Study on Coordination of Social Protection Policies:

Support to Government of Zambia’s Formulation of the Social Protection Policy

2013

International Labour Organization
Office of the opinions expressed in them.

Reference to names of firms and commercial products and processes does not imply their endorsement by the International Labour Office, and any failure to mention a particular firm, commercial product or process is not a sign of disapproval.

ILO publications and electronic products can be obtained through major booksellers or ILO local offices in many countries, or direct from ILO Publications, International Labour Office, CH-1211 Geneva 22, Switzerland. Catalogues or lists of new publications are available free of charge from the above address, or by email: pubvente@ilo.org

Visit our website: www.ilo.org/publns

Printed in [Zambia ]
Acknowledgments

The ILO and Southern Hemisphere would like to thank the following people / organisations for giving of their time and expertise to support this research:

The staff of ILO in Lusaka, namely, Anjali Patel, Belinda Chanda and Mwansa Kawesha, for their constant logistical support and advice throughout the study. Thanks also to Luis Frota, the Social Security Specialist for the ILO Decent Work Team for his expert assistance and guidance throughout the study.

The NSPP Technical Working Group for their input and advice throughout the study. In particular we would like to thank Paul van Ufford (UNICEF) and Bernard Chisanga (Consultant) for their guidance and support.

The MCDMCH for assisting with gaining access into the districts and providing logistical support during fieldwork. We would especially like to thank Mr Yengwe Kakusa, Chief Planner (MCDMCH) and the District Social Welfare Officers in Kafue, Chipata and Serenje for assisting with setting up interviews and focus groups.

3Cs Regional Consultants - consisting of Sue Clay, Mutale Chonta and Chipo Chiya - and Alessia Alvisina for conducting fieldwork and for all of their support, input and excellent approach to the study.

The Social Policy expert, Professor Jonathan Bradshaw from York University for his expert input into the report.

The Southern Hemisphere team consisting of Cathy Chames, Nana Davies, Tracey Phillips and Leo Mapira for conceptualizing the study design as well as managing the fieldwork process, analyzing the qualitative data and drafting the report.

Lastly and most importantly a special thanks goes to all the national, provincial and district level state and non-state interviewees and beneficiaries who participated actively in the interviews and focus groups discussions and who gave so generously of their time and knowledge. Your participation has offered us invaluable insight into the coordination and integration of social protections services at provincial, district and community level in Zambia.
Foreword

In recognition of Zambia’s international obligations to social protection, expressed in the Universal Declaration of Human Rights and other subsequent instruments, the Ministry of Community Development, Mother and Child Health continues to make efforts to ensure a decent and dignified life for all citizens. It is in line with this objective that the Ministry embarked on the process of coordinating the development of a comprehensive National Social Protection Policy. An inter-ministerial working group chaired by the Planning and Information Department of the Ministry of Community Development, Mother and Child Health and with technical support from cooperating partners was established with representation from the Ministries of Gender and Child Development, Education, Health, Finance, Agriculture, and Labour, and with representation from the Cabinet, as well as civil society and cooperating partners.

The Policy involves a multi-pillar and multi sector approach, including the areas of social assistance, social security/social insurance, livelihoods promotion and protection (violence, abuse, exploitation,...). The National Social Protection Policy aims at providing an inter-departmental framework for informing and guiding all stakeholders in the development and implementation of social protection programmes and resonates with the Patriotic Front Manifesto, in which the chapter on social protection strategy states that: “The PF government will adopt a comprehensive social protection policy, to those who face special challenges in meeting their basic needs.” The implementation of the cross-cutting policy will be overseen by a high level unit established under the Cabinet Office”.

The Social Protection Policy tentatively draws on several policy instruments and implementation mechanisms and therefore it is critical that we explore how coordination will be ensured at the different local, district, provincial and national levels.

In this context, my Ministry requested the International Labour Organization (ILO) (Country Office Lusaka) to provide technical assistance in reviewing the current implementation framework to assess its sustainability to implement the Social Protection Policy. The ILO responded, under its mandate to guide countries in implementing National Social Protection Floors, after the ILO Recommendation R 202 (2012) on National Social Protection Floors, which calls for “consideration of diversity of methods and approaches (to social protection floors), including of financing mechanisms and delivery systems; coherence with social, economic and employment policies; coherence across institutions responsible for delivery of social protection; high-quality public services that enhance the delivery of social security systems”.

In this context, the Ministry benefited from the expertise of the ILO and exposure to a wide range of international best practices, some of which are included in the study.

This is a rich and comprehensive review of social policy delivery and coordination mechanisms in Zambia. Its recommendations will be useful at the time of unfolding the policy and defining a strategy and implementation plan.

Dr. Joseph Katema, MP
MINISTER OF COMMUNITY DEVELOPMENT, MOTHER AND CHILD HEALTH
### Acronyms

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>ACCs</td>
<td>Area Coordinating Committees</td>
</tr>
<tr>
<td>ACM</td>
<td>Annual Consultative Meeting</td>
</tr>
<tr>
<td>CLICS</td>
<td>Community-based LEAP implementation committees</td>
</tr>
<tr>
<td>CPs</td>
<td>Cooperating partners</td>
</tr>
<tr>
<td>CSOs</td>
<td>Civil society organisations</td>
</tr>
<tr>
<td>CSPR</td>
<td>Civil Society for Poverty Reduction</td>
</tr>
<tr>
<td>CWACs</td>
<td>Community Welfare Assistance Committees</td>
</tr>
<tr>
<td>DAC</td>
<td>District Agricultural Committees</td>
</tr>
<tr>
<td>DDCC</td>
<td>District Development Coordinating Committee</td>
</tr>
<tr>
<td>DSWO</td>
<td>District Social Welfare Officer</td>
</tr>
<tr>
<td>DWAC</td>
<td>District Welfare Assistance Committee</td>
</tr>
<tr>
<td>GRZ</td>
<td>Government of Zambia</td>
</tr>
<tr>
<td>DCPs</td>
<td>District Childcare and Protection Committees</td>
</tr>
<tr>
<td>EU</td>
<td>European Union</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith Based Organisation</td>
</tr>
<tr>
<td>FGD</td>
<td>Focus Group Discussion</td>
</tr>
<tr>
<td>FISP</td>
<td>The Farmers Input Support Programme</td>
</tr>
<tr>
<td>FNDP</td>
<td>Fifth National Development Plan</td>
</tr>
<tr>
<td>FSP</td>
<td>Food Security Pack Programme</td>
</tr>
<tr>
<td>GESS</td>
<td>Global Extension of Social Security</td>
</tr>
<tr>
<td>ILO</td>
<td>International Labour Organisation</td>
</tr>
<tr>
<td>IMF</td>
<td>International Monetary Fund</td>
</tr>
<tr>
<td>IOM</td>
<td>International organisation for Migration</td>
</tr>
<tr>
<td>M&amp;E</td>
<td>Monitoring and evaluation</td>
</tr>
<tr>
<td>MACO</td>
<td>Ministry of Agriculture and Cooperatives</td>
</tr>
<tr>
<td>MCDSS</td>
<td>Ministry of Community Development and Social Services</td>
</tr>
<tr>
<td>MDAs</td>
<td>Government ministries, departments and agencies</td>
</tr>
<tr>
<td>MCDMCH</td>
<td>Ministry of Community Development, Mother and Child Health-</td>
</tr>
<tr>
<td>MESW</td>
<td>Ministry of Employment and Social Welfare</td>
</tr>
<tr>
<td>MoFNP</td>
<td>Ministry of Finance and National Planning</td>
</tr>
<tr>
<td>MOH</td>
<td>Ministry of Health</td>
</tr>
<tr>
<td>MoLSS</td>
<td>Ministry of Labour and Social Security</td>
</tr>
<tr>
<td>MOU</td>
<td>Memorandum of Understanding</td>
</tr>
<tr>
<td>NAPSA</td>
<td>National Pension Scheme Authority</td>
</tr>
<tr>
<td>NGOs</td>
<td>Non-Governmental Organisations</td>
</tr>
<tr>
<td>NSPP</td>
<td>National Social Protection Policy</td>
</tr>
<tr>
<td>NSPS</td>
<td>National Social Protection Strategy</td>
</tr>
<tr>
<td>OVC</td>
<td>Orphans and vulnerable children</td>
</tr>
<tr>
<td>PAG</td>
<td>Programme Advisory Group</td>
</tr>
<tr>
<td>PDCC</td>
<td>Provincial Development Coordinating Committee</td>
</tr>
<tr>
<td>PF</td>
<td>Patriotic Front</td>
</tr>
<tr>
<td>PPM</td>
<td>Pay Point Manager</td>
</tr>
<tr>
<td>PSP</td>
<td>Platform for Social Protection</td>
</tr>
<tr>
<td>PRSP</td>
<td>Poverty Reduction Strategy Paper</td>
</tr>
<tr>
<td>PS</td>
<td>Permanent Secretary</td>
</tr>
<tr>
<td>PSPF</td>
<td>Public Service Pension Fund</td>
</tr>
<tr>
<td>PSPFC</td>
<td>Provincial Social Protection Fund Committee</td>
</tr>
<tr>
<td>PUSH</td>
<td>Peri-Urban Self-Help</td>
</tr>
<tr>
<td>Acronym</td>
<td>Description</td>
</tr>
<tr>
<td>-----------</td>
<td>--------------------------------------------------</td>
</tr>
<tr>
<td>PWAS</td>
<td>Public Welfare Assistance Scheme</td>
</tr>
<tr>
<td>PWSO</td>
<td>Provincial Social Welfare Officer</td>
</tr>
<tr>
<td>SA</td>
<td>Social Assistance</td>
</tr>
<tr>
<td>SAG</td>
<td>Sector Advisory Group</td>
</tr>
<tr>
<td>SCTS</td>
<td>Social Cash Transfer Scheme</td>
</tr>
<tr>
<td>SNDP</td>
<td>Sixth National Development Plan</td>
</tr>
<tr>
<td>SPF</td>
<td>Social Protection Floor</td>
</tr>
<tr>
<td>SPLiT</td>
<td>Social Protection and Livelihood Technical Team</td>
</tr>
<tr>
<td>SPS</td>
<td>Social Protection Strategy</td>
</tr>
<tr>
<td>SWAP</td>
<td>Sector Wide Approach Planning framework</td>
</tr>
<tr>
<td>TWG</td>
<td>Technical Working Group</td>
</tr>
<tr>
<td>UNJPHT</td>
<td>United Nations Joint Programme on Human Trafficking</td>
</tr>
</tbody>
</table>
Executive Summary

Introduction and Context

Despite Zambia’s robust economic growth and recent reclassification as a lower-middle income county, a large proportion of the country remains in poverty. Statistics reveal that 60 per cent of the Zambian population - and an estimated 78 per cent of those located in rural areas – continue to live below the poverty line.

Social protection (SP) serves as an important means of ‘graduating’ or moving households from such a state of high vulnerability and poverty to one of resilience, with an increased capacity to invest in productive assets and hence improved livelihood security.

The Government of Zambia defines social protection (SP) broadly as “…all policies and practices that promote the livelihoods and welfare of people suffering from crucial levels of poverty and deprivation or vulnerable to risks and shocks”; and a National Social Protection Policy (NSPP) is currently being drafted with the Ministry of Community Development, Mother and Child health (MCDMCH) taking the lead in this process. The draft policy has proposed a broad framework, which will lay the foundation for improved coordination and coherence of the Zambian SP system as a whole and includes the four pillars of social assistance, social security, livelihood and empowerment programmes and protection programmes.

Purpose and Objectives of the Study

In support of development of the NSPP, the International Labour Organisation (ILO) has undertaken this study on the coordination of social protection policies in Zambia.

Thus the main purpose of this assignment was to conduct a review on the current roles and linkages between social protection agencies and institutions and advise on the most suitable institutional arrangement(s) or frameworks for the coordination of social protection policies in Zambia, including the need for creating overarching coordination mechanisms, tools and processes.

Research method and sample

A qualitative research design was adopted for this study which was conducted at national, provincial and district level. Three of the country’s districts were covered, namely Kafue, Chipata and Serenje. Within each province and district a set of semi-structured interviews were conducted with a pre-defined set of government and non-government stakeholders. Focus groups were held with district coordinating bodies and with beneficiaries of grants. Finally, at national level semi-structured interviews were conducted with key informants from a select number of ministries, non-governmental organisations, cooperating partners and donors. A total of 29 key informant interviews, 1 joint interview and 7 focus group discussions were completed.

1 Development of the National Social Protection Policy (NSPP), The Technical Brief for the Lunch Meeting with key Permanent Secretaries (30 April 2012): Ministry of Community Development, Mother and Child Health (MCDMCH)
In addition to this research, a desktop study was conducted on International Best Practice on Coordination of Social Protection and eleven case studies were produced and referred to throughout the report. The countries reviewed include: Kenya, Zambia, Ghana, Chile, Mozambique, Cambodia, Nepal, Brazil and South Africa. The full case studies are contained in annexure one to eleven of this report.

Coordination of Policy and Planning

National goals and priorities for social protection are reflected in the National Social Protection Strategy, and the SNPD which both provide an overall vision for social protection in the country. However, there are a number of barriers to effective coordination of social protection policy making and planning which include: ministries working strictly according to their mandate (silo mentality); absence of an integrated policy framework for social protection; poor end-user orientation during planning; limited vertical coordination of social protection within ministries (vertical coordination); and lack of incentives to collaborate. In addition, the planning department within the MCDMCH which is tasked with coordination of social protection plans and policy making experiences severe capacity constraints.

Whilst linkages with civil society organisations in planning and policy making is strong; linkages with business is poor and government has no plan or overall vision for how to include business, civil society organisations and donors in planning activities.

A range of cooperative governance structures are in place at national level for coordination of social protection policy and planning and the Social Protection SAG makes an important contribution to coordination of social protection at national level even though a number of factors hamper its effective functioning. Respondents advocated both for a higher level structure at Cabinet level to oversee the coordination of social protection policy; and for the decision making power of the SP SAG to be strengthened. The study explores the idea of establishing a National Social Protection Council at Cabinet level with a dedicated Secretariat similar to the institutional framework for implementation of the National Social Protection Policy in Kenya.

Coordination of Implementation

The majority of respondents believe that coordination of social protection services and programmes between government ministries is inadequate. Key barriers to programme integration and harmonisation that emerged include: limited vertical coordination of programmes within ministries; limited funding and resources; lack of formal referral mechanisms; and limited information sharing across ministries.

There are well established structures in place to facilitate vertical coordination from national through to provincial, district and local level; and the main tools for facilitating vertical coordination are operations manuals, guidelines and regular internal meetings. However, not all of these tools structures are functioning effectively. At district level the DDCC was identified as the main structure for promoting coordination of services across all sectors although there are some challenges with its functioning.

Overall there is good representation of civil society organisations on the DDCCs but this is not mirrored at community level where coordination of CSO and government services is marked by duplication and poor information sharing. There is also very little coordination with the
business sector at community level with the absence of a clear strategy for engaging business in the social protection system.

Coordination mechanisms within the four pillars of social protection found that Social Assistance and particularly the SCTS are well coordinated with good decentralised structures. However, implementation and coordination of social security is a challenge which is exacerbated by the MoLSS inconsistent levels of presence at provincial and district levels. With regards to livelihood and empowerment programmes and protection programmes some coordinating structures are in existence however, coordination of service delivery within each of these pillars is marked by fragmentation.

Concerns were raised that the transfer of the mandate of PHC from MoH to MCDMCH had taken away the social welfare focus of the ministry and has left it overwhelmed and with insufficient capacity. Opportunities were also seen in this move as the ministry would have to include both health and welfare in planning and budget processes and hence create more awareness and integration of the programmes.

Knowledge and Awareness of Social Protection

A shared understanding of social protection amongst all actors is important for coordination as it contributes towards actors working towards the common goal of the overall system.

Overall it was found that both civil society stakeholders and national level stakeholders share a broad understanding of social protection. Provincial and district level stakeholders understand that social protection includes the four pillars of intervention but the element of social assistance tends to dominate. On the other hand beneficiaries equate social protection with social assistance indicating a need for more education and knowledge dissemination at community level.

Most awareness raising activities are undertaken in an ad hoc and uncoordinated way by individual programmes and institutions working in the SP sector.

Coordination of Management of SP Services/Systemic Issues

A review of the systemic issues around coordination of management of social protection services found that there is no unified way of targeting beneficiaries and the various programmes have different ways of targeting beneficiaries. Whilst a Management Information System (MIS) is being launched for the SCTS beneficiaries, there is currently no unified database for beneficiaries of SP.

Zambia is in the process of decentralization, which would facilitate SP service coordination at local level, mitigate bureaucracy and create community ownership. However, decentralization must be coupled with sufficient capacity building of local government in order to enable effective management and implementation of SP services.

With regards to incentives for collaboration it was found that there is a variation in incentives and volunteerism depending on the SP programmes and line ministry responsible. If the National Decentralization Policy is implemented, management and administration of SP services will be fully located at local level; and in order to increase motivation by local authorities and encourage coordination; an incentive scheme for SP coordination could be considered.
The review of coordination of SP budgets reveal that, in a context of insufficient SP budget for the vulnerable and poor people of Zambia, there is little coordination at the planning stage of budgets and each ministry works in a silo to produce their budget.

A final systemic issue is that there is no formal structure in place for grievances related to SP services at governmental level and legal assistance related to SP services is inaccessible for most of the population.

Impact

In general it was found that poor coordination leads to fragmented and sub-optimal service delivery, plus hampers beneficiary access to SP services. This limited access is compounded by poorly coordinated referral systems. This results in beneficiaries wasting time and resources moving from one service provider to another, as well as the overburdening of certain government departments and agencies due to limited sharing of SP responsibilities.

Lack of adequate coordination also results in poor service coverage, with some geographical areas and target groups receiving limited or no services, whilst others are ‘over-targeted’. Service duplication also leads to high costs; resource wastage; and a lack of effective information-sharing. This has a negative impact upon levels of awareness and knowledge of SP, amongst beneficiaries and programme implementers alike.

Recommendations

The recommendations below are based on the key findings and are derived directly or indirectly from the interviews with stakeholders and from the nine case studies which were derived from the review of international best practices relating to coordination of social protection services. They will be discussed and finalised at the feedback and recommendations workshop.

Policy and Planning

The National Social Protection Policy will provide an important framework for coordination of SP in Zambia and it is recommended that, as far as possible, all current and future SP-related legislation and policy be aligned to this national policy.

Following the finalisation of the NSPP, a strategy for policy implementation - including all institutional arrangements that will maximize coordination and integration of social protection services and programmes - should be developed together with an operational plan.

Planning for SP services should start with a consideration of the end-user or beneficiary so that services are designed according to their needs. Efforts should be made to include all line ministries in this planning process so that programmes can be offered in an integrated way to include protection, prevention and promotion. Lessons learnt from South Africa’s ICROP programme and Cambodia’s ‘single window service’ can be drawn on here.

- The overall objective of the Integrated Community Registration and Outreach Programme (ICROP) in South Africa is to improve access to social protection services to communities in deep rural areas by offering all services under one roof. The use of a mobile ‘one stop shop’ approach relies on an integrated service delivery model where
different government departments work together to bring a range of services to the community.

- Cambodia’s PEOPLE service is an excellent example of how the needs of the end-user were taken into consideration when planning for services. This Single Window Service is an office within government structures at local level that brings social protection and employment services together under one roof, in order to concentrate information, to share costs and to make it easier for people to access many services in one place, at subnational level. A key objective of the service is to facilitate access to existing social protection schemes for those families which lack access to information and services. The offices are close to the people, at district and commune level.

- Both Chile’s Solidario programme and Kenya’s Hunger Safety Net Programme provide innovative examples of how sustainable livelihoods and empowerment programmes have been integrated with non-contributory social assistance schemes in a coherent way in order to improve economic productivity of households.

**Funding for SP**

There is an overall need for improved coordination of resource allocation in order to ensure strategic use of funds in the sector. Therefore coordinated decision-making on resource allocation could be made by a higher level structure at Cabinet level and these decisions should be informed by the SP SAG.

Research participants have advocated for the establishment of a dedicated fund for social protection. The management of this fund would require dedicated management capacity at the MCDMCH, through a dedicated agency for benefit delivery, and technical working groups in charge of different aspects of this management including information systems; payment systems and beneficiary identification. Temin et al (2008) supports this and confirms that “Establishing a separate unit to administer cash transfers within a broader social protection framework may make the most sense – it is a discrete component of social protection that is highly technical in nature. This unit would require oversight by a policy-making body with senior leadership”.

In addition the Ministry of Finance needs to prioritise the implementation of the NSPPP when making decisions about budgets in order to fulfil its development priorities as laid out in the SNDP.

---


3 The government recently established a Social Protection Fund under the livelihood and empowerment pillar.
**Institutional framework for SP**

A tentative framework for implementation of the NSPP is presented in the diagram below.

![Diagram of Institutional Framework for SP](image)

**Figure 1: Tentative institutional framework for implementation of the NSPP**

The **National Social Protection Council** located at Cabinet level could provide oversight and strategic direction which would also significantly improve accountability in the sector. This could include overseeing the development of policies and programmes and the direction and allocation of resources. This suggestion is based on a strong recommendation from study respondents that a higher level body at Cabinet level needs to be established which to oversee the SP system in the country. The exact membership of the Council will still need to be determined.

A **Social Protection Secretariat** should be established which could carry out the day-to-day functions of the Council and implement decisions made by the Council which could also include the functions of M&E and monitoring of funds. It is suggested that this Secretariat should be located in the MCDMCH together with additional required capacity since it will be playing a more operational role. This will also facilitate closer integration with the SP SAG.

The **Social Protection Sector Advisory Group** could play both an advisory and an operational role of leading integrated planning and budgeting of social protection interventions. However, in order for the current SP SAG to fulfil this role its structure and functioning should be reviewed. The following recommendations are made in this regard:

- The purpose and objectives of the SAG need to be reviewed so that the focus of its activities shift from implementation towards integrated planning and budgeting.
Lessons learnt from the MOH’s SWAP framework and tools could be used by the MCDMCH for integrated planning and coordination with key ministries and other actors. For example, a comprehensive/consolidated meeting matrix could be developed annually, approved by the SAG and monitored and revised by the secretariat reporting to the Council.

- The **Sub-Committees** or **Technical Working Groups** of the SP SAG would need to be determined but there are two alternatives here. Firstly, given the broad orientation of the proposed NSPP, which encompasses several underlying policies, programmes and services, it may be preferable to adopt the four pillar framework proposed in the draft NSPP. The second option could be to arrange them according to the systemic elements responsible for supporting the SP system as a whole, for example: programme implementation; human resources; M&E, research, MIS; and funding. Other sub-committees could be added such as communication and knowledge sharing. A system for monitoring the functioning of the SP SAG should be put in place in order to monitor its meetings, attendance, and planned activities; and to hold its members accountable for their actions.

- The lead department needs to have the authority to hold all representatives accountable for attendance and for delivery of agreed actions. In a study done on cooperative governance structures in South Africa by Giese et al (2008), it was found that those structures which had a deputy chair elected from civil society to work alongside the government chairperson were more effective. This is a model worth considering.

- In addition, it will also be useful to ensure that the terms of reference for the SAG distinguishes between the role of the lead department, as *co-ordinator* of the structure, and the role of all participating ministries as being integral to the realisation of the objectives of the structure.

- Attendance at key coordination meetings and delivery of agreed outputs should be included by managers in performance reviews for all ministry and civil society representatives so as to ensure that active participation in the coordinating structures and mechanisms are not seen as ‘add-on’ tasks.

Given the proposed four pillar structure of the NSPP it may be worth considering that the **Employment and Labour Sector Advisory Group** be integrated into the institutional framework because of its focus on Social Security. Decisions will need to be made about whether it a) remain as a standalone SAG or b) become a sub-group of either the SP SAG or under the oversight of the Cabinet level structure.

The **Provincial Social Protection Committee** could be responsible for the coordinated planning and budgeting of social protection interventions in the province. It is suggested that it could be a sub-committee of the current PDCC. However, the functioning of this structure will need to be reviewed as this study found that these structures do not meet regularly in all provinces, and this raises questions around the added value of such a provincial committee. One possibility could be the establishment of a dedicated Provincial Social Protection Secretariat to support the committee.

The **District Social Protection Committee** should oversee the coordination of social protection services at district and community level. Since this study found that the DDCC is the main
structure for promoting coordination of services at district level; it is recommended that the District Social Protection Committee could be a sub-committee of the DDCC. At the same time though it would be important to re-consider the current formation of the sub-committees of the DDCC with a view to integrating those sub-committees coordinating social protection related services under one umbrella social protection sub-committee. As with the province, this committee could also be supported by a dedicated District Social Protection Secretariiate. This will allow for integrated planning and decision making at district level. Furthermore, adequate resources will need to be allocated to districts in order to ensure that DDCCs are able to fulfil this additional responsibility effectively. Regular monitoring and evaluation of these structures will need to be undertaken by the District Commissioner in order to ensure that they are meeting their objectives, and to revise objectives and activities according to changing needs and circumstances. Consolidation of district- and community-level structures in general is advised to eliminate beneficiary confusion and over-burdening of volunteer staff, who often serve on a number of different bodies simultaneously.

There is also a need to consolidate the coordination mechanisms located at community level, particularly those structures focusing on health and those for social welfare. For example, the CWACs could be integrated with the Safe Motherhood Action Groups and the Neighbourhood Health Committees. This is in line with the shift of the Primary Health Care Mandate to the MCDMCH and will lead to improved integration of these services.

**Revised institutional framework for SP**

A feedback and recommendations workshop was held with the NSPP TWG on 8 August 2013 where members were given an opportunity to revise the tentative framework presented above. Based on the discussion and input from various groups, the structure below was presented and is viewed to be a good institutional arrangement for implementation of the NSPP.
The following key points were made with regards to the roles and responsibilities for each structure.

It is important to note that there could be a temptation to establish a single unit, with no multi-sectoral representation, managing social protection at Cabinet level. Whilst this may be useful in terms of providing strategic thinking, it is critical that the sector is not controlled by a ‘top-down’ approach where instructions in the sector are dictated separately from the ministries. Instead, the TWG proposed for the establishment of a National Social Protection Council which has multi-sectoral representation and supported by a NSP Secretariat which could be based at ministerial level.

The **NSPC** will be responsible for policy direction, resource mobilisation and strategic planning.

The **Secretariat** will provide technical advice and guidance on issues of SP so as to ensure that the policy is understood as a broad framework which encompasses a range of policies. It may be worth considering that this Secretariat be linked to the National Implementation Committee described next rather than the NSPC.

The **National Implementation Committee** will be responsible for tracking policy implementation, coordination of integration amongst the four pillars, and quality assurance. It is advised that the Chairperson of this committee should be elected as there are several ministries involved in SP implementation. This will also strengthen accountability.
The **Technical Working Groups (TWG)** of the Implementation Committee will focus on the systemic elements of the overall social protection system, namely: Human Resources; Programme Implementation, awareness raising and communication; funding; M&E and research. A sub-committee for each of the four pillars of the NSPP will then be established for each TWG, namely: social assistance, social security, livelihood and empowerment, protection.

The subcommittees will receive reports from the **PDCC** which will be responsible for coordination and monitoring and evaluation of implementation at district level.

The **DDCC** will have a **social protection sub-committee** which will be responsible for overseeing that there is an integrated approach to delivery of SP services.

**Monitoring and evaluation**

An M&E framework and system containing a set of core indicators that will be used to measure the outcome and impact of coordination and integration of SP services at all levels of government should also be developed. Regular evaluations should be conducted to evaluate the level of coordination of services and programmes at national, provincial, district and local levels.

**Decentralisation**

The current decentralization plans by the Government of Zambia will contribute towards better social protection coordination at district level. It must be highlighted that good decentralisation requires good centralisation. For example there need to be centrally designed programme to ensure rules of application and eligibility are the same across the districts. Standard setting and Monitoring and Evaluation (M&E) are areas that would also be the mandate of central government. Likewise a central database would be necessary. Finally, it is crucial that capacity building of councils and other local authorities take place for the effective administration and implementation of the social protection services as illustrated in the Nepal case study.

**Incentives for coordination**

If the National Decentralization Policy is implemented, management and administration of SP services will be fully located at local level. In order to increase motivation by local authorities and encourage coordination an incentive scheme for social protection coordination could be considered. It is recommended that Zambia in connection with the decentralization policy consider the performance-based management tools and incentives (including Formalizing Agreements for Decentralized Implementation, Monitoring the Quality of Decentralized Implementation using the IDG and Performance-Based Incentives for Quality of Decentralized Implementation) as described in the Brazilian case study. One of the performance indicators is good coordination.

**Capacity and Human Resources**

The capacity and resource constraints of the MCDMCH’s planning department needs to be addressed so that it can effectively fulfil its role of overseeing policy coordination, planning and M&E of the social protection system.

To address capacity constraints at district level – as well as the high demand for services currently being experienced by the Zambian Department of Social Welfare – lessons learnt from
South Africa’s use of an independent agency for grant administration could be applied. The South African Social Security Agency (SASSA) was established to manage and deliver social security transfers via service units located at district, area and ward level. These decentralised, independent structures have not only alleviated the work load of the Department of Social Welfare, but have brought about better integration and administration of the grant system via delivery of social services by one provider.

In order to enhance the capacity of those who work within the social protection system the government, led by the MCDMCH, needs to invest in systematic education and training programmes on social protection both for government and non-government stakeholders involved in the sector. These programmes need to be well-coordinated across all government ministries and between the government and the CSO sector. In particular, training programmes should be targeted at the district and community level social protection actors so that coordination can directly benefit beneficiaries through improved referral mechanisms, information sharing, and awareness raising.

**Data and information systems**

A central database should be installed at district level with a link to a centrally managed database, similar to the design of the SCTS management information system which is being developed. This will then allow for regular and reliable data to be captured on the number of families who require and receive social protection services. It should be accessible at all government levels with user privileges. The establishment of such a database should be coupled with the development of guidelines and sufficient capacity building of anyone who uses the system. The current work on establishment of a Management Information System (MIS) is acknowledged here.

A strategy needs to be developed for sharing knowledge and data amongst key Ministries and between Ministries and CSOs. This strategy should consider the creation of linkages between the databases of the Ministries by formal agreement so that data can be shared and verified amongst key stakeholders. These Ministries should include: MCDMCH, MOLSS, MOE, and MOH.

**Referral mechanisms**

In the absence of formalised referral mechanisms amongst SP actors it is recommended that a formal referral mechanism be developed together with a clear set of guidelines for referral between the proposed four pillars of SP and between these pillars and other relevant services such as health or education services. This should be accompanied by a capacity building strategy targeting all government and non-government actors involved in direct service provision at district and local levels. Respondents also noted that the formulation and operationalization of standardised targeting mechanisms, for the identification and selection of SP beneficiaries, should be prioritised to enhance transparency and equitable distribution of benefits.

**Knowledge and awareness on SP**

As part of the strategic plan for the NSPP, a joint communication strategy should be developed to raise awareness and share information on SP amongst the public and specific key stakeholders such as parliamentarians, religious leaders, traditional leaders, and the media.
Coordination between government and other actors

A strategy for the inclusion of business in the SP sector needs to be developed starting with a clear vision of the private sector’s role and contribution towards a comprehensive SP system. Opportunities exist for the business community to play a key role in the ‘graduation’ of beneficiaries from social assistance, via its participation in empowerment, skills development, income-generating and capacity-building initiatives.

In terms of facilitating SP coordination between government and civil society, the compilation of a database of all NGOs, CBOs and FBOs operating at district level might be compiled at provincial level to indicate what services are being provided, by whom and to which target groups. This database could be based upon the existing Register of Societies - and might be used to facilitate linkages between all SP actors thus eliminating programme overlaps or duplication and resource wastage.

The Kenyan Hunger Safety Net Programme (HSNP) offers a potential model for collaboration between government and non-state actors. Coordinated at national level by a HSNP secretariat, this programme facilitates the allocation of unconditional cash grants via cooperation with district-level INGOs – responsible for beneficiary targeting and registration - as well as the banking sector and private merchants – who oversee grant distribution through the use of biometric data and smartcards. Furthermore, this coordination between state and non-state actors has greatly facilitated cash grant distribution in isolated and ‘hard to reach’ areas with poor security and limited infrastructure.

Develop institutional arrangements for effective implementation of a national Social Health Insurance system

Key recommendations emerging from the study include the use of an autonomous fund administrator within a public accountability structure to manage the scheme to ensure heightened levels of efficiency and effectiveness. The introduction of the scheme should be accompanied by a national sensitisation campaign to inform the public of the scheme and its benefits - and to promote higher membership and contribution levels. It is to be noted the future expansion of social insurance to other contributory benefits including maternity benefits that need to be coordinated with such fund.

Finally, it is recommended that all forms of contributory social protection/social security be included under one single coordination framework. Similarly assistance mechanisms could be placed under a single coordination structure to streamline the pillar’s activities and interventions. Kenya’s National Safety Net Programme (NSNP), whilst overseeing coordination of all cash transfer programmes, offers a best practice model from which key learnings might be drawn and applied.

Grievance mechanism for SP

There is currently no joint grievance mechanism for social protection. It is recommended that a joint social protection grievance mechanism should be established with clear guidelines. This could be part of a Single Window Services as mentioned in the Cambodian case study. Awareness creation and information campaigns on social protection need to include this joint grievance mechanism as well.
# Table of Contents

1  Introduction .................................................................................................................. 23
2  Background and Context .............................................................................................. 23
3  Social Protection in Zambia .......................................................................................... 24
   3.1  The Social Protection Floor approach ...................................................................... 24
   3.2  Definition of Social Protection .............................................................................. 25
   3.3  Social Protection Policy and Legislation ............................................................... 26
4  Purpose and objectives of the study ............................................................................. 28
5  Overview of key concepts .............................................................................................. 29
6  Research method and sample ....................................................................................... 31
   6.1  Research method ..................................................................................................... 31
       6.1.1  Planning workshop ......................................................................................... 31
       6.1.2  Document review ............................................................................................ 31
       6.1.3  Desktop study ................................................................................................ 31
       6.1.4  Design of instruments ..................................................................................... 32
       6.1.5  Training fieldworkers ..................................................................................... 33
       6.1.6  Data analysis ................................................................................................... 33
       6.1.7  Draft report writing ......................................................................................... 33
       6.1.8  Data collection ................................................................................................ 33
       6.1.9  Feedback and recommendations workshop .................................................... 33
   6.2  Sample ..................................................................................................................... 33
       6.2.1  Sample of provinces and districts ..................................................................... 33
       6.2.2  Sample of national stakeholders ..................................................................... 34
       6.2.3  Sample of provincial and district level stakeholders ....................................... 35
7  Coordination of policy and planning (National level) ..................................................... 36
   7.1  National goals and priorities for social protection ................................................... 36
   7.2  Current government structures, roles and responsibilities ...................................... 36
       7.2.1  Current government structures in Zambia ........................................................ 36
       7.2.2  Role of Cabinet ................................................................................................ 38
   7.3  Structures and mechanisms and tools to promote coordination at national level .... 38
       7.3.1  Effectiveness of structures and mechanisms at national level......................... 41
   7.4  Issues affecting Social Protection policy making and planning ............................... 45
       7.4.1  Government works in silos .............................................................................. 46
7.4.2 Poor end-user orientation during planning ................................................. 46
7.4.3 Absence of an integrated policy framework for social protection ................. 46
7.4.4 Lack of incentives to collaborate ............................................................... 47
7.4.5 Limited coordination of social protection planning and policy making within ministries ....................................................................................... 48
7.4.6 Poor coordination of social protection planning and policy making with other social protection actors ............................................................. 48
7.5 Key point summary .................................................................................... 49

8 Coordination of implementation (Provincial, district, local) .................................. 50
8.1 Roles and responsibilities .............................................................................. 50
  8.1.1 Role of provincial government .................................................................. 50
  8.1.2 Role of district government and community governmental structures ........... 51
  8.1.3 Role of business ...................................................................................... 51
  8.1.4 Role of Cooperating Partners and Donors .................................................. 52
  8.1.5 Role of Civil Society ................................................................................ 52
  8.1.6 Role of traditional Leaders ....................................................................... 53
  8.1.7 Role of beneficiaries ............................................................................... 54
8.2 Structures and mechanisms for coordination at provincial, district and community level ........................................................................................................ 54
  8.2.1 Effectiveness of coordination structures and mechanisms at provincial and district level ................................................................................. 57
8.3 Effectiveness of coordination of implementation ............................................. 59
  8.3.1 Limited vertical coordination within ministries .......................................... 59
  8.3.2 Limited funding and resources ................................................................. 60
  8.3.3 Lack of formal referral mechanisms ......................................................... 60
  8.3.4 Limited information sharing between social protection actors .................. 60
  8.3.5 Limited coordination between government and other actors at community level .................................................................................................. 61
8.4 Effectiveness of coordination within and between the four pillars of social protection ........................................................................................................ 61
  8.4.1 Description and effectiveness of social assistance coordination ................. 61
  8.4.2 Description and effectiveness of social security (contributory) coordination .... 64
  8.4.3 Description and effectiveness of livelihood and empowerment coordination .... 65
  8.4.4 Description and effectiveness of protection programmes coordination ........ 66
8.4.5 Effectiveness of coordination between the four pillars of social protection ..... 67
8.4.6 The shift of Primary Health Care mandate to MCDMCH .......................... 68
8.5 Key point summary ......................................................................................... 69

9 Knowledge and awareness of social protection................................................. 70
9.1 Knowledge and understanding of social protection ...................................... 70
9.2 Awareness raising around social protection and social protection services .... 70
9.3 Key point summary ......................................................................................... 71

10 Coordination of management of SP services/systemic issues.......................... 71
10.1 Knowledge and data management ................................................................. 71
10.1.1 Identification, intake and referral of beneficiaries ...................................... 71
10.1.2 Database of beneficiaries ......................................................................... 72
10.2 Decentralisation ............................................................................................. 72
10.2.1 Consequences of decentralization on coordination and on poor families ... 73
10.2.2 Incentives for coordination ...................................................................... 74
10.3 Budget for SP and coordination of budget ..................................................... 75
10.4 Grievance procedure coordination ............................................................... 76
10.5 Key point summary ......................................................................................... 77

11 Impact .............................................................................................................. 78
11.1 Key point summary ......................................................................................... 79

12 Conclusion ........................................................................................................ 80

13 Recommendations............................................................................................ 83
13.1 Policy and planning ....................................................................................... 83
13.2 Funding for SP ............................................................................................... 84
13.3 Institutional framework for SP .............................................................. 85
13.3.1 Revised institutional framework for SP ...................................................... 87
13.4 Monitoring and evaluation ............................................................................ 89
13.5 Decentralisation ............................................................................................. 89
13.6 Incentives for coordination .......................................................................... 89
13.7 Capacity and Human Resources ................................................................. 89
13.8 Data and information systems ...................................................................... 90
13.9 Referral mechanisms .................................................................................... 90
13.10 Knowledge and awareness on SP ............................................................... 90
13.11 Coordination between government and other actors .................................. 90
13.12 Develop institutional arrangements for effective implementation of a national Social Health Insurance system .......................................................... 91
13.13 Grievance mechanism for SP ........................................................................ 91

Annexure 1 Case Study Kenya Social Protection Policy ........................................... 92
Annexure 2 Case study Zambia ........................................................................... 96
Annexure 3 Case study Ghana ........................................................................... 99
Annexure 4 Case study Kenya ........................................................................... 102
Annexure 5 Case study Chile ........................................................................... 105
Annexure 7 Case study Mozambique ................................................................... 108
Annexure 8 Case study Cambodia ..................................................................... 111
Annexure 9 Case study Nepal ........................................................................... 115
Annexure 10 Case study Brazil ......................................................................... 119
Annexure 11 Case study South Africa ................................................................. 123
Annexure 12 Reference list for document review and desktop study on best practice .... 127
Annexure 13 Social protection programmes ....................................................... 131

Table of Tables

Table 1 Sample of provinces and districts ............................................................... 34
Table 2 Sample of national stakeholders ................................................................ 35
Table 3 National coordination structures and mechanisms ........................................ 38
Table 4 Provincial Coordination mechanisms and structures ....................................... 54
Table 5 District coordination mechanisms and structures ........................................ 55
Table 6 Community coordination mechanisms and structures .................................... 56

Table of Figures

Figure 1: The Social Protection Floor as an integrated set of policies and programmes aimed at protecting and empowering citizens throughout their life cycles (Adapted from Figure 2 of Social Protection Floor: For a Fair and Inclusive Globalisation: 2011). ........................................................................... 25
Figure 2: Current Central, Provincial and Local Government Structures in Zambia .......................................................... 37
Figure 3: Social Protection Institutional Framework for Kenya’s National Social Protection Policy .......................................................... 44
Figure 4: SWAP coordination mechanisms in Zambia MOH ........................................ 45
Figure 5: Coordination of Social Cash Transfer Scheme ........................................... 62
Figure 6: Tentative institutional framework for implementation of the NSPP ................ 85
Figure 7: Revised institutional framework for NSPP .................................................. 88
Figure 8: Social Protection Institutional Framework .................................................. 93
Figure 9: Institutional structure for administering main cash transfer programmes .......................................................... 95
Figure 10: Overall structure for joint meetings and working groups ................................ 96
Figure 11: How the different institutions work together to maintain Brazil’s Single Registry .......................................................... 120
Figure 12: Structure of decentralised service delivery for SASSA ................................ 124
1 Introduction

The Ministry of Community Development, Mother and Child health (MCDMCH) is coordinating the development of a National Social Protection Policy (NSPP). In order to achieve this, an inter-ministerial working group has been established to assist with the development of a holistic, broad-based policy framework with the potential to ensure coherence; improved coordination and monitoring and evaluation.

To assist in this policy formulation process the International Labour Organisation (ILO) has undertaken this study on the coordination of social protection policies in Zambia, coupled with a critical review of current and possible coordination mechanisms to facilitate the outreach of – and access to – social protection services within the country. This report is a product of this task and the structure is explained below.

Structure of the report

The report commences with a discussion of the background and context to poverty and inequality in Zambia followed by an overview of social protection in the country. The research purpose and objectives are presented thereafter including the research method and sample; and followed by a discussion of the key concepts. The sections that follow present the findings of the qualitative analysis according to the key themes covered in this study which includes coordination of policy and planning; coordination of implementation; coordination of management of social protection services (systemic issues); awareness and knowledge of social protection measures; and impact of coordination and non-coordination. Each of these sections ends off with a concluding summary which also highlights main points to consider when designing recommendations to improve coordination of social protection policies and programmes in Zambia. The final two sections of the report present the overall conclusion and recommendations.

A series of nine case studies on international good practices related to social protection coordination have been written by the research team. These have been referred to in the report where they are relevant to the findings and recommendations; and they have also been annexed to the report in annexure one to nine.

2 Background and Context

According to the African Economic Outlook\(^4\) (2012), Zambia is enjoying a robust level of economic growth, with an economic growth projection of 7.3 per cent for 2013. This favourable trend has been underpinned by sustained agricultural production over the past three years, coupled with expansion in a number of sectors including construction, manufacturing, transport and communications, plus a rebound in the mining industry. As a result of the country’s favourable economic performance, the World Bank has reclassified Zambia as a lower-middle income country.

However, despite these positive indicators, a staggering 60 per cent of the Zambian population - and an estimated 78 per cent of those located in rural areas – continue to live below the poverty line\(^5\). Poverty reduction strategies are being hampered by the country’s vulnerability to

---


\(^5\) Development of the National Social Protection Policy (NSPP), The Technical Brief for the Lunch Meeting with key Permanent Secretaries (30 April 2012): Ministry of Community Development, Mother and Child Health (MCDMCH)
external shocks and a sluggish global economy, which is impacting negatively upon further expansion of Zambia’s key mining sector. Another challenge faced by the country is the high level of unemployment, particularly amongst its youth. Studies estimate that 63 per cent of urban youth, aged 15-19 are without employment, whilst 48 per cent of those aged 20-24 are unemployed. This is of concern given that half of the total 14 million people living in the country are under the age of 15. In rural areas, most households depend upon subsistence agriculture, “...with limited access to resources and capacities, such as education, skills and contacts, that would enhance productivity.” This makes such households highly vulnerable to external ‘stresses’ such as droughts, floods or periods of price volatility and fluctuation.

Social protection (SP) serves as an important means of ‘graduating’ or moving households from such a state of high vulnerability and poverty to one of resilience, with an increased capacity to invest in productive assets and hence improved livelihood security.

3 Social Protection in Zambia

3.1 The Social Protection Floor approach

The Social Protection Floor (SPF) approach was developed by the ILO based upon current examples of protection extension mechanisms being implemented - mostly within developing countries. During the 2011 International Labour Conference, the following definition of a SPF was confirmed:

“...social protection floors, containing basic social security guarantees that ensure that over the life cycle all in need can afford and have access to essential health care and have income security at least at nationally defined minimum level. Social protection floor policies should aim at facilitating effective access to essential goods and services, promote productive economic activity and be implemented in close coordination with other policies enhancing employability, reducing informality and precariousness, creating decent jobs and promoting entrepreneurship.”

The SPF thus offers an integrated set of social policies with the aim of promoting a comprehensive, coherent and coordinated approach to SP, to ensure that beneficiaries are assisted throughout the course of their lives. Underpinned by the principle of social justice, it includes guarantees of universal access to basic benefits, including essential, affordable social services in the areas of health, water and sanitation, education, food security, housing - and any other needs as defined by national priorities. The SPF also guarantees access to basic income security, in the form of social transfers for the elderly and people with disabilities, as well as child- and income-support benefits for the unemployed and working poor.
Figure 3: The Social Protection Floor as an integrated set of policies and programmes aimed at protecting and empowering citizens throughout their life cycles (Adapted from Figure 2 of Social Protection Floor: For a Fair and Inclusive Globalisation: 2011).

A key strength of the SPF is that it is not prescriptive, nor is it proposed as a universal standard. While it is recommended that the SPF be integrated into national development plans, it offers a flexible policy approach that, once adopted, should be country-led. This allows for benefits / interventions to be designed and implemented as per each country’s specific needs, priorities and financial capacity.¹⁰

3.2 Definition of Social Protection

The Government of Zambia (GRZ) defines social protection (SP) as “...all policies and practices that promote the livelihoods and welfare of people suffering from crucial levels of poverty and deprivation or vulnerable to risks and shocks.”¹¹

Thus a sound, comprehensive SP system has the potential to significantly contribute towards addressing inequality and poverty, as well as to promote the realisation of human rights for the poor, vulnerable and marginalised populations of Zambia as guaranteed within the SPF approach outlined above.


¹¹ Development of the National Social Protection Policy (NSPP), The Technical Brief for the Lunch Meeting with key Permanent Secretaries (30 April 2012): Ministry of Community Development, Mother and Child Health (MCDMCH)
### 3.3 Social Protection Policy and Legislation

The foundation of the current Zambian SP sector was laid during the development of the Poverty Reduction Strategy Paper (PRSP) of 2002 which focussed on poverty reduction based upon economic development. However, programmes aimed at addressing poverty and vulnerability were - at that point - poorly coordinated, with uneven and limited coverage. Consequently, a draft Social Protection Strategy (SPS) was formulated in 2005, with the aim of guiding and coordinating SP in Zambia. The SPS was developed by the SP Sector Advisory Group (SAG), chaired by the then Ministry of Community Development and Social Services (MCDSS); and was based upon Zambia’s Fifth National Development Plan (FNDP), which outlined “...the government’s vision for poverty reduction and growth for 2006-2010.” The SPS was a positive step in terms of its provision of a common framework for SP programmes - as well as the expansion, coordination, monitoring, reporting and financing thereof – and reports suggest that considerable progress is being made in the Zambian SP sector, particularly in the provision of basic protection services such as food and health care.

However, key challenges remain which impact negatively upon the ‘graduation’ of incapacitated and low capacity households to levels of income security and self-sustainability (Refer to Box 1).

These challenges include limited capacity and funding for programme implementation, poor coverage of SP mechanisms, insufficient monitoring and evaluation (M&E) to determine the impact of GRZ programmes on poverty reduction, insufficient levels of awareness and understanding of SP amongst key stakeholders, and increasing levels of poverty. Also noted is the absence of coordination and integration mechanisms for the development and delivery of SP services, which has led to programme overlaps and fragmentation in the sector. Studies also

---

12. Mboozie, B. (Senior Social Welfare Officer of the Ministry of Community Development and Social Services). Presentation on Zambia Social Protection Case Study (no date indicated).


---

**Box 1: SP Target households as identified by the MCDSS:**

**Incapacitated households:**

Households that have no adults fit to work or a high dependency ratio. Hence, these households have limited means and capacity to maintain themselves. Such households often have many elderly members and children, and are often affected by HIV and AIDS. The capacity of such households will only improve once the children become economically active.

**Low-capacity households:**

Households generally located in rural areas that have only a few economically active adults and marginal livelihoods - making them highly vulnerable to risks and shocks, particularly those of an environmental nature. These households tend to avoid risks, engaging in low-input, low-outputs agricultural activities.

indicate that many of the programmes being implemented are failing to reach or address the needs of the extremely poor and vulnerable. Thus a significant amount of public spending on SP is not contributing to poverty reduction amongst those who need it most.

In 2008 the ILO conducted a social protection expenditure and performance review of the whole social protection system in Zambia. A key aspect of this review was that it saw social protection as one system which includes different non-contributory benefits or elements with each element being equally important and mutually supportive of the others. This includes child benefits, benefits for the elderly and benefits for the disabled. The review highlighted the importance of finding synergies so that all people are covered and adequately budgeted for. In other words, even though different benefits may be led by different ministries, they should be strictly planned and implemented in close coordination with other benefits. Further, it was noted that there is a need for social pension to synergise with other elements of social security such as social insurance, especially if the benefits are to be universal.

The political will of the GRZ for investment in SP is noted to be growing. This – it might be argued – is demonstrated by the GRZ’s request for the development of a National Social Protection Policy (NSPP), under the lead of the MCDMCH. An inter-ministerial Technical Working Group (TWG) was established in 2012 including representatives from the Ministries of CDMCH, Labour and Social Security, Health, Education, Finance, Agriculture, and Gender and Child Development; as well as civil society organisations (CSOs) and cooperating partners (CPs). Thus far, the TWG, which receives financial and technical support from UNICEF and technical advice from CPs, has developed a proposed outline for the NSPP, including a broad conceptualisation of SP plus a four-pillar framework, which includes:

- Social Assistance: non-contributory transfers (in cash and in kind), fee waivers and subsidies with a view to reducing poverty and vulnerability
- Social Security: contributory insurance schemes (pensions, health insurance), labour market programmes and protection of workers – including maternity protection
- Livelihood and Empowerment programmes: micro-finance services, agricultural input supplies, women’s empowerment programmes, and functional literacy
- Protection from violence, abuse, and exploitation: legal protection for vulnerable groups including child protection systems, anti-human trafficking programmes and anti-gender-based violence initiatives.

These four pillars are the proposed components of the new NSPP which is still in the draft phase, however, new NSPP is generally perceived as an ‘umbrella’ framework, which will lay the foundation for improved coordination and coherence of the Zambian SP system as a whole.

---


16 Temin (2008: 6) notes that political will is essential in ensuring a long-term, sustained commitment to social protection.

17 Mboozie, B. (Senior Social Welfare Officer of the Ministry of Community Development and Social Services). Presentation on Zambia Social Protection Case Study (no date indicated).
4 Purpose and objectives of the study

The main purpose of this assignment is to conduct a study and provide recommendations to:

- Advise on the most suitable institutional arrangement(s) or frameworks for the coordination of social protection policies in Zambia, including the need for creating overarching coordination mechanisms, tools and processes.
- Review current roles and linkages between social protection agencies and institutions.

The specific objectives of the study were to:

- Assess and analyse the relevance of increased collaboration between social protection services for increased service impact and effectiveness, notably social cash transfers at community level;
- Study the institutional and administrative possibilities for coordination with and linkages to contributory social security system in the country (at central and decentralized levels);
- Determine challenges for the uptake of social and health services in the community, as well as the current level of interaction of these services with social protection programmes; envisage synergies with local development and employment/livelihood promotion measures;
- Critically review the relevance and need for better coordination of essential social and health services and social protection programmes at local, district and national levels so as to contribute towards a better understanding of such coordination mechanisms;
- Determine what inputs/institutions and/or mechanisms/processes can improve upon the out-reach of social protection, in a context of scaling up of current social protection;
- Assess the likely impact of a better coordinated social protection system at local, national and inter-departmental levels; and
- Provide recommendations, based upon national and international good practices, regarding appropriate institutional processes in a coordinated, national social protection policy that is both multi-sectoral and inter-departmental.
- Reference the tools and instruments which need to be established and maintained at different levels to ensure coordination and coherence of the Governance and Administration of social protection, notably with Reference to R.202 on national floors of protection.
- Make recommendations to establish a responsive, rights based and accountable social protection system including the need for complementary, overarching institutions to ensure accountability which could include, for example, citizen/beneficiary claim and redress processes and institutions and interactions with community based legal clinics.
5 Overview of key concepts

This study is exploratory in nature and was guided by the main purpose and objectives listed above; by the questions identified by the Technical Working Group at the planning meeting; and by a review of literature. Some of the key concepts or themes which are explored in this study are discussed below.

The need for social protection coordination

A growing level of global awareness regarding the importance of SP has led to a multitude of policies, programmes and SP systems. However, as noted by Robalino, Rawlings and Walker (2012: 1), “Although the term (SP) ‘system’ gives the idea of interconnected programmes achieving interrelated functions, the reality in most cases is that of an amalgam of programmes operating with little or no coordination…” 18 This lack of well-coordinated and harmonised SP interventions is noted as contributing to a number of challenges including system fragmentation, the duplication of SP efforts and consequent inefficient use of – often limited – resources, uneven or scattered coverage and programme gaps, leading to a lack of programme effectiveness, poor impact and limited sustainability 19.

Such a lack of coordination is due to a variety of factors including constraints to institutional capacity and organisation, a lack of political leadership, limited resources and a lack of incentives, plus the prevailing problem of programme implementers working in ‘silos’ or in isolation of other efforts. Another key contributor to poor coordination is the plethora of SP interventions, and varying time frames in terms of their design and implementation.

Rawlings, Murthy and Winder (2013) 20, and Gawanas (2012) 21 emphasise that, when properly coordinated, social protection can serve as a catalyst for expanding access to services and thus contribute to enhanced equitable sector outcomes. This starts with a national framework for improved coordination and coherence and should be coupled with on-going dialogue between national, non-state and informal systems, sound vertical and horizontal or inter-ministerial coordination, as well as the provision of adequate resources and capacity-building - where necessary. The use of a singular administrative system - including common targeting mechanisms, registries, and M&E systems - is also noted as facilitating improved SP coordination and harmonisation.

The dual role of government in social protection coordination

The document review reveals that, when assessing the coordination of the social protection system as a whole it is critical to differentiate between government’s role as central oversight and policy-making body; and government’s role as implementing body. Thus, the study has sought to explore the level of coordination in relation to these two roles.

---


Coordination of SP policy and planning

The planning and policy level is the highest level of engagement where the objectives and functions of the social protection system are defined. It therefore plays a critical role in coordination and integration by ensuring that the SP system has an overall vision and that SP does not become a residual or corrective approach. It also assists to define the institutional arrangements that can facilitate coordination between different ministries and sectors.  

This study looks at what structures, mechanisms and tools are in place at national level to facilitate the coordination of SP policy and planning and whether they are effective. This analysis provides a good foundation from which to develop the proposed institutional framework for the coordination of social protection in the country.

The study also explores the key issues affecting coordination of policy making and planning and the main themes which emerged from the data include: government works in silos; poor end-user orientation; absence of integrated policy framework for social protection; lack of incentives to collaborate; limited coordination within ministries and between ministries and other actors.

Coordination of SP implementation

Coordination of implementation looks at the level of coordination and integration of social protection programmes. Coordination of implementation is crucial to avoid overlapping, increase efficiency and improve synergies.

Thus this study explores the current structures, mechanisms and tools that are in place at provincial, district and community to facilitate the coordination of programme implementation and assesses whether they are effective. It also explores the issues affecting implementation and the key themes emerging here are: limited vertical coordination within ministries; limited funding and resources; lack of formal referral mechanisms; limited information sharing between social protection actors; and limited coordination between government and other actors.

Given that the framework for the draft NSPP is based on four pillars, the study reviews the current coordination mechanisms of each pillar and the levels of integration and coordination of these four pillars with one another.

Knowledge and awareness of social protection

A shared understanding of social protection amongst all actors within the system makes an important contribution to coordination as it implies that all actors are working towards a common purpose. Thus this study explores the current levels of knowledge and understanding of social protection amongst key stakeholders and to what extent awareness raising on social protection and related services has been conducted.

Systemic issues which impact on coordination

---

22 Rawlings et al (2013)

Effective coordination of the SP system requires that a number of systemic elements need to be in place to support the overall system. The issues affecting the overall coordination of social protection system vary from country to country, and in Zambia the key systemic elements which emerged from the data include: knowledge and data management; decentralisation; budget for SP and coordination of budget; and coordination of grievance procedures.

6 Research method and sample

A qualitative research design was adopted for this study which was conducted at national, provincial and district level. Three of the country’s districts were covered, namely Kafue, Chipata and Serenje. Within each province and district a set of semi-structured interviews were conducted with a pre-defined set of government and non-government stakeholders. Focus groups were held with district coordinating bodies and with beneficiaries of grants. Finally, at national level semi-structured interviews were conducted with key informants from a select number of ministries, non-governmental organisations, cooperating partners and donors.

The section below describes the research method and sample in detail, including the steps in the research process and some of the study limitations.

6.1 Research method

A multi-method qualitative research methodology was adopted for this study. It adopted a participatory approach in that MCDMCH, ILO and other stakeholders who are part of the Technical Working Group (TWG) were involved in the design of the research, the questionnaires and the study recommendations.

The research team was managed by Southern Hemisphere who was responsible for implementing and managing all aspects of the study. The research process and methods employed are described below.

6.1.1 Planning workshop

A participatory planning workshop was held on 21 May 2013 with the Southern Hemisphere research team and stakeholders from: MCDMCH, Ministry of Labour and Social Security (MOLSS), UNICEF, ILO and the Platform for Social Protection. The planning workshop informed the methodology; sample of provinces and districts; sample of stakeholders; and instrument design.

6.1.2 Document review

A review of relevant documents and reports on social protection policy and programmes in Zambia; and coordination of social protection in Zambia was conducted. The list of documents reviewed is contained in annexure 12 of this report.

6.1.3 Desktop study

A desktop study was conducted throughout the duration of the overall study which involved a review of International Best Practice on Coordination of Social Protection. The process for conducting the desktop study is described below.

Data sources and search strategies

The names of countries or specific programmes considered to be best practice examples on social protection coordination. These included: Brazil, Chile, Cambodia, Ghana, Nepal, South
Africa, Mozambique, Zambia and Angola. However, the research team included other developing countries: DRC, Namibia, Malawi, Nepal, Botswana, Rwanda and Bukina Faso to ascertain whether additional countries could have important coordination elements. The full list of literature reviewed is contained in annexure 12 of the report.

An extensive search using a variety of search engines and databases, as well as particular search words was then conducted for each of these countries. Papers were also identified via the reference and bibliography lists of documents. An extensive search for relevant documents was also conducted of the ILO Global Extension of Social Security (GESS) website.

The documents selected for the study were subject to three main inclusion and exclusion criteria[1].

- The research must focus on best practice examples from developing countries in Africa, Asia and South America.
- The article / text must include information / refer to social protection, specifically in terms of coordination of social protection policies or programmes.
- Where possible, the research must be no more than five years old; therefore documents were excluded that predated 2007.

**Observations regarding document search and coding**

Overall, there were a limited number of documents that met the initial criteria as listed above. Whilst there are a wide range of texts documenting social protection services and models in developing countries, very few focused specifically on the coordination of social protection policies and practice. Based upon these findings, it would appear that there is a substantial paucity of published research and writing regarding the coordination of social protection mechanisms in a developing country context.

**Case study approach**

Each of the best practice examples has been written up as a case study with the following headings:

- Summary of what this case study demonstrates
- Description of institutional mechanism or structure
- Key lessons learnt and recommendations for Zambia

The best practice case studies have been integrated into the sections of the report where they provide the most relevant input and insights.

**6.1.4  Design of instruments**

A total of nine research instruments were designed based on the document review and inputs from the planning workshop. Technical input on the instruments was obtained from ILO before they were finalised. The instruments are listed below.

Semi-structured interview schedules:

- National level semi-structured interview schedule with government
- National level semi-structured interview schedule for joint interview with non-state

[1] Note that only English texts were included in the resource pool.
actors

- National level semi-structured interview schedule with donor funders (IMF and World Bank)
- Provincial level semi-structured interview schedule with government
- District level semi-structured interview schedule with government
- District level semi-structured interview schedule with non-state actors

Focus group discussion schedules:

- National level focus group discussion schedule with members of TWG
- District level focus group discussion schedule with members of DWAC
- District level focus group discussion schedule with beneficiaries of social protection services

6.1.5 Training fieldworkers

The four local fieldworkers who conducted the fieldwork at district level were provided with information on the background to the study and were trained by the project manager in the research instruments.

6.1.6 Data analysis

A coding sheet was developed based on the key themes explored in the study and NVIVO 8 qualitative software was used to analyse the data.

6.1.7 Draft report writing

The draft report was written and submitted to ILO and other key stakeholders for comment and input.

6.1.8 Data collection

Fieldwork began shortly after completion of the completion of training and was conducted over a period of one week.

A letter of introduction was provided by the MCDMCH which contained details of the purpose of the study and this facilitated access into the provinces and districts. The Ministry also made initial contact with the Provincial Social Welfare Officers to elicit their support for the study. The District Social Welfare Officers in each of the three districts provided support in setting up the interviews at district level. The national level interviews were set up by staff at the ILO offices in Lusaka.

6.1.9 Feedback and recommendations workshop

A feedback and recommendation workshop was held on 8 August 2013 to present and discuss the findings and to refine the institutional mechanisms.

6.2 Sample

6.2.1 Sample of provinces and districts

The selection of districts was discussed extensively at the planning meeting where it was decided that the criteria for selection of districts should be the level of effectiveness of coordination amongst social protection services. This allowed for the research team to
compare sites, learn lessons from good practices and learn about what challenges need to be addressed in a context of limited coordination when social protection services are scaled up.

In order to accommodate the timeframes and resources allocated for the study it was also decided that the districts should not be located too far in distance from Lusaka and that the districts chosen should have a provincial office located close to district office.

Based on this criteria and using a purposive sampling process, a total of 3 districts were selected – two districts where there is expected to be relatively good levels of coordination and one district where the coordination is considered less effective. This is captured in the table below.

**Table 1 Sample of provinces and districts**

<table>
<thead>
<tr>
<th>Province</th>
<th>Research site/s</th>
<th>Criteria</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lusaka Province</td>
<td>• Kafue</td>
<td>• No Cash transfer programme</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Effective level of coordination</td>
</tr>
<tr>
<td>Eastern Province</td>
<td>• Chipata</td>
<td>• Semi-rural</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Cash transfer programme</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Effective level of coordination</td>
</tr>
<tr>
<td>Central Province</td>
<td>• Serenje</td>
<td>• Semi-rural site</td>
</tr>
<tr>
<td></td>
<td>• Kabwe</td>
<td>• No Cash transfer scheme</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Less effective coordination</td>
</tr>
</tbody>
</table>

**6.2.2 Sample of national stakeholders**

A total of 11 key informant interviews; one joint interview and one focus group discussion were held at national level.

At the planning meeting it was decided that the interviews with national level stakeholders from the government should reflect each of the four pillars contained within the draft policy framework and that they should be conducted firstly at Permanent Secretary level; and secondly at the level of the Technical working group. Furthermore it was indicated that interviews should be conducted with both cooperating partners and funders. The table below captures the final sample of national level stakeholders which were included in the study.
Table 2 Sample of national stakeholders

<table>
<thead>
<tr>
<th>Method</th>
<th>Stakeholder Group</th>
<th>Explanation</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key informant interviews</td>
<td>State</td>
<td>• MCDMCH&lt;br&gt;• Ministry of Agriculture and Cooperatives (MACO)&lt;br&gt;• MOLSS&lt;br&gt;• Ministry of Health (MOH)&lt;br&gt;• Ministry of Education (MOE)&lt;br&gt;• Policy Analysis and Coordination Division (Cabinet)&lt;br&gt;• Management Development Division (Cabinet)</td>
<td>7</td>
</tr>
<tr>
<td>Focus group</td>
<td>State, non-state, CP, donors</td>
<td>TWG developing the NSPP</td>
<td>1</td>
</tr>
<tr>
<td>Joint interview</td>
<td>Non state actors</td>
<td>Platform for Social Protection&lt;br&gt;Civil Society for Poverty Reduction (CSPR)</td>
<td>1</td>
</tr>
<tr>
<td>Key informant interviews</td>
<td>Multi-lateral agencies and donors</td>
<td>• ILO&lt;br&gt;• UNICEF&lt;br&gt;• World Bank&lt;br&gt;• Irish Aid</td>
<td>4</td>
</tr>
</tbody>
</table>

6.2.3 Sample of provincial and district level stakeholders

A total of 18 key informant interviews and six focus group discussions were held at district level. Participants of the planning meeting felt that it would be important to interview the Provincial Permanent Secretary (PS) who heads up the Provincial Development Coordinating committee. This was done prior to moving into the district. The table below captures the provincial and district level stakeholder group, method and number of interviews and focus groups conducted.

<table>
<thead>
<tr>
<th>Method</th>
<th>Stakeholder Group</th>
<th>Explanation</th>
<th>Number of interview or focus groups</th>
</tr>
</thead>
<tbody>
<tr>
<td>Key informant interviews</td>
<td>Provincial government</td>
<td>PS who leads the Provincial Development Coordinating Committee</td>
<td>3</td>
</tr>
<tr>
<td>Key informant interviews</td>
<td>District government</td>
<td>Agriculture (1 per district)&lt;br&gt;Social welfare (1 per district)&lt;br&gt;Health (1 per district)</td>
<td>9</td>
</tr>
<tr>
<td>Key informant interviews</td>
<td>Non state actors</td>
<td>NGOs involved in SP sector (2 per district)</td>
<td>6</td>
</tr>
<tr>
<td>Method</td>
<td>Stakeholder Group</td>
<td>Explanation</td>
<td>Number of interview or focus groups</td>
</tr>
<tr>
<td>-----------</td>
<td>-------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>-------------------------------------</td>
</tr>
<tr>
<td>Focus group</td>
<td>State/non-state</td>
<td>Members of DWAC (including members of the DDCCs and CWAC) (1 per district)</td>
<td>3</td>
</tr>
<tr>
<td>Focus group</td>
<td>Non-state</td>
<td>Beneficiaries of SP services (1 per district)</td>
<td>3</td>
</tr>
</tbody>
</table>

7 Coordination of policy and planning (National level)

This section presents the findings of the current coordination of policy and planning of social protection occurring at national level.

7.1 National goals and priorities for social protection

The GRZ has established a set of national goals and priorities for social protection in Zambia. These are reflected in chapter 21 of the Sixth National Development Plan (SNDP); the National Social Protection Strategy (2005) and the Policy Manifesto of the ruling party, in which the chapter on social protection strategy states that: “The PF (Patriotic Front) government will adopt a comprehensive social protection policy, which will guarantee all citizens access to basic services, and provide additional support to those who face special challenges in meeting their basic needs. The implementation of the cross-cutting policy will be overseen by a high level unit established under the Cabinet Office”.

Many of the respondents confirmed that these national goals and priorities provide an overall vision for social protection in the country and an important starting point for a coordinated social protection system.

7.2 Current government structures, roles and responsibilities

7.2.1 Current government structures in Zambia

Zambia has three levels of government i.e. the Central government, provincial administration and the district/local administration. The function and administration of local government and the inter-governmental relations are regulated by the Local Government Act (cap 281 of 1991). It brought the following key changes:

- The Ministry of Local Government and Housing became responsible for Local Government while Cabinet office was responsible for provincial and district administration;
- A Deputy Minister (appointed by the President) became the political head of the province and was assisted by the Provincial Permanent Secretary who headed the secretariat;
- The dual system of district administration was reintroduced;
- The local government elections were reintroduced;
In 1995 the government introduced the national, provincial and district development coordinating committees (DDCC) to coordinate development activities.

Figure 4 Current Central, Provincial and Local Government Structures in Zambia

The district has a dual administration i.e. the field administration of Central Government (represented by departments of line ministries such as Education, Health, and Agriculture etc.) and Council/Local Authority. The two systems have separate reporting lines: the field administration staff report to their ministries through the provincial administration headed by the Provincial Permanent Secretary while the councils report directly to their parent Ministry i.e. Local Government and Housing (MoLGH). The provincial Local Government Officer has some limited powers based on what the Minister delegates to him/her. The field administration is headed by the District Commissioner while the Council is headed by the Major/Council Chairperson.

The political head of each Province is a Deputy Minister while the administrative head is the Permanent Secretary, both of whom are appointed by the President. The Permanent Secretary coordinates government activities in the province. Additionally, in each province are provincial heads of department who act as the link between the district and central line ministries. These are answerable to their sector ministries on technical matters while administratively they are supervised by the provincial permanent secretary on day to day matters. Also found at provincial level are the Deputy Permanent Secretary, Civil Servants, all of whom are appointed by the national government.

In order to improve the operations of the provincial administration, central government created the Provincial Development Coordinating Committee (PDCC) whose main function is to coordinate the planning and implementation of developmental activities in the province. It draws its membership from the DDCCs and provincial sector ministry officers and is chaired by the provincial Permanent Secretary. The main role of the provincial administration is to coordinate activities of the districts in their territory. But the province also plays an important function in development planning. Firstly, each province has a provincial planning office. Secondly, the PDCC has a critical role to play in decentralized development planning as they act as the link between the DDCCs and the National Development Coordinating Committee (NDCC)25.

7.2.2 Role of Cabinet

Two key Cabinet level offices were included as part of this study because of the important role they play in coordination of policy and planning.

- **The Management Development Division** (MDD) assists Ministries in developing strategic plans so as to ensure that policies are translated into action. The MDD then assists to develop their systems, structures and monitoring systems in order to implement their policies. Another important role they play is to give expert input into systems and structures that may not be operating efficiently. Therefore, if there is a problem with coordination of social protection policies they could be brought in as experts to advise on institutional mechanisms for improved coordination and implementation of programmes.

- **The Policy and Analysis Coordination Unit** is responsible for coordinating the formulation of government policies in all nine ministries. It is also responsible for coordinating the management of the Cabinet business (process of Cabinet papers/policies and final approval), and manages the division of responsibilities between the Secretariat and the Cabinet.

7.3 Structures and mechanisms and tools to promote coordination at national level

The table below presents the cooperative government structures identified by study respondents as playing a crucial role in the coordination of social protection related policy and planning at national level.

---

Table 3 National coordination structures and mechanisms

<table>
<thead>
<tr>
<th>Name of structure or mechanism</th>
<th>Lead Ministry</th>
<th>Members</th>
<th>Overall purpose, roles and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health and Social Select Committee of Parliament</td>
<td>Parliament</td>
<td>Members of parliament who deal with health and social issues</td>
<td>This committee plays a key role in the coordination of social protection policy at national levels.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>It is responsible for drafting laws pertaining to social policy including all social and health issues and if there is a bill, then it provides the input into this.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>It provides oversight in terms of the portfolio functions – looking at the way Ministries are performing in line with their portfolio functions. Sometimes they pick what they call a topical issue and they do an investigation to see how government is addressing a particular matter.</td>
</tr>
<tr>
<td>Social Protection Sector Advisory Group</td>
<td>PS of the MCDMCH</td>
<td>All social sector line ministries, development partners, civil society.</td>
<td>To monitor social protection programs against the Sixth National Development Plan and Vision 2030.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>To provide oversight and recommendations to institutions implementing social protection programmes.</td>
</tr>
<tr>
<td>Health Sector Advisory Group</td>
<td>MOH</td>
<td>All social sector line ministries, development partners, civil society.</td>
<td>To coordinate the health sector.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>To disseminate information and consult with wider sector.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Meets twice per year.</td>
</tr>
<tr>
<td>Employment and labour sector advisory group26</td>
<td>MOLSS</td>
<td>All social sector line ministries, development partners, civil society.</td>
<td>To advise government on general policy direction with regards to labour and</td>
</tr>
</tbody>
</table>

26 In the past the Employment and Labour SAG was dissolved and members joined the Micro Economic SAG however, this SAG became overloaded and it was found that employment issues were unique and needed their own platform so the Employment and Labour SAG was recently reconstituted.
<table>
<thead>
<tr>
<th>Name of structure or mechanism</th>
<th>Lead Ministry</th>
<th>Members</th>
<th>Overall purpose, roles and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Protection Policy Technical Working Group <em>(Temporary structure)</em></td>
<td>MCDMCH</td>
<td>All social sector line ministries, civil society and development partners.</td>
<td>This is a temporary structure tasked with developing the national social protection policy.</td>
</tr>
<tr>
<td>Platform for Social Protection (PSP)</td>
<td>The PSP Secretariat</td>
<td>Members of civil society</td>
<td>To coordinate social protection activities, capacity building, accountability amongst civil society actors.</td>
</tr>
<tr>
<td>Zambia Social Protection Programme Expansion Programme quarterly meetings and annual review</td>
<td>MCDMCH</td>
<td>DFID, UNICEF, Irish Aid, Finland, MCDMCH (expanded group for annual review)</td>
<td>Focus on the cash transfer programme – quarterly meetings are held with the PS in order to provide on-going feedback</td>
</tr>
<tr>
<td>National Development Coordination Committee</td>
<td>Chaired by the Secretariat to the Cabinet</td>
<td>Representatives from all line ministries, major Cooperating Partners, Key Development Programs and private sector entities.</td>
<td>Meet on an annual basis to coordinate and monitor the country’s development programmes and projects undertaken in each of the country’s provinces. <em>Respondents indicated that this structure does not meet regularly.</em></td>
</tr>
</tbody>
</table>

Two main tools for coordination were identified by the study.

1. A government handbook contains guidelines for developing policy and legislation which specifies the administrative provisions for consultation amongst all stakeholders during the policy development process. As one respondent explained:

   “When a policy is developed it is submitted to line ministries to avoid duplication or conflict of interest – we submit a draft to each of the departments to review”, *(National stakeholder)*

2. Partnerships between ministries are formalized with a Memorandum of Understanding (MOU) which are usually facilitated by the planning units within each department responsible for coordination. It was noted, however, that when it comes to implementation level, this coordination is often not formalized.
7.3.1 **Effectiveness of structures and mechanisms at national level**

In general respondents confirm that the structures and mechanism for facilitating planning between ministries at national level are adequate; however there is overall consensus that their level of functioning needs to be reviewed.

Several respondents stated that the Sector Advisory Groups for each of the line ministries and in particular the Social Protection Sector Advisory Group make an important contribution to coordination of social protection at the national level.

There is good representation of all sectors on the Social Protection SAG with respondents referring to it as being “truly inter-sectoral”. It meets regularly and provides a useful platform for sharing knowledge and information which is particularly the case for collaboration between government and civil society as the following respondent explains:

“The Social Protection SAG provides us with information which we could not have known in good time – it gives us information from civil society which we may not have obtained if we did not have these meetings. For example, education is free but we found out from civil society at the SAG that some schools are charging fees and this gave us an opportunity to work with certain DEBs to intervene and help children to access schools”, (National stakeholder)

Despite these strengths, respondents still believe that the SP SAG does not function to its full potential. The key reasons for this are discussed below.

**Current structure of the SP SAG working groups**

The three working groups of the SAG reflect how Zambia categorises social protection – incapacitated households, low capacity households, and gender. These sectors are informed by the National Development Plan and disability is integrated into the three groups. However, respondents expressed concern that this structure fails to capture what is happening in the different sectors since they report against the objectives of the NDP and it does not capture specific programmes. It is hoped that the four pillar structure proposed in the Draft NSPP will inspire a new way of thinking in terms of coordination.

**Issues of leadership**

The issue of leadership was mentioned as having an impact on the effective functioning of the Social Protection SAG. The MCDMCH takes the lead for this structure but there may be reluctance of one government department to be ‘dictated to’ or lead by another. It may therefore be useful to ensure that terms of reference for the SAG distinguishes between the role of the lead department, as co-ordinator of the structure, and the role of all participating ministries as being integral to the realisation of the objectives of the structure.27

**Limited decision making power**

The limited decision making power of the SAG was mentioned frequently by respondents as having an impact on its effectiveness.

---

27 A similar proposal was made in a study done in South Africa on cooperative governance structures in the children’s sector undertaken by Giese et al, 2008 for the Alliance for Children’s Entitlement to Social Security
SAGs are meant to be technical fora charged with the responsibility of planning and formulating appropriate development interventions primarily through facilitation. SAGs have a pool of sectoral technocrats and experts who are supposed to be best placed to deal with development issues affecting their respective sector.28 According to the TOR for SAGs, they are tasked with ensuring “intra-sectoral allocation of resources and related expenditures, and ensure annual sector budgets presented to Ministry of Finance and National Planning (MoFNP) reflect sector priorities, and are in line with the Vision 2030, the goals and objectives of the FNDP and are linked to the district plans.”29 However, respondents raised concern that the focus of SAG meetings tends to be on programme implementation rather than on planning and budgeting. This is expressed in the following statement:

“It is not systematic in terms of coordination for planning – there is no effort to adjust planning based on what is happening elsewhere in government – this is linked to the decision making power of the group”, (National stakeholder)

This is supported by the findings of two surveys undertaken by the M&E Department of MoFNP in 2008 and 2009 which found that more than one half of all respondents to the survey felt that budget matters were not discussed either adequately or at all in SAG meetings.30 A study conducted by World Bank also confirms this finding. In its assessment of the institutional set-up and responsibilities of the current social protection system in Zambia it states that “the SP-SAG plays more of an advisory role that is limited to reviewing the implementation bottlenecks of programmes...it does not have any power to make decisions and recommendations for increasing coherence of the social protection system, nor does it review the modalities for achieving each programmes objectives and outcomes.”31 Some respondents in this study have therefore advocated for the decision making power of SAGs to be increased so as to improve their effectiveness.

Lack of clarity around lines of accountability

Linked to issues of decision making is the issue of who the SP SAG is accountable to which was noted by respondents as impacting on its functioning:

“Recommendations are made and action can be taken by the SAG – the response to these could be slow or quick - but the recommendation is not binding so if something hasn’t been done there is no accountability”, (national stakeholder)

Whilst this research did not review whether the SAG had a monitoring and evaluation system, it is promising to note that the M&E Department of MoFNP has undertaken two surveys on the performance of the SAGs in 2008 and 2009. However, it is unclear to what extent the findings of these surveys have been used to ensure corrective action aimed at improving the inefficiencies of the SAGs.

Without clarity on lines of accountability, the SP SAG has no way of knowing whether it is achieving its activities and outputs and no way of knowing how these activities and outputs are contributing to its intended outcomes and impact. It is therefore suggested that the monitoring

---

should be **results-based** which will allow the SAG to assess how “what it does” (activities and outputs) contributes to the intended outcomes and impacts it wants to achieve.

However, the question of who is best placed to monitor the SP SAG will still need to be decided and is related to the need for a higher level structure at Cabinet level which was raised repeatedly as a “missing link” in the overall system.

**Need for higher level structure overseeing coordination of social protection policy**

The need for a higher level structure, at Cabinet level to oversee the coordination of social protection policy and strategic direction across government resonated strongly amongst respondents at national level:

“We need a SP division at cabinet office for the next five years whilst setting up the structure and getting the policy off the ground – if it is located at this level and it gives directives from the cabinet office then this also ensures that it comes from a position of authority”, (national stakeholder)

“At a higher level, beyond the level of ministries, at cabinet office in the office of the vice president we should have a system that is able to oversee this as a cross-cutting issue rather than by sector specific ministries”, (national stakeholder)

“The SAG plays more of a technical role – we need a higher level body which can give strategic direction for Social Protection with a focus on the four pillars”, (national stakeholder)

As the above statement reflects, this body should take responsibility for providing strategic direction and oversight for social protection across the four pillars.

The case study in [annexure 1](#) on Kenya’s National Social Protection Policy (2012) provides some useful ideas for an institutional framework at national and sub-national level for improved coordination. The diagram below illustrates the national and county coordination mechanisms to oversee the development, implementation and integration of social protection strategies, programmes and resourcing.
Figure 5 Social Protection Institutional Framework for Kenya’s National Social Protection Policy

In Kenya the National Social Protection Council is established by an act of Parliament. The Council’s membership is comprised of Government ministries engaged in social protection and non-state actors. Its functions include, among others: the development of a national strategy on coordination of social protection; design and development of integrated social protection programmes; the development of systems to improve research, analysis and targeting; review of the status and progress on social protection, and identifying gaps and areas to be prioritized to improve impact of social protection. The Council affairs are reported at the National Assembly through the host ministry. The county and sub-county social protection committees are responsible for coordination of community-based initiatives. As social protection is a function of the National Government, the committees report to the NSPC but have appropriate functional interface with the county governments.

A similar structure could be adopted by the Zambian government. Based on study participants’ calls for a higher level structure to oversee social protection coordination a National Social Protection Council at Cabinet level could be established. Such a structure, with the support of a dedicated Secretariat, could provide oversight and strategic direction which would significantly improve accountability in the sector. The strategic decision making power of the current SP SAG could be strengthened with it playing both an advisory and operational role around social protection interventions.

The case study on Mozambique in annexure 7 demonstrates how the country’s social protection sector revision process has resulted in establishment of multi-sectoral Council for Coordination at national level which is responsible for the management of the Basic Social Security Sub-system - one of the sub-systems of the overall social protection system.

The case study on the Sector Wide Approach Planning framework (SWAP) utilised by the MOH in annexure 2 of this report provides some further ideas on an institutional framework for...
integrated planning and coordination between multiple stakeholders. The structure is presented in the diagram below:

![Figure 6 SWAP coordination mechanisms in Zambia MOH](image)

Although not included as part of the organogram above it is worth noting that the overall structure is supported by a Secretariat located in the Development and Cooperation Unit of the MOH which is also responsible for ensuring that the structure operates according to its terms of reference.

The SWAP is used to coordinate donor funding through one single department rather than for improving coordination between departments so therefore it may therefore not be applicable for this study. However, one aspect of the SWAP structure which could be useful is the arrangement of the TWGs. Instead of being programme or target group based they are focused more on systemic themes which include: service delivery/communication; human resources; procurement; M&E and research; finances. This set up could be worth considering when setting up sub-committees of the SP-SAG in future.

Some other features of this structure which are useful for consideration include:

- A clear terms of reference for each of the structures including roles, responsibilities and duties.
- A comprehensive/consolidated meeting matrix which is developed annually, approved by the annual consultative meeting and monitored and revised by the secretariat reporting to the policy meetings.
- A results based framework to monitor the implementation of the SWAP framework with indicators that talk to outcomes for coordination.

### 7.4 Issues affecting Social Protection policy making and planning

Mixed responses were given with regards to the level of coordinated policy making and planning between ministries. Whilst the majority of respondents indicated that coordination is
generally weak at this level, others indicated that it is adequate. The section below discusses the key issues raised with regards to coordination of policy making and planning between ministries.

7.4.1 Government works in silos
The “silo mentality” which exists amongst Ministry officials was frequently mentioned as a key barrier to planning and policy making between ministries and refers largely to the fact that each Ministry tends to work according to their particular mandate. As one of the respondents explained:

“Each ministry has a mandate – so they will implement according to this mandate.....they are independent of each other and are not compelled to work together on anything”, (national stakeholder)

This occurs even at the highest level of the Permanent Secretary as one interviewee indicated:

“The coordination falls under the mandate of the PS and that is why they are called ‘Chief Coordinating Officer’ but they remain narrow in their approach and limit issues being dealt with in their Ministry, not across ministries”, (National stakeholder)

7.4.2 Poor end-user orientation during planning
It was further noted by one respondent that poor coordination and integration of services is a result of poor end-user orientation at the planning stage. This is explained in the following quote:

“If you looked at the beneficiaries or users of the service, you would think through backwards to say ‘what is it that this person needs, what set of programmes need to be in place, and who will be affected by the course of action you want to introduce?’” (National stakeholder)

In other words, the needs of the end-user or beneficiary are not born in mind when policies and plans are being developed by ministries. Thus, the focus on the end-user would facilitate the development of integrated programmes and coordinated service delivery.

7.4.3 Absence of an integrated policy framework for social protection
A range of policies related to social protection are spread across the different line ministries however, there is no specific policy that covers the social protection system. It was further confirmed by respondents that these policies do not mention the term “social protection” and, up until recently, were not seen as such as the following stakeholder explains:

“One of the things the people in the ministry never realised is that this programme was used as a measure to protect people during droughts and floods when people became vulnerable....and now only when other players such as World Bank became involved did we start seeing them as social protection programmes – in the past we saw them purely as livelihood programmes”, (National level stakeholder)

Thus there is general consensus amongst stakeholders that a key barrier to effective coordination of social protection planning between ministries is the absence of a national social protection policy. As one stakeholder noted:

“We are running these programmes within ministries and we need a framework within which to operate - to show who should lead, mechanisms to work together and roles and responsibilities”, (National level stakeholder)
Whilst provisions for coordination are contained in some of the social protection related policies, others do not have such provisions. For example, the Ministry of Agriculture and Cooperatives (MACO) indicated that their current social protection related policies do not specify the institutional arrangements required for coordinated service delivery with other ministries.

This lack of a national framework for social protection undermines coherence and coordination between programmes and the development of the National Social Protection Policy (NSPP) is thus seen as a critical move towards filling this gap.

It will provide a consensually agreed, multi sector and inter-departmental framework for informing and guiding all stakeholders in the development and implementation of sectoral social protection programmes. The policy can thus be seen as “an umbrella framework” and there is general consensus amongst respondents in this study that it will be a first step towards creating coherence and improving coordination in planning and programme implementation as the following quotes reflect:

“The programmes have always been there – you have the SCT and the PWAS with strategies developed under the Community Development policy. They existed separately and this is trying to bring them together – to ensure it encompasses prevention and promotion”, (national stakeholder)

“With the new Social Protection policy, which has a broad conceptualisation of social protection – contributory, non-contributory, health insurance, protection and livelihoods – it will result in the implementation of an institutional arrangement that can facilitate coordination”, (national stakeholder)

The Government also envisages that, once developed, the proposed NSPP will contribute to national monitoring and evaluation of social protection strategies and programmes across sectors and institutions in the country.

Furthermore, the proposed four-pillar framework of the NSPP has the strong potential to break the “silo mentality” of the Ministries referred to frequently by respondents which will contribute to overall improved coordination and integration of the social protection sector.

7.4.4 Lack of incentives to collaborate

A final issue raised by respondents is lack of incentives for collaboration between ministries at national level. This is reflected in the following statement:

“There are no incentives to do this – people are not held accountable for extent to which they coordinate with others – and then there are some disincentives to coordination – sharing knowledge or resources – sometimes people may think things will be taken away – better to just implement your programme and the budget because if you coordinate the budget some of the money may move elsewhere”, (National stakeholder)

Furthermore, coordination is not recognised as a key performance area and is therefore often seen as an add-on task, rather than a core function. As stated, the absence of incentives is linked to poor accountability for coordination amongst social protection actors. This issue is explored in more detail in section 9.1.2 below.
7.4.5 Limited coordination of social protection planning and policy making within ministries

The planning unit within each ministry is tasked with overseeing the coordination of programmes within ministries.

The MOLSS has a number of committees at senior management level to facilitate planning and some coordination across programmes occurs here. The MOE has individual steering committees for each of its social sector programmes (school feeding, bursaries and learners with special needs) however, it was indicated that since they focus on different target groups coordination between them is limited. The MOH makes use of the SWAP framework which has been described earlier in section 7.3.1 of this report.

The planning department within the MCDMCH plays the role of coordinating various programmes that the different departments are implementing (e.g. PWAS and SCTS) however; these programmes are often not well coordinated. One explanation for this that the different levels of funding received for each programme results in different levels of functioning as the following respondent explains:

“There are coordination challenges within the ministry – you have a situation where the Social Cash Transfer Scheme which is heavily donor funded has money for meetings, workshops, travel, equipment and then you have the other departments within the ministry which are struggling with no donor funding so it’s very difficult to coordinate within the ministry”, (national stakeholder)

This quote highlights how donor funding which is allocated for specific programmes can have an unintended negative impact on coordination of programmes within ministries.

It was further noted that the planning department within the MCDMCH has capacity constraints because one person in the department is tasked with fulfilling multiple functions including policy coordination, planning and M&E. This set up is different to other ministries which have standalone units for each of these functions. It was noted that this issue has been raised internally within the ministry during their last strategic planning process.

7.4.6 Poor coordination of social protection planning and policy making with other social protection actors

At national level respondents were asked to describe the level of integration of social protection planning and service delivery between government, business, civil society organisations and donors.

The overall sentiment is that there is no overall plan or vision on how these different sectors complement one another. As one stakeholder stated:

“There is no integrated system to say if you want to do this intervention then you need to follow a specific procedure; or if you want to target these people then you need to consult this department – we don’t have this system in place”, (national stakeholder)

Coordination with business at national level is limited to once off programmes and projects and they are not included in planning activities, this is confirmed in the following statement:

“The problem with the business community is that when they plan programmes or project they do it without consulting us (government) but when they reach a hitch or problem with implementation then they try to get us involved”, (national stakeholder)
On the other hand, linkages between government and civil society at national level are fairly strong.

At national level the Platform for Social Protection is the lead NGO which sits on the TWG of the NSPP and on the Social Protection SAG. They therefore give input into the policy making process and thematic areas. It was noted that, in the absence of a policy spelling out a clear role for civil society it is difficult for this sector to claim their space in the social protection arena as the following respondent explains:

“*The most difficult issue is that there is no policy which spells out our role so we have to fight for our space. It is very much left up to the discretion of ministry to engage you but our role is to engage with ministry and to give input and monitor and evaluate so we can see if they are yielding intended results. That would be our ideal role – we are fighting for space and want us to be recognised as partners*,” (National stakeholder)

Whilst there is no single unit at national level coordinating social protection advocacy and services amongst civil society organisations, this sector coordinates and harmonises their efforts through thematic group meetings.

In order to harmonise their position as civil society in this sector a social protection thematic group was established. The group is facilitated by the Platform for Social Protection and the quarterly meetings are attended by sector specific groups – HIV, children, women, and different vulnerable categories which are represented by lead organisations for each group. The meetings are generally held before the SAG meeting they develop a joint report for submission to the SAG.

In general this structure has worked well because there is unity in purpose and CSOs understand the importance of standing together. However, a key challenge has been the differing mandates of organisations which make it difficult to get all groups around the table at meetings.

Other thematic groups have bi-annual meetings and these include agriculture; governance; gender; water and sanitation; health and nutrition. Each of these groups participates on different platforms with government and share information on what was presented in SAG meetings.

### 7.5 Key point summary

- National goals and priorities for social protection are articulated in the National Social Protection Strategy, and the SNPD which provide an overall vision for social protection in the country and an important starting point for a coordinated social protection system.
- The district has a dual administration i.e. the field administration of Central Government (represented by departments of line ministries such as Education, Health, and Agriculture etc.) and Council/Local Authority. The two systems have separate reporting lines;
- The main barriers to effective coordination of social protection policy making and planning at national level include: ministries working strictly according to their mandate (silo mentality); absence of an integrated policy framework for social protection; poor end-user orientation during planning; lack of incentives to collaborate.
- The social protection SAG makes an important contribution to coordination of social protection at national level as it provides a platform for knowledge and information sharing.
- Key strengths of the SP SAG are: its inter-sectoral membership and regular meetings.
- Key challenges of the SP SAG are: its focus on implementation rather than on planning and budgeting; limited decision making power; leadership; accountability.
The need for a higher level structure, at Cabinet level to oversee the coordination of social protection policy, implementation and strategic direction across government resonated strongly amongst respondents at national level and the institutional framework for Kenya’s National Social Protection Policy provides some interesting ideas here.

The MOH’s SWAP framework and tools also provide some useful ideas for integrated planning and coordination with key ministries and other actors although the focus of this structure is on coordination of donor funding through one ministry rather than on coordination between ministries.

The planning department within the MCDMCH which is tasked with coordination of social protection planning and policy making within the ministry and with other ministries experiences severe capacity constraints and its management capacity will need to be significantly strengthened in future.

Whilst linkages with civil society organizations in planning and policy making is strong; linkages with business is poor and government has no plan or overall vision for how to include business, civil society organizations and donors in planning activities.

8 Coordination of implementation (Provincial, district, local)

The focus of this section is on the coordination of programme implementation at provincial, district and local level. It looks at the roles and responsibilities of key social protection actors and provides an overview of the structures and mechanisms in place to facilitate coordination of programmes. It then goes on to review the effectiveness of coordination of programme implementation and then explores the four pillars of social protection and whether the pillars could be useful entry points for coordination at various delivery levels.

8.1 Roles and responsibilities

8.1.1 Role of provincial government

The roles and responsibilities of provincial government in the implementation of SP services might be divided into two main streams; namely administration and supervision / coordination.

Administrative duties at provincial level include the provision and oversight of human resources, coupled with technical support in the form of capacity building, training and orientation of key staff. Provincial administration is also responsible for the lobbying of funds and other material resources, such as equipment and transport – based upon information gathered at district level regarding such requirements. Once these resources have been approved and dispatched from central level, provincial government stakeholders are responsible for overseeing the movement thereof to the relevant districts.

Provincial government is also responsible for the planning, supervision and coordination of SP service delivery at district level. Included here is the provision of guidelines and recommendations to ensure the smooth functioning of all SP programmes, coupled with ongoing monitoring of all associated activities. This information, together with evaluations of programme performance and achievements, is communicated to the relevant head office. Therefore, it might be argued that provincial government serves as a vital communication link between district and national level.

Finally, it was noted that provincial government was responsible for networking with other stakeholders, such as CBOs and NGOs, regarding SP service provision. This was undertaken to ensure integration and harmonisation of the SP system within their areas of jurisdiction.
8.1.2 Role of district government and community governmental structures

The role of district government in terms of SP is overwhelmingly described as being that of ‘implementer’ of all SP services under the relevant departments. Like provincial government, district level stakeholders are responsible for programme planning and budget formulation, the release and distribution of resources (based upon community-needs assessments), M&E plus reporting on programme implementation and results, and networking with other welfare-related key players, including local CBOs, NGOs and FBOs.

The DWAC is a vital part of the district SW governance structure and fulfils a variety of strategic and key roles, including:

- Community-level capacity building (CWAC members and data collection staff);
- Conflict resolution;
- Authorization and approval of final beneficiary lists;
- Oversight to ensure that all necessary checks and balances are in place with regard to benefit distribution;
- Liaison with ACC and CWAC for community data-gathering, programme follow-ups and to ensure the transparency of all work undertaken by the CWAC; and

Facilitation of information-sharing between the community and the DSW – as highlighted in the quote that follows:

“There are about 62 CWACs in the districts so it would be hard for all of these to knock on the door of the SWO; but through the representation of the DWAC it is easier to pass information upwards and downwards.” (FGD, DWAC, Serenje)

Community-based structures are generally responsible for information-collection on their relevant communities plus identification of vulnerable households. Following such an identification process, these structures will compile and verify beneficiary lists – and communicate these to the relevant government stakeholders, often via a sub-district body (such as the ACC). The sub-district body thus serves as a communication link between the community and district government. It also has a verification role and ‘coordinates’ applications from various CWACs to ensure that there are no double applications or duplication of applications.

8.1.3 Role of business

Respondent feedback indicates that public-private SP partnerships are limited and areas of cooperation and coordination between government and the private sector are generally of a ‘discretionary’, charitable and ad hoc nature. This is highlighted in the following quote:

“The business community is normally involved through spot meetings when a need arises. The level of contribution is very low and not comparable to the international organisations.” (District, government stakeholder, Chipata)

Where the business community does engage in SP, it generally does so via contributory mechanisms; that is business’ contribution towards social security schemes, or in the form of Corporate Social Responsibility (CSR). Other notable private sector contributions towards

---

32 This generally takes the form of construction of health clinics for employees and surrounding communities only; or via donations of food, seed and blankets to the poor.
improved social protection for the citizens of Zambia include the Business Coalition on HIV and AIDS, which has led to resource disbursements for clinics.

It was noted that some business communities, notably the banking and telecommunication sectors, do contribute funds towards sponsorships and campaigns; however, these tend to be located in the areas of health and education only. No formal mechanisms for public-private cooperation exist as yet.

Respondents did, however, note some examples of good coordination and cooperation between the private and public sectors. These included the use of businesses to distribute agricultural inputs to surrounding communities, plus the business community’s purchase of outputs produced by micro-farmers and cooperatives. Such mechanisms, together with a possible future role for business in capacity-building, skills development - and beneficiary ‘graduation’ and empowerment initiatives – require further consideration and investigation.

8.1.4 Role of Cooperating Partners and Donors

The roles of cooperative partners (CPs) and donors in the provision of SP services are varied and numerous. Apart from the provision of funding across all levels, the roles and responsibilities most noted include:

- Provision of technical input – both at policy and programmatic / implementation level. This included representation on the Cooperating Partner SP Group, as well as on various technical working groups and advisory bodies;
- Management of research, analysis and M&E to inform and guide policy formulation; plus provide the necessary evidence for programme expansion or ‘scale up’;
- Systems strengthening and capacity building, including the provision of training to non-state actors and organizations; and
- Programme implementation assistance.

In terms of coordination of support provided by CPs, the United Nations Development Assistance Framework for the Republic of Zambia 2011-2015 (UNDAF) is the guiding framework used by UN agencies. It spells out how the UN System in Zambia should use already existing Government coordination mechanisms established to coordinate support to the SNDP. It is stated that the UNDAF will be coordinated at different operational levels through a range of mechanisms at Government level, within Cooperating Partners (CP) groups, and within the UN System. Overall, the Government is supported by the UN system in Zambia, in collaboration with other cooperating partners, in strengthening its aid coordination, management and accountability.

8.1.5 Role of Civil Society

Most of the respondents included in this study agreed that the key role for non-state actors was that of complementing or supporting government-led SP interventions. This support included the allocation of human and material resources, coupled with technical input and capacity-building. However, it was also noted that NGOs could play an important role in the monitoring of government performance and its provision of SP interventions. This could be coupled with advocacy, lobbying and community mobilisation efforts to influence SP policy and national strategy formulation. It was also noted that NGOs, particularly INGOs, often had the necessary
resources to go to ‘hard-to-reach’ areas, hence it was argued that they could play an important role in facilitating access to SP services amongst isolated and marginalised communities.

Feedback regarding the role of faith-based organisations (FBOs) and churches specifically appears to vary according to district. In Serenje and Kafue, beneficiaries, non-state actors and government stakeholders all noted that local churches played an important ‘complementary’ or supplementary role in terms of the government’s provision of SP. In Serenje, beneficiaries included in the study noted that SW and local churches were, in fact, the two ‘main doors’ via which they accessed any form of social assistance – and that the church played a vital role in both vulnerable household / community member identification and SP monitoring; that is, ensuring that benefits reach the targeted households. Coordination between FBOs / churches and government departments in these two districts was reported to be minimal, relatively informal and mainly via referrals. However, Serenje respondents did note that FBO representatives served on the DDCC.

In contrast with this, beneficiaries from Chipata who participated in the study indicated that they received no assistance from their local FBOs or churches. However, this did not concur with feedback obtained from Chipata government respondents. These stakeholders noted that certain services were being provided by FBOs, albeit independently of government. Line ministries were, however, called upon / involved in particular cases of vulnerability.

Across all three districts included in the study, FBOs and churches were mainly involved in the following forms of local or community-level SP:

- Donations of money or food, such as the provision of milk formula or meals for children whose parents could not provide them with adequate nutritional input
- Provision of agricultural inputs, such as livestock, to poor families as well as assisting with livelihood and empowerment programmes, such as fish farming
- Educational support, via the provision of books, school uniforms and assistance with payment of school fees
- Medical support, including services related to gender-based violence (GBV) and care for those affected by HIV and AIDS
- The establishment and operation of shelters or homes for children

The Kenyan Hunger Safety Net Programme (HSNP) offers a potential model for collaboration between government and non-state actors. It illustrates how the coordination between state and non-state actors has greatly facilitated cash grant distribution in isolated and ‘hard to reach’ areas with poor security and limited infrastructure.

8.1.6 Role of traditional Leaders

While traditional leaders do not play a role in direct provision of SP services, they are important stakeholders within the system – particularly in terms of their support / acceptance of SP programmes being implemented in villages under their supervision. Here, the traditional leader plays an important role as ‘gatekeeper’ to the community and may facilitate programme implementation via information dissemination, sensitisation and awareness-raising, and community mobilisation. Secondly, all district-level respondents indicated the role played by traditional leaders in the identification of SP beneficiaries coupled with their assistance with resource distribution. Traditional leaders were also noted as playing a supervisory and monitoring role in programme roll-out, plus are often called upon to act as mediators in the event of disputes relating to receipt of benefits. This is further outlined below:
“Traditional leaders provide checks and balances. At the community level, the traditional leaders provide a ‘supervisory responsibility’ at sub-district structures. They have a mediator role between the community and the district government.” (Provincial, government stakeholder, Chipata)

8.1.7 Role of beneficiaries

Of interest is that the beneficiaries of SP services and programmes strongly advocated for themselves to be seen as pro-active members of the SP system. This included their selection – and election - of community representatives to serve on community-based SP structures, their nomination of vulnerable households as beneficiaries, as well as their accountability for choices made in terms of use of the grants / transfers received. This is indicated in the quote below:

“We are pro-active recipients of social services. For instance, the majority of beneficiaries invest the received cash in farming, business activities and in renewing or improving our own houses.” (FGD, Beneficiaries, Chipata)

In terms of those beneficiaries involved in empowerment and livelihood programmes, a measure of accountability and adherence to programme regulations is also required to ensure the sustainability of these activities – and their future impact upon other community members. Finally, beneficiaries’ involvement in community-based structures – such as the ACC, CWAC and the NHC – offers them the opportunity to provide input regarding services required, as well as their experiences of SP service provision and overall programme effectiveness. Thus they play a key role in informing programme design and roll-out, ensuring relevant and effective interventions.

8.2 Structures and mechanisms for coordination at provincial, district and community level

The tables below present the key cooperative government structures which were identified by study respondents as playing a role in coordinating social protection programmes implementation at a provincial and district level.

Table 4 Provincial Coordination mechanisms and structures

<table>
<thead>
<tr>
<th>Name of structure or mechanism</th>
<th>Lead Ministry</th>
<th>Members</th>
<th>Overall purpose, roles and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>PDCC (Provincial Development Coordinating Committee)</td>
<td>Provincial Permanent Secretary (Under the office of the President)</td>
<td>The members are all Provincial Heads of government departments and civil society organizations</td>
<td>The overall purpose is planning, coordination, provision, supervision and monitoring. It is made up of sub-committees.</td>
</tr>
<tr>
<td>Provincial Social Protection Fund Committee (PSPFC)</td>
<td>MCDMCH</td>
<td>All heads of departments (education, health, agriculture etc) and civil society.</td>
<td>This is a new committee that has been put in place to coordinate the Social Protection Fund. Meets when funds are released to discuss/approve applications for the social protection grants.</td>
</tr>
</tbody>
</table>
### Table 5 District coordination mechanisms and structures

<table>
<thead>
<tr>
<th>Name of structure or mechanism</th>
<th>Lead Ministry</th>
<th>Members</th>
<th>Overall purpose, roles and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Provincial Disaster Management and Coordinating Committee</strong></td>
<td>Office of the Vice President</td>
<td>All heads of departments and civil society</td>
<td>The coordination and provision of disaster management services in times of droughts, floods, epidemics, pest infestation, environmental degradation, refugees, and internally displaced populations as well as accidents.</td>
</tr>
<tr>
<td><strong>District Development Coordinating Committee (DDCC)</strong></td>
<td>Cabinet Office; chaired by District Commissioner</td>
<td>All line ministries, NGOs and FBOs and private sector</td>
<td>Coordination and planning of all programmes in the districts. Oversight and monitoring of development activities in the districts. Each ministry reports through sub-committees.</td>
</tr>
<tr>
<td><strong>District Welfare Assistance Committee (DWAC)</strong></td>
<td>MCDMCH</td>
<td>Ministries of Health, Education, Agriculture Civil society organizations including NGOs, CBOs, FBOs</td>
<td>Evaluates needs of beneficiaries for social protection Planning Monitoring Verification of targeting Grievance mechanism - people can raise their concerns if for example the targeting is not done well in the districts. Approve payments</td>
</tr>
<tr>
<td><strong>District Agricultural Committees (DAC)</strong></td>
<td>Ministry of Agriculture</td>
<td>Ministry of Agriculture, local council, MCD, Office of the President, Zambia National Farmers Unions, Secretaries of the Community Agriculture Committees</td>
<td>Sub-committee of the DDCC Coordination of agriculture activities in the district - responsible for approving all agricultural related programmes at district level Formulation of by-laws to implement agricultural activities in the district</td>
</tr>
</tbody>
</table>

34 In some districts the DWAC is a subcommittee of the District Coordinating Committees (DDCC). In others it is merely linked to the social subcommittee of the DDCC.
<table>
<thead>
<tr>
<th>Name of structure or mechanism</th>
<th>Lead Ministry</th>
<th>Members</th>
<th>Overall purpose, roles and responsibilities</th>
</tr>
</thead>
</table>
| District Disaster Management Committee | District Commissioner (Office of the President) | This is a sub-committee to the DDCC | Sub-committee of the DDCC  
The coordination and provision of disaster management services in times of droughts, floods, epidemics, pest infestation, environmental degradation, refugees, and internally displaced populations as well as accidents. |
| The District Aids Task Force | Ministry of Health | MOH, NGOs, FBOs, business community | Coordination and organisation around issue of HIV/AIDS in the district |
| District Food Security Committee | MCDMCH | MCDMCH; MACO; civil society partners |  |
| District Child Labour Committee | MOLSS |  | These committees create awareness of the worst forms of child labour and monitor the implementation of child labour programs at the district and village levels. |

**Table 6  Community coordination mechanisms and structures**

<table>
<thead>
<tr>
<th>Name of structure or mechanism</th>
<th>Lead Ministry</th>
<th>Members</th>
<th>Overall purpose, roles and responsibilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Area Coordinating Committee (ACC)</td>
<td>MCDMCH</td>
<td>Community volunteers</td>
<td>For coordination, CWACs are grouped together into ACCs to facilitate communication, training, monitoring and reporting. The ACCs main role is to scrutinize submissions of CWACs before submitting for approval the list of applicants to the district.</td>
</tr>
<tr>
<td>Community Welfare Assistance Committees</td>
<td>MCDMCH</td>
<td>Community volunteers</td>
<td>The main role of a CWAC is to identify in collaboration with the traditional leadership households in the area that need public welfare assistance.</td>
</tr>
<tr>
<td>Community Aids Task Force Committees</td>
<td>MOH</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The following tools are used for formalised coordination:

1. Guideline/operational manual: This tool has been used for SCTS, PWAS and FISP to guide roles and responsibilities in details between the various stakeholders. It also describe eligibility criteria and the application process;

2. Memorandum of Understanding (MoU): This tool is particularly used by MCDMCH to guide cooperation between its partners like MACO, MOH and NGOs on SCTS, PWAS, FSP, Primary Health Care and other social welfare services. For the School, Health and Nutrition Programme, the MoE and MoH have also entered into a MoU together and NGOs also seem to use it as a tool to guide their cooperation;

3. Referral slip system: This was a tool mentioned as guiding the cooperation between DSWO and the Police as well as between the DSWO and the hospitals;

4. SAG and DDCC: Meetings with agendas for SAG and DDCC were also considered a formalized tool for guiding coordination between stakeholders.

It should be noted that beside the guidelines/operational manuals listed above, each department utilises internal guidelines but at district and community level there are no other guidelines or operational manuals to guide coordination. Likewise, there are no tools that are applied across programmes or between the four pillars - the structure proposed for the new NSPP.

8.2.1 Effectiveness of coordination structures and mechanisms at provincial and district level

Respondents believe that the current structures and mechanisms are adequate for the coordination of services at district level. The overwhelming majority of national and district level respondents confirm that the DDCC is the main district level structure for promoting coordination of services across government ministries and between government, civil society and the private sector.

The sub-committees of the DDCC meet once per month and these differ across districts. For example in Chipata they include: Planning and Advisory sub-committee; Economic sub-committee; District Infrastructure sub-committee; Social Service sub-committee; Disaster Management sub-committee; Environmental sub-committee; Gender based violence sub-committee; District Food Security Pack sub-committee. These are apparently specified as a result of an act of Parliament and the roles and responsibilities are defined in a terms of reference.

Cross cutting issues such as gender and disability are integrated into each of these structures and it was suggested that social protection could be integrated as a cross cutting issue. Alternatively a sub-committee for social protection could be established as an umbrella for other social sector programmes. However, there would need to be clarity around how this structure would relate to the role of DWAC as there is potential for overlap of roles.
During these meetings stakeholders give update reports on activities that have been carried out and share challenges. Key strengths of the DDC structure are that:

- Membership is truly multi-sectoral as it includes government, civil society and private sector stakeholders
- The District Commissioner who is responsible for chairing the meeting has a good level of authority in the district.
- The capacity and technical knowledge of DDCC members is fairly strong
- Roles and responsibilities are clearly defined as there is a clear terms of reference for DDCCs
- The structure is a good ‘gatekeeper’ for new development projects in the community as the following statement reflects:

  “If there is an NGO in the district and they want to implement a programme in the community then they table it with the DDCC and they give the go ahead and direction of where to implement it”, (national stakeholder)

A number of challenges were raised with regards to the structures and mechanism responsible for coordination of programmes and services.

Firstly the national and provincial equivalent to the DDCC does not meet on a regular basis. It was reported that the National Development Coordinating Committee has not met for some time and is considered by some respondents to be a “dormant” structure. The PDCCs meet on an irregular basis, for example in Kabwe (Central Province) it was noted that the PDCC only met twice in 2012 and prior to that it met in 2009. It is therefore not surprising that there is no regular reporting from the PDCCs to DDCCs. It is therefore not surprising that the level of reporting from the PDCC down to DDCC is problematic which leads to poor continuity and follow-up.

Secondly, an observation made by a number of respondents at district level is that some of the DDCC committees have overlapping mandates and some respondents complain that they have to attend meetings of multiple structures as the following respondent indicated:

  “The composition of these committees mostly constitutes the same people, therefore you find people moving from one meeting to another. At times there are situations where meetings clash and in this case it means that some people do not attend meetings”, (District, government stakeholder, Serenje)

This sentiment was echoed by national level stakeholders during the focus group discussion of the NSPP TWG where it was suggested that the number of structures at district level will need to be reviewed.

Thirdly, all districts reported that meetings for the committees are irregular and that there is little collaboration between the different committees which means that joint planning between the sub-committees is limited as the following respondent explains:

  “There is a lack of planning together among ministries because of the ‘one sector report’ for sub-committees”, (District government stakeholder, Serenje)

Lastly, the issue of funding was raised numerous times by respondents as a barrier to the effective functioning of the DDCC and its sub-committees as the following quote reflects:
“The DDCC helps everyone know what others are doing but the meetings are only held when there are funds. For example members need transport or refreshments. There are 20 departments all reporting so it can be a long meeting, a whole day, and if there are no funds some people are excluded”, (District, government stakeholder, Kafue)

As this quote indicates, limited funding affects attendance and regularity of meetings. It also affects coordination at the local level.

8.3 Effectiveness of coordination of implementation

Whilst a small handful of respondents believe that coordination of social protection services and programmes between government ministries is adequate, the majority indicated that there is still much room for improvement.

In general it was noted that ministries tend to work in isolation at community level. This is reflected in the following statement:

“Co-ordination is not much. The programmes work in isolation. For example, we don’t work with Labour around the social security/pensions, but people waiting for their pensions come to us for social assistance. Some of them get stranded, they sleep at the bus terminus, they have no food, yet they have to be in Lusaka to follow up on their pension. So we end up supporting them, or even ‘repatriating them’ to get home”, (Provincial Stakeholder, Lusaka)

A number of issues related to effective integration and harmonisation of programme implementation were raised by respondents and these are discussed in more detail below.

8.3.1 Limited vertical coordination within ministries

There are well-established structures within ministries to facilitate vertical coordination of programmes from national through to provincial, district and local level. The main tools for facilitating vertical coordination are operations manuals, guidelines and regular internal meetings. However, the research revealed that not all of these structures are functioning effectively. For example, in Chipata district it was noted that the PWAC has only met once.

Most respondents indicated that vertical coordination within their ministries is adequate; however an issue around communication and feedback from national through to district level was raised. One stakeholder sums this up:

“Decisions always come from the HQ to provincial to district – it is very top-down rather than the reverse and there is very little feedback on our reports on our recommendations and we rarely see reports from the HQ”, (Government stakeholder, Kafue)

This is not surprising given that some of the provincial and national level structures may not meet regularly which is the case of the PDCC in some provinces and the NDCC. It was also confirmed by respondents that there is no communication and information sharing mechanism in place to facilitate two way communications.

Another factor contributing to lack of feedback could be that most of the programmes are centrally coordinated. For example, with the SCTS and the PWAS decisions around budgets are taken at central level whilst lower levels focus on implementation. Although there is some form of bottom up planning and preparation of budgets, the districts submit them to national level but Treasury (MOFNP) makes the final decision with little feedback on what influenced these decisions. This may be because the budgets for the social cash transfer scheme are paid on a regular basis and therefore more predictable.
8.3.2 Limited funding and resources

The most frequently mentioned barrier to effective coordination of social protection services is that of limited funding and resources for coordination meetings and monitoring. For example, some stakeholders do not have funding for transport to attend community meetings; or DWACs are unable to attend monitoring trips to see what has been implemented at community level.

There is also limited funding for programmes and services and this funding is described as being inconsistent as the DWACs in Kafue highlighted:

“There is inconsistency in funding. We all receive funds at different times and this makes coordination difficult“, (FGD, DWAC, Kafue)

Despite these funding constraints respondents across all districts indicated that ministries share resources such as transport, fuel and person-power amongst themselves if and when they are able to do so.

8.3.3 Lack of formal referral mechanisms

It is important to acknowledge that there are some good examples of collaboration between ministries at local level. For example, the MACO and MCDMCH jointly run the Food Security Pack programme; the Child Justice Programme is implemented by MCDMCH and the Department of Justice; and the Immunisation and Growth Monitoring Programme is coordinated by MOH and the MCDMCH, in partnership with civil society stakeholders. For each of these interventions committee meetings and internal meetings for individual programmes provide a space for referrals between services.

However, respondents report that there are no formalised referral systems in place between the different programmes and services. Instead, referrals occur on an ad hoc basis between different sectors when the need arises:

“Referrals depend with the cases presented as different government departments come across different scenarios and refer clients to the appropriate services. For example, there is a patient who has been diagnosed with a serious illness and require specialised treatment, the hospital will give primary health care and then refer to social welfare to assist in terms of funds to go to a major hospital in an urban setting”, (FGD, DWAC, Serenje)

As reflected above, the linkages between health and social welfare in this district are not strong even though an MOU exists between these two ministries at national level.

Respondents have advocated for a set of guidelines to formalise linkages at district level.

8.3.4 Limited information sharing between social protection actors

Limited information is being shared across programmes. This was highlighted as another barrier to effective coordination of social protection services and is compounded by the fact that there is no centralised beneficiary identification system or registry of beneficiaries as the following respondent confirms:

“It is often a subject of discussion during strategic planning – the fact that people are getting funds and services from all over due to lack of data on who is receiving services”, (National stakeholder)
8.3.5 Limited coordination between government and other actors at community level

There is good representation of civil society organisations on the DDCCs. This allows for collaboration between government and CSOs at district level. However, respondents noted that this is not always mirrored at community level:

“There are situations where we work together through the DDCC at district level but at community level there isn’t very good networking and communication as you often find that different organisations have different mini structures they have employed for identifying vulnerable communities instead of having one channel like the way the DWAC, ACC and DWAC works”, (FGD, DWAC, Serenje)

As stated there are instances where parallel structures for beneficiary identification are being established by civil society organisations which results in duplication and fragmentation of services.

A number of respondents indicated that there are also cases where similar services are being provided to the same beneficiaries because civil society and government do not plan their services together; and information is not being shared.

It was also indicated that sometimes CSOs implement programmes at local level without going through the official DDCC structure. This has led to poor coverage of services particularly in rural areas because activities are concentrated in easier to reach urban areas.

There is very little coordination with businesses at community level and often the same businesses are approached for support as the following quote reflects:

“There is not much integration with businesses – we should coordinate more. Often all the NGOs go to the same businesses for sponsors and they become tire of us”, (District, non-government stakeholder, Kafue)

Respondents suggested that there needs to be a clear strategy for engaging business in the social protection sector.

8.4 Effectiveness of coordination within and between the four pillars of social protection

This section explores the effectiveness of coordination within and between the four pillars of social protection which are proposed by the Draft NSPP. A summary of the programmes provided by the government for the purposes of social protection are captured in the table in annexure 13 of this report.

8.4.1 Description and effectiveness of social assistance coordination

There are two main non-contributory social assistance schemes in Zambia, namely PWAS and the Social Cash Transfer Scheme.

The Public Welfare Assistance Scheme (PWAS) is the most long standing social assistance programme. It provides food, clothing, blankets, hospital fees, uniforms, payment of exam fees and once off cash support for highly destitute households. The beneficiaries are identified by CWAC and the structures described below for SCTS which have been revitalised for the PWAS as well.

“A client goes to see the headman about a problem. He refers him to the CWAC. The CWAC submits a request for help to the ACC and they bring it to district level.
The DWAC then plans and prioritise who gets help” (District, government stakeholder, Kafue).

A pilot of the Social Cash Transfer Scheme (SCTS) began in 2003 in one district and was soon expanded to other districts with four versions of the scheme differentiated by the targeting model used. Based on the lessons learned from the pilots the government decided in 2009 to introduce a national SCTS with uniform benefits per household regardless of the number of individuals that they contain. The SCTS is now being implemented in 14 districts. It will over the years be expanded to the whole country. It is considered a flagship programme and has so far reached over 50,000 beneficiaries.

The SCTS is administrated by the MCDMCH. The Ministry relies on the District Social Welfare offices, District Welfare Assistance Committees (DWACs), Community Welfare Assistance Committees (CWACs), Area Coordinating Committees (ACCs), and Pay Point Managers to select beneficiaries, pay benefits and manage household changes. The PWAS is severely understaffed, hence the reliance on community committees to implement the scheme. All of these committees at the community, ward and district level consist of volunteers. A manual of operations guides the coordination. It describes in detail the roles and responsibilities of all actors in the SCTS. It provides an insight into how different stakeholders coordinate at different levels in implementing the SCTS and in linking social cash transfers effectively with other social protection interventions. It also sketches out the communication channels from community to national level. The figure below illustrates both the vertical and horizontal linkages between the different SCTS structures.

---

36 The World Bank, Human Development Department, Social Protection Unit, Africa Region (2013) Using Social Safety Nets to Accelerate Poverty Reduction and Share Prosperity in Zambia

37 Ibid

The SCTS is implemented at district level through the community structures like ACC and CWAC. The CWACs identify the beneficiaries and application forms to the ACCs who then submit a list of beneficiaries to the District Welfare Assistance Committee (DWAC). A screening and a check is carried out and the beneficiaries are approved by the DWAC which consists of the main relevant government departments (like agriculture, health, community development, education, and police), NGOs and churches.

The role of provincial government is to monitor and supervise the implementation of the social cash transfer scheme. The social cash transfers are sent from national level (Ministry of Finance) to districts and according to a number of interviewees are being disbursed by teachers.

The majority of interviewees said that the implementation of the Social Cash Transfer Scheme is effective. It was however mentioned that there was insufficient cooperation between the cash transfer scheme and community health assistants. There is also potential to strengthen...
coordination with nutrition programmes, agriculture support programmes and micro credit and savings programmes. It is hoped that the recent move of Primary Health Care to MCDMCH will create further integration of services.

Likewise, the coordination with other social protection services is not formalised. Although, beneficiaries are meant to graduate from the Social Cash Transfer Scheme after 5 years there are no planned and coordinated programmes to support the beneficiaries in skills development and empowerment.

“The problem is that the cash transfer scheme is not built for graduation. The objective of the cash transfer programme was for families to have one warm meal a day. An empowerment programme that is aimed at graduation would have put other things in place” (National stakeholder)

The case study on Kenya in annexure 4 provides details on the Kenyan Hunger Safety Net Programme (HSNP) and demonstrates how coordination and collaboration between state and non-state actors can facilitate the effective distribution of cash grants in communities characterised by high levels of poverty.

The case study on the Chile Solidario programme in annexure 5, provides innovative examples of how sustainable livelihoods and empowerment programmes have been integrated with non-contributory social assistance schemes in a coherent way in order to improve economic productivity of households. However, whilst this case study provides some interesting ideas, it may be unrealistic for the Zambian context because it requires a lot of case management and a wide range of well-distributed services and interventions.

8.4.2 Description and effectiveness of social security (contributory) coordination

Social security consists mainly of National Pension Scheme Authority (NAPSA) where employees and their employer contribute 5% each of the salary. The MOLSS has the oversight of the scheme while NAPSA is managing the programme. The role of district government officials is to sign NAPSA forms and ensure that the required documentation for retirement plan of workers is sent to MOLSS. The Public Service Pension Fund (PSPF) introduced a loan arrangement in January 2013. It was raised that no awareness creation had taken place at district level and that workers therefore were not aware of this possibility.

All of the interviewees said that there was little or no coordination of social security with other programmes at district level and that social security had not been decentralised which the following quote attests to:

“Since 2000, the realignment of the pension system has failed. The poor are really suffering. To get your pension is a real issue and the administration is really bad. It has not been decentralised, so people travel for miles to Lusaka from the village to try to fight for it. They even get lost, or die before any money is released” (District, government stakeholder, Kafue).

Social security programmes or schemes seem to be working in silos. Also there is no cooperation between social security and other social protection programmes. For social assistance it is clear that the target groups are different, but the coordination with livelihood and empowerment programmes could be enhanced.

“Unfortunately there is no linkage between contributory social security and other social protection, but this is an area where we want to get more information on
what is happening on the ground. For example a retiree could be getting fertiliser support” (National stakeholder).

“In Zambia consistently pensions are never paid on time and there is no arrangement of linking pensioners with other programmes” (National stakeholder).

One of the reasons given for the lack of linkage between social security and other social protection services is that social security is not viewed by citizens as part of a system or a constitutional entitlement. Social protection is considered for the poor so hence social security is not considered part of social protection. Another reason given is that MoLSS has a limited presence for social security at provincial and district level. However, this could vary from province to province as it is reported that in the South there is a much stronger presence of social security branches. This means that, if the MoLSS takes on the role of implementing a universal social pension, there will need to be a review of the current distribution of services and staff on the ground. This could be coupled with an identification of all the available and feasible options for payment processes. For example, is there a banking system or post-office system which reaches rural areas? If a single one of these options is unable to deliver cash cost-effectively, a combination of measures may provide more efficient coverage. Lesotho’s delivery system for the social pension provides an example of this option with a collaborative arrangement among the post office, Lesotho Defence Force and the Lesotho Mountain Police – with military helicopters used to access remote areas.39

Payment procedures for Namibia and Kenya’s cash transfer programme are also arranged through Post Office, branches with alternative mechanisms currently being developed; and similar payment arrangements are used for the conditional and unconditional cash transfers in Ghana (see full case study for Ghana in annexure 3).

8.4.3 Description and effectiveness of livelihood and empowerment coordination

There are a variety of programmes that could be classified as livelihood and empowerment programmes. These include the Food Security Pack Programme (FSP), the Farmers Input Support Programme (FISP) and Peri-Urban Self-Help (PUSH). The FSP is implemented by the MCDMCH. The Ministry procures small packages of seeds and fertilizer centrally, and distributes them to districts through Provincial Community Development Offices; who in turn distribute the inputs to Area Food Security Committees. These committees are then expected to give the packages to selected poor (but viable), food-insecure agriculture households with guidance and support from the District Community Development Officer and the District Food Security Committee. Targeting is done by CWACs based on lists initially drawn up by village headmen. Beneficiary farmers are supposed to receive complementary technical support from the extension staff of the MACO. The coverage of the programme has declined drastically over the last couple of years due to budget constraints and shift in focus to the larger FISP.40

FISP is the largest single transfer programme in terms of coverage and provides subsidized fertilizer and seed to smallholder farmers. It is operated by the MACO. Farmer co-operatives are the main instrument for implementing the programme. Inputs are delivered to the district level by private firms selected through a national tender, and released to selected beneficiaries through cooperatives and other farmer organisations approved by the District Agricultural Committee.41 Farmers have to deposit their share of the cost of the package in a cooperative

39 Samson, M, van Niekerk, I, Mac Quene, K (2006); “Designing and Implementing Social Transfer Programmes”, EPRI
41 Ibid
account before the package is released\textsuperscript{42}. A detailed implementation manual guides the implementation and coordination of the programme\textsuperscript{43}.

PUSH is a public-works based scheme that provides employment to the poor in both rural and urban areas. It has evolved into a combination of employment, training and income-generating programmes geared to raise the incomes of the poorest. Districts for operations are generally chosen on the basis of the VAC Vulnerability Assessments and then an attempt is made to focus on the poor areas within the district. Beneficiaries may be employed from 3-24 months and receive a small wage and/or food. PUSH is normally funded by the Ministry of Local Government or MCDMCH.

Although there seems to be some coordinating structures within each of the livelihood and empowerment programmes, the coordination of the whole livelihood and empowerment social protection pillar is fragmented.

“\textit{The coordination of different livelihood services is very poor and fragmented. There is no coordinating committee for livelihoods programmes}” (District, government stakeholder, Chipata).

The Productive Safety Net Programme in Ethiopia implemented since 2005 provides a good example of how livelihood empowerment programmes are coordinated with cash transfer programmes. The key objectives of this programme are to: provide households with enough income (cash/food) to meet their food gap and protect them in times of drought; protect households from asset depletion; and build community assets to contribute to addressing root causes of food insecurity.

It targets poorest households in food-insecure areas has a two-pronged approach of providing grants for households unable to work; and financing public works for able-bodied individuals in building community assets. A key aspect of the programme that makes it work effectively is that it has particular institutional aspects that allow localities to determine what public works projects get implemented based on community needs (asset based approach).\textsuperscript{44} This decentralisation of decision making within the livelihood and empowerment component could be highly relevant in the Zambian context.

\textbf{8.4.4 Description and effectiveness of protection programmes coordination}

One of the protection programmes with good coordination revolves around human trafficking. The Government of Zambia has focused on anti-human trafficking activities through the United Nations Joint Programme on Human Trafficking (UNJHPT) and with the support from IOM, ILO and UNICEF. The programme has the following coordinating structures: The \textbf{Programme Advisory Group} (PAG) is an advisory forum that provides advice and coordination on human trafficking for the UNJHPT and consists of 36 members from the relevant ministries, CSOs and donor agencies. Its establishment was facilitated by UNJHPT and its meetings are chaired by MoHA. It is currently being considered to change PAG into a National Consultation Forum.

In the districts, the DDCCs implement and coordinate Human Trafficking activities. The UNJHPT has been implemented in 12 districts. The district interventions on Human Trafficking are led by Social Welfare Department. In order to facilitate coordination and integration of services two

\textsuperscript{42} The possibility of shifting to use of electronic vouchers is currently being discussed.


\textsuperscript{44} Ethiopia: Productive Safety Net Programme, Global Showcase of Best Practices in Social Safety Nets, World Bank (date unknown)
tools were produced: The Minimum Standards and Toolkit for Protection of Victims of Trafficking\(^45\) which maps out the referral mechanism when working with VOTs; and the Counter trafficking Service Providers Directory\(^46\) which are intended to facilitate links and improve coordination among service providers with a focus on the “protection” mandate of Zambia’s National Policy to Combat Human Trafficking and the Act.

Finally it should be noted that Children Coalitions have been formed with children actively engaged in promoting messages about Human Trafficking through school debates and other events.

In the Evaluation of the UNJPHT\(^47\) it was found that although the establishment of PAG had improved coordination between the ministries and civil society organisations, the inconsistency in attendance of PAG meetings by members’ jeopardised coordination. District management, partnership and coordination worked well in some districts while in others not. A contributing factor to successful coordination was the buy in by the communities. However weak leadership in the DDCC in some districts resulted in challenges in terms of coordinating anti-human trafficking activities within the DDCC. Regular DDCC meetings did not take place and cooperation often occurred on an ad hoc basis.

For gender based violence there is a Gender-based Violence Committee.

For child protection, the main structure is the National Child Justice Forum. At the district level, Child Justice Forums (inter-ministerial and inter-sectoral committees) and child-friendly courts were scaled up from 15 to 25 districts, with 320 trained in child justice administration. 13 District Childcare and Protection Committees (DCPCs) have been established. Terms of reference, annual work plans, and guidelines have been put in place to support the functioning of the DCPCs to respond to the needs of vulnerable children at district and community levels. In addition, the capacity of 325 members of DCPCs has been strengthened in minimum standards of care, basic qualification in child care, and psycho social counselling\(^48\).

Despite these committees, coordination is fragmented as noted by the following interviewee:

“In fact the MCDMCH works very closely with the police through the Child Protection Unit in protecting violence against children. The police officers are based in the same offices and the investigations are conducted in close partnership with the Department of Social Welfare. The Child Justice Forum is involved as well. From a general point of view even if their coordination is fragmented, the existing committees in all sectors are attempting to improve the delivery of social protection services” (District, government stakeholder, Chipata)

8.4.5 Effectiveness of coordination between the four pillars of social protection

There is currently limited coordination between the four pillars or between programmes within a pillar. This is partly a result of no common vision and that SP historically was not seen as a wider sector programme where ministries like education, health, agriculture were included. Each ministry is used to delivering their programme and a more systemic approach to SP is not

\(^{45}\) Counter Trafficking Service Provider Directory Zambia, 2012, UN Joint Programme on Human Trafficking (ILO, IOM and UNICEF)


inherent. As a result a proper strategy for the promotion of beneficiaries is not planned or carried out.

“It is a big coordination question – the graduation strategy – how to help the families more sustainably to improve their livelihoods and this requires coordination with other programmes” (National Stakeholder)

Interestingly, the NGO Platform with the support of CARE and EU is piloting the SCALE project where group savings components are introduced to the SCTS. This is coupled with capacity building of beneficiaries on how to set up saving schemes and how to run businesses. This project will ensure that beneficiaries graduate to improve their livelihoods.

There are ‘small pockets of opportunities’ where some coordination between the four pillars is taking place namely the meetings under the SAG and DDCC and the recent joint monitoring trips in districts. However as long as DDCCs and SAG do not have decision making power it is difficult to coordinate the four pillars.

It was raised numerous times that the lack of a central body is one of the reasons why the programmes of the 4 pillars are not coordinated. Furthermore social security is not considered part of SP and hence no efforts have been put into coordinating this pillar with the others. It is envisaged that the proposed four-pillar framework of the new NSPP, which proposes a broad framework for social protection intervention, will address this issue.

8.4.6 The shift of Primary Health Care mandate to MCDMCH

Concerns were raised about the recent transfer of mandate of Primary Health Care from the MoH to MCDMCH. It was felt that MCDMCH was being overwhelmed and also had its mandate expanded without proper consideration of the internal capacity of the ministry. It was therefore emphasised that both human resource and financial capacity will need to be allocated to the ministry to allow them to fulfil this new mandate successfully.

Concerns were also mentioned that the current success of the SCTS would not be sustained as these transfer schemes would no longer be high on the agenda of the MCDMCH. This is reflected in the following statement:

“The risk is that suddenly the social protection agenda is going down because of this shift – it becomes side-lined in favour of health services because of this focus on Primary Health Care”, (National stakeholder)

However, some interviewees also saw some opportunities emerging as the result of the change of mandate:

“It is critical that MCDMCH prepares an integrated budget for social welfare and primary health for next year. The planning sessions can lead to information exchange and awareness of programmes in different locations. There is an opportunity at local level to come up with integrated training and capacity development to all those implementing social welfare and health programmes. They can be brought together more structurally under the districts” (National stakeholder).

49 According to one interviewee these joint monitoring trips involve different Ministries going out into the field to assess how programmes are being rolled out on the ground. Someone from each relevant Ministry attends to see what other Ministries are doing. This started 6 months ago and the PS from the MCD assisted with putting this in place.
The PEOPLE programme implemented in Cambodia contained in annexure 8 is an excellent example of how all four pillars of social protection have been integrated into a single window service which is provided right at the level of local communities who are also involved in implementation and oversight.

### 8.5 Key point summary

<table>
<thead>
<tr>
<th>Key Point</th>
</tr>
</thead>
<tbody>
<tr>
<td>Whilst a small handful of respondents believe that coordination of social protection services and programmes between government ministries is adequate, the majority indicated that there is still much room for improvement.</td>
</tr>
<tr>
<td>Key barriers to programme integration and harmonisation include: limited vertical coordination of programmes within ministries; limited funding and resources; lack of formal referral mechanisms; limited information sharing across ministries.</td>
</tr>
<tr>
<td>There is good representation of civil society organisations on the DDCCs which allows for collaboration between government and CSOs at district level. However, this is not mirrored at community level where coordination of CSO and government services is marked by duplication and poor information sharing.</td>
</tr>
<tr>
<td>There is very little coordination with businesses at community level and a clear strategy for engaging business in the social protection sector needs to be developed.</td>
</tr>
<tr>
<td>The DDCC is the main structure for promoting coordination of services across all sectors although some challenges exist, most notably its limited access to funding; and the fact that its provincial and national counterparts, the PDDC and NDDC are dormant structures.</td>
</tr>
<tr>
<td>A social protection sub-committee could fall under this structure to incorporate all social sector programmes - this would allow for joint planning and will go some way to addressing the problem of DDCC committee members having to attend multiple committee meetings.</td>
</tr>
<tr>
<td>Social Assistance and particularly the SCTS are well coordinated with good decentralised structures.</td>
</tr>
<tr>
<td>The implementation and coordination of social security seems to be challenging exacerbated by MoLSS has inconsistent levels of presence at provincial and district levels which needs to be addressed if this ministry is tasked with rolling out the universal social pension.</td>
</tr>
<tr>
<td>Some coordinating structures exist within each of the livelihood and empowerment programmes and protection programmes. However, the coordination of each of the livelihood and empowerment social protection pillar and the protection pillar is fragmented.</td>
</tr>
<tr>
<td>Coordination seems to work particularly well when a guideline or an operation manual is produced outlining the specific functions, roles and responsibilities.</td>
</tr>
<tr>
<td>There is no coordination between the four pillars or between programmes within a pillar. Each ministry is used to delivering their programme and a more systemic approach to SP is not inherent. As a result a proper strategy for the promotion of beneficiaries is not planned or carried out.</td>
</tr>
<tr>
<td>Concerns were raised that the transfer of the mandate of PHC from MoH to MCDMCH had taken away the social welfare focus of the ministry and leaving it overwhelmed and with insufficient capacity. Opportunities were also seen in this move as the ministry would have to include both health and welfare in its planning and budget process and hence create more awareness to the programmes.</td>
</tr>
</tbody>
</table>
9 Knowledge and awareness of social protection

This section reports on the level of knowledge of social protection amongst the study participants. It also looks at what awareness raising activities have been undertaken in the sector to date.

9.1 Knowledge and understanding of social protection

The research sought to determine the extent to which the Zambian Government’s conceptualisation of social protection is shared amongst the different social protection actors.

The findings reveal that civil society organisations share the broad understanding of the term social protection to include elements of social assistance, social security, livelihoods and protection.

Within different levels of the Zambian government there is variation in officials’ understanding of social protection. National actors conceive of social protection in its broad sense with the idea of livelihoods promotion more prominent than the other facets of social protection.

Provincial stakeholders also embrace a broad view of social protection although the idea of social assistance dominates. This is largely because national government actors are closely involved in policy formulation and provincial stakeholders are consulted; hence are privy to the current debates around conceptual approaches to social protection. The idea of sustainable livelihoods as a crucial component of social protection came out strongly at the district level.

District-level actors seem to realise that social protection does not only mean assistance programs such as government hand-outs but should include self-sustainability. It is important that social protection has a self-sustainability connotation.

Most beneficiaries think of social protection along the social assistance pillar (with one livelihood observation). Thus the broad conceptualisation of social protection shared by funders, national and provincial government actors does not neatly fit into the grassroots-level notion of social protection. Such a situation demands information and awareness for all the dimensions of social protection.

9.2 Awareness raising around social protection and social protection services

In general it was noted that beneficiaries are not aware of their rights with regards to social protection and, as one stakeholder indicated: “from grassroots this information is not there...about social protection programs available”; (National level stakeholder).

There are currently some efforts to raise awareness and knowledge of social protection services amongst beneficiaries through sensitisation campaigns and community meetings arranged by CWACs and local NGOs. However, these tend to be ad hoc as they are once-off or only target certain areas. The role of traditional leaders, churches and civil society organisations in advocacy and information sharing is widely recognized and partnership with these actors needs to be strengthened for future awareness raising activities. Overall it was indicated that communication strategies need to extend beyond individuals and households to include communication within the service providers themselves. As one civil society respondent at district level argued:

“At the local level we are talking about this (awareness raising) because there is a need for coordination when you deliver the cash transfer to refer to other services and convey
“information about the family – we need to be aware of the services to coordinate”, (National Stakeholder).

At national level stakeholders confirm that each program organises its own communication and awareness campaigns. For example there have been some isolated efforts to disseminate information through MACOs communication department in order to establish a shared understanding of the concepts of social protection system and its implementation; and donors have developed a communication strategy in partnership with the MCDMCH which is yet to be rolled out.

9.3 Key point summary

- Overall it was found that both civil society stakeholders and national level stakeholders share a broad understanding of social protection which includes social assistance, social security and social protection.
- There is evidence that both provincial and district level stakeholders understand that social protection includes the four pillars of intervention; however, the element of social assistance tends to dominate.
- Beneficiaries equate social protection with social assistance indicating a need for more education and knowledge dissemination at community level.
- Most awareness raising activities are undertaken in an ad hoc and uncoordinated way by individual programmes and institutions working in the SP sector.

10 Coordination of management of SP services/systemic issues

This chapter looks at the more systemic issues around coordination of management of SP services. It starts by examining the data management systems in place including how beneficiaries are targeted. The benefits of decentralisation, including a suggestion for the introduction of evidence based performance management system with incentives are then described. Finally, SP budget coordination and grievance mechanisms are discussed.

10.1 Knowledge and data management

10.1.1 Identification, intake and referral of beneficiaries

There is no systematic or standardised process for identifying and referring beneficiaries to social protection services. This is because there are different structures in place to identify beneficiaries depending on the programme they are linked to. Some programmes target beneficiaries based on their age and household composition, while other programmes like PWAS identify beneficiaries through self-targeting. Beneficiaries are mainly identified through community targeting by headmen and community committees like CWAC, ACC and Agriculture Camp Farmers officer (ACFO) as described above in the previous chapter. However it was raised by some of the respondents that the identification and selection of beneficiaries were not transparent enough and that the current SP services did not reach sufficient number of vulnerable people.

Another factor which exacerbates this problem which was highlighted by beneficiary respondents said that there was not sufficient information available at community level on how to access SP services. Furthermore it was raised that potential beneficiaries are note being
properly referred between services and therefore they have to approach each line department for their services resulting in beneficiaries having to carry information from one service to another.

10.1.2 **Database of beneficiaries**

There are many arguments for having a database of beneficiaries or a database of poor and vulnerable people which can be used to check eligibility for accessing social protection programmes. There are a number of reasons why it is a critical tool for coordination. Firstly, if the various ministries had access to a database of beneficiaries it will reduce duplication; secondly, it will allow for a coordinated approach to identifying poor and vulnerable people and will create transparency in identification of beneficiaries, determining their eligibility and the delivery of services; and thirdly, it will serve as a tool for coordinated monitoring and evaluation and coordinated planning.

A Management Information System (MIS) is currently being set up of SCTS beneficiaries within MCDMCH, both to be managed centrally and at district level\(^5\). The MoH also has a database of beneficiaries in their Health Management System. There is however no central database for all beneficiaries of SP services. All interviewees agreed that a database of all SP beneficiaries should be established.

“We need a central database so each ministry can see which families are vulnerable rather than have multiple databases in each sector. We need the database so we can centralise information on which services are being provided and to whom” (National stakeholder).

Concerns were raised regarding the complexity of a database. Firstly, if used for effective and unified targeting the database needs regular updates and roles and responsibilities should be outlined for this task. Secondly, the notion of a database of ‘poor’ people could also amount to a conflict with human rights. For example, there are some risks with a “common registry” from a rights perspective in terms of individuals’ right to anonymity, confidentiality and non-communication of data. Therefore, data protection is essential in order to preserve people’s right to confidentiality.

Respondents were not in agreement as to whether database should be centrally located or in the districts. Most of the respondents felt that the database should be located within MCDMCH and managed by the DSWO. Ideally, the database should contain beneficiaries of SP programmes and be managed decentralised through the districts and then feed into central level as well. It should be accessible at all levels with user privileges. It should be mentioned that the establishment of such a database should be coupled with the development of guidelines and sufficient capacity building of anyone who uses the system.

The case study on Brazil in annexure 10 demonstrates how the use of a unified family registry, the *Cadastro Unico*, has resulted in a better-than-average targeting accuracy with over 70 per cent of transfers going to the poorest quintile and fully 95 per cent of the poorest two quintiles. It has therefore had a significant impact on poverty and inequality.

10.2 **Decentralisation**

The Decentralisation Policy was adopted in 2002 and officially launched by the President in 2004. The core of the policy is devolution in phases although the process will start with de-
concentration, where local authorities will be given more functions while their capacity is developed. The vision is as follows:

“The vision of the government is to achieve a fully decentralized and democratically elected system of governance characterised by open, predictable and transparent policy making and implementation processes at all levels of the public service, effective local community participation in decision making and development and administration of their local affairs while maintaining sufficient linkage between central and local government” (National Decentralization Policy)

A Decentralization Policy Implementation Committee (DPIC) and a Decentralization Secretariat were set up and a first draft Decentralisation Implementation Plan was already produced in 2006. However despite these mechanisms there are challenges with the implementation of the policy.

“There are 14 functions, some of which are related to social protection, that will need to be played by local authorities, namely primary education, primary health care, agricultural extension, community development, environmental management and natural resources, community policing, traffic etc. The organisational structures have already been developed and government is supposed to approve the organisational structures that provides for the functions to be devolved. It is all meant to commence in 2013” (National stakeholder).

A new implementation plan is almost finalised and ready to be launched.

In terms of fiscal decentralization, each district will develop their own plans and request adequate resources directly from Treasury (as opposed to the current situation where districts predominantly receive finances from their line departments and through provincial level). The fiscal decentralization has been approved last year, and its roll out will be stipulated in the implementation plan.

10.2.1 Consequences of decentralization on coordination and on poor families

Respondents all agreed that decentralization would have a positive effect on poor and vulnerable families. It would be easier to identify and reach the beneficiaries and the system would be potentially more speedy and efficient in service delivery.

“If it was decentralised the funds would come straight to the districts. We could make the decisions and avoid delays. We are the ones who do the assessments, who have the information, yet the decisions are made by those who do not know” (District, government stakeholder, Kafue).

It was raised that decentralization would facilitate coordination at local level as it would mitigate bureaucracy and create community ownership.

“Decentralization would help effective and efficient provision of social protection services to the vulnerable and the poor families would be better serviced. Right now there is a bureaucratic tendency which may delay the process (District, government stakeholder, Serenje).”

Local government also receives Constituency Development Fund from the National Budget to cover e.g. social protection programmes.
“Currently when disbursement takes place from the Ministry of Finance to the MCDMCH a lot of money is withheld by headquarters and this influences programmes on the ground. Some districts can do nothing as they have no money for fuel” (National stakeholder).

It should be noted that, the cash transfer schemes are typically centrally designed in terms of eligibility and benefit level. However, for livelihood and empowerment programmes, decentralised decisions and criteria would be more relevant and suited to local needs and could adapt to the local resource context.

Some of the negative aspects that were raised included fears of favouring some districts more than others and the capacity of the districts to implement services. Also concerns of losing homogeneity in the application in the districts and decentralization without adequate funding were raised.

“The negative aspect is if mandates are decentralised without adequate funding. There is a risk of losing uniformity and homogeneity” (National stakeholder).

As emphasised in the case study from Nepal, decentralization must be coupled with sufficient capacity building of local government in order to enable effective management and implementation of SP services. Details of this case study can be found in annexure 9.

It must be highlighted that good decentralisation requires good centralisation. For example there needs to be a centrally designed programme to ensure rules of application and eligibility are the same across the districts. Standard setting and Monitoring and Evaluation (M&E) are areas that would also be the mandate of central government. Likewise a central database would be necessary as discussed in the section above. Finally, it is crucial that capacity building of councils and other local authorities take place for the effective administration and implementation of the SP services as illustrated in the Nepal case study.

10.2.2 Incentives for coordination

There is a variation in incentives and volunteerism depending on the SP programmes and line ministry responsibility. The social cash transfers are meant to be based on volunteerism. CWAC and ACC are given 100 kwacha bi-monthly to cover administrative costs. Furthermore the department provides two bicycles per 10-15 ACC and CWAC members to be used in the community. There is furthermore talk about giving an incentive of 50 kwacha for those who witnesses disbursement of funds. The main incentives mentioned by respondents which could facilitate coordination are the infrequent transport refunds for attending DWAC meetings. There apparently used to be an incentive, which was removed:

“Initially under the Social Cash Transfer Programme there was a bonus, which has been removed a seen as alien to the general approach to the civil service system. Other incentives are ‘Labour Day Awards’, but they are not specific to social protection but for the excellent performance of civil servants in their work” (District, government stakeholder, Chipata).

It was mentioned that the limited funds could be rather frustrating:

“The limited and erratic funding makes it quite frustrating” (FDG, DWAC, Kafue)

However, District Agriculture Officers and Agriculture Extension Officers are all paid staff and are furthermore receiving funds to cover logistics such as fuel and transport in connection with their monitoring of SP programmes, although the refunds for logistics sometimes arrive late.
District Social Welfare Officers are also paid staff and have a limited logistics budget which facilitates coordination where appropriate.

The MOH apparently provides rain coats, bicycles and boots for their community volunteers during the rainy season.

It should however be emphasised that there is currently no incentive for SP coordination, and although there are appraisal systems in place for staff, coordination is not one of the indicators.

As mentioned above, if the National Decentralization Policy is implemented, management and administration of SP services will be fully located at local level. In order to increase motivation by local authorities and encourage coordination an incentive scheme for SP coordination could be considered. For example, some ideas here could be transport refunds; changes in the performance appraisal system; and ensuring that coordination becomes a management priority.

The case study from Brazil contained in annexure 10 elucidates some innovative incentive mechanisms for coordination of SCTS which could be applied in a Zambian context.

The implementation Brazil’s Bolsa Familia Programme (BFP) in a decentralized context comes with a lot of challenges. There is potential of ‘heterogeneous quality of implementation’ given the variation in municipal-level political commitment to implementing the federal programme and variation in municipal capacities (administrative, human resource and financial) for implementation of the cash transfer system.\(^{52}\) Brazil’s municipalities are not constitutionally obliged to carry out the programme according to federal standards. Therefore, the Brazilian government uses ‘Formalised Agreements for Decentralized Implementation’. This entails the Brazilian Government (MDS and through its several secretariats) enter into formal joint management agreements with every single municipality to clarify roles and responsibilities for implementation of the programme and to establish minimum institutional standards for programme in terms of how it should operate at the municipal level. This is complemented by Monitoring the Quality of Decentralized Implementation to ensure homogenous and quality implementation of the BFP. The Brazilian government and the MDS established a Decentralized Management Index (IGD) to monitor and evaluate the quality of implementation in each municipality. Lastly the MDS has a system of Performance-Based Incentives for Quality of Decentralized Implementation. The purpose of these financial incentives is to promote coordination and quality implementation in municipalities. These incentives provide administrative cost support to municipalities.\(^{53}\) These instruments ensure that there is vertical cooperation or coordination and quality implementation within the programme.

It is recommended that Zambia in connection with decentralization consider the performance-based management tools and incentives including Formalizing Agreements for Decentralized Implementation, Monitoring the Quality of Decentralized Implementation using the IDG and Performance-Based Incentives for Quality of Decentralized Implementation.

10.3 Budget for SP and coordination of budget

All respondents agreed that there was insufficient SP budget available to cover the vulnerable and poor people of Zambia. The budget for SP derives from government and from the cooperating partners. Funding for SP from the cooperating partners is in principle coordinated.

\(^{52}\) Lindert et al. 2007. p.24

\(^{53}\) Lindert et al., (2007).
under the joint Zambia Assistance Strategy, which is framework for donors operating in Zambia. Under this framework there is a SP sector group which is co-lead by DFID and UNICEF. It aims to coordinate SP programmatic support to the Government of Zambia. For the SCTS there is a joint financing agreement with all donors involved in the funding of the SCTS. On the government side there is no specific mechanism to coordinate funding towards SP.

There is little coordination at the planning stage of budgets and each ministry works in a silo to produce their budget. Likewise, there is no joint planning and budgeting of SP programmes at provincial or district level.

It was mentioned by respondents at the Management Development Division of Cabinet that ministries can co-finance programmes; however, in terms of accounting they cannot combine budgets. There is no pool fund for social protection. Whilst research participants advocated for the establishment of such a fund it was noted that having a pooled fund may be too ambitious in the Zambian context. A more realistic option may be to move towards coordinated decision-making on resource allocations, possibly by a Cabinet level structure informed by the SP SAG. It is also hoped that the NSPP will provide an overall take on budget allocation decisions.

Poor coordination of budgeting could be rectified with planned decentralization mechanisms as DDCC could play a coordinating role in terms of planning and budgeting. Finally, it should be noted that budget is also related to good Monitoring and Evaluation. If ministries responsible for SP can demonstrate that they are having an impact it is easier to request funding from Treasury and the cooperating partners. It is therefore recommended that a Monitoring and Evaluation System of SP is developed and implemented.

10.4 Grievance procedure coordination

Grievance mechanisms help ensure that citizens and beneficiaries can “voice” complaints regarding program administration, and seek redress for grievances related to the quality of program delivery or payment of benefits. An integrated complaints/grievance mechanism across programmes can enable proper tracking and redress of complaints and systematic analysis of the nature and type of complaints and this data can be used to improve the overall programme implementation and administration.54

There are no formal structures for grievance related to SP services at governmental level in Zambia. The Harmonised Manual of Operations Social Cash Transfer Scheme acknowledges that beneficiary households are entitled to complain however, it does not stipulate the process.

The procedures for grievance related to cash transfers are usually as described in the following:

“The beneficiary would go to CWAC and if they are not satisfied they would go to ACC and then finally to DWAC. If it is not resolved they would go the Provincial Committee. However, sometime the beneficiary would go directly to the District Commissioner” (District, government stakeholder, Kabwe)

These CWAC, ACC, and DWAC structures are usually also the structures that beneficiaries consider as representing them as their members have been elected by the community. Other representing bodies mentioned by the respondents included community leaders, head-men, traditional leaders and religious leaders.

54 Giannozzi, Khan A, (2011), Strengthening of Safety Nets in East Asia, SP Discussion paper, August 2011, no 1116, World Bank
Likewise for FISP, the beneficiaries/farmers also use their cooperatives or Community Agriculture Committee as representing bodies. There is no formal process outlined for grievance.

As part of grievance mechanisms it should be mentioned that the ministries responsible for SP go on field trip once a quarter where they receive complaints from beneficiaries on the ground.

There is a Legal Aid Board in Lusaka and some of the NGOs provide legal aid services related to SP but they are often not accessible for the beneficiaries living in rural areas. It should be noted that Irish Aid is about to fund a grievance mechanism for SP through the establishment of a toll free number and setting up suggestion boxes at clinics and schools and managed by the NGO Platform.

The Office of the Investigator General is watchdog for the proper implementation public service administration. They deal with maladministration and they could deal with SP maladministration if a case was reported. However so far there has not been any case related to SP. According to respondents, the Office of the Investigator General is ill-equipped and has limited resources.

It is recommended that a joint SP grievance mechanism should be established with clear guidelines. This could be part of a Single Window Services as mentioned in the Cambodian case study above.

10.5 Key point summary

- There is no unified way of targeting beneficiaries and the various programmes have different ways of targeting beneficiaries;
- While a Management Information System (MIS) is being launched for the SCTS beneficiaries, there is currently no joint database for beneficiaries of SP;
- Zambia has three levels of government i.e. the Central government, provincial administration and the district/local administration;
- As an overall rule, SP services are implemented at district level;
- Zambia is in the process of decentralization, which would facilitate SP service coordination at local level, mitigate bureaucracy and create community ownership;
- Decentralization must be coupled with sufficient capacity building of local government in order to enable effective management and implementation of SP services;
- Good decentralization requires good centralization. For example there need to be centrally designed programme to ensure rules of application and eligibility are the same across the districts;
- There is a variation in incentives and volunteerism depending on the SP programmes and line ministry responsible;
- If the National Decentralization Policy is implemented, management and administration of SP services will be fully located at local level. In order to increase motivation by local authorities and encourage coordination an incentive scheme for SP coordination could be considered;
- There is insufficient SP budget available to cover the vulnerable and poor people of Zambia;
- There is little coordination at the planning stage of budgets and each ministry work in silo to produce their budget;
- There are no formal structures for grievance related to SP services at governmental level and legal assistance related to SP services is inaccessible for most of the population.
11 Impact

In this section, the impact of current coordination levels within the Zambian SP system is described based upon input from national, provincial and district-level respondents as outlined in the study sample (in section 5.2 of this report).

Respondents noted that a key impact of poor coordination was that of limited access to SP mechanisms coupled with sub-optimal or poor service delivery. Beneficiaries explained that their costly and time-consuming movement from one service provider to another is a result of poorly coordinated referral systems. This is exacerbated by the fact that when they have finally accessed the service, they had to wait for extended periods of time before receiving any form of assistance. This situation is illustrated by the quotes that follow:

“You go to SWO and they give you a date to access services. Then they explain that they cannot help you. They say there is a lot of demand. People keep sending you back there when you try other places. Eventually your children drop out of school because they cannot pay. The dates for help keep changing.” (FGD, Beneficiaries, Kafue)

“It is not an easy process. You go to the CWAC, they go to the ACC, they go to the DWAC – it takes a long time.” (FGD, Beneficiaries, Kafue)

“An example is that if a school sees that a child has social needs, they send them to SW or to the clinic. The clinic often sends the aged to SW for help...people with disabilities go to the clinic, then get sent to other places for help.” (FGD, Beneficiaries, Serenje)

The cost of such ‘non-coordination’ is that the relevant support often does not reach those most in need thereof; nor does it reach the targeted beneficiaries in a timeous and efficient manner. Many households thus continue to suffer high levels of vulnerability and deprivation, and remain trapped within an ever-deepening cycle of poverty. Furthermore, feedback indicates that the Department of Social Welfare (MCDMCH) currently bears the brunt of a poorly coordinated referral system, with the majority of those applying for assistance attempting to do so via this department’s offices.

The second highest reported impact of poor coordination was that of poor coverage of services. Here, respondents noted that certain geographical areas or beneficiary target groups were often ‘over-targeted’ or were recipients of a variety of different yet simultaneous SP services whilst other areas received minimal service delivery - or no services at all. The lack of common targeting mechanisms plus poor beneficiary identification and data collection / registry systems adds to this problem and consequently, a number of respondents questioned whether or not the distribution of available resources was equitable while some voiced a lack of confidence in the SP system in general.

Thirdly, high costs associated with poor coordination and service duplication is noted by respondents as a result of the current functioning of the SP system. It was felt that improved coordination would remedy this situation and prevent service duplication whilst encouraging a more integrated and efficient use of resources - plus a more efficient SP system overall. This is highlighted in the quote below:

“Bad coordination is where departments or organisations are travelling to the same area to implement similar programmes with the same people and yet they use different vehicles and request for separate fuel.” (District, government stakeholder, Serenje)
Finally, a lack of awareness amongst beneficiaries was noted as a result of poor communication / information-sharing by service providers, particularly regarding which SP services were available and beneficiaries’ rights in terms of accessing them. A lack of coordinated information-sharing was also believed to negatively impact upon the development of a common understanding of the concept of SP, as well as how best to achieve integrated, complementary and improved service delivery. District-level respondents had the following to say:

“Good coordination leads to good referrals. If we know what is available for the clients, who is providing what, who to go and see, then we can link the clients to the services that they need.” (FGD, DWAC, Kafue)

“If there is good coordination it would mean that everyone is well-informed; there is a common understanding of the programmes...things would move much faster. Resources would be better used...less duplication.” (District, government stakeholder, Kafue)

Respondents noted that improved coordination levels would have the following impacts:

- A sharing of responsibilities between the different social protection service providers at community level, thus reducing the current (considerable) burden on the Department of Social Welfare;
- A more efficient referral system amongst all social protection service providers at community level (e.g. social assistance, protection, livelihood and empowerment, health, education), which would play a key role in facilitating timeous and efficient access to services. Such a referral system would also link beneficiaries to the services most needed and relevant to themselves, thus leading to a maximisation of benefits and enhanced impact of SP mechanisms;
- An expansion of coverage to ensure that the most vulnerable households could be reached and incorporated into the SP system, leading to a reduction in poverty and vulnerability;
- Coupled with decentralisation, improved coordination would ensure that those people who are well-positioned to identify beneficiaries – and their needs – could be incorporated into the SP system (for example, teachers would be well-placed to identify children requiring assistance);
- Improved transparency and accountability in service provision, together with better monitoring and evaluation (M&E) of programme efforts. This would inform and strengthen programme design, allowing for increased knowledge-sharing, creativity, creation of programmatic synergies, and potential ‘up-scaling’ of best practice models; and
- The establishment of common targeting mechanisms, plus a single, central database or Information Management System (IMS) to reduce duplication and enhance the equitable distribution of benefits.

In terms of international good practice, the South African case study contained in annexure 11 provides useful insights into 1) freeing up the already burdened social welfare system through the use of an independent agency to administer grants; and 2) implementing an outreach programme in order to improve access to services for vulnerable groups in deep rural areas.

11.1 Key point summary

- Poor coordination leads to fragmented and sub-optimal service delivery, plus hampers beneficiary access to SP services.
• Limited access levels are further compounded by poorly coordinated referral systems. This results in beneficiaries wasting time and resources moving from one service provider to another, as well as the overburdening of certain government departments and agencies due to limited sharing of SP responsibilities.

• Lack of adequate coordination also results in poor service coverage, with some geographical areas and target groups receiving limited or no services, whilst others are ‘over-targeted’.

• High costs and resource wastage are further impacts of such service duplication.

• Poor coordination also leads to a lack of effective information-sharing. This has a negative impact upon levels of awareness and knowledge of SP, amongst beneficiaries and key stakeholders alike.

• All of the above factors contribute towards the continuation of high levels of poverty and vulnerability.

12 Conclusion

Despite Zambia’s robust level of economic growth over the past few years a staggering 60 per cent of the population – and an estimated 78 per cent of those living in rural areas are living in poverty.

In 2008 the ILO conducted a social protection expenditure and performance review of the whole social protection system in Zambia55. A key aspect of this review was that it saw social protection as one system with different non-contributory benefits. It highlighted the importance of finding synergies so that all people are covered and adequately budgeted for and it also highlighted the need for a social pension to synergise with other elements of social security such as social insurance, especially if the benefits are to be universal.

In order to tackle the high levels of poverty and inequality the government has implemented a range of interventions and has shown a growing commitment towards establishing a comprehensive social protection system. This is reflected in the Sixth National Development Plan; the National Social Protection Strategy; and more recently in the establishment of the inter-ministerial Technical Working Group to develop a National Social Protection Policy.

The findings of this research on the coordination of social protection policy, planning and implementation will feed into the policy formulation process.

Coordination of policy and planning

With regards to coordination of policy and planning, it was found that the articulation of national goals and priorities for social protection in the National Social Protection Strategy, and the SNPD provide an overall vision for social protection in the country and an important starting point for a coordinated social protection system.

The main barriers to effective coordination of social protection policy making and planning at national level include: ministries working strictly according to their mandate (silo mentality); absence of an integrated policy framework for social protection; poor end-user orientation during planning; limited vertical coordination of social protection within ministries (vertical

---

coordination); and lack of incentives to collaborate. In addition it was found that the planning department within the MCDMCH which is tasked with coordination of social protection plans and policy making experiences severe capacity constraints.

Linkages with civil society organisations in planning and policy making is strong; however, linkages with business is poor and government has no plan or overall vision for how to include business, civil society organisations and donors in planning activities.

A range of cooperative governance structures are in place at national level which play a crucial role in the coordination of social protection policy and planning. Out of these the Social Protection SAG makes an important contribution to coordination of social protection at national level as it provides a platform for knowledge and information sharing. Key strengths of this structure are its inter-sectoral membership and regular meetings. However, a number of challenges of the SP SAG were identified, most notably its focus on implementation rather than on planning and budgeting; its limited decision making power; and issues of leadership and accountability.

There is tension between those respondents that advocate for a higher level structure at Cabinet level to oversee the coordination of social protection policy; and those that believe the decision making power of the SP SAG should be strengthened. One idea here would be to establish a National Social Protection Council at Cabinet level with a dedicated Secretariat similar to the institutional framework for implementation of the National Social Protection Policy in Kenya. The MOH’s SWAP framework and tools also provide some useful ideas for integrated planning and coordination with key ministries and other actors although the focus of this structure is on coordination of donor funding through one ministry rather than on coordination between ministries.

**Coordination of implementation**

Whilst a small handful of respondents believe that coordination of social protection services and programmes between government ministries is adequate, the majority indicated that there is still much room for improvement. Key barriers to programme integration and harmonisation include: limited vertical coordination of programmes within ministries; limited funding and resources; lack of formal referral mechanisms; and limited information sharing across ministries.

Well established structures are in place to facilitate vertical coordination from national through to provincial, district and local level; and the main tools for facilitating vertical coordination are operations manuals, guidelines and regular internal meetings. However, the research revealed that not all of these structures are functioning effectively.

At district level the DDCC was identified as the main structure for promoting coordination of services across all sectors although some challenges exist, most notably its limited access to funding; and the fact that its provincial and national counterparts, the PDDC and NDDC are dormant structures.

Overall there is good representation of civil society organisations on the DDCCs which allows for collaboration between government and CSOs at district level. However, this is not mirrored at community level where coordination of CSO and government services is marked by duplication and poor information sharing. There is also very little coordination with the business sector at community level and a clear strategy for engaging business in the social protection system needs to be developed.
A review of the current coordination mechanisms within the four pillars of social protection found that Social Assistance and particularly the SCTS are well coordinated with good decentralised structures. It also found that the implementation and coordination of social security seems to be challenging and is exacerbated by the MoLSS inconsistent levels of presence at provincial and district levels which needs to be addressed if this ministry is tasked with rolling out the universal social pension. If the MoLSS takes on the role of implementing a universal social pension, there will need to be a review of the current distribution of services and staff on the ground. This could be coupled with an identification of all the available and feasible options for payment processes such as post offices or a combination of measures for more efficient coverage.

With regards to livelihood and empowerment programmes and protection programmes some coordinating structures are in existence however, coordination of service delivery within each of these pillars is marked by fragmentation. When a guideline or an operations manual is produced outlining the specific functions, roles and responsibilities, coordination seems to work particularly well.

Concerns were raised that the transfer of the mandate of PHC from MoH to MCDMCH had taken away the social welfare focus of the ministry and has left it overwhelmed and with insufficient capacity. Opportunities were also seen in this move as the ministry would have to include both health and welfare in planning and budget processes and hence create more awareness and integration of the programmes.

Overall there is no coordination between the four pillars or between programmes within a pillar as each ministry is used to delivering their own programmes and a systemic approach to SP is not inherent. As a result a proper strategy for the promotion of beneficiaries is not planned or carried out.

**Knowledge and awareness of social protection**

Overall it was found that both civil society stakeholders and national level stakeholders share a broad understanding of social protection which includes social assistance, social security and social protection. Whilst both provincial and district level stakeholders understand that social protection includes the four pillars of intervention, the element of social assistance tends to dominate. On the other hand beneficiaries equate social protection with social assistance indicating a need for more education and knowledge dissemination at community level.

Most awareness raising activities are undertaken in an ad hoc and uncoordinated way by individual programmes and institutions working in the SP sector.

**Coordination of management of SP services/systemic issues**

A review of the systemic issues around coordination of management of social protection services found that there is no unified way of targeting beneficiaries and the various programmes have different ways of targeting beneficiaries. Whilst a Management Information System (MIS) is being launched for the SCTS beneficiaries, there is currently no unified database for beneficiaries of SP.

Zambia is in the process of decentralization, which would facilitate SP service coordination at local level, mitigate bureaucracy and create community ownership. However, decentralization must be coupled with sufficient capacity building of local government in order to enable effective management and implementation of SP services. Further to this, good decentralisation requires good centralisation. For example there needs to be centrally a
designed programme to ensure rules of application and eligibility are the same across the districts.

With regards to incentives for collaboration it was found that there is a variation in incentives and volunteerism depending on the SP programmes and line ministry responsible. If the National Decentralization Policy is implemented, management and administration of SP services will be fully located at local level; and in order to increase motivation by local authorities and encourage coordination; an incentive scheme for SP coordination could be considered.

The review of coordination of SP budgets reveal that, in a context of insufficient SP budget for the vulnerable and poor people of Zambia, there is little coordination at the planning stage of budgets and each ministry works in a silo to produce their budget.

A final systemic issue is that there is no formal structure in place for grievances related to SP services at governmental level and legal assistance related to SP services is inaccessible for most of the population.

**Impact**

Finally the study sought to identify the impact of poor coordination on service delivery and ultimately on the beneficiaries of social protection services.

In general it was found that poor coordination leads to fragmented and sub-optimal service delivery, plus hampers beneficiary access to SP services. This limited access is compounded by poorly coordinated referral systems. This results in beneficiaries wasting time and resources moving from one service provider to another, as well as the overburdening of certain government departments and agencies due to limited sharing of SP responsibilities.

Lack of adequate coordination also results in poor service coverage, with some geographical areas and target groups receiving limited or no services, whilst others are ‘over-targeted’. Service duplication also leads to high costs; resource wastage; and a lack of effective information-sharing. This has a negative impact upon levels of awareness and knowledge of SP, amongst beneficiaries and programme implementers alike.

All of these factors results in less likelihood that the current social protection programmes and interventions will reach its long term vision of truly protecting those suffering from crucial levels of poverty and deprivation and from vulnerability and shocks.

**13 Recommendations**

The recommendations below are based on the key findings and are derived directly or indirectly from the interviews with stakeholders and from the nine case studies which were derived from the review of international best practices relating to coordination of social protection services. Input into the institutional framework at the feedback and recommendations workshop is also reflected below.

**13.1 Policy and planning**

The National Social Protection Policy will provide an important framework for coordination of SP in Zambia and it is recommended that, as far as possible, all current and future SP-related legislation and policy be aligned to this national policy.
Following the finalisation of the NSPP, a strategy for policy implementation - including all institutional arrangements that will maximize coordination and integration of social protection services and programmes - should be developed together with an operational plan.

Planning for SP services should start with a consideration of the end-user or beneficiary so that services are designed according to their needs. Efforts should be made to include all line ministries in this planning process so that programmes can be offered in an integrated way to include protection, prevention and promotion. Lessons learnt from South Africa’s ICROP programme and Cambodia’s ‘single window service’ can be drawn on here.

- The overall objective of the Integrated Community Registration and Outreach Programme (ICROP) in South Africa is to improve access to social protection services to communities in deep rural areas by offering all services under one roof. The use of a mobile ‘one stop shop’ approach relies on an integrated service delivery model where different government departments work together to bring a range of services to the community.
- Cambodia’s PEOPLE service is an excellent example of how the needs of the end-user were taken into consideration when planning for services. This Single Window Service is an office within government structures at local level that brings social protection and employment services together under one roof, in order to concentrate information, to share costs and to make it easier for people to access many services in one place, at subnational level\(^56\). A key objective of the service is to facilitate access to existing social protection schemes for those families which lack access to information and services. The offices are close to the people, at district and commune level.
- Both Chile’s Solidario programme and Kenya’s Hunger Safety Net Programme provide innovative examples of how sustainable livelihoods and empowerment programmes have been integrated with non-contributory social assistance schemes in a coherent way in order to improve economic productivity of households.

### 13.2 Funding for SP

There is an overall need for improved coordination of resource allocation in order to ensure strategic use of funds in the sector. Therefore coordinated decision-making on resource allocation could be made by a higher level structure at Cabinet level and these decisions should be informed by the SP SAG.

Research participants have advocated for the establishment of a dedicated fund for social protection.\(^57\) The management of this fund would require dedicated management capacity at the MCDMCH, through a dedicated agency for benefit delivery, and technical working groups in charge of different aspects of this management including information systems; payment systems and beneficiary identification. Temin et al (2008) supports this and confirms that “Establishing a separate unit to administer cash transfers within a broader social protection framework may make the most sense – it is a discrete component of social protection that is highly technical in nature. This unit would require oversight by a policy-making body with senior leadership”.

---


\(^57\) The government recently established a Social Protection Fund under the livelihood and empowerment pillar.
In addition the Ministry of Finance needs to prioritise the implementation of the NSPP when making decisions about budgets in order to fulfil its development priorities as laid out in the SNDP.

13.3 Institutional framework for SP

A tentative framework for implementation of the NSPP is presented in the diagram below.

![Tentative institutional framework for implementation of the NSPP](image)

**Figure 8: Tentative institutional framework for implementation of the NSPP**

The National Social Protection Council located at Cabinet level could provide oversight and strategic direction which would also significantly improve accountability in the sector. This could include overseeing the development of policies and programmes and the direction and allocation of resources. This suggestion is based on a strong recommendation from study respondents that a higher level body at Cabinet level needs to be established which to oversee the SP system in the country. The exact membership of the Council will still need to be determined.

A Social Protection Secretariat should be established which could carry out the day-to-day functions of the Council and implement decisions made by the Council which could also include the functions of M&E and monitoring of funds. It is suggested that this Secretariat should be located in the MCDMCH together with additional required capacity since it will be playing a more operational role. This will also facilitate closer integration with the SP SAG.

The Social Protection Sector Advisory Group could play both an advisory and an operational role of leading integrated planning and budgeting of social protection interventions. However,
in order for the current SP SAG to fulfil this role its structure and functioning should be reviewed. The following recommendations are made in this regard:

- The purpose and objectives of the SAG need to be reviewed so that the focus of its activities shift from implementation towards integrated planning and budgeting. Lessons learnt from the MOH’s SWAP framework and tools could be used by the MCDMCH for integrated planning and coordination with key ministries and other actors. For example, a comprehensive/consolidated meeting matrix could be developed annually, approved by the SAG and monitored and revised by the secretariat reporting to the Council.

- The **Sub-Committees** or **Technical Working Groups** of the SP SAG would need to be determined but there are two alternatives here. Firstly, given the broad orientation of the proposed NSPP, which encompasses several underlying policies, programmes and services, it may be preferable to adopt the four pillar framework proposed in the draft NSPP. The second option could be to arrange them according to the systemic elements responsible for supporting the SP system as a whole, for example: programme implementation; human resources; M&E, research, MIS; and funding. Other sub-committees could be added such as communication and knowledge sharing. A system for monitoring the functioning of the SP SAG should be put in place in order to monitor its meetings, attendance, and planned activities; and to hold its members accountable for their actions.

- The lead department needs to have the authority to hold all representatives accountable for attendance and for delivery of agreed actions. In a study done on cooperative governance structures in South Africa by Giese et al (2008), it was found that those structures which had a deputy chair elected from civil society to work alongside the government chairperson were more effective. This is a model worth considering.

- In addition, it will also be useful to ensure that the terms of reference for the SAG distinguishes between the role of the lead department, as **co-ordinator** of the structure, and the role of all participating ministries as being integral to the realization of the objectives of the structure.

- Attendance at key coordination meetings and delivery of agreed outputs should be included by managers in performance reviews for all ministry and civil society representatives so as to ensure that active participation in the coordinating structures and mechanisms are not seen as ‘add-on’ tasks.

Given the proposed four pillar structure of the NSPP it may be worth considering that the **Employment and Labour Sector Advisory Group** be integrated into the institutional framework because of its focus on Social Security. Decisions will need to be made about whether it a) remain as a standalone SAG or b) become a sub-group of either the SP SAG or under the oversight of the Cabinet level structure.

The **Provincial Social Protection Committee** could be responsible for the coordinated planning and budgeting of social protection interventions in the province. It is suggested that it could be a sub-committee of the current PDCC. However, the functioning of this structure will need to be reviewed as this study found that these structures do not meet regularly in all provinces, and this raises questions around the added value of such a provincial committee. One possibility
could be the establishment of a dedicated Provincial Social Protection Secretariat to support the committee.

The District Social Protection Committee should oversee the coordination of social protection services at district and community level. Since this study found that the DDCC is the main structure for promoting coordination of services at district level; it is recommended that the District Social Protection Committee could be a sub-committee of the DDCC. At the same time though it would be important to re-consider the current formation of the sub-committees of the DDCC with a view to integrating those sub-committees coordinating social protection related services under one umbrella social protection sub-committee. As with the province, this committee could also be supported by a dedicated District Social Protection Secretariat. This will allow for integrated planning and decision making at district level. Furthermore, adequate resources will need to be allocated to districts in order to ensure that DDCCs are able to fulfil this additional responsibility effectively. Regular monitoring and evaluation of these structures will need to be undertaken by the District Commissioner in order to ensure that they are meeting their objectives, and to revise objectives and activities according to changing needs and circumstances. Consolidation of district- and community-level structures in general is advised to eliminate beneficiary confusion and over-burdening of volunteer staff, who often serve on a number of different bodies simultaneously.

There is also a need to consolidate the coordination mechanisms located at community level, particularly those structures focusing on health and those for social welfare. For example, the CWACs could be integrated with the Safe Motherhood Action Groups and the Neighbourhood Health Committees. This is in line with the shift of the Primary Health Care Mandate to the MCDMCH and will lead to improved integration of these services.

13.3.1 Revised institutional framework for SP

A feedback and recommendations workshop was held with the NSPP TWG on 8 August 2013 where members were given an opportunity to revise the tentative framework presented above. Based on the discussion and input from various groups, the structure below was presented and is viewed to be a good institutional arrangement for implementation of the NSPP.
The following key points were made with regards to the roles and responsibilities for each structure.

It is important to note that there could be a temptation to establish a single unit, with no multi-sectoral representation, managing social protection at Cabinet level. Whilst this may be useful in terms of providing strategic thinking, it is critical that the sector is not controlled by a ‘top-down’ approach where instructions in the sector are dictated separately from the ministries. Instead, the TWG proposed for the establishment of a National Social Protection Council which has multi-sectoral representation and supported by a NSP Secretariat which could be based at ministerial level.

The **NSPC** will be responsible for policy direction, resource mobilisation and strategic planning.

The **Secretariat** will provide technical advice and guidance on issues of SP so as to ensure that the policy is understood as a broad framework which encompasses a range of policies. It may be worth considering that this Secretariat be linked to the National Implementation Committee described next rather than the NSPC.

The **National Implementation Committee** will be responsible for tracking policy implementation, coordination of integration amongst the four pillars, and quality assurance. It is advised that the Chairperson of this committee should be elected as there are several ministries involved in SP implementation. This will also strengthen accountability.
The Technical Working Groups (TWG) of the Implementation Committee will focus on the systemic elements of the overall social protection system, namely: Human Resources; Programme Implementation, awareness raising and communication; funding; M&E and research. A sub-committee for each of the four pillars of the NSPP will then be established for each TWG, namely: social assistance, social security, livelihood and empowerment, protection.

The subcommittees will receive reports from the PDCC which will be responsible for coordination and monitoring and evaluation of implementation at district level.

The DDCC will have a social protection sub-committee which will be responsible for overseeing that there is an integrated approach to delivery of SP services.

13.4 Monitoring and evaluation

An M&E framework and system containing a set of core indicators that will be used to measure the outcome and impact of coordination and integration of SP services at all levels of government should also be developed. Regular evaluations should be conducted to evaluate the level of coordination of services and programmes at national, provincial, district and local levels.

13.5 Decentralisation

The current decentralization plans by the Government of Zambia will contribute towards better social protection coordination at district level. It must be highlighted that good decentralisation requires good centralisation. For example there need to be centrally designed programme to ensure rules of application and eligibility are the same across the districts. Standard setting and Monitoring and Evaluation (M&E) are areas that would also be the mandate of central government. Likewise a central database would be necessary. Finally, it is crucial that capacity building of councils and other local authorities take place for the effective administration and implementation of the social protection services as illustrated in the Nepal case study.

13.6 Incentives for coordination

If the National Decentralization Policy is implemented, management and administration of SP services will be fully located at local level. In order to increase motivation by local authorities and encourage coordination an incentive scheme for social protection coordination could be considered. It is recommended that Zambia in connection with the decentralization policy consider the performance-based management tools and incentives (including Formalizing Agreements for Decentralized Implementation, Monitoring the Quality of Decentralized Implementation using the IDG and Performance-Based Incentives for Quality of Decentralized Implementation) as described in the Brazilian case study. One of the performance indicators is good coordination.

13.7 Capacity and Human Resources

The capacity and resource constraints of the MCDMCH’s planning department needs to be addressed so that it can effectively fulfil its role of overseeing policy coordination, planning and M&E of the social protection system.

To address capacity constraints at district level – as well as the high demand for services currently being experienced by the Zambian Department of Social Welfare – lessons learnt from South Africa’s use of an independent agency for grant administration could be applied. The South African Social Security Agency (SASSA) was established to manage and deliver social security transfers via service units located at district, area and ward level. These decentralised,
independent structures have not only alleviated the work load of the Department of Social Welfare, but have brought about better integration and administration of the grant system via delivery of social services by one provider.

In order to enhance the capacity of those who work within the social protection system the government, led by the MCDMCH, needs to invest in systematic education and training programmes on social protection both for government and non-government stakeholders involved in the sector. These programmes need to be well-coordinated across all government ministries and between the government and the CSO sector. In particular, training programmes should be targeted at the district and community level social protection actors so that coordination can directly benefit beneficiaries through improved referral mechanisms, information sharing, and awareness raising.

13.8 Data and information systems
A central database should be installed at district level with a link to a centrally managed database, similar to the design of the SCTS management information system which is being developed. This will then allow for regular and reliable data to be captured on the number of families who require and receive social protection services. It should be accessible at all government levels with user privileges. The establishment of such a database should be coupled with the development of guidelines and sufficient capacity building of anyone who uses the system. The current work on establishment of a Management Information System (MIS) is acknowledged here.

A strategy needs to be developed for sharing knowledge and data amongst key Ministries and between Ministries and CSOs. This strategy should consider the creation of linkages between the databases of the Ministries by formal agreement so that data can be shared and verified amongst key stakeholders. These Ministries should include: MCDMCH, MOLSS, MOE, and MOH.

13.9 Referral mechanisms
In the absence of formalised referral mechanisms amongst SP actors it is recommended that a formal referral mechanism be developed together with a clear set of guidelines for referral between the proposed four pillars of SP and between these pillars and other relevant services such as health or education services. This should be accompanied by a capacity building strategy targeting all government and non-government actors involved in direct service provision at district and local levels. Respondents also noted that the formulation and operationalization of standardised targeting mechanisms, for the identification and selection of SP beneficiaries, should be prioritised to enhance transparency and equitable distribution of benefits.

13.10 Knowledge and awareness on SP
As part of the strategic plan for the NSPP, a joint communication strategy should be developed to raise awareness and share information on SP amongst the public and specific key stakeholders such as parliamentarians, religious leaders, traditional leaders, and the media.

13.11 Coordination between government and other actors
A strategy for the inclusion of business in the SP sector needs to be developed starting with a clear vision of the private sector’s role and contribution towards a comprehensive SP system. Opportunities exist for the business community to play a key role in the ‘graduation’ of beneficiaries from social assistance, via its participation in empowerment, skills development, income-generating and capacity-building initiatives.
In terms of facilitating SP coordination between government and civil society, the compilation of a database of all NGOs, CBOs and FBOs operating at district level might be compiled at provincial level to indicate what services are being provided, by whom and to which target groups. This database could be based upon the existing Register of Societies - and might be used to facilitate linkages between all SP actors thus eliminating programme overlaps or duplication and resource wastage.

The Kenyan Hunger Safety Net Programme (HSNP) offers a potential model for collaboration between government and non-state actors. Coordinated at national level by a HSNP secretariat, this programme facilitates the allocation of unconditional cash grants via cooperation with district-level INGOs – responsible for beneficiary targeting and registration - as well as the banking sector and private merchants – who oversee grant distribution through the use of biometric data and smartcards. Furthermore, this coordination between state and non-state actors has greatly facilitated cash grant distribution in isolated and ‘hard to reach’ areas with poor security and limited infrastructure.

13.12 Develop institutional arrangements for effective implementation of a national Social Health Insurance system

Key recommendations emerging from the study include the use of an autonomous fund administrator within a public accountability structure to manage the scheme to ensure heightened levels of efficiency and effectiveness. The introduction of the scheme should be accompanied by a national sensitisation campaign to inform the public of the scheme and its benefits - and to promote higher membership and contribution levels. It is to be noted the future expansion of social insurance to other contributory benefits including maternity benefits that need to be coordinated with such fund.

Finally, it is recommended that all forms of contributory social protection/social security be included under one single coordination framework. Similarly assistance mechanisms could be placed under a single coordination structure to streamline the pillar’s activities and interventions. Kenya’s National Safety Net Programme (NSNP), whilst overseeing coordination of all cash transfer programmes, offers a best practice model from which key learnings might be drawn and applied.

13.13 Grievance mechanism for SP

There is currently no joint grievance mechanism for social protection. It is recommended that a joint social protection grievance mechanism should be established with clear guidelines. This could be part of a Single Window Services as mentioned in the Cambodian case study. Awareness creation and information campaigns on social protection need to include this joint grievance mechanism as well.
Annexure 1 Case Study Kenya Social Protection Policy

The Institutional Framework for coordination of Social Protection Interventions in Kenya

Summary

This case study provides an overview of the institutional framework at national and sub-national level in order to ensure coordination of its Social Protection Policy adopted by the Kenyan government in 2012. It also shows how the framework for the cash grants programme – National Safety Net Programme – has been developed and integrated into the overall institutional framework.

Description of policy provisions and institutional structure to ensure coordination

The policy includes three measures:

- **Social Assistance** including cash transfers; school feeding programmes; sustainable livelihoods.

- **Social Security** including retirement schemes; sickness benefits; worker’s compensation; unemployment protection.

- **Health Insurance** including the need for revision and reform of several areas so as to transform the NHIF into a social health insurance scheme and eventually a fully-fledged health scheme.

Chapter 7 of the policy maps out the institutional framework for coordination of social protection interventions which it acknowledges are fragmented and lack coordination and synergy from national through to county level which has the bulk of service delivery responsibility. The diagram below provides an overview of the national and county coordination mechanisms to oversee the development, implementation and integration of social protection strategies, programmes and resourcing.

58 National Social Protection Policy (final draft); Republic of Kenya, June 2011
The roles and functions of each of these structures is briefly described below.

National Social Protection Council: This structure is established by an Act of Parliament and is multi-sectoral in nature. It is chaired by a non-executive chairperson appointed by the President and consists of the Permanent Secretaries of the ministries responsible for Social Protection, Finance, Health, Labour and representatives of the Attorney General, private sector, and the civil society. Its purpose is to facilitate oversight of the implementation of the SP Policy. Key areas of oversight include:

- The development of a national strategy on coordination of social protection;
- The design and development of integrated social protection programmes, with implementation guidelines and service standards on joint programmes;
- The development of systems to improve research, analysis and targeting of poor and vulnerable groups;
- Review of the status and progress on social protection, identifying gaps and areas to be prioritized to improve impact on social protection;
- Recommending the review of legislation and policies on social protection, and mutually agreed improvements in respective policies and strategies to facilitate coordination;
- Establishment of single registries for programmes across target groups and programme areas; and

---

59 Document entitled: "Kenya experience with formulating a Social Protection Policy and putting in place the institutional framework for coordination", World Bank (date unknown)
- Development and implementation of a communication and influencing strategy on social protection.

The Council will further facilitate the development of appropriate committees and sub-committees at the national level to pursue different coordination agendas. These will include:

- Committees of agencies pursuing common social protection aspects – such as asset development and income generation; asset protection and rehabilitation; safety; consumption transfers; and social security and health insurance;

- Committees of agencies supporting joint programmes at national or county levels; and

- Committees of agencies focusing on similar geographic and/or target populations (e.g. older persons, OVC, youth and persons with disability).

National Social Protection Secretariat: The main role of this structure is to implement Council decisions and to carry out day-to-day functions. It therefore provides technical support and coordinates the implementation of agenda items in social protection.

County and sub-county Social Protection Committees: These structures are responsible for community-based initiatives. They are all answerable to the National Council. Their main roles will be to:

- Promote oversight and monitoring of social protection interventions in their jurisdiction;

- Promote coordination and harmonization of programmes within the county to avoid overlap; and

- Ensure that sector policies and guidelines are implemented in the county and maintain a registry of programmes and beneficiaries in the county in coordination with the single registry at the national level (integration of MIS between the counties and national level). Disputes are resolved or referred to the national Council by county committees.

Regulation and Adjudication: Independent regulators regulate and set standards for and supervise compliance by social security and health insurance schemes. One or more adjudication institutions provide an independent appeal function in relation to the resolution of social protection disputes. Appeal institution(s) are accessible once the internal complaint mechanism of a particular social security, health insurance or social assistance institution has been exhausted.

Since the adoption of the policy the government is establishing a National Safety Net Programme (NSNP). Its main objective is to improve the welfare and resiliency of beneficiaries, with the aim of reducing poverty and vulnerability in Kenya.

It provides a framework around which the five principle cash transfer programs will increasingly be coordinated and harmonized. The five programs that will form part of the NSNP are: (i) the Cash Transfer for Orphans and Vulnerable Children (CT-OVC) program; (ii) the Hunger Safety Net Programme (HSNP); (iii) the Older Persons Cash Transfer (OPCT) program; (iv) the Urban Food Subsidy Cash Transfer (UFS-CT); and (v) the Persons with Severe Disability Cash Transfer (PWSD-CT)\(^60\).

\(^60\) Document entitled: “Kenya experience with formulating a Social Protection Policy and putting in place the institutional framework for coordination”, World Bank (date unknown)
The figure below provides an overview of how this programme fits into the overall institutional framework.

Figure 11  Institutional structure for administering main cash transfer programmes

**Key lessons learnt and recommendations for Zambia**

This case study provides some useful ideas around how the institutional arrangements for oversight and implementation of social protection could be structured in Zambia. A National Social Protection Council at Cabinet level could be set up in order to provide strategic direction and oversight with the support of a Secretariat for implementation of decisions. Such a structure will provide leadership and would significantly improve accountability in the sector. The current SP SAG could play both an advisory role and operational role around social protection interventions.

Zambia should also consider the adoption of a national safety net programme. This nation-wide approach would allow for improved coordination as it would provide scope to reduce duplication and overlap. A national programme would also be well positioned to adopt best practices from individual social cash transfer programmes while extending these systems and procedures across the country. Over time these reforms could be extended to other safety net programmes.61

---

Annexure 2 Case study Zambia

A best practice model for coordination structures and tools overseen by the Development and Cooperation Unit of the Ministry of Health in Zambia

What this case study demonstrates

This case study demonstrates how the Ministry of Health’s SWAP tool has been used successfully for integrated planning and horizontal coordination with the MCDMCH, Cooperating Partners and civil society organisations.

Description of the structure to improve integration and coordination

The Ministry of Health makes use of a Mutual Accountability Framework or MOU which it has entered into with MCDMCH, Cooperating Partners and Civil Society Organisations. The scope of the MOU includes a joint commitment to increase partnership of all participants which outlines the general principles for collaboration between all stakeholders. Within this framework the ministry makes use of the SWAP which guides all interactions with the MOH through a specific set of coordination mechanisms which are presented in figure 1 below.

![Figure 12 Overall structure for joint meetings and working groups](image)

The **Annual Consultative Meeting (ACM)** with representation of three Ministers (MOH, MCDMCH, MOLSS), Ambassadors/High Commissioners, Heads of bilateral development

---

62 Source: “Mutual Accountability Framework between the GRZ (MOH, MOCDMCH); Cooperating Partners; and Civil Society Organizations/NGOs”, September 2012, GRZ Ministry of Health.

63 SWAP Health Sector Coordination Structures, September 2012, GRZ Ministry of Health
cooperation, UN system, multilaterals, Civil Society etc, involved in the health sector. This is the highest level in the coordination framework.

**Sector Advisory Group** (Joint Stakeholders) Meetings: Meetings are held bi-annually. The primary aim for the SAG meetings is to monitor and manage for results.

**Policy Meetings** are held every month of the year except July and December. They aim at monitoring progress made and decide potential changes of the approved work programme. The content of the policy meetings is primarily derived from Technical Working Groups (TWGs), several meetings, namely, the Troikas (CPs, GRZ and CSO/NGOs) meetings between representatives for stakeholders (Troika members) and the MOH & MCDMCH Permanent Secretaries.

**There are six Technical Working Groups**, one for every building block, namely,(1) Service Delivery/Communication, (2) Human Resource, (3) Procurement, Medical Products, Vaccines, Infrastructure, Equipment and Transport,(4) Monitoring and Evaluation (M&E), (5) Health Care Financing &Joint Financing Agreement; and (6) Leadership and Governance. The working groups monitor and advise on the development and implementation of the annual work programmes. The working groups report to the policy meetings through the secretariat. As required and as decided in the Policy meeting, different task forces and sub-committees can be formed within the framework of each Technical Working Group. The TWGs meet as required but at least quarterly.

**The Secretariat (Development and Cooperation Unit)** supports the overall structure and ensures that the structure is operating according to the Terms of Reference. The Secretariat also supports the different sub-structures within stakeholders such as CPs, CSO/NGOs (FBOs, NFBOs, PHPs).

A clear terms of reference for each of these structures is laid out including roles, responsibilities and duties. A comprehensive/consolidated meeting matrix is also developed annually, approved by the annual consultative meeting and monitored and revised by the secretariat reporting to the policy meetings. To monitor the implementation of the framework a results based framework is utilised with indicators that talk to coordination.

**Key lessons learnt and recommendations**

According to the MOH, coordination of planning within the ministry is strong because there is a clear schedule for everything as the following statement reflects:

“The coordination is there because there is a schedule for everything – there is a time to plan, updates, implementation, reporting, feedback, document and the format is there – this is a coordinated system. It is well laid down and you are forced to follow it. When MOF says we have launched the planning cycle – we know what needs to happen”, (National stakeholder)

The arrangement of the TWGs is also interesting. Instead of being programme based or target-group focused they are arranged according to administrative themes which are responsible for the support of the health system as a whole – service delivery/communication; human resources; procurement; M&E and research; finances.

The combination of a Mutual Accountability Framework (MOU); clear coordination structures; and a calendar of meetings for the year provides a powerful tool for joint planning and coordination between ministries which could be replicated in other ministries. The use of a
results based framework in order to monitor the implementation of the SWAP also enhances accountability of each structure within the framework.
Annexure 3 Case study Ghana

A best practice model for improved coordination between government ministries, departments and agencies - the Livelihood Empowerment Against Poverty or LEAP Programme of Ghana

What the case study demonstrates

This case study offers an outline of the LEAP Programme, initiated in 2008, as a means of demonstrating the progress made by the Government of Ghana in the improvement of coordination of social protection interventions, as well as fostering higher levels of inter-ministerial cooperation. In addition to this, the LEAP Programme is innovative in its coupling of a long-term cash grant system with emergency relief, as well as its emphasis on the ‘graduation’ of its beneficiaries to other social protection interventions aimed at transformation, beneficiary empowerment and self-support.

Description of the structure to improve integration and coordination

In 2007, a comprehensive National Social Protection Strategy (NSPS) was developed via a consultative and participatory process including key stakeholders from government ministries, departments and agencies (MDAs), CSOs and development partners. The development of the strategy heralded a shift from a “…piecemeal approach towards a harmonised, integrated, sustainable and forward-looking national framework.”64 In 2008, the Government of Ghana introduced a trial phase of the Livelihood Empowerment Against Poverty or LEAP Programme, as a cross-sectoral, flagship programme of the NSPS. Inspired by best practice models from southern Africa and Latin America, the programme aims to provide both conditional and unconditional cash transfers every two months, via the country’s post offices, to extremely poor households with no alternative means of meeting their subsistence needs65. The programme’s targeted beneficiaries include:

- The elderly / those aged 65 years and above,
- People with severe disabilities, and
- Caregivers of orphans and vulnerable children (OVC)66

Implementation of the LEAP Programme is coordinated by a Social Protection Unit located in the Ministry of Employment and Social Welfare (MESW)67. A National Steering Committee, comprised of several government departments and agencies68, together with CSOs, NGOs and development partners, has been created to provide policy and management direction; while a National level Vulnerability and Exclusion (V&E) Sector Group, including government and donor stakeholder technical advisors, has been established to provide technical support for programme implementation. Finally, a key step towards the improvement of cross-agency coordination is the establishment of a Social Protection and Livelihood Technical Team (SPLIT),

67 The former Ministry of Manpower, Youth and Employment.
68 These include the Ministries of Health and Education, the Department of Labour, the Ministry of Women and Children, the Ministry of Financial Affairs, and the MLGRDE.
including both state and non-state actors, to serve as a platform for the coordination and harmonisation of social protection activities. The aim is that the SPLiT will facilitate the linking of LEAP beneficiaries to other social protection interventions to ensure their graduation from the programme towards self-empowerment and self-sustainment. Amongst these are initiatives led by the Ministries of Health, Education, and Agriculture.\(^\text{69}\)

Other noteworthy features of the LEAP Programme include:

- The formulation of a Manual of Operations, designed to facilitate operationalization and implementation of the LEAP Programme.
- The LEAP Programme and NSPS are both components of Ghana’s Government Development Framework and, as such, social protection provision has been mainstreamed into the Government’s Medium Term Expenditure Framework budgeting process. This inclusion of the LEAP grant in the government budgetary process bodes well for the programme’s sustainability.
- Implementation of the LEAP Programme was preceded by a national sensitisation campaign amongst stakeholders at regional, district and community level.
- District and community-level sensitisation included the establishment and capacity building of district and community-based LEAP implementation committees (CLICS), comprised of traditional leaders, district assembly members, representatives from schools and medical facilities, as well as religious and community leaders.
- The generation of a single registry / database to provide information on all beneficiaries as well as improve coordination and monitoring of social protection provision, has provided an “…excellent basis for developing a centralised information management system…"\(^\text{70}\).
- The proposed development of a common targeting mechanism for improved beneficiary identification and registration.
- The aim of articulating the LEAP Programme with complementary social protection services to facilitate the ‘graduation’ of the programme’s beneficiaries.\(^\text{71}\).
- The inclusion of an Emergency LEAP programme in response to drought or flood and the subsequent creation of severe food shortages.

Key lessons learnt

Whilst the LEAP Programme is still in its infancy, many of its proposed structures and mechanisms provide a sound basis for future programme development. The Government of Ghana has also been praised for its ‘laudable efforts’ to learn from best practice models from other developing and low-income countries.

Recommendations for Zambia

This case study offers an outline of possible coordination structures and institutional frameworks which might be adapted and utilised for improved vertical and horizontal coordination within and between government ministries, departments and agencies. Of

---


\(^\text{71}\) While this is still in its early phases, it has been noted that Memoranda of Understanding (MoUs) have been signed with the Ministries of Education, Agriculture and Health to facilitate the linkage of the LEAP with other social protection services / programmes.
particular note is the formulation of an emergency programme which is coupled to the long-term cash grant intervention, as well as the establishment of a specific coordination body; namely the SPLiT, at national level to facilitate cross-sectoral movement and empowerment of programme beneficiaries.
Annexure 4 Case study Kenya

Coordination between government and other actors - including donors, non-governmental organisations and the private banking sector - for the administration and payment of cash grants via the Kenyan Hunger Safety Net Programme (HSNP)

What the case study demonstrates

This case study offers an outline of the HSNP which has been successfully piloted in four of the poorest districts of northern Kenya over the period 2008 to 2012. In doing so, this case study will demonstrate how coordination and collaboration between state and non-state actors, incorporating the use of biometric data and smart cards, can facilitate the effective distribution of cash grants in areas characterised by poor security, a lack of infrastructure, low population density, and highly mobile communities.

Description of the structure to improve integration and coordination between the Hunger Safety Net Programme’s administration and payment systems

Phase 1 of the HSNP was launched in 2008 in the Turkana, Marsabit, Mandera and Wajir districts of the arid and semi-arid lands (ASALs) of Kenya; where poverty levels are reported as ranging from 72 to 92 per cent according to government statistics. The primary goal of the programme is to reduce extreme poverty and malnutrition via the allocation of unconditional cash transfers to those households or individuals deemed to be chronically food insecure. At the time of implementation of Phase 1, the national roll-out of cash transfers was still a new and untested social protection mechanism in Kenya. Therefore, the HSNP was designed as a means of piloting methodologies that might effectively target poor and vulnerable community members, located in “…some of the most challenging environments in Kenya.”

The programme also sought to assess the use of information systems that would enable the transfer of small cash amounts to large numbers of recipients in an efficient and effective manner.

The HSNP operates under the Ministry of State for the Development of Northern Kenya and Other Arid Lands, with financial support from the United Kingdom Department for International Development (DFID). A national level HSNP secretariat was created to manage and coordinate the work of the programme, including a Secretariat Coordinator whose duties included reporting to a steering committee comprised of Kenyan Government (GoK) and DFID representatives. Three targeting methodologies for the selection of beneficiaries were tested during Phase 1 of the programme, including community-based targeting, social pension and dependency ratio-targeting. However, it is noted that the targeting process included community members and local government at all stages.

Project administration for the HSNP was awarded to a consortium comprised of Oxfam GB, Care Kenya and Save the Children UK; all of whom are already involved in hunger reduction activities

---


Ibid.


It was noted that the Steering Committee was not institutionalized and that there was little involvement from the GoK on a national level during the pilot phase of the programme. However, district and local level engagement with government stakeholders was reported upon as being good.

within the targeted districts. These non-state actors facilitate beneficiary selection, registration and enrolment processes as well as the compilation of a final list of confirmed beneficiaries and – where necessary – their relevant recipients. This data is sent to the head office of the relevant administration component partner for screening, verification and consolidation into a single register; which is then sent to the HSNP Secretariat for approval and storage in a central database. The HSNP Secretariat Coordinator then forwards the list to the Management Consultant of Equity Bank Ltd as the payment component partner, for preparation of smartcards in the name of the listed recipients to allow for collection of cash by - or on behalf of - the beneficiaries. Prepared smartcards are sent to the nearest Equity Bank branch for collection and distribution by the administration component partner staff.

The cash grant payments are then made via an ‘agency model’, which includes the use of a network of agents or merchants, based in the towns and villages of the targeted districts. These agents are hired, trained and paid by Equity Bank on the basis of their “...strong reputation for propriety...” and “...adequate liquidity...” to enable their provision of payments to the registered recipients, via the use of a point of sale device (POS). The POS is used as a means of verifying the identity of the recipients (via their thumbprints) as well as for maintenance of electronic records of all transacted amounts.

Key lessons learnt

Challenges noted in the programme include the coordination of local implementing partners to ensure that all are following a similar information recording, reporting and communication system, thus enabling higher levels of efficacy and coordination at HSNP Secretariat level. Phase 2 of the programme aims to include formalised institutional structures, clarifying roles, responsibilities and systems, to remedy this situation. The use of biometric scanners / POS devices and smartcards also requires extensive capacity building within the targeted communities, as does the agency model employed by Equity Bank Ltd. However, the use of district level state and non-state actors, as well as community members and local merchants offers a substantial amount of experience of community life and its attendant constraints, which is an equally valuable and useful form of knowledge and capacity. Finally, a lack of horizontal harmonisation in beneficiary registration was noted, between the HSNP – situated under the National Drought Management Authority – and the Department of Gender and Social Development - situated under the Ministry for Social Assistance. This meant that some HSNP beneficiaries were registered for other social protection benefits (referred to as ‘double dipping.’) Nevertheless, it has been noted that in 2012 the GoK adopted a National Social Protection Policy (NSPP), including the establishment of a National Safety Net Programme (NSNP) to facilitate the harmonisation and coordination of the five principle cash transfer programmes, including the HSNP.

77 The target beneficiary and the listed recipient/s might be the same – or different - people. The names of a primary recipient and two secondary recipients are recorded by the administration component partner staff to ensure that, if necessary, someone is authorized to collect the money on the beneficiary's behalf.


81 Kenya experience with formulating a Social Protection Policy and putting in place the institutional framework for coordination (no date of publication indicated).
Recommendations for Zambia

The incorporation of non-state actors, including NGOs, community stakeholders and the private, professional sector, into government coordinated social protection mechanisms enables effective delivery of services to those areas that are often isolated and difficult to reach in a cost-effective manner. Furthermore, it encourages a level of social entrepreneurship in that private businesses benefit from their involvement in the system. However, a key learning is that the use of such a wide variety of different key players requires a clear structure and the ex-ante stipulation of roles, responsibilities and processes. The use of wireless, solar-powered biometric communication technology also offers a highly viable option for the safe transfer of funds to those who are excluded from mainstream banking / financial institutions, thus facilitating asset retention and accumulation – previously unavailable to many of the targeted beneficiary households.
Annexure 5 Case study Chile

The Chile Solidario System: Integration of services between SP pillars

What the case study demonstrates

The Chile Solidario System demonstrates how vertical, horizontal and family agreements with beneficiaries can be used to coordinate implementation and linkages of services to ensure that beneficiaries in extreme poverty are pulled in to the social protection system and towards sustainable livelihood.

Description of the specific unique coordination structure for social protection

The Chile Solidario system was introduced in 2002 and is defined as a system of social protection for families in extreme poverty that combines aid and skills development in an integrated approach. It should be noted that it is not a programme but a Social Protection Network, coordinated by the Ministry of Planning (MIDEPLAN). The aim of the system is to provide a coordinating mechanism that will bring the services available in the country to the families who despite fulfilling eligibility criteria were not able to access the programmes and subsidies available in the institutional network.

The system has four components:

1. Psycho-social support (through The Solidarity and Social Investment Fund’s (FOSIS) Programa Puente): A key element of Solidario is the personalised intervention of a social worker in each family. Each family has 21 home visit sessions with a social worker over 24 months with decreasing frequency after the first six months. The family and the social worker develop a strategy or a family contract as an exit strategy enabling the family to graduate out of poverty. It contains 53 minimum conditions grouped into seven pillars: health, work, education, family dynamics, housing, identification-documentation and income.

2. Protection bonus for the family: This cash benefit is conditional on the family meeting the family contract, and is given to the female head of the household. The amount of the bonus decreased over the 24 month participation in the programme.

3. Guaranteed cash subsidies. The families in the system are guaranteed the standard monetary aid to which they are entitled by their family status. These include Single Family Subsidy (SUF), Basic Solidarity Pension for old age, Disability Assistance Pension, Drinking Water Subsidy (SAP), Grant for School Promotion, and Grant for Identity Card.

4. Preferential access to programmes on skills development, work assistance and social security. Through this component and with guidance and assistance from the social worker, the family has access to other social programmes that help to meet the minimum quality of life conditions.

---


84 Taieb, D, Schmitt, V, (2012) “Good practices on Single Window Services Research on existing Single Window Services around the world (India, Chile, Brazil, South Africa, Pakistan) and key lessons to be learned for Cambodia”, International Labour Organization
As a result, various departments like Health, Education, Labour, Housing and Justice have signed agreements with the Ministry of Planning.

The institutional arrangements for the Chile Solidario System are as follows:

The Ministry of Planning is in charge of overseeing, administering and managing the Solidario program and the databases (Ficha de Proteccion Social and SIIS) and report directly to the President. The ministries and public agencies are responsible for designing and managing policies and intersectorial actions.

The municipalities ensure the coordination at local level. They are responsible for:

- processing the applications and updating of the ficha de proteccion social (database on beneficiaries)
- delivering cash transfers,
- coordinating and integrating of local social protection providers (social workers),
- managing the social workers of the UIF (Unidad de Intervencion Familiar). The workers’ performance is supervised and coordinated by a municipal employee (head of the UIF).

Making sure that the supply side is locally organized to attend the needs of this specific target population and ‘bridge’ the demand gap if needed (building an additional school etc.)

The psychosocial support element of the system is supplied at municipal level through FOSIS’s Programa Puente, which operates, with the municipality’s consent, in all the districts where the families are located. FOSIS signs an agreement giving responsibility for executing the programme to the municipality, which coordinates the family action unit of professional or technical staff who provide the family support function. Once the quota of participating families has been established for the year, the number of family support staff can be defined. Some are drawn from the local public agencies, mainly from the social or community area of the municipality (local support), and the rest assigned by FOSIS (additional support), if necessary.

The work of each family action unit is supported at local level by the local action network. This is convened by the municipality, and consists of representatives of all the public and private institutions and organizations that offer services and/or benefits to poor families. Programme coordination occurs at the local level, and the articulation of public services at provincial and regional level is subsidiary to and at the disposal of the local networks. Thus in those municipalities where any of the 53 minimum conditions cannot be met, the resources must be found at provincial and regional level.

**Lessons learned and recommendations for Zambia**

The greatest challenge has been in the implementation of the operating processes at several levels. In central government, ministries and services have had to adapt or create regulations and norms and programmes to channel compliance with the minimum conditions set by the Programa Puente (the indicators of ability to overcome extreme poverty). At the regional level, the Planning Ministry and FOSIS have had to coordinate and monitor the setting up of norms to regulate the process and solve the practical problems that arose. At local level, the

---

municipalities have had to set up procedures allowing the beneficiaries direct access to the services and programmes so as to meet the minimum conditions.

The Chile Solidario System has acted as a device for operation and coordination that facilitates synergies with existing social protection instruments to address the needs of the extreme poor more systematically. Tools and mechanisms have been applied to regulate coordination between the various stakeholders. These include vertical agreements between central and local government but also horizontal agreements between the various ministries. Interestingly, a family agreement is used as a tool to pull families into the social protection network and towards sustainable livelihood and thereby out of poverty. These mechanisms could be applied in Zambia.
Annexure 7 Case study Mozambique

The revision of Mozambique’s Basic Social Security sector as a means of better addressing poverty and vulnerability in the country

What this case study demonstrates

This case study demonstrates how the social protection (SP) sector revision process, currently taking place in Mozambique in conjunction with the STEP Portugal Programme, has contributed towards improved coordination and inter-ministerial cooperation as a means of addressing poverty and vulnerability in a more holistic and strategic manner. Specific focus will be placed upon the revised structure of the Basic Social Security (BSS) sub-system / level, which offers a highly promising model for heightened inter-ministerial cooperation and collaboration, as well as higher levels of articulation between SP, health and education, plus social assistance and empowerment interventions.

Description of the structure to improve integration and coordination

The Mozambican Government approaches social protection via a system consisting of three different levels. This is illustrated below:

<table>
<thead>
<tr>
<th>Level 3: Complementary Social Security</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Covers private mechanisms offered by non-state actors which complement benefits at compulsory level</td>
</tr>
<tr>
<td>• For example, private insurance for those seeking additional coverage to that provided by INSS</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level 2: Obligatory Social Security</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Includes contributory social insurance mechanisms</td>
</tr>
<tr>
<td>• Falls under National Institute of Social Security (INSS), under Ministry of Labour</td>
</tr>
<tr>
<td>• Includes pensions, cash sickness, hospitalisation and maternity benefits, as well as cash death grants</td>
</tr>
<tr>
<td>• Includes subsystem for civil servants under the Ministry of Finance</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level 1: Basic Social Security</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Aims to prevent situations of need and to promote social integration of the most vulnerable citizens</td>
</tr>
<tr>
<td>• Mainly funded and administered by the State, under Ministry of Women and Social Action (MMAS)</td>
</tr>
</tbody>
</table>

In May 2008, the Mozambican Minister of Social Affairs approached the International Labour Organisation (ILO) for assistance in the design of a minimum Social Protection Floor. The ILO, in conjunction with UNICEF, the World Bank and International Monetary Fund (IMF), initiated the STEP Portugal Programme, a technical cooperation project that “...aims to improve public policies and strengthen institutional capacity for the extension of social protection in Portuguese-speaking African countries.” Thus, the STEP Portugal Programme facilitates SP

---


implementation by strengthening the capacity of the relevant country’s public SP institutions, whilst coordinating international development partners’ assistance in this field⁹⁹.

STEP is currently working in collaboration with the MMAS⁹⁰ to provide support for the implementation of Mozambique’s National Basic Social Protection Strategy / NBSSS (2010 – 2014), as approved by a Resolution of the Council of Ministers in 2010. On the basis of these efforts, it is noted that “...significant institutional strides have recently been achieved in the area of extending basic social protection in Mozambique.”⁹¹ The NBSSS has three main objectives: 1. To increase the coverage and impact of Basic Social Security interventions for the poorest and most vulnerable citizens of Mozambique; 2. To increase the efficiency of the Basic Social Protection system; and 3. To ensure better levels of harmonization and coordination of Basic Social Security programmes and services as a means of ensuring a multi-sectorial approach and the strengthening of inter-ministerial cooperation. This will prevent duplication of interventions as well as possible gaps in service provision⁹².

As noted above, Basic Social Security (BSS) is one of the sub-systems of SP in Mozambique. It consists of those initiatives aimed at mitigating or offsetting the impact of vulnerabilities and risks that poorest households face. Its initiatives provide assistance to families who are unable to escape poverty by their own means. As a result of the revision of this sub-system, BSS is now comprised of four key components⁹³ as well as a new ‘package’ of BSS Programmes. These are outlined below:

Direct social action: Coordinated by MMAS and the National Institute for Social Action (INAS); this component includes programmes such as the Basic Social Subsidy Programme, the Direct Social Support Programme and the Institutional Support, Orientation and Family Reunification Programmes.

Social action for health: Coordinated by the Ministry of Health (MISAU), this is aimed at universal access of the most vulnerable to primary health care.

Social action for education: Coordinated by the Ministry of Education (MINED), this component promotes participation of the most vulnerable in the Mozambican education system; and

Productive social action: Coordinated by seven different government ministries, including the Ministry of Agriculture (MINAG); the Ministry of Labour (MITRAB); the Ministry of Public Works and Housing (MOPH); and the Ministry of Planning and Development (MPD). In addition to this, the National Institute for Disaster Management (INGC) and the National Institute of Education and Professional Training (INEFP) are included. Productive social action includes Social Inclusion through Work Programmes which target female heads of households, people with disabilities, and people living in absolute poverty; that is, the most vulnerable individuals who are able to

⁹⁸ Partnerships have been established with organizations such as DFID, ILO, SIDA, WFP and UNICEF, who will be contributing both financial and technical assistance to the government of Mozambique.

⁹⁰ STEP Portugal is also providing support to the INSS for its implementation of compulsory social protection. This support includes a diagnosis of the Institute, training / capacity building, technical assistance, and research.


work. This component also promotes complementary support via access to savings schemes and Income Generating Activities / IGAs 94.

A Council for Coordination of the BSS Sub-system was approved in 2009. This inter-sectoral body is comprised of the Ministers responsible for managing the sub-system components outlined above. However, it will also include representatives from the public and private sectors who are involved in the provision of social security services. The new BSS Sub-system will also enable the development of implementation, monitoring and evaluation instruments to facilitate planning and budgeting as well as improved M&E of programme impacts 95.

**Key lessons learnt**

Whilst the revision of the Mozambican BSS sector is still unfolding, many of its proposed structures and mechanisms provide a sound basis for the future development of a national SP framework. Key in the revised structure of BSS is its facilitation of inter-ministerial collaboration on programmes of action, thus enabling higher levels of coordination between ministries, as well as expanding the reach of SP services and eliminating possible overlaps or programmatic ‘gaps’. The inclusion of *Productive Social Action* initiatives (and the Ministries responsible for this) within the BSS framework will also facilitate beneficiary empowerment and progression to self-sustainability (thus effectively linking the social assistance, social protection, and livelihood and empowerment pillars within one, holistic framework).

**Recommendations for Zambia**

A key recommendation emerging from this case study is the formation of an overarching SP framework, coupled with the creation of an inter- and multi-sectoral coordination oversight body / council, to facilitate inter-Ministerial and inter-pillar SP structures and interventions. Notable in the Mozambican model is the inclusion of social assistance and livelihood / empowerment programmes within the same framework, which – it might be argued – will facilitate beneficiaries’ movement from social assistance towards self-sustainability. Finally, the inclusion of health, education and basic social protection within the same programmatic framework will also facilitate a higher level of intervention articulation and collaboration between these three vital SP sectors.

---


95 It is envisaged that this M&E system will also be multi-sectoral.
Annexure 8 Case study Cambodia

Single Window Services in Cambodia

What the case study demonstrates

This case study demonstrates how the establishment of Single Window Services provides integrated, coordinated and accessible social protection services at a decentralised level. It furthermore demonstrates how linking social cash transfers and other social assistance with social security and employment opportunities contribute to higher level of social protection.

Description of the specific unique coordination structure for social protection

In Cambodia, four national-level councils are centred on key themes for development and perform coordinating tasks. The leadership for the formulation and implementation of the National Social Protection Strategy (NSPS) has been given to the Council for Agricultural and Rural Development (CARD) linked to the Ministry of Interior. The NSPS aims to complement and coordinate the plans and strategies of line ministries and other stakeholders in the area of social protection. The NSPS identifies the actors (who is responsible), the actions (what is undertaken) and costs (how will the objectives be achieved)\(^6\).

To facilitate the implementation of the NSPS in a coordinated manner, a Single Window Service was established, namely the PEOPLE Service (Promotion and Enhancement of People Livelihood and Equity). It is an office within government structures at local level that brings social protection and employment services together under one roof, in order to concentrate information, to share costs and to make it easier for people to access many services in one place, at subnational level\(^7\).

---


The PEOPLE Service has five objectives:

1. Provide a coherent framework for the implementation of the NSPS and facilitate coordination between line ministries.

2. Simplify procedures and develop synergies between the components of the NSPS, reduce costs, share administrative tasks: registration, vulnerability assessment, skills assessment.

3. Empower subnational levels: the PEOPLE Service will be established at district and commune/sangkat level. The districts and communes will be involved in its design and oversight.

4. Facilitate the establishment of a monitoring and evaluation system through a common database of beneficiaries, based on ID-Poor (as explained below).

5. Facilitate access to existing social protection schemes for those families which lack access to information and services. The offices will be close to the people, at district and commune level.

The concept is to increase the efficiency and synergy of policies, link national and provincial government levels, use the ID-Poor targeting mechanism, establish an integrated database for social and employment policies and provide a gateway for the citizen to public services. This should increase the chances of the poor for progressive inclusion in the labour market and to step up the ladder towards higher level of productivity, income and social protection.

Figure 1 - Moving up the staircase: towards higher levels of social protection and sustainable employment

The functions of the PEOPLE Service are the following:

98 ID-Poor consists in the identification of all poor households in Cambodia and the determining of their respective needs.


1. All families register in a single place at commune and district level, based on IDPoor system,

2. They get information on the existing programs by the Government, Development Partners, NGOS (health equity funds, scholarships, cash transfers) and are registered and channelled to the relevant programs,

3. There is a single database of beneficiaries, closely integrated to the IDPoor database and updated regularly by the PEOPLE Service.

An assigned case manager assesses the vulnerabilities and skills of potential beneficiaries, develops a personalized plan with them covering skills development, enterprise creation or job placement, channels information on all social services they are entitled to, provides support for registration to the schemes, delivers social protection ID cards, facilitates access to benefits in cash or kind, and collects contributions if any. A grievance reporting mechanism represents the interests of final beneficiaries and increases availability and quality of social services. An integrated information system, using the latest technology available, (e.g. finger-prints, smart cards, internet-based platforms) assists with the management of each beneficiary’s case, monitors coverage and progressive inclusion in the labour market and assesses the impact of the programmes on poverty reduction.

With the “Single Window Service”:

The roles and responsibilities at the different level of government are divided in the following manner:
- At Village level, there is a front-office, opened once a week and operated by the Village Development Committee consisting of village chief and 4 village volunteers. The role of the village office is to disseminate information and identify beneficiaries.
- The role of the front-office at Commune level is to disseminate information, facilitate applications, gather complaints, collect data on families, and forward the applications.
- The functions of the front-office at district level are the same as at commune level. An Inter-Sectorial Office is responsible for coordinating with line-offices (e.g. education, health, and agriculture) while the back office consisting of officials (from e.g. education, rural development, labour and health) processes the applications. Officials responsible for planning computerize the forms and data, received from communes, and filled in the front office at district level.
- At provincial level the role is to provide coaching to communes and districts; monitor the system and provide resolution of issues.

**Key lessons learned and recommendation for Zambia**

PEOPLE is hence a best practice model of decentralisation of services and coordination thereof as well as it serves as an example of thinking long term regarding the social protection promotion of poor people. It should furthermore be noted that Cambodia has taken capacity building up as one of the main strategic government priorities, deploying an effort to strengthen decentralized government levels and laying the foundation for improved local governance and public service delivery and decentralised implementation of the new NSPS. The Single Window Service furthermore helps to empower both local communities and decentralized administrations, by giving them a role in the implementation and oversight of national social protection strategies. It is recommended that Zambia considers establishing a Single Window Service at district level like the PEOPLE model for the integrated and coordinated social protection service delivery.
Annexure 9 Case study Nepal

Coordination of Social Protection in Nepal: Insufficient capacity to implement effective decentralisation

What the case study demonstrates

The Nepal case study demonstrates two important things regarding the planning and implementation of social protection services, namely: 1) how the mere establishment of social protection coordinating structures does not automatically translate into effective coordination and integration of social services across sectors; 2) how performance-based incentives can be used to strengthen vertical cooperation and implementation by decentralized local government structures.

Description of the specific unique coordination structure for social protection

Nepal has a host of cash transfer programmes under different ministries (Ministry of Local Development, Ministry of Health; and Ministry of Women Children and Social Welfare) targeting children, the elderly, threatened ethnicities, widows, disabled, women and so forth. The delivery of social cash transfers is decentralized to district and village development committees (VDCs), with the Ministry of Local Development and Ministry of Women, Children and Social Welfare immersing as the lead ministries (see illustration of cash transfers delivery below). The Ministry of Finance factors into the cash transfer web as the financier.

The objective of the Multi-Sectoral Nutrition Plan under the Ministry of Health and Population (MOHP) is to improve Child Grant beneficiaries’ knowledge on hygiene and sanitation and other key nutritional behaviours; and assist mothers and caretakers to identify the best possible locally available food. Thus the ‘Multi-Sectoral Nutrition Plan covers nutrition policies and strategies for key sectors including agriculture and food security (National Food Security and Nutrition Strategy), public health (National Health Policy, National HIV/AIDS Strategy 2006 and Hygiene and Sanitation Plan 2010) and education (School Health and Nutrition Strategy 2006).’

Given the multi-sectoral approach, the two policies (cash transfers and multi-sectoral nutrition) require a great deal of coordination and cooperation across different sectors. Nepal has put in place some coordination structures and instruments as discussed below.

Although the Nepal social policy is fragmented, there is one broad-based apex structure at national level that is responsible for social protection policy. The National Planning Commission (NPC) is responsible for formulating development plans and policies under the directives of the National Development Council (NDC). It allocates resources for socio-economic development and monitoring and evaluation of development plans, policies and programmes. The NPC also facilitates the implementation of development policies and programmes while providing a platform for the exchange of ideas, finding solutions, discussion and consultation pertaining to economic development. However, responsible ministries are in charge of the identified programmes, under the lead of the NPC.

The Nepal system of coordination can be describe as programme-based coordination mechanism with coordination structures at national, district/municipal and village level. There are hardly any coordination structures and instruments that are cross-sectoral despite having

programmes to coordinate between ministries, agencies and programmes. For example for the Multi-sectoral Nutrition Plan (see illustration below), at national level there is a National Nutrition Policy Coordination Committee (NNPCC); and the Nutrition and Food Security Coordination Committee (NFSCC) that meets more frequently and comprises government officials from key ministries, development partners and others.\textsuperscript{102} At the District level there is a District School Health and Nutrition Coordination Committee responsible for coordinating and implementing nutrition programmes. The same applies to HIV/AIDS programmes where there is a National AIDS Coordination Committee (NACC) and a District AIDS Coordinating Committee (DACC). These multi-sector-commitments to nutrition remain poorly coordinated because of the lack of overarching and horizontal social protection coordinating structures which are cross-sectoral.

In terms of social assistance, the District Social Security\textsuperscript{103} Coordination Committee (DSSCC) is in charge of coordinating the different social transfer programmes that the Government of Nepal offers. A sub-committee to the DSSCC was put in place to deal with specifically with access to education\textsuperscript{104} ensuring that demand and supply side interventions are well harmonized. At village level, the coordinating structure mirrors the coordinating structure at district level, with the Identity Card Recommendation Committee (ICRC) and the Village Education Committee (VEC) coordinating on supply and demand side questions with respect to education.

Nepal is also experimenting with some efforts towards vertical cooperation and coordination by incentivizing good performance in implementing social cash transfers. The programmes introduced incentives; for example awarding VDC a bonus linked to excellent performance.\textsuperscript{105} Coordination among civil society is catered for by a recently formed Inter-Agency Coordinating Committee (IACC) outside government structures to coordinate NGO and civil society interventions. Despite all these coordinating structures, there is lack of an effective overall and cross-sectoral coordinating mechanism for the social protection system resulting in fragmentation and lack of horizontal linkage and synergies. The mere presence of coordinating structures does not necessarily render coordination efforts effective.\textsuperscript{106} The main hurdle that hamstrung Nepal is lack of implementing capacity and inadequate human resource capacity at district level to manage programmes.\textsuperscript{107} The capacity at the district level is not uniform and the physical facilities and human resources vary significantly.\textsuperscript{108} Although there is some coordination structures in Nepal there remain the need to strengthen these coordination structures.

\textsuperscript{102} Members of the Committee include high level government officers in five key ministries: Health and Population (MoHP), Education, Agriculture Development (MoAD), Federal Affairs and Local Development, and Urban Development (responsible for WASH). See Scaling Up Nutrition (SUN). 2012. SUN Country Summary: NEPAL. September 2012. p.1

\textsuperscript{103} Social assistance is called social security in Nepal

\textsuperscript{104} This subcommittee will be chaired jointly by the District Executive Officer and the District Development Committee chair (LDO for the time being).

\textsuperscript{105} Ministry of Local Development. (2011). Nepal Human Development & Social Protection Pilot, Project document (Funded by UNCDF and World Bank). p.4

\textsuperscript{106} For example it is reported that the District AIDS Coordination Committees (DACCs) ‘have been established in more than 60 districts but only two or three are reported to be functioning while the rest merely organize functions on World AIDS Day’. Coupled with this, the National AIDS Council (NAC) has had only one meeting and the National Aids Coordination Committee led by the health ministry has also failed to do much.


\textsuperscript{108} Holmes et al. (2009). The Role of Cash Transfers in Post-Conflict Nepal. Overseas Development Institute. p.18
Lessons learned

The mere presence of coordinating structures does not necessarily mean effective coordination. Once structures and mechanisms are in place they need to be strengthened in terms of their financial, human resource and information capacities. Coordination of social protection services across different ministries is essential for joint planning and programming given the diverse actors with diverse expertise. It should be felt necessary to have coordination mechanism at all levels, national/federal, and provincial and district to coordinate social protection services as in the case of Nepal. However, programme-based coordination mechanisms do not facilitate horizontal integration and linkage of social protection programmes and services across ministries and agencies. Programme-based social protection perpetuates fragmentation of social protection programmes.

Recommendation for Zambia

In light of the Nepal case study (as also demonstrated in the Brazilian case), it is noted that implementing social protection schemes in a decentralised context demands a great deal of resources and techniques for the Zambian government to provide effective vertical and horizontal cooperation and coordination. This is largely because provinces, districts and villages vary significantly in terms of their political commitment and administrative capacities to deliver social protection services. It is in this context that Zambia (as Nepal has done) is recommended to experiment with performance-based incentive schemes, for homogenous and quality implementation of the national social protection programmes.

Once structures are put in place, the links between the transfer programmes’ education system, health systems etc. should be strengthened in order to allow for a better coordination of demand and supply side measures, to prevent duplications and move towards a harmonized and joint planning and budgeting process. The coordination structures need to be capacitated in terms of expertise, information management and financial resources order to discharge their duties effectively. The Zambian government has to make these things available. It is one thing to put structures in place; to make them effective is another thing.
Figure 1: Coordination of Social Security

Delivery Mechanism


Figure 2 Multi-sectoral Nutrition Plan

Multi-sector Nutritional Plan

SO 2. Ministry of Health and Population
R 2.1 Maternal infant young child MYC micronutrient status improved
R 2.2 MYC feeding improved
R 2.3 MYC Malnutrition better managed
R 2.4 Nutrition related policies, standards and acts updated

SO 3. Ministry of Urban Development
R 3.1 All young mothers and adolescent girls use improved sanitation facilities
R 3.2 All young mothers and adolescent girls use soap to wash hands
R 3.3 All young mothers and adolescent girls as well as children under 2 use treated drinking water

SO 4. Ministry of Education
R 4.1 Adolescent girls awareness and behaviours in relation to protecting them from infant and young child growth improved
R 4.2 Parents better informed with regard to avoiding growth faltering
R 4.3 Nutritional status of adolescent girls improved
R 4.4 Primary and secondary school completion rates for girls increased

SO 5. Ministry of Federal Affairs and Local Development
R 5.1 Nutritional content of local development plans better articulated
R 5.2 Collaboration between local bodies’ health, agriculture and education sector strengthened at DDC and VDC level
R 5.3 Social transfer programmes for reducing chronic under nutrition
R 5.4 Local resources increased to accelerate the reduction of MYC

SO 6. Ministry of Agriculture Development
R 6.1 Increased availability of animal foods at the household level
R 6.2 Increased income amongst young mothers and adolescent girls from livestock
R 6.3 Increased consumption of animal foods by adolescent girls, young mothers and young children
R 6.4 Reduced workload of women and better home and work environment
Annexure 10 Case study Brazil

Incentive Schemes for the Coordination of Social Cash Transfers in Brazil

What the case study demonstrates

This case study demonstrates how social protection services and programmes can be implemented in a decentralised context with the inclusion of an innovative management mechanism to oversee and promote homogenous quality implementation. Secondly the study demonstrates how social cash transfer programmes play a significant role in vertical and horizontal integration of social protection systems through the concept of conditionalities and vertical merging with provincial and district CCTs. Finally, it also demonstrates how the use of a unified family registry, the Cadastro Unico, has resulted in a better-than-average targeting accuracy which has had a significant impact on poverty and inequality.

Description of the specific unique coordination structure for social protection:

The 2004 National Social Assistance Policy in Brazil consolidated all social welfare programmes into one broad and all-purpose system as well as it integrated non-contributory social protection for the vulnerable populations. The Brazilian model is a highly complex web of social protection programmes, structures, policies and institutions, stakeholders and how these are coordinated (coordinated between 19 ministries, several national councils responsible for a particular sector and civil society). Brazil has a host of programmes and the Bolsa Familia Programme (BFP) is the most prominent of all. As a result of decentralization of the State and the inter-sectorial approach to the cash transfer scheme, it means the design of the BFP emerged as vertically co-operative; and horizontally coordinated.

The exceptionality of the Brazilian cash transfer system, the BFP, lies on two design factors which merit documentation for potential adaptation for other countries with decentralized governance structures or countries which strives for decentralized service delivery such as Zambia.

The Brazilian model of social cash transfer can be described as a decentralized system in which services are organized and provided at different levels of complexity. The Ministry of Social Development (MDS) is the programme’s policy and supervision agency, and a number of secretariats are established under the MDS. Although managed at the federal level, like the host of other programmes, many aspects of BFP implementation are carried out by Brazil’s 5,564 municipalities. Several agencies, district ministries and municipalities implement social policies promulgated at national level. Social Assistance Reference Centers and Specialized Social Assistance Reference Centers enable the development of projects and are the actual point of contact. Municipalities provide a local point of contact for registering beneficiaries and for grievance handling.

Although the services are decentralised, there is a unified family registry – the Cadastro Unico - which serves as a tool for facilitating registration and targeting of social benefits. The single registry provides a consolidated beneficiary database able to serve the different social transfer programmes and acts as a targeting tool in determining eligibility. The unified system also


Lindert et al. 2007. p. 24
reduces costs that are elevated by duplication in administrative systems, benefits and monitoring. The diagram below shows how the federal government together with municipalities, public sector bank and federal government line ministries work together to maintain the system.\textsuperscript{111}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{diagram.png}
\caption{How the different institutions work together to maintain Brazil’s Single Registry}
\end{figure}

The \textit{Cadastro Unico}, has resulted in a better-than-average targeting accuracy with over 70 per cent of transfers going to the poorest quintile and fully 95 per cent of the poorest two quintiles. It has therefore had a significant impact on poverty and inequality.

The implementation of the BFP in a decentralized context comes with a lot of challenges. There is potential of ‘heterogeneous quality of implementation’ given the variation in municipal-level political commitment to implementing the federal programme and variation in municipal capacities (administrative, human resource and financial) for implementation of the cash transfer system.\textsuperscript{112} Brazil’s municipalities are not constitutionally obliged to carry out the programme according to federal standards. Therefore, the Brazilian government envisaged the use of ‘Formalizing Agreements for Decentralized Implementation’. This entails the Brazilian Government (MDS and through its several secretariats) enter into formal joint management agreements with every single municipality to clarify roles and responsibilities for implementation of the programme and to establish minimum institutional standards for programme in terms of how it should operate at the municipal level. This is complemented by Monitoring the Quality of Decentralized Implementation to ensure homogenous and quality implementation of the BFP. The Brazilian government and the MDS established a Decentralized Management Index (IGD) to monitor and evaluate the quality of implementation in each

\textsuperscript{111} Samson, M, van Niekerk, I, Mac Quene, K (2006); “Designing and Implementing Social Transfer Programmes”, EPRI

\textsuperscript{112} Lindert et al. 2007. p.24
municipality. Lastly the MDS has a system of Performance-Based Incentives for Quality of Decentralized Implementation. The purpose of these financial incentives is to promote coordination and quality implementation in municipalities. These incentives provide administrative cost support to municipalities. These instruments ensure that there is vertical cooperation or coordination and quality implementation within the programme.

The second design factor is related to horizontal linkage and vertical integration of programmes into a social protection system, i.e. the ‘interactions between the BFP and other national programmes such as health and education and local social protection programmes to avoid duplication and fragmentation of social protection. Brazil has a long history with municipal Conditional Cash Transfers (CCTs) and other national social programmes. Many municipalities have used the BFP’s role in horizontally integrating social policy (through the education and health conditionalities and by linking BFP beneficiaries to complementary services) and in vertically integrating transfers (merging with sub-national programmes) to experiment in the way they deliver the BFP and other services to the poor. The vertical merger of BFP and other municipal CCTs is formalized through the signing of a formal cooperation agreement between MDS and the sub-national entity. To integrate the BFP with other national programmes Brazil introduced the concept of health and education conditionalities. However, conspicuous by its absence, is a ‘forum for technical coordination or a management application accessible to all ministries involved in social protection that would provide more agility in the taking of decisions’. The MDS collaborates with other ministries e.g. the National Secretariat for Social Assistance, Ministry of Health and of Education in monitoring conditionalities. This coordination is mandatory in terms of BFP regulations. Secondly, there is coordination processes not related to the conditionalities; they derive from the use of the single registry (the Cadastro Unico) which requires input from different agencies and ministries. In terms of coordination there are no institutional mechanisms or working groups for the coordination of BFP programme. Thus the BFP lacks an overall coordinating mechanism and instruments.

**Key lessons learned**

Institutional coordination of social protection derives from two factors. It can be legally mandatory as provided for in the laws governing social protection and also through fostering coordination in an ad hoc fashion. Though mandatory in one case and fostered in other ones on an ad hoc basis, coordination is critical. Thus, coordination does not happen “naturally” or spontaneously; hence there is need to deliberately or consciously craft institutional mechanisms to coordinate social policies, either legally binding or rather than ad hoc coordination.

The second lesson learnt is that implementing social protection programmes and services in a decentralized context spawns challenges and problems as far as homogenous and quality implementation is concerned. Thus governments, as in the case of Brazil, have to find innovative ways to ensure vertical cooperation and coordination.

**Recommendation for Zambia**

---

113 Lindert et al., (2007).
114 Lindert et al. (2007). p.24
115 Lindert et al. (2007). P. 29
As in the case everywhere, officials of the different ministries and sectors need to work together to offer solutions to vulnerable families at the local level. The Zambian Government or ministries have to make deliberate efforts to establish institutional mechanisms for coordinating social protection through legal provisions. Also, institutional coordination mechanisms must have legal basis for enforcement. In such a case, the coordination process is not a choice, but it derives from a policy institutional framework. The Zambian Government has to take note of the following points when designing an institutional coordination mechanism for its wide range of social protection services and agencies.

- Each ministry or institution must realize the gains of the coordination and harmonization process;
- When crafting an institutional mechanism, clear definition of roles and responsibilities must be outlined in terms of what each institution should deliver, and how that can be jointly built;
- Lastly, each partner or role player has to be aware of the other’s mandate, attributions and processes to avoid encroaching on each other’s turf.

The incentive schemes in Brazil are also worth replicating albeit adaptation to local context. The case study suggests that these types of performance-based management tools and incentives are indeed useful and should be of interest to Zambia where cash transfer schemes are implemented in decentralized contexts. This innovative system includes Formalizing Agreements for Decentralized Implementation, Monitoring the Quality of Decentralized Implementation using the IDG and Performance-Based Incentives for Quality of Decentralized Implementation.
Annexure 11 Case study South Africa

The implementation of a single system for administering grants in South Africa and the use of a single window service to tackle issues of coordination

Summary

This case study describes the dedicated system which has been put in place for administering grants in South Africa – the South African Social Security Agency (SASSA). It also describes the single window service established by SASSA in order tackle the issue of coordination which has ultimately lead to improved access to grants for beneficiaries.

Description of the institutional structure to improve vertical coordination

South Africa’s national social protection programme includes grants and services, overseen by the Department of Social Development. Grants include pensions and disability, foster care, and child support. South Africa also includes other targeted services, such as free health care, education, and school meals; skills development services; and residential care for children, older persons, and persons with disabilities.

Due to recognition that the huge expansion in social security was damaging social welfare service delivery; legislation in 2004 established a national social security agency (SASSA). The purpose was to “free up” social service staff to get back to their core service-related business, such as alternative care, social work services, early childhood development, and family support to access entitlements. Furthermore, the establishment of SASSA also sought to integrate and consolidate the grant administration services across the country to achieve a common goal across all nine (9) provinces. The legislative mandate of SASSA is to ensure the provision of comprehensive social assistance services against vulnerability and poverty within the constitutional and legislative framework.

In terms of institutional set up, the National Department of Social Development (DSD) remains accountable for social security, and the Agency becomes the implementing provider, managing and administering grant delivery while the department acts as assuror. As assuror, the DSD develops and implements policies, norms and standards and monitors and evaluates the impact and quality of the Agency’s service delivery.

SASSA services are decentralised with national, provincial, district and local offices. Some government departments have assigned powers and functions to the Provinces whilst others are centralized. Social security and social assistance is considered a right’s based service that must implement uniform norms and standards and is thus a national function with decentralised offices at district, area and ward level. The centralized powers and functions with decentralised service units as in the case of SASSA proved to be a more cost effective model than the model of decentralised powers and functions. The centralized powers and functions and decentralised services result in a more standardized approach to service delivery across the country. Citizens can access the same service in any part of the country.

The assigned powers and functions whilst it optimised services within a Provinces and Regions, it created diversity, anomalies and differences in the quality and standards of services across

118 Samson, M, van Niekerk, I, Mac Quene, K (2006); “Designing and Implementing Social Transfer Programmes”, EPRI
provinces and Regions. Citizens could only access social assistance in their locality, severely restricting mobility.

The decentralised model of SASSA includes district and local offices, service, pay points and ICROP. The following figure shows the structure of the decentralised services.119

![Structure of decentralised service delivery for SASSA](image)

Figure 14 Structure of decentralised service delivery for SASSA

In 2013 the Agency entered its seventh year of operation and it has made significant strides in ensuring that it fulfils its mandate, namely, to manage, administer, and pay social security transfers. However, despite these successes a number of challenges still remain including the need to improve access to grants in deep rural areas and the limited coordination with government departments. In response to this challenge, SASSA introduced the Integrated Community Registration and Outreach Programme (ICROP) in 2007120.

**ICROP**

The purpose of the ICROP programme is to reach the most socially excluded, isolated people and communities, providing them access to social assistance and social services in anticipation to reducing poverty, social exclusion and isolation. A key objective of ICROP is to bring all government services under one roof. It does this by offering a mobile service by utilizing customized vehicles with the necessary on-board information and communication technology. The vehicles move from village to village and, with a dedicated team of 6 members, they

---


120 “Key Strategic Programmes”, Presentation to Portfolio Committee, 24 April 2013, SASSA.
provide assistance and guidance on registration for grants; linking the child support grant to schooling and ECD; and promoting access to health services. 121

The district Managers of SASSA are the Project Coordinators responsible for implementing the programme in their districts and work closely with local structures in the following integrated way:

- Ward Councillors identify specific areas of need within the communities,
- CBOs, FBOs, and Traditional Leaders assist with the mobilization of communities,
- Local Government (Municipalities) ensures that the Infrastructure is suitable for the Programme (e.g. Access Roads, Community Halls, etc.).

There is also on-going coordination with key government departments in order to provide a truly integrated service delivery approach:

- Department of Health assists beneficiaries to get legitimate Identity Documents without which they would not be able to apply for social grants.
- Department of Education assists with the completion of school extracts for Children.
- Department of Justice assists with issuing of court orders to Foster Care Clients.
- SAPS provided support in signing of affidavits, certification of documents and the provision of security at the mobile service points. 122

In a document produced by SASSA in 2010 it was noted that, since its inception in May 2007, ICROP has reached 157,313 beneficiaries in rural areas of which 107,283 are children.

**What the case study demonstrates**

This case study demonstrates that, in practice, cash transfers without a dedicated system for administration have the capability to undermine social service provision. However, whilst a decentralised system such as SASSA can lead to improved vertical coordination, challenges with horizontal coordination remain. The ICROP programme is one way in which SASSA has tried to tackle this issue at an implementation level since it is a mechanism which allows for critical coordination of inter-governmental activities which results integrated service provision being brought to the door of beneficiaries living in very remote districts.

**Key lessons learnt and recommendations for Zambia**

The use of existing service delivery mechanisms when scaling up the social cash transfer scheme across districts in Zambia will have an impact on the delivery of other social assistance services. One way to mitigate this impact would be to implement a dedicated system for administering all social cash transfers such as SASSA. A single administrative system would also allow for the integration and consolidation of grant administration services across the country.

---

121 “What is ICROP?” - Information flyer produced by SASSA.

122 Taieb, D, Schmitt, V, (2012) “Good practices on Single Window Services Research on existing Single Window Services around the world (India, Chile, Brazil, South Africa, Pakistan) and key lessons to be learned for Cambodia”, International Labour Organization.
A key lesson learnt from the South African experience is that this structure can lead to strong vertical integration, however, coordination across government departments may remain a challenge. There is thus a need for mechanisms and structures at both policy and implementation level to promote horizontal coordination within and between ministries.

The use of a mobile, “one-stop shop” approach used by the ICROP programme is one way to tackle this problem at implementation level. This programme relies on an integrated service delivery model, and therefore provides a mechanism through which government ministries can work together on the ground to implement social protection services in an integrated and coordinated way.
Annexure 12  Reference list for document review and desktop study on best practice


http://scholar.google.co.za/scholar?q=Rethinking+Poverty:+A+Discussion+on+Social+Policy+in+Nepal+--+Child+centered+Social+Protection.&hl=en&as_sdt=0&as_vis=1&oi=scholart&sa=X&ei=Xw2aUYbdHvPn7AaysIC4Gg&ved=0CCgQgQMwAA


Mboozi, B. (Senior Social Welfare Officer of the Ministry of Community Development and Social Services). Presentation on Zambia Social Protection Case Study (no date indicated).


“Mutual Accountability Framework between the GRZ (MOH, MOCDMCH); Cooperating Partners; and Civil Society Organisations/NGOs”, September 2012, GRZ Ministry of Health.


Samson, M, van Niekerk, I, Mac Quene, K (2006); “Designing and Implementing Social Transfer Programmes”, EPRI


SWAP Health Sector Coordination Structures, September 2012, GRZ Ministry of Health


“*Using Social Safety Nets to Accelerate Poverty Reduction and Share Prosperity in Zambia*”, (2013) World Bank, Human Development Department, Social Protection Unit, Africa Region


### Annexure 13 Social Protection Programmes

<table>
<thead>
<tr>
<th>Name</th>
<th>Category</th>
<th>Main form of transfer</th>
<th>Objective</th>
<th>Coverage</th>
<th>Target group</th>
<th>Targeting method</th>
<th>Condition of transfer</th>
<th>Implementing agencies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Assistance</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Welfare Assistance Scheme (PWAS)</td>
<td>Unconditional Transfers - Basic Needs</td>
<td>food, clothes, repatriation, medical, education, fees, shelter</td>
<td>To assist the most vulnerable to meet their basic needs, and to promote community capacity for local initiatives to overcome poverty.</td>
<td>National</td>
<td>2% of the poorest and most vulnerable households, those with disabilities.</td>
<td>Beneficiaries selected by Community Welfare Assistance Committee and District Social Welfare officers</td>
<td></td>
<td>Ministry of Community Development, Mother and Child Health (MCDMCH), in collaboration with Ministry of Health (MoH), Ministry of education (MoE), Ministry of Agriculture and Cooperative organisation (MACO, Programme against Malnutrition (PAM), World Vision, Oxfam, and churches.</td>
</tr>
<tr>
<td>Pilot Scheme, Kaloma District - now roll out nationally</td>
<td>Unconditional cash transfer</td>
<td>Cash</td>
<td>To reduce extreme poverty, hunger and starvation in the 10% most destitute and incapacitated households in the covered region; and to generate information on the feasibility costs and benefits of the Social cash Transfer Scheme (SCTS) as a component of a SP strategy.</td>
<td>Kaloma - now roll out nationally</td>
<td>Community based targeting system. The entry criteria for the scheme is that the households have to be incapacitated, meaning that they do not have any productive members or a dependency ratio of over 300. Assets and support system are used to rank beneficiary households.</td>
<td>MCDMCH, Public Welfare Assistance Scheme (PWAS), CARE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>---------------------------</td>
<td>-------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>---------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>School feeding programme</td>
<td>Conditional food transfer</td>
<td>Food; also deworming, treatment and hygiene education and establishment of school orchards and gardens</td>
<td>To increase enrolment, prevent drop out and stabilise attendance at assisted primary schools; to improve the attention span by relieving short-term hunger; to contribute to nutrient intakes; to promote and incorporate public health interventions (under the school health and Nutrition Programme) into School Feeding Programme (SFP), reduce worm infestation and bilharzia in school age children and to stimulate and enhance community/parents participation in education.</td>
<td>Selected schools in southern Lusaka and eastern Provinces</td>
<td>school districts that are food insecure with poor enrolment and attendance</td>
<td>Selection of schools based on: location in food insecure areas - drought affected, peri-urban area or outskirts of the districts, highly populated and low income townships; poor enrolment and high non-attendance; large numbers of OVGs; with adequate water and proper sanitation; adequate storage; demonstrated community links and willingness to manage the program; accessibility of the school throughout the year; and number of vulnerable children i.e. from households that are food insecure or orphans.</td>
<td>Community is required to provide storage room/kitchen/feediing shelter; source of water and firewood; preparation of food.</td>
<td>GRZ through the Ministry of education, World food Programme (WFP) in collaboration with UNICEF, Ministry of Community Development, Mother and Child Health (MCDMCH) and Ministry of Agriculture and Cooperatives (MACO)</td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>---------------------------------</td>
<td>-----------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>Free Basic education</td>
<td>Unconditional transfers - education</td>
<td>Education</td>
<td>To give all children free and compulsory education</td>
<td>National</td>
<td>Children attending primary education with particular focus on females and OVCs.</td>
<td>Grants given to all schools and an amount based on the number of pupils. In disbursements of bursaries, attention given to girl child and OVCs.</td>
<td>GRZ through the Ministry of Education</td>
<td></td>
</tr>
<tr>
<td>Habitat for Humanities (HfHt)</td>
<td>Unconditional Transfers - Housing</td>
<td>Houses</td>
<td>To construct simple, decent and affordable houses and to sell them interest free at no profit, and use re-payments to build more houses.</td>
<td>Lusaka Central, Copperbelt, Northwestern, Southern and Western provinces</td>
<td>Households requiring housing (especially those with OVCs, children that do not attend school, female-headed households and the elderly)</td>
<td>Use of community affiliates</td>
<td>House provides own labour. Household services mortgage by making payments calculated in bags of cement over a period of 10 years.</td>
<td>Habitat for Humanities, Zambia</td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------------</td>
<td>-----------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>----------</td>
<td>-----------------------------------------------------------------------------</td>
<td>-----------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>National Pension Scheme Authority (NAPSA)</td>
<td>Conditional cash</td>
<td>Cash</td>
<td>To respond to the risk of losing income due to retirement, disability/invalidity and survivorship.</td>
<td>National</td>
<td>People in the formal sector only</td>
<td>Mandatory scheme targeting people in the formal sector only</td>
<td>Based on contribution during working life</td>
<td>National Pension Scheme Authority (NAPSA), Regulated by the National Pension Scheme Act. Overseen by the MoLSS</td>
</tr>
<tr>
<td>Local Authorities Superannuation Fund (LASF)</td>
<td>Conditional cash</td>
<td>Cash</td>
<td>To respond to the risk of losing income due to retirement, dismissal, discharge or resignation disability/invalidity and survivorship.</td>
<td>National</td>
<td>People employed in Local authorities (Council), Water and Sewerage Companies, the ZESCO (electricity company) and the National Housing Authority (NHA)</td>
<td>Mandatory scheme targeting people employed by Councils, Water and Sewerage Companies, the ZESCO NHA only.</td>
<td>Based on contribution during working life</td>
<td>Local Authorities Superannuation Fund (LASF), Regulated by the LASF Act. Overseen by the MoLSS</td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>-----------------------------------------------------------</td>
<td>-------------------------------</td>
<td>-----------------------</td>
<td>----------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
<td>-------------------</td>
<td>-----------------------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Workers’ Compensation Fund Control Board (WCFCFD)</td>
<td>Conditional cash transfer</td>
<td>Cash</td>
<td>To provide compensation for workers disabled or killed by occupational accidents and diseases.</td>
<td>National</td>
<td>People in the formal sector</td>
<td>Mandatory scheme targeting people in the formal sector only</td>
<td>All employers are required to ensure their workers with the board.</td>
<td>Workers’ Compensation Fund Control Board (WCFCFD). Overseen by the MoLSS</td>
</tr>
<tr>
<td>Livelihood and empowerment programmes</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Farmer’s Input Support Programme (FISP)</td>
<td>Conditional Transfers - Farm inputs</td>
<td>Farming input</td>
<td>To encourage greater fertilizer use, to cushion the effect of world fertiliser price increases, to raise overall maize production and to reduce poverty by increasing the consumption of small farmers</td>
<td>National</td>
<td>All smallholder farmers</td>
<td>Beneficiary farmers are selected by Agricultural Cooperatives or approved farmer groups.</td>
<td>Beneficiary should be smallholder farmers, have the capacity to grow 0.5-5 ha of Maize and ability to pay their share of subsidized input package</td>
<td>It is operated by the Ministry of Agriculture and Cooperatives (MACO). Farmer cooperatives are the main instrument for implementing the programme.</td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>------------------------------------------</td>
<td>-----------------------------------</td>
<td>---------------------------------------</td>
<td>------------------------------------------------------------------------------------------------</td>
<td>----------</td>
<td>---------------------------------------</td>
<td>---------------------------------------------------------------------------------</td>
<td>-------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Food Security Packs and Programmes</td>
<td>Conditional Transfers - Farm inputs</td>
<td>Farming input</td>
<td>To empower vulnerable but viable households, to improve household food security, to improve nutrition, to improve access to water through small scale irrigation.</td>
<td>National</td>
<td>Vulnerable but viable households</td>
<td>Community (Community Welfare Assistance Committees - CWAC) and NGO/CBO selection</td>
<td>Payback 10% of pack value in Maize crop.</td>
<td>MCDMCH, Programme Against Malnutrition (PAM), and Oxfam GB</td>
</tr>
<tr>
<td>National Trust Fund for Disabled</td>
<td>Conditional cash transfer</td>
<td>Microfinance credit</td>
<td>To provide economic empowerment through microcredit and entrepreneurial skills to disabled poor people for sustainable employment</td>
<td>51 districts</td>
<td>Poor people with disabilities</td>
<td>Group lending approach, whereby small groups of 10-20 people are provided with microcredit based on business plan.</td>
<td>Loan must be repaid</td>
<td>Ministry of Community Development, Mother and Child Health (MCDMCH)</td>
</tr>
<tr>
<td>The Project Urban self-Help (PUSH)</td>
<td>Conditional Transfers - Food transfers</td>
<td>Small wage, food and in-kind benefits (clothes and shelter)</td>
<td>Public works programme aiming at upgrading of infrastructure and public services in exchange of food, shelter and clothes.</td>
<td>National</td>
<td>Extreme poor, victims of natural disaster, family members that have lost jobs as result of economic reform, women and orphans.</td>
<td></td>
<td>Government funded, usually by the Ministry of Local Government or MCDMCH.</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>------------------------------------</td>
<td>--------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------</td>
<td>--------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>-----------------------------------------------</td>
</tr>
<tr>
<td>Women Empowerment Fund (WEF)</td>
<td>Conditional transfers - cash and skills training</td>
<td>Cash and skills training (basic planning, organizing, budgeting, marketing, record keeping, production, services and technology, simple accounts and leadership skills).</td>
<td>The Fund is designed to complement the Citizen Economic Empowerment Commission (CEEC) fund, which covers all citizens and has proven difficult to access by many segments of the population, particularly women. Hence the WEF target women.</td>
<td>National</td>
<td>Women</td>
<td>Women are encouraged to form clubs and apply for funding through various government initiatives such as the WEF.</td>
<td></td>
<td>Women Empowerment Fund (WEF)</td>
</tr>
<tr>
<td>Youth Empowerment Fund</td>
<td>Conditional transfers - cash and skills training</td>
<td>Cash and skills training</td>
<td>This program/fund was launched after the realization that Government cannot afford to provide formal employment to all the youths. The Youth are encouraged to form clubs and apply for funding through this fund.</td>
<td>National</td>
<td>Youth</td>
<td>The Youth are encouraged to form clubs and apply for funding through this fund.</td>
<td>The African Development Foundation (ADF) (in Zambia) in partnership with international business and foundations support this program. Ministry of Youth and Sports.</td>
<td></td>
</tr>
<tr>
<td>Name</td>
<td>Category</td>
<td>Main form of transfer</td>
<td>Objective</td>
<td>Coverage</td>
<td>Target group</td>
<td>Targeting method</td>
<td>Condition of transfer</td>
<td>Implementing agencies</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>---------------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
<td>--------------------------------------------------------------------------------------------------------------------</td>
<td>--------------</td>
<td>-------------------------------</td>
<td>----------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------</td>
<td>------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Street Children project in Zambia</td>
<td>Counselling, youth skills, temporary shelter, food clothing, school fees, books, uniforms, business skills.</td>
<td>To strengthen the capacity of street children centres: to support children's access to quality services in the community; to provide access to safe shelter for 48 vulnerable children living on the streets and support their re-integration into community life; to enhance children's access to basic and higher education; to enhance the child's well-being through access to a nutritious diet; to provide children with clothing; and to enhance the children's access to psycho-social support.</td>
<td>Mainly Lusaka city, Copperbelt Province also considered.</td>
<td>Children on the streets and children from the streets aged 6-18 years; women with or potential to have children on the streets; youth without family support; mothers and households with potential to increase children on the streets.</td>
<td>Children visiting the centre; outreach through social workers; and referrals from organisations dealing with vulnerable children.</td>
<td>Zambia Red Cross Society in collaboration with Youth Foundation, YWCA, YMCA, Girl Guides, Scout, International Federation for Red Cross and Red Crescent, DAPP, MCDMCH and SCOPE-OVC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victim Support Unit (VSU)</td>
<td>Prosecuting offenders, sensitising community members on their basic human rights</td>
<td>To prevent crimes; to ensure effective investigations of crimes, and to offer counselling to the victims of the family/domestic violence crimes against children and elderly persons and sexual offenses.</td>
<td>National</td>
<td>All citizens</td>
<td>Demand-driven and self-targeting</td>
<td>Zambia Police Service</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>