

About REBA

What is RHVP?

The Regional Hunger and Vulnerability Programme (RHVP) supports improvements in policy and programme approaches to hunger and vulnerability in southern Africa with particular emphasis on the role of social protection.

The Regional Evidence Building Agenda (REBA)

Evidence-building, together with capacity-building and policy change, is one of RHVP's three interlinked activities. The Regional Evidence Building Agenda (REBA) is a cohesive framework that has guided the Programme's cross-country evidence-related activities between April 2006 and September 2007. The REBA consists of individual case studies of 20 ongoing social transfer programmes together with thematic studies covering cross-cutting design and implementation issues. The studies were carried out by locally commissioned researchers, mostly working through national research and consultancy institutions, in the six southern African countries covered by RHVP (Lesotho, Malawi, Mozambique, Swaziland, Zambia and Zimbabwe). All the case studies involved close collaboration with the agencies – government departments and government-appointed bodies, local and international NGOs, UN agencies and communities – that were implementing the social protection schemes under review. The research was supported and guided by a core team of international mentors which included Stephen Devereux (IDS, Sussex), Frank Ellis (ODG, University of East Anglia) and Lionel Cliffe (University of Leeds) and was coordinated and managed by Philip White (ODG).

REBA Aims

The REBA aims to support RHVP's efforts to promote improved policy and programme approaches to social transfers as a means of addressing hunger and vulnerability. REBA findings are feeding into a range of policy, advocacy and research outputs and processes, including policy briefs, best practice guidelines, national and regional learning events for policymakers, practitioners and civil society, a film series and research publications. In addition, by working through a network of national consultants, the REBA aims to increase national capacity to carry out analytical research on hunger and vulnerability within the six countries.

REBA Thematic Briefs

This series of briefs was prepared by Stephen Devereux, Frank Ellis and Philip White, and provides a regional synthesis of findings of both the 12 thematic studies and the 20 individual case studies undertaken under the REBA. The themes explored in these briefs are those addressed in the respective REBA thematic studies, but include additional themes that have emerged during the implementation of the REBA work as being of particular interest and policy relevance.

Coordination and Coverage

Overview

Efforts are being made in most countries of the southern African region to establish improved coordinating mechanisms for social protection. Coordination is about the way that different bodies involved in social protection, within institutions and across institutions, interact with each other to share information, determine roles and competencies, avoid duplication of effort, and establish funding priorities. Coordination can have a significant bearing on the adequacy of coverage of different vulnerable groups achieved by social protection. In its absence, coverage is likely to be accidental and patchy, driven more by the diverse interests of NGOs or the unreliable enthusiasms of donors than by a considered oversight of the social and geographical distribution of those most in need in a country.

Coordination is a complicated aspect of social protection because it is required or is desirable at many different organisational levels, and also involves strands of history and politics in order to explain the forms it takes in different countries at different times. In terms of organisational levels, coordination can or does occur at levels from an overall overseeing capability in central government down to the practical coordination between partner organisations required in order to deliver a particular type of social transfer to a defined group of beneficiaries. In between these there are many intermediate levels of coordination that may involve collaboration and information sharing between some institutions but not others. One kind of intermediate level coordination that is prevalent in the region is a national committee or programme centred around a particular vulnerable group; for example, national committees on action related to HIV and AIDS, or national programmes for orphans and vulnerable children (OVC), that have been established in several countries.

The historical and political dimensions of coordination have a significant bearing on what is achievable and how well coordination works in practice. In central government, sectoral ministries (finance, health, education, agriculture etc.) tend to have differing political status, as also different command over government resources and different social protection interests. Social transfers are often located in weak agencies, with little leverage on central decision making. Inevitably, coordination sometimes springs into life around an upsurge of resources, in which donors play big roles, often with feeble grasps of the political processes that they set in train. In some instances, motives of re-election or consolidation in power by parties in government have proved powerful forces behind the introduction of particular national social transfer programmes (examples are the old age pension in Lesotho and the input subsidy programme in Malawi).

1 Briefs on individual REBA case studies, numbered 1 to 20, are available at http://www.wahenga.net/index.php/evidence/case_study_briefs/

Stronger coordination contains the potential for both positive and negative impacts on the effectiveness of social protection at achieving its objectives. Amongst positive benefits of good coordination are the capabilities:

- (a) to foster a common understanding across institutions regarding who are the most vulnerable to hunger and how they can best be reached by social transfers;
- (b) to avoid gaps in coverage caused by inadequate information sharing between agencies about their own coverage, set within national spatial and social patterns of deprivation;
- (c) to learn lessons from the implementation of different social protection approaches, and to promote best practice across institutions;
- (d) to avoid duplication of effort caused by different agencies (both inside and outside government) devising their own channels for tackling the same problems of social deprivation.

On the other hand, coordination could potentially aggregate too much power and command over resources in one place. If handled in a particular way, it could stifle diversity of provision and innovation in delivery. It could demand too elaborate involvement of multiple stakeholders to provide a workable framework for efficient delivery of social protection. This can already be seen on the small scale in some social protection schemes that work with so many district, province, and central committees and structures that keeping all the stakeholders happy takes more time and human resources than the delivery of the transfer to the beneficiaries itself.

This briefing paper draws together the experience of coordination and coverage across the region as revealed by the 20 REBA case studies. First, it begins by summarising selected experience in the region around improving coordination at central state level. Second, it identifies patterns of coordination at intermediate and project levels that emerge from the case studies. Third, it examines patterns of coverage represented by the case studies, and links these to the coordination discussion. Finally, it seeks to draw out some lessons about coverage and coordination from the experiences of the case study projects and programmes.

Coordination at central state level

The deficiencies of uncoordinated responses to emergency events have been recognised for a long time, and most countries in the region now have in place a disaster

management unit or equivalent agency that seeks to anticipate such problems before they arise and ensure an orderly approach to crises when they occur. It is widely thought that a parallel capability for social protection is desirable. Although immediacy and continuity differ between disaster management and social protection, in the absence of coordination they are both prone to information inadequacies, duplication of effort and gaps in coverage that can make them substantially less effective at meeting the needs that they set out to address than otherwise could be the case.

It is in line with this thinking that countries in the region have been moving towards a coordination capability for social protection that is broadly equivalent to the role of a disaster management unit for managing crises. However, in the case of social protection, the boundaries around such coordination are not quite as easily defined as they are for disaster management. This is because different central line ministries conduct their own forms of social transfer in the context of their own operational mandates, and these can have relatively clear water separating them in terms of transfer approach, form and beneficiary type. A good illustration is the comparison between farm input subsidies falling under the mandate of the Ministry of Agriculture and school feeding to primary school children falling under the mandate of the Ministry of Education. These are both social transfers, but they address such entirely different needs in such very different ways that it is reasonable to ask whether coordination between them is likely to occur, or even really necessary.

The difficulties of achieving central coordination of social protection are illustrated by the example of Mozambique (Box 1). The obvious place to coordinate cash transfer types of social protection (including pensions) is the department of social welfare or its equivalent (in Mozambique, the Department for Social Action – DNAS). Nevertheless this does not solve the problem of information sharing on vulnerability, nor how to avoid duplication or gaps in coverage caused by other line ministries pursuing their own social protection activities. A partial solution in Mozambique's case is found in SETSAN, a cross-sectoral secretariat that hosts a variety of different cross-institution social protection working groups or committees. However, SETSAN's location in the Ministry of Agriculture is a weakness, and overall, social protection is rather politically marginalised in the Mozambique case.

In the region, two countries, Zambia and Malawi, have tackled central coordination in a formal way by adopting social protection frameworks and strategies. The Zambia case is described in Box 2 below. In both these instances, coordination occurs through a cross-sectoral steering committee supported by a parallel technical committee.

Box 1: Coordination and coverage in Mozambique

In Mozambique, a substantial range of social protection initiatives are in place, but institutional arrangements are confusing, and coverage is fairly limited. An initial distinction can be made between social security for formal sector employees (pensions, sickness, invalidity benefits) and social assistance to the destitute. Responsibility for social security comes under the Ministry of Labour, while responsibility for social assistance rests with the Ministry of Women and Social Action (MMAS). MMAS has two Directorates, one for Social Action (DNAS) and one for Women (DNM).

DNAS is responsible for policy, coordination and oversight of social action, while a separate agency, the National Institute of Social Action (INAS), is responsible for social action programmes and implementation. The division of roles and reporting procedures between MMAS/DNAS and INAS is complicated. At province level INAS delegations report directly to INAS at central level, but are also supposed to interact with Provincial Directorates for Women and Social Action that have a monitoring role. INAS depends on MMAS for political representation, for example to the Council of Ministers. Yet the largest INAS run programme, the Programa de Subsídios to Alimentos (PSA – see REBA Case Study No.7) is funded directly by the Ministry of Finance, and funds do not go through MMAS.

So far, apparently not too complicated; however, the package of competencies represented by MMAS, DNAS and INAS is only part of a diverse broader picture. The cross-sectoral Secretariat for Food Security and Nutrition (SETSAN) has a mandate to coordinate all actors (state and non-state) in actions aimed at ensuring food security. However, SETSAN has limited status and authority, being located under the National Directorate for Agriculture (DNA) of the Ministry of Agriculture. Until recently, its main function has been gathering information on vulnerability to food insecurity in disaster affected or disaster prone districts of the country. In this capacity it links to the National Institute for Disaster Management (INGC) also located in the Ministry of Agriculture.

SETSAN coordinates a number of cross-departmental working groups, including a Vulnerability Assessment Group (GAV) and the Food, Nutritional Security and HIV/AIDS group (SANHA). It also hosts the National Council for the Fight Against HIV/AIDS (CNCS). SANHA has overseen the development of a Procedures Manual (funded by CNCS) to help social protection initiatives identify vulnerability linked to HIV and AIDS. This manual was due to be piloted by INAS, thus representing a positive example of inter-institutional collaboration. In the meantime, the OVC mandate of CNCS was scheduled to move to the women's directorate (DNM) of MMAS during 2007. A strong recent emphasis on medical delivery with respect to AIDS (anti-retroviral therapy) has created tension about functions between CNCS and the Ministry of Health.

In Mozambique, MMAS is regarded as a fairly peripheral ministry, with little leverage at the centres of power. Likewise SETSAN lacks authoritative status as a coordinating body, even though it hosts important cross-agency working groups and councils.

The coverage of social protection in Mozambique is patchy and thin. Formal social security reaches at most about 5 per cent of the population. It is probable that the PSA only reaches about 15 per cent of the population that comply with its criteria for inclusion, and the level of its benefit is so low as to scarcely make any difference to meeting the nutritional needs of its beneficiaries (see REBA Case Study No.7). Nutritional support to households with AIDS patients on anti-retroviral therapy covers about 15 per cent of those potentially eligible to receive ART in the country at large (REBA Case Study No.9). A vast array of NGOs make social protection contributions on the small scale, typically by specialising in particular types of transfer in particular provinces, or clusters of districts within provinces. The diversity of these efforts means that overall social protection coverage of destitute and highly vulnerable people in Mozambique is really not known.

Source: Waterhouse, R., 2007, Coordination and Coverage Module Paper: Mozambique, Regional Evidence Building Agenda (REBA) of the Regional Hunger and Vulnerability Programme, May

In Zambia, the site of these initiatives is the Department for Social Welfare of the Ministry of Community Development and Social Security, itself a relatively peripheral ministry in the power hierarchies of the Zambia government. In Malawi, the National Social Protection Steering Committee and parallel Technical Committee have recently been moved from the Office of the President and Cabinet to the Ministry of Economic Planning & Development, where they fall under the newly created Department of Poverty Reduction and Social Protection. In both cases, the principal focus of the coordination is social assistance, understood to be mainly about cash transfers to the destitute. This still leaves a wide variety of social transfers in other hands;

nevertheless the scope for valuable exchanges of information on vulnerability and coverage is much improved compared to the situation before the adoption of these frameworks.

Coordination at intermediate and scheme levels

The coordination features of the 20 REBA case study social protection schemes are summarised in Table 1

Table 1: Coordination in selected regional social protection schemes 2006-07

No.* & Country	Social Prot. Scheme	Coordination parameters of scheme
1 Malawi	Dowa Emergency Cash Transfer (DECT)	DFID (funding): Concern, Universal, MVAC, district level line ministry personnel, chiefs, headmen
2 Zambia	Social Cash Transfers (SCTs)	DFID (funding): CARE, MCDSS, DSW, Public Welfare Assistance Scheme (PWAS), PSWOs, DSWOs (department personnel), DWACs, ACCs, CWACs (stakeholder committees),
3 Lesotho	Old Age Pension (OAP)	Ministry of Finance (funding): Post Office, Local Community Councils
4 Mozambique	Input Trade Fairs (ITFs)	Donors (funding): FAO, Ministry of Agriculture (HQ, province, district), consultation community leaders
5 Malawi	Input Subsidy Programme (ISP)	GoM (funding): Ministry of Agriculture (Logistical Unit), ADMARC, SFFRF, district, traditional authority, village leaders and stakeholder committees
6 Swaziland	Old Age Grant (OAG)	Ministry of Finance (funding): Department of Social Welfare, 4 regional DSW offices, pay points
7 Mozambique	Food Subsidies Programme – Programa de Subsídios de Alimentos (PSA)	Ministry of Finance (funding): Ministry of Women and Social Affairs (MMAS), National Institute for Social Action (INAS), provincial INAS offices
8 Zimbabwe	Urban Food Programme (UFP)	DFID PRP (funding): Technical, Learning and Coordination (TLC) committee, Action Aid International and local partners, private supermarkets
9 Mozambique	Food Assistance Programme (FAP)	WFP/donors (funding): WFP, Ministry of Health (MINSAU), MMAS, NPA-OVC, SETSAN; provincial OVC committees; WFP district partners
10 Zambia	Food Security Pack (FSP)	Ministry of Finance (funding): joint oversight MCDSS/MACO; implemented by PAM with district partners overseen by DFSC; AFSCs/CWACs for beneficiary selection
11 Malawi	Public Works Programmes (PWP)	World Bank, EU, others (funding): MASAF, District Assemblies, NGOs
12 Mozambique	Education Material Fairs (EMFs)	Donors (funding): SC-UK, district level MINED, MMAS; OVC Committees
13 Lesotho	Burial Societies (BSs)	Personal subscription (funding): no umbrella organisation, but registration encouraged (Law Office or Chiefs)
14 Swaziland	Neighbourhood Care Points OVC (NCPs)	UNICEF/other donors (funding): National Programme of Action on OVC (NPA); NERCHA, WFP, several ministries, NGOs
15 Swaziland	School Bursaries for OVC (SBs)	GoS/NPA (funding); Ministry of Education, Regional Education Offices, school heads, committees, chiefs, rural health motivators
16 Swaziland	Chiefs' Fields for OVC (CFs)	GoS (funding): NERCHA, MOAC, chiefs (land allocation), indlunkhulu committees (beneficiary selection)
17 Swaziland	Farm Inputs for Child-Headed HHs (CHHHs)	JICA (funding): NERCHA, MOAC, chiefs (land allocation), indlunkhulu committees (beneficiary selection)
18 Zimbabwe	Small Livestock Transfers (SLTs)	DFID/PRP (funding): TLC, local partners
19 Lesotho	School Feeding (SF)	GoL/WFP (funding): MOET, Food Management Unit, WFP, caterers
20 Zimbabwe	Rural Micro Finance (RMF)	Various donors (funding): CARE Zimbabwe, local partners, Community Based Trainers

* Case study number (see footnote 1)

below. This table indicates the source of funding of each scheme, as well as the principle agencies involved in its organisation and implementation. The REBA case studies fall into roughly five overlapping groups as far as coordination is concerned. These are described briefly as follows, and it can be noted that coordination patterns are closely associated with differences in scale and intention between social protection schemes:

- A. **National programmes overseen by a single line ministry.** The two pension schemes in Lesotho and Swaziland (REBA Case Study Nos.3 and 6), the national programme for the destitute in Mozambique (REBA Case Study No.7), the input subsidy programme in Malawi (REBA Case Study No.5), and school feeding in Lesotho (REBA Case Study No.19) correspond to this category. These require a prior commitment by central government towards recurrent funding (Ministry of Finance) as well as operational coordination appropriate to a national scale of delivery.
- B. **Pilot projects designed for scaling up within a coordinated SP strategy.** The single case study that corresponds to this category is the social cash transfer pilots in Zambia (REBA Case Study No.2). These are designed to explore the implications of delivering cash transfers to the most vulnerable, within the context of the national Social Protection Strategy and under the coordination of the Department for Social Welfare as described in Box 2.
- C. **Projects of limited duration funded by donors and implemented by NGOs, UN agencies, or government ministries, as well as local partners.** This set includes the Malawi DECT project (REBA Case Study No.1), the three Zimbabwe NGO-led projects (REBA Case Studies No.8, 18 and 20), the ITF and EMF projects in Mozambique (Case Studies No.4 and 12), the WFP food assistance project in Mozambique (REBA Case Study No.9) and the JICA-funded farm inputs for child-headed households in Swaziland (REBA Case Study No.17). Schemes in this category tend to coordinate between stakeholders at an operational level, but are not part of a larger design or oversight formulated at a strategic level by government. The Mozambique ITFs represent a partial exception to the latter characterisation because they are integrated into a broader Ministry of Agriculture strategy towards recovery from crop failures caused by floods or drought.
- D. **National programmes with varying funding run semi-autonomously from government.** This category includes the public works programmes (PWP) in Malawi (REBA Case Study No.11) that are run by the semi-autonomous body, the Malawi Social Action Fund (MASAF); and the food security programme (FSP) in Zambia overseen jointly by two parent ministries (MACO and MCDSS), and implemented by a national NGO called Programme Against Malnutrition (PAM) (REBA Case Study No.10).

It seems likely that projects of this type may be prone to governance problems, and their unpredictable funding means that coverage and effectiveness vary from one year to the next.

- E. **Intermediate level coordination around the social protection needs of a particular vulnerable group.** The example here is the National Programme

Box 2: Coordination of social protection in Zambia

Zambia has a Social Protection Strategy that is built into the National Development Plan for 2006-2010 as a chapter on social protection. The strategy states the government's intention to harmonize, prioritize and improve upon existing and new approaches to social protection. The strategy is given practical effect in the formation of a Sector Advisory Group (SAG) on Social Protection, comprising stakeholders from key ministries, civil society, donors, NGOs and other cooperating partners. The SP-SAG is chaired by the Ministry of Community Development and Social Services, the lead ministry in the area of social protection. The SAG has created five Technical Working Groups (TWGs) to work on different facets of social protection in Zambia, comprising TWGs on: low-capacity households, social assistance, women and children, disability and advocacy. The TWG on Social Assistance, chaired by the Department of Social Welfare, coordinates all social assistance interventions in Zambia. The main focus of this group has been the piloting of the cash transfer schemes for Zambia, and it has developed an implementation framework to this effect.

In terms of implementation, the DSW manages an operational scheme called the Public Welfare Assistance Scheme (PWAS), a key social protection activity of the government of Zambia since the 1950s. PWAS operates at district level through the District Social Welfare Office under the guidance of a District Welfare Assistance Committee (DWAC). At lower levels there are Area Coordination Committees (ACCs) covering several communities and Community Welfare Assistance Committees (CWACs). In terms of personnel and decision-making DWACs, ACCs and CWACs are the three stakeholder committees of the PWAS system, while government officials are the Provincial Social Welfare Officer (PSWO) and the District Social Welfare Officer (DSWO). Reporting upwards is from the DSWO to the PSWO and the DSW, and likewise downward responsibilities, procedures and flows of funds for transfers, move in the opposite direction.

Source: Mujenja, F., 2007, Coordination and Coverage Module Paper: Zambia, Regional Evidence Building Agenda (REBA) of the Regional Hunger and Vulnerability Programme, June

of Action (NPA) for orphans and vulnerable children (OVC) in Swaziland. This coordinates resources and coverage for neighbourhood care points (NCPs) and school bursaries (SBs) for OVC (REBA Case Studies No.14 and 15), under the umbrella of the National Emergency Response Council on HIV and AIDS (NERCHA). Interestingly, two further projects in this area – chiefs’ fields for OVC and farm inputs for child-headed OVC households (REBA Case Studies No.16 and 17) – come under NERCHA but are not included in the NPA.

The foregoing classification is not, of course, definitive, nor does it quite cover all the REBA case studies. For example, the DFID Protracted Relief Programme (PRP) in Zimbabwe has been classified under C. above; however, this is a rather unique programme out on its own that offers an interesting model of effective coordination taking place outside government, in which international and local NGOs conduct a variety of different social transfers with feedback and lesson-learning occurring through a Technical Learning and Coordination committee. Burial societies in Lesotho (REBA Case Study No.13) are neither coordinated nor regulated, although they are encouraged to register either with the local chief or the government Law Office.

Cutting across this intermediate level classification of social protection case studies is the role of decentralised local government and traditional authority in coordinating social transfers at district level. For example, in Malawi the draft Social Protection Policy envisages District Assemblies as coordinating all implementing partners in social protection at district level. In almost all social transfer implementation, local level officials, district or village committees, and chiefs play varying roles in coordinating, monitoring or legitimising transfers that occur under their jurisdiction (see Annex Table 2). However, as noted earlier, there are occasions when the multiplicity of such local stakeholders becomes dysfunctional to efficient implementation.

Coverage

Basic data on the coverage achieved by the different projects and programmes included in the 20 REBA case studies is provided in Table 2. Coverage does, of course, have several different dimensions that have a bearing on the true outreach achieved by social protection programmes:

- **geographical coverage:** extent to which spatial coverage of an intended set of beneficiaries is achieved;
- **group coverage:** extent to which full coverage of a designated social group is achieved;

- **predictability and duration of coverage:** extent to which vulnerable people who comply with the requisite targeting criteria can expect reliable and continuing social transfers.

Amongst the 20 REBA case studies, ten represent an intention towards national coverage geographically or with respect to designated groups at risk (see summary provided in Table 2 below). They vary, however, in the extent to which they achieve this coverage. The two pension schemes and the school feeding programme in Lesotho come the closest to true national coverage, while the input subsidy programme in Malawi has also achieved successful nationwide outreach, if not necessarily due to the precision of its implementation in that direction. Burial societies in Lesotho are also thought to have near complete national coverage, founded on the voluntary membership by Lesotho citizens in one or more societies.

Others in this group less clearly achieve their intended national outreach. The Mozambique PSA has operated mostly in urban areas, and its limited resources mean that transfer amounts are not sufficient to ensure the food security of its beneficiaries. The Zambia FSP notionally has national geographical coverage, but erratic funding has meant that only a small proportion of intended beneficiaries are reached in any particular year. PWP in Malawi respond to seasonal food insecurity and have tended to vary in national coverage depending on organisation and funding. The two OVC programmes in Swaziland – neighbourhood care points and school bursaries – have hitherto fallen short of their intended OVC coverage; the former due to resource constraints, and the latter due to the recognised capture of a considerable proportion of bursaries by non-OVC school pupils.

The other ten case studies have limited coverage in their design. This may be due to their ‘pilot’ or lesson-learning character (for example, SCTs in Zambia and EMFs in Mozambique); or to intentional short-term and targeted geographic response (for example, DECT Malawi); or to a non-repeating formula (ITFs in Mozambique); or to limited annual budgets in the context of donor-led transfers (the Zimbabwe PRP projects). The two Swaziland *indlunkhulu* (chiefs’ land allocation to OVC) projects are limited for a different reason, which is that the designated amount of land allocated nowhere near meets potential needs, even supposing that other requirements for the success of such schemes could be reliably met.

While some of the limited coverage schemes in this set of case studies can be attributed to the nature of the vulnerability addressed, in other cases poor coordination is also implicated. For example, the *indlunkhulu* projects in Swaziland are poorly coordinated with that country’s National Programme of Action for OVC, resulting in

Table 2: Coverage of selected regional social protection schemes 2006-07

No.* & Country	Scheme	Notes on Scheme Coverage
1 Malawi	Dowa Emergency Cash Transfer	10,161 HHs in two extension planning areas (EPAs) of Dowa District. 65% coverage HHs in selected communities
2 Zambia	Social Cash Transfers	9,627 planned beneficiaries (5 schemes), 2150 confirmed beneficiaries (CARE projects)
3 Lesotho	Old Age Pension	National coverage, everyone aged 70+
4 Mozambique	Input Trade Fairs	266,030 recipients over 5 years (2002-07), once-only transfer per recipient; about 8% all rural HHs covered
5 Malawi	Input Subsidy Programme	National coverage, small farm HHs growing maize or tobacco, estimated coverage achieved about 60% all farmers
6 Swaziland	Old Age Grant	National coverage, aged 60+ subject to registration, meant to exclude those in receipt other pensions
7 Mozambique	Food Subsidy Prog.	95,582 beneficiaries in 2006
8 Zimbabwe	Urban Food Programme	2000 HHs in 5 cities
9 Mozambique	Food Assistance Programme	26,689 beneficiaries in 2006, about 15% of HHs living with AIDS
10 Zambia	Food Security Pack	Nationwide coverage, but sharply declining numbers in recent years: estimated 220,000 unique recipients 2001- 07, about 22% of estimated 1 million eligible rural HHs
11 Malawi	Public Works Programmes	National social safety net, with numerous short-term and seasonal sub-projects; typical coverage 0.5m beneficiaries, each receiving max US\$16 for 10 days work.
12 Mozambique	Education Material Fairs	3,432 HHs in 5 communities in Zambezia Province 2006
13 Lesotho	Burial Societies	Most Basuto HHs belong to one or more societies
14 Swaziland	Neighbourhood Care Points for OVC	625 NCPs out of 2,520 neighbourhoods (25%)
15 Swaziland	School Bursaries for OVC	93,000 bursaries in 2006, but extensive capture by non-OVCs. Probably about 45% of 132,000 OVCs actually reached
16 Swaziland	Chiefs' Fields for OVC	339 out of 360 chiefdoms had set aside a 3-ha chief's field in 2007
17 Swaziland	Child-Headed Households	320 chiefdoms covered, target 8,320 HHs, but area planted 7% of planned in 2006
18 Zimbabwe	Small Livestock Transfers	Overall coverage not known
19 Lesotho	School Feeding	All primary school children (100%)
20 Zimbabwe	Rural Micro-finance	8,000 or more groups, 48,000 or more members

* Case study number (see footnote 1)

multiple OVC farm or garden initiatives, overlapping responsibilities, and duplication of effort. Only two of the case studies directly involve dedicated state social transfer agencies – the pilot social cash transfers in Zambia that come under the Department for Social Welfare and the PSA in Mozambique which is the flagship social assistance programme of INAS/MMAS (Boxes 1 and 2 refer). Pension schemes emerge from this discussion of coverage as having important positive attributes: their coverage is assured by the legal entitlement of anyone over the stated age threshold to claim the benefit on offer; their coordination is the practical matter of ensuring that the transfers reach their beneficiaries at stated time intervals, achieved well in the case of Lesotho, but requiring greater government commitment to a reliable and dedicated delivery system in the case of Swaziland.

Lesson learning about coordination and coverage

Coordination and coverage represent a large, multi-layered and rather complex area in social protection where approaches and solutions are likely to vary between

countries. There are evident trade-offs between adding bureaucratic layers, effectiveness, and the desirable scope of coordination. In principle, a national coordinating capability can be envisaged that would seek to bring all social transfers under a single guiding structure; however, it is not clear whether this is either feasible or desirable. Its feasibility is likely to be compromised by the interests of different line ministries in pursuing their own policy agendas that may comprise significant social transfer components (as exemplified by the Malawi input subsidy programme that is not hitherto linked to the recent adoption of a National Social Protection Policy). Its desirability is arguable due to the risks such a monolithic structure could pose for diversity, change and innovation in social transfer provision.

For these reasons, it is unlikely that the apparently rather disorderly character of social protection in southern Africa (i.e. the mosaic of numerous organisations pursuing many different social transfer objectives in relation to many different types of beneficiary) will ever be more than partially resolved by the advent of national social protection strategies and frameworks. This disorder is found in all countries, rich and poor, and reflects the great diversity of people in need due to a multiplicity of different causes; therefore giving moral legitimacy

to the many different organisations with different mandates seeking to do what they can to help.

The experience of coordination and coverage in the 20 REBA case studies suggests a number of principles and practicalities that can help guide the formulation of an effective approach to coordination, with positive features also for the adequate coverage of intended beneficiaries:

- (1) coordination does not require the advent of a new bureaucracy, it can equally well (and perhaps more appropriately) comprise a steering committee, the membership of which is drawn from state institutions conducting social transfers, as well as donor, NGO and other stakeholder representatives;
- (2) the key attribute of successful coordination is the flow of pertinent information; therefore such a steering committee needs to be serviced by a technical secretariat that collects, compiles, summarises and reports data on vulnerable groups and populations (the national vulnerability assessment committee would feed into, or form part of, such a technical secretariat);
- (3) a steering committee can form working groups of varying durations that are tasked with investigating and reporting back on how best to meet the needs of different vulnerable groups (or, for that matter, on any social transfer policy topic for which national guidelines need to be developed);
- (4) certain types of social transfer, principally social pensions and cash transfers to the destitute or other vulnerable constituency, seem rather obviously to belong in a Ministry or Department of Social Welfare (DSW), but this does not mean that such a DSW should have jurisdiction over other social transfers, the overseeing role for which would be the steering committee and its technical secretariat;
- (5) other line ministries are likely to be best placed to conduct the social transfers for which they have the required professional expertise, for example the Ministry of Agriculture for subsidised farm inputs, the Ministry of Education for school meals, the Ministry of Health for nutritional support to AIDS patients, and so on;
- (6) the REBA case studies show that intermediate level coordination around a particular social group (for example, orphans and vulnerable children) or type of transfer (for example social pensions) can work

well – in some instances, such coordination might usefully be located under the suggested steering committee, in others it might be a unit within an implementing Ministry;

- (7) for smaller scale social protection efforts, of the kind conducted by numerous different international and national NGOs, streamlining is desirable regarding assignment of public sector partners to such endeavours: currently, in most countries of the region, lack of clarity in this area results in much unnecessary involvement by multiple would-be stakeholders, and this particularly occurs at the district level of implementation of SP projects;
- (8) the technical secretariat alluded to above should have as one of its functions a monitoring role on the extent and coverage and institutional home of social transfers going on in the country, with capability to report regularly to the steering committee on this position;
- (9) donors could, of course, play an important role in the funding and technical support to such a technical secretariat, always bearing in mind that short-term, intermittent and unpredictable funding for this type of capacity is just as inadvisable as it is for other worthwhile activities that donors support; and
- (10) with respect to funding, coordination between donors through budget support and basket-funding arrangements is preferable to the rather arbitrary patchwork funding of social protection that has prevailed to date.

A list such as this inevitably appears rather idealised. Even though not intended as such, it looks more like a blueprint than a realistic assessment of the political and policy processes by which institutional structures of this kind get put in place. However, it is interesting the extent to which countries individually are gravitating towards this sort of response to the coordination problem in social protection, as exemplified by the national policies adopted in Zambia and Malawi. Nevertheless an important message to convey from this review of coordination and coverage is that the creation of a single executive body (in distinction from an oversight body) with all embracing powers to direct the course of social protection events in a country is neither a necessary nor a desirable goal in order for improvements in the coordination of social protection to be achieved in the future.

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