia	- National pensions Scheme - Disability Grants	- Government - Government
Seychelles	- Old age pension	- Government
South Africa	- Child support Grants - Old age pension - Disability Grant	- Government - Government - Government
Swaziland	- Emergency drought response - Old age grant	- NGO (save the Children) - Government

Sources: Devereux & Cipryk (2009) and Niño-Zarazúa, et al (2010);

Available evidence shows that these grants and pensions are deployed by recipient families to ensure children's schooling, improve health care and re-allocate productive resources within households[23]. In Lesotho for example, 60% of the monthly pension received by person aged 70 yeas and older is redirected consistently to children—to purchase school uniform, books, and health care. Evidence suggests that that this has halved Lesotho's hunger rate[24]. Various evaluations of social pensions in Southern Africa have similarly revealed the extent to which these pensions have broadened social inclusion (Box 1):

Box 1. Evaluating the impacts of pensions in Southern Africa

Non-contributory pensions in South Africa reduce the country's overall poverty gap by 21 per cent, and for households with older people by more than half (54 per cent) while virtually eliminating poverty for households with only older people (a reduction of 98 per cent) (Samson et al., 2004).

In Mauritius the share of older people in households below the poverty line is 64 per cent without the non-contributory pension but only 19 per cent with the non-contributory pension (Gopee, 2006).

Old-age pensions also help children grow into more productive adults who escape the inter-generational transmission of poverty. Girls in households receiving a non-contributory pension are more likely to attend school, succeed academically and have better health and nutrition indicators than children in similar households that do not receive the grants (Duflo, 2000; Samson et al., 2004).

Predictable and regular pension income provides the income security that households need to manage social risk and invest in the riskier but higher return activities that enable people to break free from poverty.

Some older people in Namibia, for example, use their pension to invest in livestock and other agricultural activities, and to access credit (accepted as collateral) (Devereux, 2001). Elsewhere, 21 per cent of the surveyed recipients in Lesotho spent part of their pension creating jobs ranging from general household chores to farm work.
Source: Adapted from International Social Security Association (2008).

The "Middle African" model consists of cash transfers that are diverse in design and implementation. The programmes grouped under this model are small in scale and limited in time. In contrast to the Southern African model, the programmes are not policies *per se*, but projects that have two types: those that rely on pure income transfers; and those which aim to link transfers with services[25]. Illustrated in Table 3 (in annex), these have been referred to as the *new wave of* social protection programmes in Africa, having emerged recently as a result of policy engagement with social policy and social protection in sub-Saharan Africa. Their delivery typically involves a variety of agencies, non-governmental organisations, international development partners and donors, and government agencies etc. To this end questions about the domestic ownership of these programmes and the role of partners often shroud their effective implementation.

Conclusion

Given the depth of poverty and the range of vulnerabilities that Africans face, the need for social protection, particularly in the form of social cash transfers, is arguably greater in the region than elsewhere in the world. Social cash transfer programmes can take many forms. They can be given to households as a unit because they meet poverty or vulnerability criteria, to a vulnerable individual, or to families based on the presence of certain vulnerable individuals; they can be unconditional (given without obligations) or conditional (tied to obligations of recipients to participate in work, training, education, nutrition, or other services or activities), or they can be linked to these activities but not obligatory. Regardless of the form they take, cash transfers contribute to development processes, by enabling or encouraging investment in assets that increase people's chances of breaking out of poverty in the long term.

Despite the available evidence, social cash transfers are more the exception that the rule in the continent due to numerous challenges that can succinctly be summarised as follows[26]:

- There is a deeply entrenched belief that cash transfers are handouts that would reduce labour participation. Many governments therefore remain sceptical preferring, instead, to invest scarce publics resources directly in productive sectors such as through agricultural, industry and trade.
- There is a widespread perception that transfers would divert resources from investment in infrastructure and much-needed spending on socials services such as provision of free basic education, and primary health care.
- Concerns about long-term financial viability of social protection programmes against a context of high poverty incidence and fiscal constraints. Indeed the constraints on financing social protection expansion have been felt already felt in South Africa and Lesotho.
- Limitations in technical and institutional capacity to formulate, deliver, and evaluate transfer.

The specific pathways to achieving comprehensive and adequate social protection to alleviate family poverty in Africa differ among authors[27], but all emphasize three key components:

- *Improve the overall understanding of social protection* by conducting research on extension efforts, documenting best practices worldwide, and creating guidelines for extending basic benefit entitlement. Studies (e.g. World Bank, RSHP) have been done and evidence accumulated that well—implemented social protection programmes can contribute to achieving all the MDGs—not only reducing poverty and hunger, but also promoting access to education and health, and enhancing gender equality. These should be widely disseminated.

- *Achieve concrete improvements in coverage* through technical assistance projects focusing on a diagnosis of unfulfilled needs and ways to meet them. Undertake training and policy discussion with stakeholders, strengthening institutions and social dialogue, formulating action plans, establishing networks of support institutions and individuals, and monitoring and evaluating results:

> A successful extension of social protection will involve the horizontal integration of poverty researchers, policy analysts, political scientists, financial experts, programme managers, information system analysts and developers, accountants and field officers[28]

- *Raise awareness and mobilize key actors and partnerships* in particular with possible donor countries and agencies to ensure a broad base of support for the implementation of the campaign:

> Social protection programmes … that are home-grown rather than imported …– tend to be more successful at mobilising domestic political constituencies. This is because a domestically driven policy agenda is responding to strategic calculations about citizen needs and electoral popularity; it is not being pushed onto a reluctant government by donor partners who believe in social protection but have no stake in national political processes[29].

Table 1: Types of Social Security Programmes, Selected African Countries, 2009

Country	Old age, disability & survivors	Sickness and maternity		Work injury	Unemployment	Family allowances
		Cash benefits for both	Cash benefits plus medical care[a]			
Benin	X	b	c	X	d	X
Botswana	e	d	d	X	d	c
Burkina Faso	X	b	X	X	d	X
Burundi	X	d	d	X	d	X
Cameroon	X	b	X	X	d	X
Cape Verde	X	X	X	X	d	X
Central African Republic	X	b	X	X	d	X
Chad	X	b	c	X	d	X
Congo (Brazzaville)	X	b	X	X	d	X
Congo (Kinshasa)	X	d	c	X	d	X
Côte d'Ivoire	X	b	X	X	d	X
Equatorial Guinea	X	X	X	X	d	X
Ethiopia	X	d	d	X	d	d
Gabon	X	b	X	X	d	X
Gambia	X	d	d	X	d	d
Ghana	X	d	c	X	d	d
Guinea	X	X [f]	X	X	d	X
Kenya	X	d	g	X	d	d
Liberia	X	d	d	X	d	d
Madagascar	X	b	X	X	d	X
Malawi	d	d	g	X	d	d
Mali	X	b	X	X	d	X
Mauritania	X	b	X	X	d	X
Mauritius	X	d	g	X	X	X
Niger	X	b	X	X	d	X
Nigeria	X	d	g	X	c	d
Rwanda	X	d	d	X	d	d
Sao Tome and Principe	X	X	c	X	d	d
Senegal	h	B	X	X	d	X
Seychelles	X	X	c	X	c	d
Sierra Leone	X	d	d	X	d	d
South Africa	X [i]	X	c	X	X	X
Sudan	X	d	d	X	d	d
Swaziland	X	d	d	X	d	d
Tanzania	X	b	X	X	d	d
Togo	X	b	c	X	d	X
Uganda	X	d	d	X	d	d
Zambia	X	d	g	X	d	d
Zimbabwe	X	d	g	X	d	d

Source: International Social Security Association *(2009). Social Security Programs Throughout the World: Africa, 2009.* Geneva: International Social Security Association

Key: a. Coverage is provided for medical care, hospitalization, or both.
b. Maternity benefits only.
c. Coverage is provided under other programmes or through social assistance.
d. Has no programme or information is not available.
e. Old age and orphan's benefit only.
f. Maternity benefits are financed under family allowances.
g. Medical benefits only.
i. Old age and disability benefits only, with survivor benefits under unemployment.
X Available in some form.

Table 3: Types and beneficiaries on social protection initiatives, selected African countries

Country	Social Protection initiative	Beneficiaries	Funder
Ethiopia	Productive Safety Net Programme consisting of food (30%) and cash transfers	8.4 million food insecure people including children, women, older and disabled people	Government, the World Bank & DFID
Kenya	Food and cash transfers	Vulnerable groups: prioritising households affected by HIV and AIDS, drought and food insecurity	Government, DFID, UNICEF & other various donors
Madagascar	Come conditional cash transfers within wider social protection strategy	Chronically poor children and women with some emphasis on other vulnerable groups	International financial institutions, the Un and bilateral agencies
Malawi	Poverty strategy includes targeting free and subsidised social support through nutrition, education and some cash transfers as well a public works for vulnerable groups	Vulnerable groups including older, disabled and unemployed people and malnourished women and children	--
Mozambique	Scaled up version of food subsidy scheme, given through cash transfers. Targeted work programmes and support to HIV-affected households.	Vulnerable groups—prioritising women and their lifelong role in childcare, HIV and AIDS affected households and orphans, and older, disabled and unemployed people.	State budget.
Rwanda	Some local pilots of cash transfers targeted at the socially excluded.	Programmes are directed at families of survivors of genocide. Other vulnerable groups targeted include indigenous and disabled people	--
Tanzania	Some cash transfers. Targeted social protection for older and disabled people and HIV-affected households is within one of the four pillars in the National Strategy for Poverty Eradication and Growth (MKUKUTA). Social protection also includes improved access to education and a number of other initiatives.	People who are in a state of 'generalised insecurity'. Vulnerable groups include older and disabled people, women and orphans.	--
Uganda	Targeted social protection is contained within the Poverty Eradication Action Plan (PEAP). The focus is on free primary education, improved access to health services, conflict resolution initiatives and credit for poor women.	Poor people, with a focus on women, conflict-affected people and HIV and AIDS affected households	--
Zambia	Cash transfer—the Kalomo pilot cash transfer scheme. Cash transfers are reflected in the recently agreed Social Protection Strategy.	Cash transfers target the poorest 10 per cent of the population and households unable to participate in labour-based poverty reduction initiatives. Community-based selection. Recipients are older people, children, disabled, child and female-headed households.	Funded by German development aid
Zimbabwe	Targeted access of poor people to basic education, food and public works programmes. Some cash transfers.	Vulnerable groups including women, children, disabled and older people	--

Source: Country presentations made by government delegates at the *Intergovernmental l Conference on Social protection,* held in Lusaka, Zambia March 2006[30].

Note: -- No information available

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