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Research, Network and Support Facility (RNSF)

“Support to enhance livelihoods per people dependent on informal economy and improve social inclusion of marginalised and vulnerable persons”

Good Practices and Lessons Learned

RESEARCH QUESTION	1- ENABLING ENVIRONMENT
SUB-TOPIC (Research matrix)	<u>Institution and capacity strengthening on IE (1.9)</u>
REGION - COUNTRY OF IMPLEMENTATION	West Africa - Ghana
GOOD PRACTICES	Conducting outreach and incentivising local or central administrations (Social security, health insurance services) to search and convince informal economy operators to register rather than wait for them to come and register on their own. Example: National health insurance systems that combine organising small informal operators with providing outreach.
PROJECT NAME	<i>Market Access through Cooperative Action in Ghana - Empowering Rural Women Informal Workers using Microfinance, Education, and ICT</i>
YEAR	January 2011 - July 2014
FUNDING AGENCY	European Commission
IMPLEMENTING AGENCY	Association Planet Finance
KEY TARGET GROUPS	Rural women

SUMMARY OF THE ACTION

Capacity strengthening is on the agenda of most development policies and projects. It applies to public institutions, private and community institutions as well as individuals. Capacity strengthening of public institutions can help meet the goals of formalising the informal economy by expanding its benefits to the most remote and vulnerable populations.

The recent adoption of the ILO Recommendation 204 on the transition from the informal to the formal economy in June 2015 by the 104th International Labour Conference—in quasi-unanimity—has resulted in a renewed willingness of public authorities (fiscal or social) to lead violators of labour laws to enforce the laws. Although it should be added that the authorities must insist on the positive impact of the enforcement of labour laws as indicated in Recommendation 204 rather than on their compulsory aspect.

Even before the adoption of ILO Recommendation 204, many governments attempted to expand their social security systems by putting pressure on public service providers in charge of their enforcement to obtain better results and coverage. Budgetary restrictions have, however, limited the overall impact of these policies and the



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achievement of such objectives.

Projects aiming at enhancing the livelihoods of vulnerable populations dependent on the informal economy have nonetheless found original ways and means of achieving the objective of expansion of coverage. This includes examples of national health insurance systems that combine organising small informal operators with providing outreach. It also includes incentivising local and central administrations in charge of the national health insurance system.

The basic principle is that public service providers should go to the population to offer the said services and collect corresponding taxes or premiums instead of waiting for populations to come forward on their own.

In order to understand this principle, one has to remember that in many countries--and for population groups, the payments to social security systems are seen as taxes rather than insurance premiums because they cannot envision the positive returns. In the same way, they cannot envision the benefits of taxes in terms of enabling them to access education, health and other public amenities (Charmes, 2015). This is because the poor are generally not the main beneficiaries of social protection systems or public amenities and services.

In Ghana, the National Health Insurance System (NHIS) was successfully involved in facilitating the registration and membership card renewal of an EC supported project's beneficiaries. The project focused, among other aspects, on market access of women shea producers through cooperative action. Using a combination of sensitization, logistics support, and techniques for facilitating registration and organizing women producers it was possible to reach the goal of improved access to these public services.

Meetings with the staff of regional offices of NHIS were used to convince them to participate in sensitizing clients on the importance of the NHIS and help them understand that the project valued their role as service providers.

Logistics support, such as vehicle and a public address system, was also provided to facilitate their travel to the sites for mass registration.

NHIS staff gave presentations of the role of their institution and the benefits for the population in the project field sites. The NHIS staff were asked numerous questions since many women were unaware of the existence of such health insurance schemes. They also had to listen to complaints about non/late delivery of cards, difficulties in renewing cards as well as about the frustrations that card bearers encountered at various delivery points. This exposure helped make the NHIS staff more aware of the harsh conditions of remote and vulnerable populations.

Techniques for facilitating registration included getting women to make contributions in instalments towards registration and renewals. It also included scheduling bulk registrations in the communities thus extending registration operations beyond the projects' beneficiaries through a cascading effect. Project officers also contributed by picking up the expired cards of women and bringing them to the NHIS offices.

Women producers have been organised in community social funds (CSF) that were connected to Micro Finance Institutions to obtain financial support for their production activities but also for NHIS registration. This allowed the CSF members to share their health risks as they can pool resources together through the CSF to access healthcare. An increased attendance to health facilities has been observed with earlier treatment of sicknesses/diseases.



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NHIS officials now travel to renew expired cards and register new clients as a result of the collaboration between the NHIS and the shea associations.

The good practice described is an illustration of the role that civil society organisations can play in complementing government institutions to fulfil development agendas such as the achievement of universal health care services.

The logistical support provided may raise the question of the sustainability of the good practice. It is up to the NHIS administration to incentivize its staff through the achievement of quantitative goals for new registrations and renewals.

Note: In another thematic area (Justice and civil registration) the example of a civil registration project implemented through UNICEF in Niger deserves to be shared. This UNICEF project implemented mobile court hearings among nomadic populations to register people who have missed the legal deadline for registration, without penalising them. Civil registration is the real first step towards formalising as it is a requirement for accessing to social benefits and can then lead to the registration of an enterprise.

LESSONS LEARNED	-
CONCLUSIONS AND RECOMMENDATIONS	Develop incentivising method for local or central administrations to sustain the process of searching for and convincing informal economy operators to register their activities. Examples include supporting social protection service providers (health and other services) to meet with, answer questions and provide information to informal economy groups. This leads to a greater understanding of the issues, helps to disseminate information about available programs and encourages staff to personalise their work.
FURTHER TAGS	-
SOURCE(s)	RNSF Research Volume 4.1: https://europa.eu/capacity4dev/iesf/document/rnsf-research-volume-41-gp-and-ii-33-projects-funded-european-union
REFERENCES(s)	<ul style="list-style-type: none"> ▪ Market Access through cooperative action (Evaluation Report) – PLANET FINANCE, Ghana. ▪ Support programme for strengthening the civil registration system in Niger (Project report) – UNICEF, Niger. ▪ Charmes Jacques (2015), <i>Social Protection</i>, RNSF-IESF Thematic Brief N°4 (En, Es, Fr).

