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

Social Transfers
- Cash transfers (including pensions, child benefits, poverty-targeted, seasonal)
- Food transfers
- Nutritional supplementation; Provision of ARVs
- Public works

Programmes to access services
- Birth registration
- User fee abolition
- Health insurance
- Exemptions, vouchers, subsidies
- Specialized services to ensure equitable access for all

Support and care
- Family support services
- Home-based care
- Accessible Childcare services

Legislation
- Minimum and equal pay legislation
- Employment guarantee schemes
- Maternity and paternity leave
- Removal of discriminatory legislation or policies affecting service provision/access or employment
- Inheritance rights

Sustainable Development Goal (SDG) 1

• Contribute to monitoring of SDG 1, target 3
  o 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:
  o 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)

*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