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**CASH TRANSFERS AND POVERTY ALLEVIATION FOR ORPHANS AND
VULNERABLE CHILDREN IN ZIMBABWE: THE CASE OF ZVIMBA RURAL
DISTRICT.**

By

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**Submitted in fulfillment of the requirements for the degree of MASTER OF
SOCIAL SCIENCE in the subject of DEVELOPMENT STUDIES at the
UNIVERSITY OF FORT HARE**

Department of Development Studies

Faculty of Management and Commerce

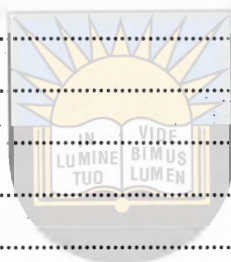
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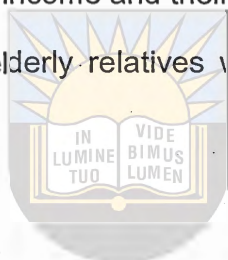
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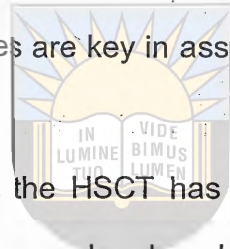
Abstract

The focus of the study is on the implementation of cash transfers and their effects on poverty alleviation amongst orphans and vulnerable children. The Harmonized Social Cash Transfer (HSCT) is used as a mechanism of fulfilling the National Orphan Care Policy (NOCP) and National Action Plan (NAP) policy objectives by reaching out to all OVC in the country with social cash transfers that would help meet the basic needs of OVC and increase access to basic services. The NOCP and NAP as guiding mechanisms of the HSCT have been insufficient and ineffective in addressing the orphans and vulnerable children poverty situation. Many of these children have no reliable sources of income and their vulnerability is worsened by the fact that they are in the care of elderly relatives who are either chronically ill or economically inactive.



The study made use of qualitative research method through which interview guides were responded to by 60 participants from orphan and vulnerable households in Zimba rural District who were inclusive of both beneficiary and non-beneficiaries of the Harmonized social cash transfer of Zimbabwe. Further participants included government officials from the Department of Social Services and child protection committee (CPC), who are representative members from the community who play an active role within the implementation of the cash transfer program. Secondary sources were also used to assess the social protection and policies revolving around the implementation of cash transfer programs in Zimbabwe. Findings of the study have shown that the number of OVC living in poverty is still high and unattended to. As the study has shown 22 out of 60 household respondents have benefited from the

HSCT. Many eligible OVC households have been excluded. Though the community shows high commitment towards the care of orphans and vulnerable children, the government of Zimbabwe still has to develop its capacity to develop the community's commitment into actual valuables. The DSS faces difficulties in implementing the HSCT, and the challenges have affected the effect of the HSCT towards poverty alleviation amongst the OVC. These challenges include inadequate institutional capacity, community power structures, low budget, inadequate human resources, targeting precision, dependency syndrome and lack of an exit strategy for beneficiary households. However these activities are key in assessing and effecting social cash transfer programs.



Though the study has shown that the HSCT has great potential in assisting the poverty situation amongst orphans and vulnerable children in Zimbabwe, the implementation gaps still have to be addressed in order to avoid manipulation and other problems that may prevent the HSCT from achieving its goals in eradicating poverty in Zimbabwe. Therefore there is need for the government of Zimbabwe to develop the capacity of the Department of Social Services in order to achieve actual realization of social policy and social cash transfer objectives. It the primary responsibility of the government to ensure these children's rights are protected and child poverty is alleviated. Social policies should be responsive to the needs and problems faced by communities in regards to the care of orphans and vulnerable children. Social policies should be inclusive of all actors within the cash transfer program; that is government institutes, communities, NGOs and children.

Declaration

I, Dexter Mutongerwa, (200909567) do hereby declare that the work presented in this research is my own and that works of other scholars have been cited and acknowledged. It has never been presented to any University other than the University of Fort Hare for the award of a degree.



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A handwritten signature in black ink, appearing to be 'Dexter Mutongerwa', written in a cursive style.

06 May 2015

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I would like to thank Dr. P.B. Monyai for the guidance, support, insights and encouragement as she read, analysed, and critiqued various points, aspects, and chapters in this study, and for showing interest and commitment towards the supervision of this study. Furthermore, I would like to thank Govern Mbeki research department and my step father Sidwell Gundu-Sekeso for supporting me financially and morally. To the Lord and Saviour, I thank you for giving me the strength to persevere through the difficult times during the course of my studies.



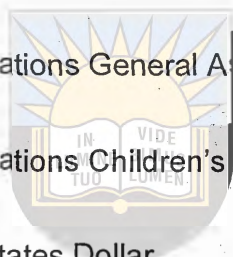
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List of abbreviations and acronyms

ACRWC	African Charter on Rights and Welfare of Children
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AIDS	Acquired Immune -Deficiency Syndrome
AMTO	Assisted Medical Treatment orders
BEAM	Basic Education Assistance Module
CARE	Cooperative for Assistance and Relief Everywhere
CCTs	Conditional Cash Transfers
CDC	Children in Difficult Circumstances
CPC	Child Protection Committee
CPF	Child Protection Fund
CRC	Convention of Rights of Children
CRC	Convention on the Rights of Children
CSO	Central Statistics Office
DFID	Department for International development
DSS	Department of Social Services
DSWO	Department of Social Welfare Offices
ESPP	Enhanced Social Protection Programme
FAO	Food and Agriculture Organisation og

GoZ	Government of Zimbabwe
HIV	Human immuno-deficiency Virus
HSCT	Harmonized Social Cash Transfer
IFAD	International Fund for Agricultural Development
MDG	Millennium Development Goals
MMD	Movement for Multiparty Democracy
MoLSS	Ministry of Labour and Social Services
MoPSLW	Ministry of Public Service, Labour and Social Welfare
NAP for OVC	National Action Plan for Orphans and Vulnerable Children
NAP	National Action Plan
NGO	Non- Governmental Organisation
NOCP	National Orphan Care Policy
NPA	National Plan of Action
OAU	Organization of African Unity
OVC	Orphans and Vulnerable Children
PAAP	Poverty Alleviation Action Plan
PSNP	Productive Safety Net Programme
RBA	Rights Based Approach
SAPs	Structural Adjustment Programmes

SCF	Street Children Fund
SDA	Social Dimension of Adjustment
SDF	Social Development Fund
SL	Sustainable Livelihood
SLA	Sustainable Livelihood Approach
SPF	Social Protection Floor
UNGASS	United Nations General Assembly Special Session
UNICEF	United Nations Children's Fund
USD	United States Dollar
ZIMSTATS	Zimbabwe National Statistics Agency
ZIMVAC	Zimbabwe Vulnerability Assessment Committee



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Dedication

I would like to dedicate this research to my lovely parents and grandmother.



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CHAPTER ONE

OVERVIEW AND BACKGROUND OF THE STUDY

1.1 INTRODUCTION

Poverty has been an issue of great concern in Africa, particularly among orphans and vulnerable children. Driven by factors such as the AIDS pandemic, recurrent drought, food insecurity, economic upheavals and political instability the poverty situation in Africa seems to worsen. In an attempt to address these problems, the United Nations in April 2009, through the social protection floor (SPF) introduced social protection particularly through cash transfers as the new universal approach to tackling poverty especially in developing countries (Sepúlveda and Nyst, 2012:9). Social protection has a cardinal role in helping developing countries to realize the Millennium Development Goals (Chitambara, 2010).

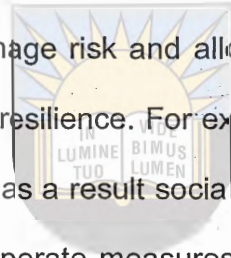
Social protection broadly and social cash transfers in particular, are being promoted as the latest proposed solutions to poverty and vulnerability in Africa. Social protection is the set of public and private policies and programs aimed at reducing the economic and social vulnerability of children, women and families, in order to ensure their access to a decent standard of living and essential services (Cummins, 2013:17). It involves a set of all initiatives, both formal and informal, that provide: social assistance to extremely poor individuals and households; social services to groups who need special care or would otherwise be denied access to basic services; social insurance to protect people against the risks and consequences of livelihood shocks; and social equity to protect people against social risks such as

discrimination or abuse (Devereux and Wheeler 2004:9). Child sensitive social protection systems mitigate the effects of poverty on families, strengthen families in their child care role, and enhance access to basic services for the poorest and most marginalized (Samson, 2004: 7).

Cash transfer programs have become an important tool of social protection and poverty reduction strategies in low- and middle-income countries. During the past decade, a growing number of African governments have launched cash transfer programs as part of their social protection strategies. However, policy-makers have frequently raised the concern that social cash transfers will create “dependency”, which is a vaguely defined term with strong emotional connotations. “Dependency from the state is not necessarily worse than being dependent on a husband, a rich relative or on begging the neighbors” (Kunnemann and Leonhard, 2008:23). Therefore, social protection should not be viewed as a cost, but rather as a form of investment in human capital formation that is helping the poor keep access to basic social services, avoiding social exclusion and develop coping strategies which are irreversible to the negative effects during adverse shocks (Garcia and Bruat, 2003).

There is growing favor towards the use of cash transfers as one of the most effective forms of social protection to vulnerable groups. According to Samson (2007:3) “Social cash transfers can be defined as regular non-contributory payments of money provided by government or non-governmental organizations to individuals or households, with the objective of decreasing chronic or shock-induced poverty, addressing social risk and reducing economic vulnerability”. The transfers can be unconditional or conditional on households actively fulfilling human development

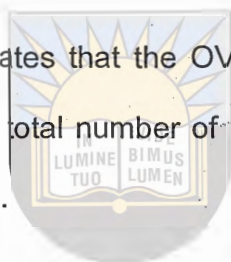
responsibilities (education, health, nutrition, etc.). Usually the transfer aims to improve the conditions of groups that are particularly vulnerable to poverty such as children, the elderly, and people with disabilities (Samson, Niekerk and Quene, 2006:3). Cash transfers are the most appropriate approach for a government administered national system of social protection for households that are the very poorest. Cash transfers require fewer capacities and inputs, they are faster to scale up and are more likely to achieve a wider coverage than alternative approaches (Michael, 2009). They are part of a broader social protection system which provides support to poor households to manage risk and allow investment in human capital and for physical assets to increase resilience. For example, droughts in Ethiopia had reduced household earning power, as a result social cash transfers were introduced to enable households to resist desperate measures and reduce future vulnerability (Dercon, 2005: 483).



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Once one of the wealthiest countries in Africa, Zimbabwe is now one of the poorest countries in the world. A breakdown in social service delivery, coupled with steep economic decline and the generalized prevalence of HIV/AIDS has resulted in 78 per cent of the population living below the poverty line and 55 per cent below the food poverty line with 25 per cent of all children orphaned (Handa, 2012:7). Among the Southern African countries, Zimbabwe is one of the countries with the worst poverty situation, emanating from the failure of structural adjustments program, drought, coupled with political instability and the economic crisis and AIDS. Particularly affected by this detrimental situation are orphans and vulnerable children who are more susceptible to the poverty.

The sharp increase in poverty in Zimbabwe over the last decade, coupled with the weakening of the social protection system, has resulted in multiple deprivations for children in terms of access to basic services. Recent research indicates that 1.5 million households in Zimbabwe are extremely poor and food insecure. These households include 3.5 million children, who urgently need free access to basic services and protection (Schubert, 2010:5). Many of these children have to work to meet their basic needs and are often exploited (GoZ, REPORT 2010). Zimbabwe has a high prevalence of Orphans and Vulnerable Children (OVC) and the National AIDS Co-ordination Program estimates that the OVC population grows by 60 000 children per year, thus causing the total number of orphans to rise to an estimated 1.8 million in 2012 (Garutsa 2012:1).



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In order to understand the background behind cash transfers in Zimbabwe, there is need to acknowledge the social policies that guide the operation of social protection. The national orphan care policy of 1999 provides basic care and protection guidelines for orphans and includes a commitment to national and community support. The orphan care policy combines institutionalisation, fostering and community-based care (Mhati, et al. 2008:3). The National Orphan Care Policy developed from welfare to a transformative social protection for orphans and vulnerable children. Transformative interventions included changes to the regulatory framework to protect the socially vulnerable groups in this case OVC (Devereux and Wheeler 2004:10). The policy intended to address the concerns of social equity and exclusion of OVC by addressing their rights. The policy led to the drafting of the national plan of action (NAP), an HIV and Aids mitigation project approach endorsed by cabinet in 2004. The vision of the National Action Plan (NAP) is to reach out to all

orphans and vulnerable children (OVC) in the country with basic services and also strengthen the capacity of local authorities to coordinate service delivery. Furthermore, the NPA approach is to reach out to communities and strengthen their capacity to identify and provide material support to orphans and vulnerable children (Munyati, 2006; 4). Household poverty is a major cause of child vulnerability in Zimbabwe manifesting through lack of access to social services and increased protection risks for the poorest children (CPF, 2010;6). To address household poverty as a key driver of child vulnerability in Zimbabwe, the National Action Plan for Orphans and Vulnerable Children (NAP II) 2011-2015 and its accompanying pooled funding mechanism, the Child Protection Fund, include social cash transfers as a major program component.



The Harmonized Social Cash Transfer (HSCT) was introduced in 2011 by the Ministry of Labour and Social Services (MoLSS) to strengthen the purchasing power of 55 000 ultra-poor households who are labour constrained through cash transfer (FAO, 2013:1). The program aims to enable beneficiary households to increase their consumption to a level above the food poverty line, to reduce the number of ultra-poor households and to help beneficiaries avoid risky coping strategies such as child labour and early marriage. Moreover, the program is expected to lead to improved nutritional status and to improved outcomes for children in health and education. It should be noted that a national cash transfer mechanism is not new in Zimbabwe. Rather, such a program has been in effect since the 1980s and is already part of the MoLSS' social protection strategies (CPF, 2010: 19).


This study seeks to evaluate social cash transfers in relation to alleviating poverty among orphans and vulnerable children in rural areas of Zvimba District. Zvimba Rural District is one of the biggest districts in Zimbabwe and is situated in the Mashonaland West province. The number of orphans and vulnerable children in Zvimba Rural District are increasing everyday as parents and guardians are dying at an alarming rate. Whilst the orphans and vulnerable children are living under difficult conditions most of them are looked after by grandparents and widows, with no reliable sources of income. In some households with old grandparents, it is often the case that children would actually assume the role of head of household (Mashange, et al, 2008:17).



Although social protection through cash transfers has been acknowledged and recommended as the solution to the poverty situation, particularly among orphans and vulnerable children in Zimbabwe, a lot still has to be done in regards to the aspect of implementation of cash transfer programs in the country. Viability of cash transfer objectives are impaired by such gaps as the lack of accessibility and sustainability of the program. Errors of exclusion tend to prevail with intended beneficiaries being left out due to community and political influences. Child poverty is still considered very high in the country. Recent analyses indicate that over two-thirds of all children in Zimbabwe live below the food poverty line (ZIMVAC, 2010; and PASS, 2003). Generally, the NOCP and NAP for OVC were designed with the aim of addressing concerns of social equity and exclusion of OVC by addressing their rights. Introduction of the HSCT was to be used as a mechanism of fulfilling the NOCP and NAP policy objectives by reaching out to all OVC in the country with social cash transfers that would help meet the basic needs of OVC and increase

access to basic services. The HSCT also intended to help strengthen local authorities and communities in their capacity to identify and provide support in meeting basic needs necessary for child survival, development and graduation out of poverty (Munyati, 2006:4). However with so many gaps within the implementation of the social cash transfers in Zimbabwe, one tends to wonder whether these cash transfers could be a permanent solution to the poverty situation in the country.

1.2 PROBLEMSTATEMENT



There is a serious problem emanating from the increasing number of orphans and vulnerable children living in poverty and who remain unattended to in Zvimba rural district. Despite the promises made by the National Orphan Care Policy and National Action Plan for OVC in terms of delivery, it is still struggling with implementation problems. Harmonized cash transfer program (HCST) which is the mechanism used in fulfilling these policies objectives faces a number of short comings such as poor targeting mechanism, limited financial, human and other resources required when implementing social cash transfers programs. The Department of Social Services (DSS) which is a government institution mainly responsible for implementing the Harmonized cash transfer program (HSCT), hardly has the resources required to ensure the program can be implemented to its full potential. The DSS faces difficulties identifying eligible beneficiaries, enforcing program services intended to support the OVC, monitoring and evaluation of the program. According to Schubert (2011: 28), "most on-going social cash transfer programs have been implemented by organizations that are equipped with appropriate human and financial resources and equipment (offices, vehicles, computers, copiers, etc.). The DSS incapacity is due to

the government's reluctance to invest in social protection and develop the DSS capacity to support the community efforts towards the care of OVC as intended to by the NOCP and NAP for OVC which guide the HSCT operation. In 2009, government investment in social protection reached an all-time low of less than 1% of the total recurrent budget of government (MoLSS, 2010: 7). Such circumstances have left the DSS greatly depleted with regard to financial, human and other relevant resources required for operations. As a result, this government institution has thus been greatly dependent on voluntary community support when identifying eligible beneficiaries and coordinating the HSCT. If Zimbabwe fails these children, their future will be bleak and the country will face a rapidly growing number of under-educated, malnourished, socially marginalized, angry youth (DEPP, 2006: 9). The study intends to examine the implementation of the HSCT program and its effect in alleviating poverty amongst OVC in Zvimba Rural District. Therefore the major question for this study is, to what extent can the HSCT strive towards achieving the NOCP and NAP policy objectives in relation to eradicating poverty amongst orphans and vulnerable children?

1.3 OBJECTIVES OF THE STUDY

The main objective of the study is to investigate the role and effect of the Harmonized Cash Transfer Program (HSCT) on the poverty situation of orphans and vulnerable children in Zvimba rural district. The study will achieve this objective by:

- Determining the extent to which the HSCT has managed to address the poverty amongst OVC in Zvimba rural District.
- Investigate the role and challenges faced by the Department of Social services in implementing the HSCT.

- Investigate possible gaps in the NOCP and NAP for OVC that may need to be addressed in order to enhance the capacity of the DSS and improve the effect of the HSCT in addressing the OVC poverty situation.

1.4 SIGNIFICANCE OF THE STUDY

The study will make a substantial contribution in showing that the HSCT is insufficient and ineffective as a mechanism of the NAP for OVC and the NOCP for addressing poverty among OVCs. The study will advocate for an evaluation of the policy and will propose alternative policy interventions that may help the government institutions with ideas on issues of capacity to better implement social protection programs and address the situation of orphans and vulnerable children.

The study contributes to help enhance the wide range of literature on cash transfers and advise the government on how it can improve their capacity when making use of social cash transfer programs to address poverty particularly among orphans and vulnerable children. It will assist in guiding policy makers, governments, donors and academics by building the body of knowledge on cash transfers. Poverty eradication is not achieved by merely distributing social grants to the poor; therefore the study is substantial as it advocates for the government to take note of aspects revolving around implementation, monitoring and evaluation of social cash transfers which have made difficult to fulfil policy objectives.

1.5 DELIMITATION OF THE STUDY

The study is centred on Zvimba Rural District. The Harmonized Social Cash Transfer Program is supposed to be implemented nationally, with the Department of Social Services administering the program from district to national level, whilst the impact of

the program is assessed. However this study focuses on 60 respondents from orphans and vulnerable households who are both beneficiaries and non-beneficiaries of the HSCT, and they are selected from district. Not everything can be analysed in a single study.

1.6 CONCLUSION

This chapter has given an introduction of the study by reflecting on the background and overview of social protection through cash transfers in Africa. Social protection through cash transfers has become the new universal approach to tackling poverty in developing countries. Zimbabwe the case study, like most African countries introduced social cash transfers in an attempt to address the poverty situation revolving around orphans and vulnerable children. Weakening of the social protection system and the sharp increase in poverty in Zimbabwe over the last decade has resulted in multiple deprivations for children in terms of access to basic needs and services.

This chapter shows that in order to deal with the poverty crisis revolving around orphans and vulnerable children (OVC), the government introduced the Harmonized Cash Transfer program (HSCT) as a mechanism of the National Orphan Care Policy and Nap for Orphans and Vulnerable Children. Despite the promises made by the NOCP and NAP for OVC in terms of delivery, the Harmonized Cash Transfer program has been ineffective in addressing the poverty situation revolving around orphans and vulnerable children in Zvimba rural district. Whilst the DSS which is responsible for administering the cash transfers at district level, it hardly has the

capacity and faces difficulties in identifying, monitoring and evaluating the cash transfer program.

1.7 CHAPTER OUTLINE

Chapter 1 presents an introduction to the study which is inclusive of the background of the study and defining central concepts used in the study. Chapter 2 gives a discussion on the global and continental framework on social protection and cash transfers and the theoretical base in relation to poverty alleviation using cash transfers. Chapter 3 provides a comprehensive discussion on social protection in Zimbabwe, from the colonial period, after independence and the current situation of the 21st century. This chapter also reflects the socio-economic background of the study area. Chapter 4 presents the research methodology and findings on the HSCT program in Zvimba rural district. Chapter 5 analyses the research findings, bringing out the main themes of the study. Chapter 6 presents conclusions and the way forward from the study.

CHAPTER 2

CASH TRANSFER AND CHILD POVERTY: A THEORITICAL BASE

2.1 INTRODUCTION

This chapter discusses the guiding approaches or theories the study is using in order to investigate the impact and contribution of cash transfers towards alleviating poverty amongst OVC. The chapter gives an overview of the approaches which guide cash transfer implementation. The chapter reveals an extensive literature on the theories used in the study and provides definitions and empirical case studies of what has happened on the ground with relation to cash transfers and the applied theories. Furthermore, the chapter provides examples which illustrate a point, argument, assumptions and conclusions made by the theories. This study will make use of the rights based approach and sustainable livelihood approach to help interpret the researcher's area of concern which involves assessment of cash transfers as a poverty intervention strategy in Zimbabwe's rural sector.

2.2 GLOBAL AND CONTINENTAL FRAMEWORK ON SOCIAL PROTECTION AND CASH TRANSFERS

In this study orphans and vulnerable children (OVC) are children who have one or two deceased parents or are living with chronically ill parents, children who are disabled or have been neglected, destitute, abandoned, affected or infected by HIV/AIDS and living in remote areas (GoZ, 2003:2). These children are highly prone to poverty and struggle to meet basics needs, such as food and nutrition, clothing, shelter and access to education and health services. Cash transfers programs are designed to help these children with financial support so they can better access the basic needs crucial for their survival and development. For example the Harmonized

cash transfer program (HSCT) in Zimbabwe, was strategically designed to help strengthen the OVC household economy so as to increase the chances of meeting the basic needs for orphans and vulnerable children. Over the past decades there have been a wide range of global commitments which are introduced to protect children. However this research will only mostly make use of those global commitments that directly affect orphans and vulnerable children. The Millennium Development Goals (MDGs) were established in September 2000 to reaffirm international dedication to working towards a world in which sustaining development and eliminating poverty have the highest priority. The Millennium development goals were part of the goal commitments to deal with the child poverty. Some of the goals aimed at eradicating poverty by fulfilling the rights of all children, OVC included (Kielland, 2004).

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The Convention on the Rights of Children (CRC) was formulated in 1989 in order to protect the rights of the child. The CRC provides a comprehensive framework to facilitate the protection, provision and participation of all children without any form of discrimination so as to ensure their survival and development to the maximum extent possible. In order to protect the orphans and vulnerable children; the CRC (Article 1) defines a 'child' as a person below the age of 18, unless the laws of a particular country set the legal age for adulthood lower (reference). The CRC supports non-discrimination, values the best interest of the child, outlines duty of care and protection, standards of care, survival and development, participation, freedom of expression, protection from violence, protection from economic exploitation, substance abuse, sexual abuse and exploitation, 'all other forms of exploitation', torture, cruel, inhuman or degrading treatment or punishment, physical and psychological recovery and social reintegration (UNICEF 2003:12).

There are also regional commitments which were formulated with the intention of promoting and protecting the children's rights in Africa. The African charter on the rights and welfare of children, which is a regional human rights instrument adopted by the Organization of African Unity (OAU) on the 11th of July in 1990. This regional legislative commitment was formulated in order to protect the human rights of the African child (Kaime, 2009). African countries have traditional practices that may violate the rights of children, such as early marriages, gender discrimination, child labour, et cetera; thus the OAU would help fight/combat these traditional practices that were unfavourable towards children. The state of most African children remains critical due to the unique factors of their socio-economic, cultural, traditional and developmental circumstances, natural disasters, armed conflicts, exploitation and hunger, and on account of the child's physical and mental immaturity he/she needs special safeguards and care (Kaime, 2009). Member states had the sole responsibility to protect the child despite any prevalent disparities within the state in terms of culture, religion etcetera. For instance Article 21 of the African Charter on Rights and Welfare of Children states that governments should do what they can to stop harmful social and cultural practices, such as child marriages, that affect the welfare and dignity of children (Gose, 2002:51).

The 2001 United Nations General Assembly Special Session (UNGASS) on HIV specifically emphasized on the importance of OVC, hence it encouraged African countries to implement national policies and strategies to ensure their protection. The strategies implemented included supporting orphans and children infected and affected by HIV with counselling and psychosocial support; enrolment in school; access to shelter, good nutrition, health and social services and protection from abuse, violence, exploitation, discrimination, trafficking and loss of inheritance (GoZ

REPORT, 2010). Further strategies included coordinating people's efforts with regards to the care of OVC by involving a wide range of actors such as families, community leaders and political parties, among others. Additional commitments included ensuring adequate protection of orphans and vulnerable children through reviewing and amending all legislation applicable to national aids policies (GoZ REPORT, 2010).

National Action Plan for Orphans and Vulnerable Children (NAP for OVC) were introduced in Southern Africa by the United Nations in order to provide guidelines for social protection programs directed to help OVC poverty situation. National Plans of Action (NPA) can be defined as a plan that is based on a situation assessment and multi-sectorial consultation, sets priorities and objectives, defines strategies, identifies corresponding coordinating bodies, includes a policy and legislative review and a monitoring and evaluation strategy and estimates costs and funding sources for priority actions (Cardoso, 2010:5).

The NAP for OVC is one of the most successful responses to OVC situation by African countries. What made it more successful was the multi-sectorial approach in which the United Nations in cooperation with other non-governmental organizations (NGOs) coordinated with the government providing funding and relevant support towards the program. NAP for OVC designs differ from country to country depending on their definition of OVC, contributing factors to orphanage and vulnerability of that child within that country, and to what extent the country was committed to support these OVC. For example, South Africa's NAP for OVC of 2006, 2008 covered six strategic areas. These included: strengthening and supporting the capacity of families to protect and care for orphans and other vulnerable children by HIV and AIDS; Mobilizing and strengthening community-based responses for care, support

and protection of OVC; Ensuring that legislation, policy, strategies are in place to protect the most vulnerable children; Ensuring access for orphans and other children made vulnerable by HIV/AIDS to essential services; Raising awareness and advocacy to create supportive environment for orphans and other children made vulnerable by HIV/AIDS and engaging the business community to play an active role in supporting the plight of OVC (Smart, 2003:11).

The problem with most African countries is that even though legal frameworks are in place to ensure mandatory registration, lack of awareness of legal requirements, lack of registration of parents, lengthy bureaucratic processes, high costs and difficulties of access, particularly in rural areas, prevent many people from registering children's births (Davis 2006: 9). Lack of birth registrations makes it difficult for government or any other aid agencies to sufficiently apply services and resources that may assist the orphans and vulnerable children. Hence the problematic situation of social exclusion tends to prevail in relation to social provision. Governments need to increase awareness on the importance of birth registration and develop convenient ways of birth registration. Communities can assist in identifying orphans and vulnerable children in need of birth registration, can alert their caretakers to its importance, and can assist local authorities in ensuring that these children are registered (Piotand and Bellamy 2006). Another problem is that Southern Africa countries tend to uphold and preserve traditional laws and value which contradict international legislative laws which protect women and children such as CRC and ACRWC. Such practices as use of corporal punishment, accusation of witchcraft and other exploitative circumstances expose women and children to extreme physical or sexual abuse. These precarious situations have increased vulnerability to abuse and girls face increased risks of sexual exploitation. There is common reluctance to get

involved in family matters and formal laws to protect children are often weak, thus permitting perpetrators of abuse to escape conviction (UNICEF 2009:20).

There has been reluctance amongst most African countries to commit to continental commitments of ensuring social protection of orphans and vulnerable children particularly through cash transfers. Of those who have engaged the use of cash transfers programs there is a petite amount of political support being manipulated for political interests. As Hickey (2008) notes, the delivery of social transfers serves the interests of ruling elites through formal electoral processes and by sustaining informal patron-client relations. In Zambia, the ruling Movement for Multiparty Democracy (MMD) successfully countered the appeal of opposition parties during the 2006 elections, buying support from rural voters by pledging to raise the fertilizer subsidy to 60% (Devereux, et al 2008:5).

Another example is the 2006 presidential elections in Brazil where social transfers were a major electoral issue (Farrington et al, 2007). Devereux and White (2008; 3) outlined that "African governments lack the political will to invest in social protection, which Finance Ministries tend to dismiss as an expensive extravagance that merely creates dependency", so they need to be persuaded with evidence demonstrating that social transfers are an investment that can generate pro-poor economic growth and poverty reduction. The relationship between politics and cash transfers in Africa manifests the types of politics and political agendas that contribute to or shape the design or implementation of cash transfers (Cliffe, 2006).

It is widely agreed that cash transfers do support household consumption and so directly improve household welfare. However, the broader poverty reduction and development effects of social transfers, especially targeted transfers and/or

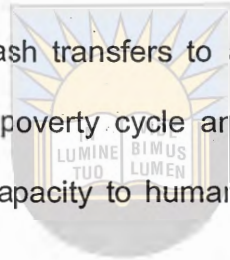
conditional cash transfers (CCTs) are disputed. When it comes to social protection in Africa, policy makers and a wide range of scholars tend to argue on the viability of cash transfers in relation to prior socio-economic development. According to Devereux and White, (2008:2) “the drive towards institutionalizing social protection programs as a substitute for social welfare systems in Africa is occurring often against the instincts of powerful national actors such as ministry of finance, many of which are reluctant to commit to long term programs, which they regard as fiscally unsustainable and creating a dependency mentality among the poor. For example (Low et al., 1998) acknowledged that those countries like Mozambique where poverty is widespread and a government’s financial resources are limited, mechanisms other than safety nets must be found to lift the majority out of poverty. Large social assistance programs, such as direct transfers or social security, simply do not seem fiscally or politically sustainable in resource-poor countries. In 2005 in Ethiopia, cash transfers contributed to rising market food prices in the absence of actions to improve the supply of grains into markets where the Productive Safety Nets Programme was distributing cash to poor households. Getting cash transfers right requires wider investments in, for example, markets, roads and the availability of services (Stephen Devereux, 2006).

According to the Report of the Economic Commission for Africa, (2005: 6) “Growing perception that cash inputs may create dependency on hand-outs from the state and donors and thus were not economically viable for most African states”. Therefore in order to reduce the number of people dependant on cash transfers and to make cash transfers more feasible for African economies, most African countries resorted to the ideology of restricting social protection programs initially to those in extreme poverty. For example Zimbabwe’s harmonized cash transfers program is targeted at

elderly, chronically ill, labour constrained households and orphans and vulnerable children. Despite the controversial issues revolved around the political will and economic viability of social cash transfers towards development and poverty alleviation in Africa, growing evidence and empirical case studies have reflected the progressive developments brought about by the use of cash transfers. Social cash transfers have the potential to help cushion socio-economic stability. Social cash transfers stimulate demand for local goods and services. In Zambia 70% of the social transfers are spent on locally purchased goods thereby stimulating enterprises in rural areas (Samson, et. al, 2006:31). In South Africa the redistribution of spending power from upper to lower income groups shifts the composition of national expenditure from imports to local goods, increasing savings (by improving the trade balance) and supporting economic growth (Samson et al, 2004). Cash transfers have the potential capacity to address the poverty situation facing orphans and vulnerable children. Generally children living in poverty are deprived of nutrition, water and sanitation facilities, and access to basic health---care services, shelter, education, participation and protection. while a severe lack of goods and services hurts every human being, it is most threatening and harmful to children, leaving them unable to enjoy their rights, to reach their full potential and to participate as full members of society” (United Nations General Assembly,2006: 46).

Cash transfers can help address child poverty through improving access to education, health and nutrition. For example in Brazil the government increased the income for households in the Bolsa Familia Program in order to reduce child labour. As a result the positive results included decrease in school dropout and an increase in enrolment even though the amount of the cash transfer was less than that realised from child labour (Cardoso and Souza 2003). Conditional cash transfer based

programs such as The Red de Protección Social Program in Nicaragua were reported to have resulted in an average increase of 18 percentage points in enrolment and 23 percentage points in attendance (against a baseline of 70% enrolment in the target population) between 2000 and 2003 (Maluccio, 2005:). Access to food improved and absenteeism declined by 16% during the first 9 months in Kalomo district Zambia where unconditional cash transfer was implemented. (Wietler, 2007:19). Several wide literature depicts the crucial role cash transfers play in tackling poverty, thus there is need for the Zimbabwe government to show better commitment towards the use of cash transfers to address child poverty. Not only does the cash transfer break the poverty cycle amongst orphans and vulnerable children but it also improves the capacity to human capital development for these vulnerable children.



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It is widely agreed that cash transfers do support household consumption and so directly improve household welfare. However, the broader poverty reduction and development effects of social cash transfers, especially targeted transfers and/or conditional cash transfers are disputed. The viability of a social protection program largely depends upon the size of the transfer and the degree to which the design of the scheme is child-oriented. Furthermore, limitations to institutional capacity to formulate, deliver and evaluate transfer program are a key constraint in many low income countries in Sub-Saharan Africa (Schubert, et al. 2007: 31). There is a strong reliance on community management of social protection programs in Africa. Programs in Malawi, Ethiopia and Zambia rely on community organizations to select beneficiaries, collect and distribute, review and manage eligibility (Zarazua, et al 2010; 29). However community involvement tends to reproduce or reinforce social disparities and power relations at the local level (Mansuri and Rio, 2004).

This study intends to depict that the government of Zimbabwe should fully commit to social protection services such as cash transfers by increasing the governmental institution capacities, coordinating civil societies, increasing access and participation of vulnerable groups which are the beneficiaries so as to ensure greater efficiency and sustainability of the cash transfers programs. Social protection is not merely creation of a dependency syndrome but an effective strategy of addressing the poverty situation among vulnerable groups by empowering them with a sense of autonomy, social status, safety net, increasing their capacities to assets accumulation and ensuring human development towards the vulnerable groups (Devereux and White, 2008).



According to (MoLSS: 2010:5), “recent research indicates that 1.5 million households in Zimbabwe are extremely poor and food insecure. These households include 3.5 million children, who urgently need free access to basic services and protection.” These children hardly have any means of support and are vulnerable due to the fact that they are children of deceased parents or are living with chronically ill parents or they are disabled or have been neglected or are destitute or abandoned, affected or infected by HIV/AIDS. They struggle to meet basic needs crucial for the survival and development such as food, clothing, shelter and access to education. Despite community efforts (extended families) and struggle to take care of these children, the government is failing to support community efforts towards the care of these OVC; hence they still remain vulnerable to poverty.

The cash transfer programs as a mechanism of the NOCP and NAP were designed in such a way that they tend to over rely on a community based care approach with regards to the welfare of OVC. These policies tend to assume and assign the overall responsibility of OVC towards the extended family whilst neglecting the role and

need for the government to support the community efforts. Though a community based care (extended family) may provide an alternative and cost effective form of care, the problem is that the community at large has not recovered from a decade of economic decline and most of them have no reliable sources of income and are struggling to take care of OVC. Most social protection measures have been depleted while 80% of the populations are unemployed, and 90% living below the poverty line (BTI, 2014:17). Most of the household heads taking care of OVC in rural areas are labour constrained, elderly and chronically ill. They hardly have the means for their own survival, much less taking care of OVC. Therefore they also urgently need support from the government. In some households with old grandparents, children would actually assume the role of head of household (Mashange, et al, 2008:17).

Bearing in mind the fact that most orphans and vulnerable children are struggling and have not been attended to, whilst there are social policies and cash grants operating and intended to assist them leaves a lot to be considered with regards to government's poverty intervention strategies. The orphans and vulnerable children's plight tends to worsen and their rights violated whilst the government is part of a wide range of international commitments which agreed to protect these disadvantaged children. There is need to review the policies that guide the operation of cash transfers in orders to better address the problems revolving around orphans and vulnerable children.

2.2 THE RIGHTS-BASED APPROACH

The rights based approach is a development and poverty alleviation approach that calls for the universal approach to poverty intervention strategies. The approach basically views poverty as a deprivation of the social, economic and political rights of

the poor and vulnerable people. The Human rights approach views poverty to be as a result of the violation of human rights (Human Rights Policy and Strategy Paper. Australian Council for Overseas Aid, June 2001:2). The approach views people as having rights validated by international standards and laws which are essential for the fulfilment of livelihood security. Hence it advocates for people to claim their rights and for the state to fulfil its responsibilities to its citizens rights (CARE 2000: 38).

The rights based approach has two main core arguments in which it advocates for poverty alleviation. Firstly, the approach calls for close working relations with duty-holders which comprise of the state, NGOs and other development actors to build up their capacity to respond to human rights and work towards fulfilling their obligation towards protecting, respecting and fulfilling human rights. Secondly the approach argues that fulfilling the rights of the poor would entail working to build the capacity of citizens to claim their rights, by working alongside them as advocates and by seeking to provide opportunities for people to empower themselves (Musembi and Cornwall, 2004:45).

The rights based approach has been acknowledged to have particular strengths when it comes to alleviating poverty amongst the poor. The approach binds the government when ratifying human rights agreements, by accepting a formal duty to implement the commitments that they would have made. It identifies institutions, agencies and groups that play an influential role in denying people particularly the poor their rights which may result in the perpetuation of poverty and vulnerability (Musembi and Cornwall, 2004:46). The rights based approach is primarily focused with linking public institutions and the civil society and enhancing the accountability of public institutions to the people. The approach views people as active citizens

with rights, expectations, and responsibilities. Accordingly, poverty intervention is not an issue of charity but the fulfilment of individual's rights and entitlements (Forest, et al 2007:7). Hence, the rights based approach can be a viable way to assessing the functioning of institutions and political processes that contribute towards the livelihoods of the poor (Baumann and Sinha, 2001). The approach helps identify possible reasons why an institution has failed to help people access livelihoods that may help them fulfil their rights.

There is need for a basis in rights in order for the poor to attain a considerable improvement in access to government services. Establishing rights to livelihood-related opportunities or provisions could in fact be the only means to make sure that a government does deal with these areas as policy priorities, and implement an essential shift in public expenditure patterns which depict this prioritization (Moser, et al, 2002:2).

A framework of rights that is rooted in access to resource-based opportunity or to a minimum of state-provided social services might also enhance the social and political sustainability of pro-poor interventions. Once accepting and recognizing a social assistance flow to the poor as a right, it is difficult to reverse, and noticeably easier to protect against corruption and political capture (Norton, et al 2002: 3). For example, in India since 1978, the case of Maharashtra Employment Guarantee Scheme has helped to fulfil the people's right to employment by providing subsistence level employment on rural public works to all who want it. The fact that the rural poor of Maharashtra are aware of their right to safety net employment has prohibited its wholesale capture and made possible its sustained impact (Joshi and Moore, 2000).

The experience from Southern Africa suggests that rights-based access to livelihoods is more reliable over the long term, and as such plays an important part in reducing the vulnerability of the poor (Conway, et.al, 2002:4). For example, in South Africa, the right to social assistance has ensured that people living in poverty are able to meet basic subsistence needs. Studies have shown that the poverty rate in South Africa would be six percentage points higher in the absence of the grants (Budlender, 2012:48).

2.2.2 LIMITATIONS OF THE RIGHTS BASED APPROACH

Despite the above mentioned strengths many governments particularly in developing countries tend to be reluctant to make use of the rights based approach in their development interventions. This is mainly due to the fact that the rights based approach tends to overlook the fact that most duty bearers fail to meet the rights of the poor because of the lack of human, economic and organizational resources. The Zambian pilot social cash transfer project is a good example where the state has been reluctant to commit to a rights based approach inclusive of social and economic rights, on the bases that they lack sufficient funds to commit to such an approach (Kunnemann and Leonard 2008:37). According to Conway, et. al, (2002:2) “to realize citizens’ full economic and social rights as laid out in international law would require levels of public spending – and institutional capacity – which are not feasible in poor states.” Human rights advocates as it has been presumed are inherently critical of government, paying more attention in blaming rather than changing (Archer, 2005:2). The fact that they emphasize on individual over collective rights, and on rights over responsibilities, is from time to time argued to threaten not only environmental sustainability but also economic stability and social cohesion (Conway, et al, 2002: 2)

The basic assumptions underlying the rights based approach proposed here is that rights tend to be violated because the poor might not have the capacity to claim their rights or duty-bearers lack the capacity to meet their duties (Musembi and Cornwall, 2004:54). The availability of a considerable number of complimentary strategies and conditions determines the ability of poor people to effectively claim their rights. These include access to information, group cohesion, development of skills and capabilities (especially in organization and communication), help from allies capable of advocating for rights at other levels, in distant institutional fora (e.g. international conferences), and with particular (e.g. legal) skills; and recourse to a fair arbitrator of claims (e.g. an appeals court) which is capable of assessing competing claims according to rights and without being captured by elite groups (Moser et al, 2002:4).

2.2.3 THE RIGHTS BASED APPROACH AND CASH TRANSFERS

From a rights based perspective, this study views social protection through cash transfers as a basic need and obligation that the state has towards orphans and vulnerable children and not as a charity. According to Jonson (2003: 23) "Children have a right to be dependent on the state, especially when families are vulnerable. Targeting children in the poorest households thus makes programmatic sense and can advance human rights." Generally a democracy and human-rights approach translates poor people's needs into rights, and recognizes individuals as active subjects and stakeholders. It further identifies the obligations of states for example legislation, policies and programs – whose purpose is to respect, promote and fulfil the human rights of all people within their jurisdiction (Cornwall, 2002). In the rights based approach the participation of beneficiaries is ensured. Beneficiaries become fully aware of the responsibility of the state to them.

When governments make use of a rights based approach in cash transfer payments, recipients are holders of rights, eligibility and allocations are transparent and there are legal remedies for those who are excluded unfairly or are subject to other forms of violation (Ritcher, 2009). Nonaka (2008:12), argues that “These income transfers are likely to be strong opening salvos in the introduction of social cash transfers in Africa. They need to be enshrined in the state constitution or similar binding legal framework.”

When politicians and political parties associate themselves with cash transfer programs as they have tended to be in Latin America or with donor and advocacy groups as they have tended in sub-Saharan Africa, the sustainability of the cash transfer programs are compromised. This is mainly because these groups are mainly concerned with achieving their agendas from a rights based approach that is not developmental in most cases but rather political. Sustainability is compromised in such instances because their programs are not long term but rather short term until political agendas are achieved. The Rights based approach plays a much more significant role in improving the design and delivery of cash transfers. Outlining a legal entitlement to a cash transfer under clean and agreed conditions will tend to lead, in the long run, to fairer implementation and with minimum manipulation by politicians (Devereux and White: 2010).

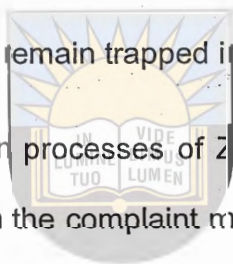
Cash transfer programs are increasing, but problems may arise if they have a fragile legal framework or none at all. The problem with a fragile legal framework is that it fails to enforce the laws that intend to protect children’s rights, as a result cash transfer programs are easily manipulated as they are not protected by law. It is therefore important to provide beneficiaries with legal protection, in regards to the the consideration of long-term objectives of human capital building. A Legal framework

would legally protect the rights of children and thus social protection programs can be designed in a manner that fulfils these rights. Cash transfer programs attract votes; therefore prominent politicians may compromise the sustainability of the cash transfers by using the cash transfers to gain mass political votes instead of helping the poor to graduate out of poverty (Soares, et al. 2008:6).

The rights based approach advocates for the strengthening of the legal framework which strives for protect the rights of the children through social protection programs such as cash transfers (Degol and Fabio, 2008:28). For example, South Africa has an extensive social security system, which includes the Child Support Grant, Old Age Grant, Disability Grant, Grant in Aid, Care Dependency Grant and Foster Child Care Programme. These social cash grants are legally recognized and regulated by the Social Assistance Act, and are also supported by constitutional legislation. The rights-based approach has marked a new strategy in the field of social protection in South Africa, and makes the national government responsible for ensuring social security rights (Hailu and Soares, 2008;28).

In India, the National Rural Employment Guarantee Act of 2005 supports a cash transfer program known as the Rural Employment Guarantee Scheme. The Act enforces the government's provision of social protection and the public's right to it (Degol and Fabio, 2008; 29). The regulation of the program is by a legal apparatus which represents a fundamental rights-based approach to social protection. Furthermore, sustainability and continuity of the program should be strengthened by their legal status that protects them against fiscal shocks and political changes (Deol and Fabio, 2008; 29).

The Zambia pilot social cash transfer project of 2006 is a good example where the state had been reluctant to commit to a rights based approach inclusive of social and economic rights, on basis that they lack sufficient funds to commit to such an approach. Zambia as a state is a member of the International Covenant on Economic, Social and Cultural Rights but has failed to apply and practice at country level, its provisions to the commitments. The government of Zambia has failed to conceptualize the international covenant; therefore children do not have the right to social assistance and are excluded from the social cash transfer program as they do not have the right to claim thus they remain trapped in their poverty situation.



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During the targeting and distribution processes of Zambia's social cash transfer of 2006, irregularities were revealed in the complaint mechanism. Though recipients in the villages were educated on what the social cash transfer was all about and who is eligible, potential beneficiaries complained of being excluded in the list of the 10% targeted households. There was no way to enforce the people's right in the social cash transfer (Kunnemann, et al 2008: 39). Mainly due to the fear of economic implications the government of Zambia has been very reluctant to put into practice economic and social rights within social protection programming. The government forcefully resisted to include economic, social and cultural rights in the constitution, basing its argument on the lack of funds to comply (Leonhard, et al 2008:39).

The constitution of Zimbabwe acknowledges the rights of children but does not commit to providing for the fulfilment of children's rights, such as right to food and nutrition, shelter, education, etcetera including the right to social assistance. Vulnerable children do not have the right to social assistance but rather the government provides social assistance to those children fortunate enough to be identified as eligible beneficiaries and when resources permit. Thus this gap in the

national law makes it difficult to advocate for the provision of social assistance for children. The rights based approach would ensure that the Zimbabwean government commits to fulfilling the rights of children by incorporating social assistance to children into its constitution and this would legally oblige the government to provide social protection programs which strive for the fulfilment of children's rights (Kunnemann, et al 2008: 39). In rights based approach vulnerable children can claim social assistance from the state.

While a rights based approach may increase participation and accountability in cash transfer programs as OVC have the right to and can claim social assistance from the government, difficulties may be faced in circumstances where community members are unaware of children's rights and their responsibilities within the social assistance programs. Furthermore, poor people are often deterred from approaching the formal judiciary due to such barriers as the costs of engaging in a lawyer, the lack of legal aid, lack of general education and skills level necessary to engage in a litigation process (Ljungman, 2004).

In Africa, there have been difficulties in making use of the rights based approach due to the fact that the approach tends to be too political in nature and its application is difficult in environments that are politically sensitive. African governments fail to make use of a rights based approach by separating the developmental perspective of the approach from the political perspective thus the approach has received much resentment. For example in Zimbabwe, the rights-based approach at first encountered strong opposition during the period of 2006-2008, which resulted in the banning of a lot of NGOs from operating in the country (Kaseke, 2008:5). This was due to the government opposition to the idea of development agencies taking on a rights focus that would emphasize that the government had the responsibility to fulfil

children's rights. Similar opposition was experienced in rural communities, particularly due to the premium given to children's and women's rights (Kaseke, 2008:6). The rights based approach does not depict or explain the contribution role cash transfer are making towards poverty eradication, it merely focuses on the need for accountability of the implementers (Foresti and Griffins, 2007:4). This study also did not make use of the rights based approach due to its universal approach towards poverty eradication. It fails to acknowledge how some developing countries might not have the necessary resources i.e. financial capacity to initiate a universal approach to social grants.

2.3 THE SUSTAINABLE LIVELIHOOD APPROACH

This study acknowledges the role and effects of sustainable livelihood approach towards poverty alleviation of the rural poor. The study attempts to define the sustainable livelihood approach, reflecting on its core arguments, strengths and weakness and how applicable the approach may be in trying to investigate the role and impact of the HSCT in alleviating poverty in Zvimba Rural District. Generally sustainability refers to coping with immediate shocks and stresses where local capabilities and knowledge are effectively supported (Scoones 2009: 182). A livelihood comprises the capabilities, assets (stores, resources, claims and access) and activities required for a means of living: a livelihood is sustainable when it can cope with and recover from stresses and shocks, maintain and enhance its capabilities and assets, and provide sustainable livelihood opportunities for the next generation; which contribute net benefits to other livelihoods at the local and global levels in the long and short term (Chambers & Conway 1991:8).

The Sustainable Livelihood approach contains a number of core principles that strengthen its implementation. These include a people-centred approach; responsive and participatory; sustainability; working at multiple levels; conducted in partnerships; and dynamic – responding flexibly to changes in people's situation (Ashley and Carney 1999:7). A people-centred perspective involves policy making which understands the realities of people's struggle against poverty, by formulating policy and practice that is based on an understanding of the poor and their livelihood strategies (Scott and Reyes, 2005:21).

This therefore means that the poor should directly contribute to determining development priorities and be able to influence the institutions and process that impact on their lives (Reyes, et, al 2005:21). Participation entails the need to effect institutional structures and processes that govern people's lives. The sustainable approach is holistic in that it is non-sectorial and it identifies multiple actors, multiple influences, multiple strategies and multiple outcomes. The approach is also 'dynamic' in that it tries to understand change, complex cause-and-effect relationships and 'interactive chains of events' (Scott, et. al 2005:21). The approach also emphasizes on assessing and enhancing the strengths rather than needs and strives to build on people's inherent potential. It attempts to bridge the gap between macro- and micro-levels by analysing the impact of policies and institutions on livelihood alternatives and the need for policies to be guided by insights from the local level and by the priorities of the poor. Generally micro-level interventions occur at the household level and are coordinated simultaneously with mezzo-level approaches, such as improvement in communication and transportation systems. Macro-level approaches are addressed in larger community systems and in national policy arenas (Blackshaw, 2004:16). The livelihoods approach recognizes the

importance of these links and of enhancing accountability, though it takes as its starting point a need to understand the livelihoods of poor people in context. From this starting point it then tries to identify the specific constraints which prevent the realization of people's rights and consequently the improvement of their livelihoods on a sustainable basis (DFID 1999).

2.3.1 ASSUMPTIONS AND STRENGTHS OF THE SUSTAINABLE LIVELIHOOD APPROACH

The Sustainable Livelihood approach assumes that people's livelihood are determined by a range of assets which include; financial, social, physical, human and natural assets. Also that their ability to achieve their livelihood outcomes is determined by their ability to access these assets (Ashley and Carney, 1999:7).

According to DFID (2000:5), "the sustainable livelihoods approach (SLA) seeks to gain an accurate and realistic understanding of people's strengths (assets or capital endowments) and how they attempt to convert these into positive livelihood outcomes. People require a range of assets to achieve positive livelihood outcomes."

Accessibility to these assets is also influenced by the existing social, institutional and political environment which affects the ways in which people combine and use their assets to achieve their goals. The sustainable livelihood approach also takes into consideration the complications of poverty: what is the individual's level of skill or knowledge, accessibility to education, sources of credit, networks of support and how vulnerable they are to unforeseen detrimental circumstances like natural disasters. A community's vulnerability is assessed based on economic, political and technological trends and its assets are counted by looking at natural resources, access to education and health care, sources of credit and networks of support

(Hamilton-Peach and Townsley, 2006:2). The following diagram explains how policies and institutional processes influence people's accessibility to assets, livelihood strategies and outcomes.

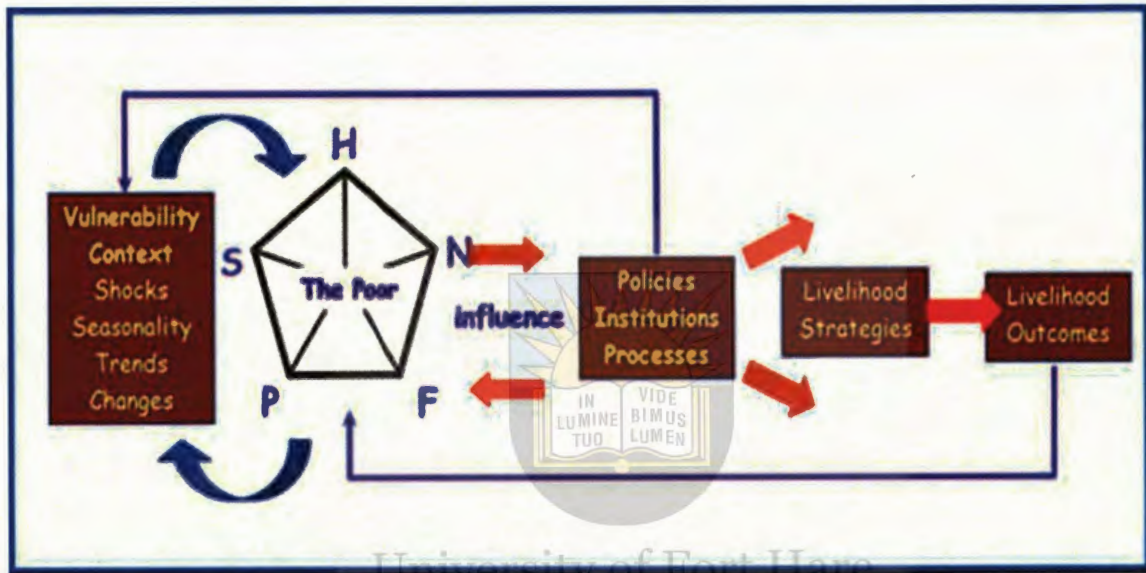


Figure 1: AN IFAD SUSTAINABLE LIVELIHOOD FRAMEWORK

Source: (Hamilton-Peach and Townsley, December 2006:1)

(www.ifad.org/sla/framework/sla.)

The sustainable livelihood approach has been frequently used among scholars and development actors due to its flexibility, diversity and substantial number of strengths. Its analysis provides a way to prioritize efforts to attain rights of the poor. By identifying the constraints on people's livelihoods, the SLA can suggest which rights may be the most vital for a particular group at a particular time, or the series in which rights should be approached for a given group (Moser, et.al (2002:3). The SLA also recognizes the necessity to investigate the relationships between different activities that constitute household livelihoods, which in turn require attention both to intra-household and to extra-household social relations (Mayoux, 2001:23).

The approach attempts to make the connections between factors that constrain or enhance their livelihoods on the one hand, and policies and institutions in the wider environment. On the other hand it identifies measures that can strengthen assets, enhance capabilities and reduce vulnerability. An effectively applied livelihood approach increases access to donor funding. One other advantage of making use of a sustainable approach to development is that donors are increasingly looking for organizations and programs that can clearly demonstrate impact. Interventions that address livelihoods and vulnerability issues will generally be better targeted and thought through. After project design, the livelihoods framework supports clearer monitoring and impact assessment. This enables development organizations and communities to manage and guide activities in ways that truly reduce poverty. Donors are more likely to support programs that are well-designed and that include impact monitoring (Murray 2000:18). This may also enhance pool funding of social cash transfers by donors. Generally the livelihood focus Programs (projects) that focus on livelihoods are more effective in reducing poverty than projects that seek to reduce poverty through economic growth or improved access to infrastructure and social services without regard for the ways that poor people make their living.

2.3.2 WEAKNESSES OF THE SUSTAINABLE LIVELIHOOD APPROACH

The SLA is widely used and has gained much favouritism from scholars and development actors due to its advocacy for community participation within the development and poverty alleviation process. However, the approach tends to undermine the inequalities of power within communities that can be influential for worsening poverty. Power relations can have a negative impact on the contribution of social cash transfers as community elites try to manipulate the program politically

for their own personal gains. This can contribute to the exclusion of eligible beneficiaries.

A Livelihoods approach is also still perceived by many project planners and policy-makers as complex, and requiring more administrative and financial flexibility to develop and implement than a more conventional approach firmly rooted within one sector or discipline (Conway, (2002:1). Inequalities of power and conflicts of interest are not sufficiently acknowledged by the sustainable livelihood approach (Murray 2000).

2.3.3 THE SUSTAINABLE APPROACH AND CASH TRANSFERS

One of the major advantages of the sustainable livelihood approach is that it acknowledges the importance of building household assets of the poor in order to make them more resilient to poverty. In terms of this study, distribution of cash transfers can assist OVC households by providing an injection of financial resources that can boost access to other household assets thereby making the OVC household more resilient to poverty. The cash transfers provide an income base for OVC households; the amount does not automatically fulfil all livelihood needs such as meeting all the basic needs of the household but it can generate savings which can help develop other assets such as investment in education.

Devereux (2002: 672) outlines that tiny cash transfers are often invested in income generation activities, education and acquisition of productive assets, implying that they can play a key role in reducing chronic poverty. This kind of spending contributes to enhancing household assets. The main asset for poor people is human capital that includes education, skills and good health (Tembo and Freeland 2009:1). In 2003, the evaluation report of the Kalomo district cash transfer scheme in

Zambia, showed that among beneficiary house-holds school enrolment rates rose by 3% in 2004-2005, while in Chipata district beneficiary households spent up to 276% on school fees and other educational expenses” (Neuhaus et al. 2009: 30).

The Sustainable livelihood approach helps to deal with issues relating to poor households assets portfolio, livelihood strategies among recipients and the contribution of cash transfers to these livelihoods. By building assets using cash transfers the beneficiaries can help facilitate positive livelihood outcome and change (Matandiko, 2010:9). Social cash transfers enable the poor to protect themselves and their assets against shocks, enabling them to defend their long-term income-generating potential. For instance, droughts in Ethiopia had reduced household earning power, as a result social cash transfers were introduced to enable households to resist desperate measures and reduce future vulnerability (Dercon, 2005: 483). Social cash transfers enable households to resist desperate measures and reduce future vulnerability.

The core aims of the sustainable livelihoods approach can be achieved through supporting poor people to build their capacities: for example, increasing people’s access to appropriate in financial services –including insurance/ cash transfers– is one way of reducing vulnerability (Phiri, 2012: 13). The concept of sustainable livelihoods (SL), while linked to issues of social protection, alters the focus from income and consumption to directly address the critical role that assets and capabilities play in improving individual and household social and economic well-being and associated poverty reduction (Ashley and Carney 1999).

Policy makers in developing countries tend to undermine the contributor role of cash transfers towards economic development. The sustainable livelihood approach can

help depict how cash transfers can help livelihood needs whilst at the same time boosting local economies. According to Matindiko (2010: 11), "cash transfers build assets among poor households they become an essential contributor to community livelihood strategies because when beneficiaries spend transfers within the community they contribute to local economies. In poor communities there is a problem of rural credit availability. Despite inadequate rural financing markets, cash transfers may provide finances to allow rural households diversify and expand farm production".

Cash transfers can help enable community members within a household to participate in labour markets. The fact that food consumption is improved within the household other members within the household can help also contribute to enhance household economy by seeking employment thereby enhancing other household assets such as human capital and income (Samson, 2009:44). Social cash transfers support the participation of the poor in labour markets. Job search is often expensive and risky. In South Africa, workers receiving social cash transfers put more effort into finding work than those in comparable households not receiving grants and they are more successful in finding employment (Samson and Williams, 2007).

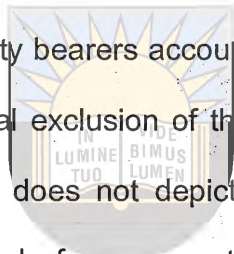
This study will make use of the sustainable livelihood approach as it will help the policy makers and the government of Zimbabwe to acknowledge the crucial role cash transfers play towards poverty alleviation amongst OVC households. Community members have the will to support OVC within their communities but due to financial constraints their capacity to assist is repressed. Cash transfer income helps to fight livelihood constraints and improve household assets by improving assets, access to education, health services, human capital and financial resources (Matandiko, 2010: 13). The Sustainable approach through its advocate for

community participation can also help improve social networking in cash transfer programs. The livelihoods approach attempts to bridge the gap between macro level policy and micro level policy, emphasizing the importance of macro level policy and institutions to the livelihood options of communities and individuals. It also stresses the need for higher level policy development and planning to be informed by lessons learnt and insights gained at the local level. This will simultaneously give local people a stake in policy and increase overall effectiveness (DFID 1999). Bridging the gap may involve enhancing the capacity of government institutions that interact with the community, thereby enhancing the capacity of the government institutions to support and monitor the community members in cash transfer programming. The Sustainable Livelihood Model advocates for poverty reduction through focusing on livelihoods, not only focusing on symptoms of poverty which is a traditional way of looking at it. The SLA also argues for a thorough scrutiny of existing policies and institutions that help in sustainable livelihoods. This indicates that there is a need to look beyond individual organization and to consider partnerships with policy makers; in most cases the government (Mutambara, 2011:25).

2.5 CONCLUSION

This chapter has provided an extensive literature on the overview on the global and continental framework on social protection and cash transfers. It shows the global commitments introduced to protect children over the past decades. The chapter shows such commitments as the Millennium Development goals (MDGs) introduced in 2000; the Convention on the rights and welfare of children (1989); the African Charter on the rights and welfare of Children of 1990; United Nations general Assembly Special Sessions in HIV (UNGASS) of 2001 and National Action Plan for

OVC facilitated by the UN for southern African countries to provide guidelines for social protection programs designed to assist OVC poverty situation. This chapter further reflects the theoretical framework that was used by the study to achieve the study objectives. In this study the Rights based approach (RBA) and Sustainable livelihood approaches (SLA) were used in order to assess the role of cash transfers towards alleviating poverty particularly amongst OVC households. The RBA views poverty as a result of deprivation and violation of human rights. Hence the RBA calls the universal approach to poverty intervention strategies by advocating for the poor to claim their rights and hold the duty bearers accountable. Though the RBA goes a long way to help fight against social exclusion of the poor in social protection and cash transfer programs. The RBA does not depict or explain the effect of cash transfer on poverty but rather merely focuses on the need to hold implementers accountable.



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Therefore the chapter reflects how the study made use of the SLA, which was more appropriate in achieving the research objectives. The SLA was used to assess the effects of cash transfer towards poverty alleviation. It acknowledges the importance of building poor people's household assets in order to make them more resilient to poverty in a long term perspective. Cash transfers therefore should help provide an injection of financial resources that can help boost household assets. Income from cash grants can help fight livelihood constraints and improve household assets such as education, health services and human capital. In this case from SLA improved access to basic needs such as education, nutrition and health services can assist OVC graduate out of poverty in a long term perspective.

CHAPTER 3

SOCIAL PROTECTION AND CASH TRANSFERS IN ZIMBABWE

3.1 INTRODUCTION

This chapter reviews literature on social protection and cash transfers implemented in Zimbabwe in order to address poverty. The study explores the landscape of child protection in Zimbabwe from the colonial period to the time when the country attained its independence in 1980. The chapter also depicts the situation of orphans and vulnerable children in Zimbabwe, the social policies and cash transfers programs that were implemented to deal with poverty particularly among the orphans and vulnerable children. In this Chapter, the researcher will discuss the current social protection mechanisms for OVC in Zimbabwe. The chapter also provides in length a description of the physical, social and economic landscape of the case study.

3.2 THE LANDSCAPE OF SOCIAL PROTECTION IN ZIMBABWE

During the period of 1880s and 1890s when the white settlers came into the country, there were no formal social protection systems in place. Instead the indigenous population relied on traditional or informal welfare systems based on kinship ties and cultural practices of solidarity and reciprocity. Thus, during the formative years of colonialism, there were no personal social services, neither was there any social security systems. The extended family system was an important social welfare institution which provided material and non-material support to its members. Thus the extended family looked after its own destitute, sick, handicapped and elderly (Dixon, et al 2002:220).

Social assistance on the other hand came in very late in the colonial administration. This was because colonies were primarily for economic reasons (Gough, 2006). Thus they were only interested in what they could get out of the colony. The colonial administration introduced the Public Assistance Act 1930 in order to make it possible for destitute members of the white community to meet their basic needs. The cash assistance provided was means tested so as to ensure that only destitute people with no meaningful alternative source of income benefited. The initial focus was providing assistance to the non-African population. The Africans were excluded because it was assumed that they had no need for assistance because of their allegedly simple needs (Dixon, et al 2002: 222), hence social assistance provided in the colonial era was initially meant for the white population. It was thus discriminatory and based on racial grounds. The role of the state in social assistance was minimal and coverage was low. The provision of social services, particularly social assistance was seen as a waste of resources, hence the limited resources were on assisting only white destitute members of the society (Midgley and Piachaud 2011: 121)

In 1936, the Children's Protection and Adoption Act was introduced. It was the principal instrument by which children were protected and assisted to realize their potential. This Act had provision for fostering, adopting or committing to institutions those children deemed to be in need of care. Probation officers were expected to investigate cases of children alleged to be in need of care and prepare social enquiry reports for the court (Hampson and Kaseke 1987). It should be pointed out that the African people carried out their own informal adoption and foster care system within the extended family system. This was still African people's traditional welfare system for dealing with children in need of care. The informal practice was of course, not reported on official statistics on foster care or adoption. In order to keep the

philosophy of racial discrimination, services for Africans were inferior to those provided for whites (Scheurell et al, 2002). In 1944, the Public Assistance Act was extended to the African population with the Department of Native Affairs being responsible for dispensing the benefits. The scheme was transferred to the Department of Social Welfare in 1964. Assistance was only provided to permanently urbanized Africans who had broken ties with their rural kinsmen (Gargette, 1977). This was mainly because poverty was viewed to only exist in urban areas where there were problems of destitution and unemployment. It was therefore considered inconceivable for the rural population to be destitute since they were taken care of by the subsistence economy (Dixon, et al 2002:223). Progressively improvements towards the social assistance of the African began to develop as more and more Africans were incorporated. In 1965 social assistance was extended to the disabled, to the elderly who had no kin, to children and the sick only after it had been proved that they had no family and therefore could not be sent to the rural areas (Kaseke, 1982).

In 1979, the Children's protection and Adoption Act and Maintenance Act (chapter 35) were introduced to legally protect children in need of care and their families, through the creation of juvenile courts and the protection, welfare and supervision of minors. The 1979 Act provided guidelines for adequate standards for operating children's institutions and delineates criteria for determining child abuse and neglect. The level of cash assistance is minimal and covers up to six children only (Dixon, et al 2002: 303). At independence, in 1980, the government removed the discriminatory practices and decentralized its services in order to improve accessibility. Today these services include promoting the welfare of all children through the Children's Protection and Adoption Act (Chapter 33) which provides for fostering, adoption and

institutionalization of children in need of care. The Children's Act fostered the establishment of the child welfare fund which ensured social protection to orphaned and vulnerable children. Included also were the Birth and Deaths registration Act (Children's Act of Zimbabwe, 2002: Chapter 5:02), child welfare council which comprised of one representative from the police force, six voluntary organizations and other organizations which the Minister considered dealing with issues concerning the welfare and upbringing of children. In Zimbabwe, if any parent or guardian of a child or young person assaults, ill-treats, neglects, abandons, or exposes in a manner likely to cause him unnecessary suffering or expose him to injury or detrimentally affects his health or morals or any part or function of his mind or body, he shall be guilty of an offence (Children's Act of Zimbabwe 2002: chapter 5:02). The Amended Children's Act of 2001, basically involves the prevention of neglect, ill-treatment and exploitation of children, and young persons. The Act empowered the children's court to ensure this legislative law was enforced.

Currently Zimbabwe has an extensive range of formal social protection measures, some in place before the recent macro-economic and political crises, others being introduced in response to recent sharp rises in vulnerability (Devereux, 2006). There are three main forms of Social Protection in Zimbabwe and these are social insurance, social assistance and social allowance. Social Assistance is a non-contributory scheme that is mostly funded from public funds (Devereux and Sabates Wheeler, 2004 Kaseke et al, 1997). In Zimbabwe, social insurance programs usually take the form of contributory schemes managed by government and the private sector (Devereux and Sabates Wheeler, 2004 Kaseke et al, 1997). Retirement pension and grants, the invalidity pension and grants, the survivors' pension and

grants, the Funeral Grant and workers compensation, as well as medical aid schemes are examples of social insurance. Social assistance in Zimbabwe includes the Basic Education Assistance Module, Institutional grants, the Harmonised Social Cash Transfer program, the Public Assistance scheme, Drought mitigation program, Grain loan scheme, as well as the Assisted Medical Treatment program, among others.

3.3 THE SITUATION OF OVC

Zimbabwe defines vulnerable children as children with physical and/or intellectual disabilities, children affected and/or infected by HIV and AIDS, abused children (sexually, physically, and emotionally); working children, destitute children, children living outside a family environment, pregnant/married children and/or child parents, neglected/abandoned children, children in remote areas (who walk long distances to schools, health centers, and other service centers), children with chronically ill parent(s); children in conflict with the law; unaccompanied child migrants; children of school going age, who are not in school (e.g., dropouts); children living with very poor/elderly parents/guardians; children of mobile vulnerable populations; children living in very crowded shelter (MoLSS, 2010:10). Despite all these categories for defining children, assistance to children by the government is only directed by particular age limit which is 16 years and below, any child that falls outside this limit maybe excluded (Skinner, et al 2004).

Like in most African countries, the leading causative factor to the proliferation of orphans and vulnerable children (OVC) in Zimbabwe is the HIV/AIDS pandemic. The poverty situation is further worsened by political and economic instability, outwards

migration and drought. Communities are solely reliable for the welfare of the orphans and vulnerable children with a few institutionalized centers and periodic support from the government. According to Jimat (2010: 3) "most orphans are cared for by their extended families, including grandparents or are living in child-headed households. Many orphans live in extremely poor households and are less likely to access health care, attend school or have basic clothing, shoes and bedding than other children from the same communities". They are also more likely to suffer from psychological problems and to be subjected to child abuse, including forced sex in adolescence, which increases their likelihood of contracting HIV (Gregson, et al 2005).

Zimbabwe's socio-economic and political environment is leading to increased deprivation and causing some children to move, often unaccompanied, within the country and to other countries in southern Africa. This movement exposes these children to violence, exploitation and abuse, and denies most of them their right to education (GoZ, 2010). The poverty situation of these orphans and vulnerable children is usually as a result of lack of decent shelter, sanitation, macro-economic instability and lack of basic services such as health and education. Many orphans are denied their inheritance rights and have to fend for themselves from a young age. They are generally without any skills or capital and have to rely on low paying jobs, begging on the streets and immoral ways of survival such as theft and prostitution (MoLSS, 2010).

3.4 POLICIES SUPPORTING CHILDREN

In November 2002, Zimbabwe, along with other countries in Eastern and Southern Africa, participated in the Regional Workshop on Children Affected by HIV and AIDS in Windhoek, Namibia, to measure progress towards fulfilment of the United Nations General Assembly on Special Sessions (UNGASS) goals (GoZ 2010). This workshop enabled the Zimbabwean delegation to review national progress, learn from different countries, experiences identify key action points (based on lessons learnt during the workshop), and formulate a plan to secure further commitment to action in Zimbabwe. The Zimbabwean delegation committed the nation to some actions including; advocating for greater political commitment to support for children; conducting a situational analysis of OVC programming in Zimbabwe; conducting a national stakeholder's consultative conference and developing a national plan of action for orphans and vulnerable children. The resolutions of these workshops emphasized the need to adopt family-centred approaches and child participation when strengthening livelihoods and food security (MoLSS 2010:20).

Currently Zimbabwe has two key national policies as part of the legal framework that supports children; these include the National Orphan Care Policy and the National AIDS Policy, both adopted in 1999. These policies were developed through broad-based consultation, reflecting Zimbabwe's strengths and traditions and through collaboration between government and civil society. These policies also establish the government structures and systems to implement and coordinate services and benefits provided in the policies (GoZ: 2010).

3.4 1 NATIONAL ORPHAN CARE POLICY

The Zimbabwe National Orphan Care Policy adopted in 1999, identifies opportunities to provide care and support for vulnerable children that are based on the country's laws, the cultural tradition of caring and the collaborative approach which exists between government and the civic society. It established a partnership between government ministries and private voluntary organizations, communities, faith based organizations, traditional institutions and non-governmental organizations (both national and international). The partners collaborate and network to monitor the situation of children, advocate on their behalf, and respond to their needs through Child Protection Committees, which have been established at all tiers, from the village to national levels. It recognizes the traditional leaders' role in the care of orphans and the support of their programs such as the Zundera Mambo/Insimu yeNkosi²⁶ and Dura raMambo/IsiphalaseNkosi (GoZ, 2010 REPORT).

Government has adopted a collaborative approach to care and support for vulnerable children, with programs coordinated through the Child Protection Committees at district, provincial, and national levels. Government' assistance to vulnerable families, with basic living costs, through programs such as Public Assistance, Drought Relief, Assisted Medical Treatment Order and Public Works Program. A conditional cash transfer program for vulnerable groups is currently being implemented.

3.4.2 ZIMBABWE'S NATIONAL ACTION PLAN FOR ORPHANS AND VULNERABLE CHILDREN (NAP FOR OVC)

ZIMBABWE'S National Action Plan for orphans and vulnerable children (NAP for OVC) of 2004-2010 was co-ordinated by a National Secretariat for the NPA for OVC,

working with provincial and district secretariats and child protection committees. Emphasis was placed on education and awareness on existing policies and legislation that protect the best interests of the child, strengthening community based initiatives and social safety nets and strengthening rights based approach to programming which had an initial time frame of 3 – 5 years (Fanelli, et al 2007).

Key objectives included strengthening existing co-ordination structures for OVC programs and increasing resource mobilization by December 2005; Increasing the percentage of OVC with birth certificates by at least 25% by December 2005; Increasing child participation as appropriate in all issues that concern them from community to national level; considering their evolving capacities; Increasing new school enrolment of OVC by at least 25% by December 2005; while ensuring retention of OVC in primary and secondary schools; increasing access to food, health services and water and sanitation for all OVC by December 2005; Increasing education on nutrition, health, and hygiene for all OVC by December 2005 and reduce the number of children who live outside of a family environment by at least 25% by December 2005 this includes children living without adult guidance; children living on the streets and in institutions (GoZ, 2004).

The NAP for OVC is an important instrument for the implementation of laws and policies for OVC. It provides for multidisciplinary action in the care and protection of OVC. However, it does not make explicit reference to the term 'social assistance' as a strategy for dealing with the OVC problems (Manyika, 2010; 73).

3.5 THE EFFECTS OF STRUCTURAL ADJUSTMENT PROGRAMMES (SAPs) on SOCIAL PROTECTION IN ZIMBABWE

The declining performance of the economy forced the government to embark on economic structural adjustment programs from 1990 to 1995 with the assistance of International Monetary fund and World Bank (Sampson and Kaseke, 1987). The structural adjustment programs introduced cutbacks on social services expenditure and institutional costs sharing measures. The introduction of structural adjustment programs saw the government reducing spending on social services, much to the detriment of the vulnerable population. The growing problem of orphan-hood as a result of the Aids pandemic forced the Department of Social Welfare, in collaboration with other stakeholders to introduce community care programs for orphans and vulnerable children (Mtetwa et al 2013). Community care programs enable orphans to be cared for in the community. The advantage of community care is that orphans and vulnerable children (OVC) remain in their communities and thereby avoiding the unnecessary uprooting of children.

Community based care as compared to institutional care, has the cost advantage due to the fact that it emphasizes on identifying and building existing resources within community rather than being provided resources from outside. However, despite the cost advantage of community based care, the reliance on community participation for the identification and implementation of cash transfers has the risk of being vulnerable to high errors of social exclusion as selection is easily manipulated by community elite. Structural adjustment programs coupled with economic downfall saw the depletion of many social provisions. Furthermore, insufficient funding towards social protection saw many social programs funds exhausted halfway through the financial year (Mtetwa and Muchacha, 2013:4).

3.6.1 THE SOCIAL DEVELOPMENT FUND (SDF)

The social development fund was implemented in 1991 to 1993 to respond to the social ills that were a result of ESAP. The SDF was established in 1991 with the aim of cushioning the vulnerable and poor communities against negative effects of the reform programs through specifically targeted interventions (Human Development Report, 1998). In the 1980s social assistance was based on a system of social safety nets under the Department of Social Services within the Ministry of Labour and Social Services. The concept was however expanded following the adoption of ESAP in 1991 with the establishment of the Social Dimension of Adjustment (SDA) program that was designed to mitigate the impact of adjustment on vulnerable groups. Consequently a Social Development Fund (SDF) was created under SDA program (Chitambara, 2010). The social development fund enabled many of the poor and vulnerable groups to access education and health services.

3.6.2 THE POVERTY ALLEVIATION ACTION PLAN (PAAP)

In an effort to address the deficiencies of the SDA programs government introduced the Poverty Alleviation Action Plan (PAAP) in 1995. The government adopted the program of economic reform with a formal commitment to protect the poor and vulnerable groups from the negative impacts of ESAP via Social Dimensions of Adjustment Program (SDP). The aim of the SDP was to protect the poor from the negative impact of subsidy removal, introduction of fees and unemployment. It has two components, namely; directing transfers to support health and school fees payment for the same households (Mtetwa, et al 2013:20). PAAP encourages the integration and participation of vulnerable groups into the mainstream of economic activity.

3.6.3 THE STREET CHILDREN FUND

The Street Children Fund (SCF) introduced in 2002 provides for the needs of more than 12,000 children living on/off the streets. It supports reintegration of these children into their families and supports families to ensure smooth and sustainable reintegration (GoZ 2010:22). However failure of successful program intervention was attributed to poor funding and lack of coordination among the street child care workers. According to Mawoneke (2001; 30), "because of the many different reasons why children may be on the street, there is no single intervention that would fit the needs of all children. Children who have become successful "street entrepreneurs" may have little motivation to be "re-socialized".

3.6.4 THE BASIC EDUCATION ASSISTANCE MODULE (BEAM)

Established in 2001 as a key component of the Enhanced Social Protection Program (ESPP), the Basic Education Assistance Module (BEAM) was designed to provide quality education to orphans and vulnerable children. It is a school tuition, levy and examination fee assistance module targeted at the vulnerable children. The primary objective of the BEAM is to reduce the number of children dropping out of school and reach out to those who have never been to school due to economic hardships (MoLSS, 2013:2). This program is also intended to reduce child labour, which perpetuates the poverty cycle. BEAM uses community based targeting in order to allow the community to participate and use their local knowledge and perspectives on the socio-economic conditions of children in the community to select the neediest children. However, due to corruption the BEAM targeting system was reported to have gaps which resulted in non-eligible households benefiting from the program (Murenha, 2006).

One of the main challenges when targeting potential beneficiaries is that even those who can afford would like to benefit from the program. As a result they can change their behaviour or even deem to claim themselves as poor so they can benefit from the program. Another problem is the fact that the BEAM program only allows for free school fees provisioning, whilst schools impose conditions when attended which could lead to situations where children from the poorest households are excluded. This is usually because they are unable to meet the condition of regular attendance as their caregivers are unable to afford school uniforms or even shoes and soap (Schubert 2011). Hence there is need for cash transfers to be directed to beneficiary household than can enhance household capacity to meet basic needs such as food, clothing, uniform, etcetera so as to make the BEAM program effective.

3.6.5 THE NATIONAL STRATEGY ON CHILDREN IN DIFFICULT CIRCUMSTANCES (CDC)

The National Strategy on Children in Difficult Circumstances (CDC), introduced in 1999, targeted to orphans and vulnerable children. In this program the government provides resources through local authorities to reach out to children in difficult circumstances (Masda and Atiku, 2006). The CDC budget provides financial assistance for the maintenance of children in institutional or foster care and directed to children's homes to cater for foster fees, maintenance grants, administrative grants, school fees and uniforms (Manyika 2010).

However, the CDC neglects the larger proportion of the orphans and vulnerable children who are not in institutional or foster care as it only provides for children in institutional and foster care. This is a problem because in the Zimbabwean context, institutional care is considered as the last possible resort after other alternative care methods have been considered, thus the poverty situation amongst the OVC not in

institutional care still remain unattended to. The program was also criticized for having low impact due to inadequate budgetary allocations and for targeting adult-headed households thus ignoring households which are labour constrained and headed by children (Masda and Atiku, 2006).

3.6.6 PUBLIC WORKS PROGRAM

There is also the Public Works Program introduced in 1991; was not directed at children, it is for families, but primarily labour based in approach. Children benefit indirectly as members of the household through cash and food transferred to poor and vulnerable households on the conditions that the able-bodied family members provide labour. The problem with the public works program is that although the program can help reduce the poverty situation among orphans and vulnerable children, it still neglects the majority of the OVC. Most OVC living in extreme poverty are either living with labour constrained household heads such as old people or disabled, or are child headed households. Thus this makes the program liable to social exclusion to the most vulnerable as it targets able-bodied household only (Mtetwa, et al 2013).

3.6.7 THE HARMONIZED CASH TRANSFERS (HSCT)

Owing to the effects of HIV and Aids, there has been an increase in the number of orphans. This orphan-hood has increased the vulnerability of children. HIV and Aids has also eroded the livelihood sources of households, reduced their labour; and also destroyed community safety nets (such as the extended family). Children were exposed to negative and unhealthy coping mechanism by households for example withdrawing children from school, streetism, child labour, child transactional sex. Children are deprived basic services such as education, health, etc. essential development. These practical problems led to the introduction of the 'unconditional'

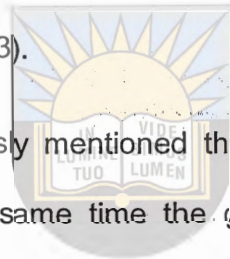
Harmonized Social Cash Transfer (HSCT) in 2011 by the Ministry of Labour and Social Services (MoLSS), through the Department of Social Services (DSS). The program's objective is to strengthen the purchasing power of 55,000 ultra-poor households who are labour-constrained through cash transfer (FAO 2013:1).

It basically aims to enable beneficiary households to raise their food consumption level by increasing access to basic food commodities and strengthen household economies so that they can improve their child care role, through providing cash and linking them with other livelihood programmes. Though the cash transfer is unconditional, beneficiaries' households are encouraged to spend the money in a child sensitive manner, prioritise children in spending the cash. Thus the Harmonised Social Cash Transfer Programme is a child sensitive social protection program that aims to fulfil the rights of children.

The program implementation is guided by the National Orphan Care Policy and National action Plan for Orphans and Vulnerable children phase II. Program funding comes from the government of Zimbabwe and the Child Protection Fund (CPF) which is a multi-donor funding mechanism. The program was designed on the basis of three pillars namely reducing, household poverty by implementing a national cash transfer program targeting households that are food poor and labour-constrained; enhancing access to child protection services for all vulnerable children including legal, welfare and judicial services for children affected by violence, abuse and exploitation; and, improve access to basic education for poor orphans and other vulnerable children (Schubert 2010:10).

The Harmonized Cash Transfer program is presently reaching only 4,140 households with monthly payments of USD 20 (Schubert 2011:13). The problem with

this program is that households are self-identified and only those able to report can access benefits. However, most of the potentially eligible beneficiaries are unaware of the program as they live in isolated areas within the rural areas. This means that many labour constrained extremely poor households, the neediest of all households, fall through all safety net cracks. This is one of the most pressing and unsolved problems of social protection in Zimbabwe. The hardest to reach households are arguably the most important to invest in for government and human rights organizations in equity terms for their potential to contribute to the alleviation of extreme poverty (Schubert, 2011: 13).



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Considering the problems previously mentioned the program has potentially high errors of exclusion, whilst at the same time the government has not developed initiatives for potential beneficiaries to claim the cash transfer leaves a lot to be questioned about the contribution capacity the program has towards poverty alleviation for intended beneficiaries. For example some developing countries constitutionally enshrine the right to social protection - Brazil and South Africa have built comprehensive systems of social entitlements that have substantially reduced poverty and inequality over the past ten years (Samson et al., 2007).

Currently the Harmonized cash transfer program is the only social cash program in Zimbabwe that intends to address the poverty situation amongst orphans and vulnerable children. The fact that its implementation design reflects possibly high levels of exclusion and that it potentially open to abuse or patronage at community level due to its community based model derived from the national orphan care policy and national action plan for orphans and vulnerable children, leaves a lot to be questioned on its impact capacity.

3.7 PHYSICAL AND SOCIO-ECONOMIC LANDSCAPE OF THE STUDY AREA

Zimbabwe is a landlocked African country located within Southern Africa, between South African and Zambia. Geographical coordinates 20 00S, 30 00E. Total area covered is 390, 757 square km with land 38, 847 square km and water 3, 910 square km. Land boundaries total of 3, 066km bordered countries including Botswana 813 km, Mozambique 1, 231km, South Africa 225km and Zambia 797 km. Climate of country basically involves tropical, moderate by altitude, rainy season November to December. Terrain is mostly high plateau with higher central plateau (high-veld) mountains in east (Fact book, 2013:1).

The population of the country is 13, 182, 908, estimates explicitly take into account the effects of excess mortality due to AIDS, and this can result in lower life expectancy, higher infant mortality, higher death rates, lower population growth rates and changes in the distribution of population by age and sex. The age structure is 0-14 years at 39,4%, 15-24 years at 22.5%, 25-54 years at 30,8%, 55-64 years at 3.7% and finally 65years and over at 3,6%. Such information is crucial to illustrate a country's insights about political and social stability and as well as economic development. Zimbabwe has a total dependency ration of 76.4%, with youth dependency ratio at 69.6%, elderly dependency ratio at 6.8% and potential support ratio at 14.7 (Fact book, 2013: 2-3).

The country constitutes 8 provinces namely; Bulawayo, Manicaland, Mashonaland Central, Mashonaland East, Mashonaland West, Matebeleland North, MatebelelandSouth, Midlands, Masvingo and Harare. The distribution of the population by province for 2012 indicates that Harare with 16% of the total population is the most populous province. Manicaland Province is next with 14 per

cent, followed by Midlands (13%), Masvingo (11%), Mashonaland West (11%), Mashonaland Central (9%), Matabeleland North (6%), Bulawayo and Matabeleland South with (5%) each (ZIMSTAT, 2012:10).

Harare has the highest proportion of the country's population. The same province also happens to have the highest population density. The number of persons per square kilometre in Harare is 2406. This is followed by Bulawayo (1 369) then Manicaland (48), Mashonaland East (41), Mashonaland Central (40), Midlands (33) Masvingo (26) Mashonaland West (25), Matabeleland South (13) and Matabeleland North (10) (ZIMSTAT, 2012:10). In this research the main study area will be Zvimba district situated in Mashonaland West of Zimbabwe

3.7.1 ZVIMBA DISTRICT

Zvimba District is a rural district situated in the Mashonaland west province of Zimbabwe. The district is in the middle-veld and is situated 71km from Harare and approximately 60km from the provincial capital Chinhoyi. Mashonaland West is the 4th biggest province in Zimbabwe. The district stretches up to 6, 071km² with a density of 43.3 inch /km² (Zimstats, 2012: 17).

3.7.2 GEOGRAPHY

Zvimba District is bordered by Guruve District to the north, Mazowe District to the east, the city of Harare to the southeast, Chegutu District to the south, Kadoma District to the southwest and Makonde District to the west and northwest. Its main town, Murombedzi, is located about 110 kilometres (68 mi), by road, west of Harare, the capital of Zimbabwe the largest city in the country. This location lies about 48 kilometres (30 mi), by road, south of the town of Chinhoyi, Makonde District, the

nearest large town. [1] The coordinates of the district are: 17° 42' 0.00"S, 30° 12' 0.00"E (Latitude:-17.7000; Longitude: 30.2000).

3.7.3 POPULATION COMPOSITION

The current population of Zvimba District is not publicly known but according to ZIMSTAT (2012:55) "The district has a total of 35 wards with a population of 263 020 with 132 165 males and 130 855 females. There are 52 630 households, with an average household size of 4.2 people".

3.7.4 HEALTH AND EDUCATION SERVICES

The district has 33 health centres of which 4 are hospitals and 27 are either rural health posts or clinics. The district hospital has a bed capacity of 65. Darwendale rural hospital, Banket hospital, Father O' Hea Hospital, Chinhoyi hospital. Transportation and lack of adequate medical resources are some of the challenges faced within the district (Mashange. et.al, 2008:16).

The district has 164 primary schools with an enrolment of 42 430 students and there are 46 secondary schools with a total of 13 684 students, as reported by the ministry of education, sports and culture (Munyathi, et. al, 2008:16). Forty-four of the schools are in Zvimba south. The greatest challenge in the schools is acquiring teaching resources such as text books. With regard to education assistance, the Basic Assistance Model (BEAM) helps students with school fees. Early child development centres are also found in the district and there are 30 pre-schools registered in the district with the Ministry of Education Sports and Culture. There are 29 schools with special classes for children with specific disabilities but because of the lack of resources, some of the children are sent away from school. In relation to literacy rate, 16.2% of the population have never attended school. Population age 3-24 years

currently attending school; 11.4 pre-school, primary school 64.3%, secondary 23, 4% and tertiary 0.7% (ZIMSTAT, 2012). Most of the schools are in Zvimba South. The BEAM helps some students with school fees. There are 29 schools with special classes for children with specific disabilities.

3.7.5 AGRICULTURE ACTIVITIES

Zvimba District is primarily farming and ranching district. Crops raised include tobacco, maize and cotton. Cattle are raised for dairy products and beef. The population largely relies on agriculture, most of which comprises communal farms; hence farming is the major source of food and cash for most households. Very poor households that only cultivate for subsistence use rely primarily on casual work. Due to the reliance on agriculture, the occurrence of droughts can dramatically reduce the livelihood of the communities. Drought became one of the major challenges during the 3 years of 2002-2005 and other challenges include shortage of transport and change in market systems. Approximately 20% of the poor population relies on relief support (Mashange. et.al, 2008:15).

3.7.6 WATER AND SANITATION

The majority of the households use protected sources as their main sources of water, namely 8.9% piped water inside dwelling unit, 20.3% piped water outside dwelling unit, 35.4% communal taps and 20.1% protected well/borehole (CSO, 2002). With regard to sanitation, about 15% use flush toilets, 24% use Blair toilets (ventilated improved pit latrine), 24.3% use pit toilets and 28.7% have no toilet facility (Zimstats, 2012).

3.7.7 HOUSING AND ENERGY

About 30% of the population live in traditional dwelling units, 29% live in mixed dwelling units and 24% live in detached units. Just below 5% have no proper dwelling units and live in shacks (CSO, 2002). Generally, the houses are not in good condition, some of the houses are made of poles and mud while others are constructed with the brick and mud but with no cement and so they are not properly built. The most common source of energy for household is wood, although over a tenth of households do not use electricity (Munyathi, et. al, 2008:16).

3.7 CONCLUSION

The chapter has discussed the changing trends of social development in Zimbabwe in three phases. These include; the colonial era of the 1800s-1980 which involved social welfare based on sectorial and racial discrimination; the independence phase of the 1980s-1990s which involved removal of all racial and sectorial discriminatory practices in social welfare and assistance in Zimbabwe; The last phase after the Structural Adjustment Programs from the 1995 to present 2014, which are inclusive of the cut down on social spending and more reliance on community participation with regards of social protection. Through this extensive literature provided by the chapter a better understanding is provided of Zimbabwe's perspective towards social protection.

The chapter also depicts legislation and policies intended to support children in Zimbabwe and the development of social cash transfers as the new form of social protection for orphans and vulnerable children. It can be observed that Zimbabwe has not been able to shed its colonial past. Zimbabwe had an opportunity at independence to make a break with the past, by advancing from a social ideology

orientation of the white coloniser which limited social provision. To develop a social protection system that shows greater commitment from the government by acknowledging the need to invest in social protection programs in order to eradicate poverty. It would appear that resource limitation constrained the hand of government in policy making (Midgley and Piachaud 2011: 129). Analysis from this chapter has shown that most social and cash transfer programs have lacked sustainability and failed to effectively address poverty particularly to orphans and vulnerable children who are the most vulnerable within a given society. Therefore there is need for Zimbabwe to show greater commitment politically, socially and economically to social protection through cash transfers in order to better tackle the poverty crisis.



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CHAPTER 4

RESEARCH METHODOLOGY AND RESEARCH FINDINGS

4.1 INTRODUCTION

This chapter constitutes the methodological framework and findings obtained by the study. The chapter further justifies the research method used by discussing the research instruments, target population, sampling and data collection procedures.

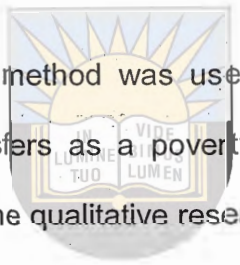
The participants included orphans and vulnerable households in Zvimba District which are inclusive of both beneficiary and non-beneficiaries of the Harmonized social cash transfer of Zimbabwe.

Further participants included government officials and child protection committee (CPC), who are representative members from the community who play an active role within the implementation of the cash transfer program. This chapter will also give a comprehensive outline of the research findings which are presented in the following categories; household's respondent's information, accessibility and sustainability of cash transfers, human capital, economic, health and nutrition impacts of the cash transfer to beneficiaries. Implementation of the cash transfer from government and community perspectives.

4.2 RESEARCH METHODOLOGY

Research methodology is a systematic way to solve a problem. It is a science of studying how research is to be carried out. Essentially, the procedures by which researchers go about their work of describing, explaining and predicting phenomena are called research methodology. It is also defined as the study of methods by which knowledge is gained. Its aim is to give the work plan of research (Rajasekar, et al, 2013:5). Crossman (2014:2) further explains that the focus is on participants'

perceptions and experiences and the way they make sense of their lives. Qualitative research is a research method that is used to understanding aspects of social life, by generating words, rather than numbers, for data analysis (Brikci and Green 2007:2). It is useful for obtaining insight into situations and problems concerning which one may have little knowledge. This method is commonly used for providing in-depth description of procedures, beliefs and knowledge. Exploring the reasons for certain behaviours including the opinions of respondents about particular issues (Snape and Spencer, 2003).



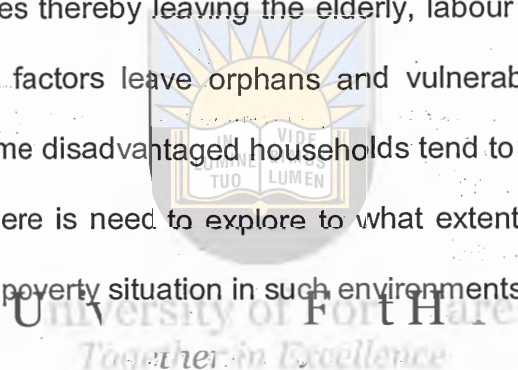
In the study, qualitative research method was used in order to understand and assess in great depth, cash transfers as a poverty alleviation strategy amongst orphans and vulnerable children. The qualitative research method gave orphans and vulnerable households the opportunity to express their opinion and views towards the cash transfer as a poverty intervention amongst them. By conducting a study inclusive of beneficiary and non-beneficiary households were a chance to articulate their opinion on the effects of the HSCT on their lives in relation to alleviating poverty amongst orphans and vulnerable children in the communities. The participants provided descriptive answers to open ended questions which gave a detailed description of the phenomena under study

4.3 TARGET POPULATION

The target population for a survey is the entire set of units for which the survey data are to be used to make inferences. Thus, the target population defines those units for which the findings of the survey are meant to generalize (Cox, 2010). In this research the target population involved orphans and vulnerable children within Zvimba rural district. The study tended to assess how cash transfers through the

HSCT program have been able to enhance social protection amongst the target group. The target population in this study provided the researcher with information or data that will be useful in regards to achieving the research objectives.

The study chose orphans and vulnerable households as the target population in Zvimba rural district. This is because orphans and vulnerable children tend to be the most vulnerable to poverty in any given society. Poverty tends to be high in the rural sectors of Zimbabwe, with the migration of economically active to urban areas and in search of greener pastures thereby leaving the elderly, labour constrained, illiterate and chronically ill. Such factors leave orphans and vulnerable children prone to poverty. Furthermore, some disadvantaged households tend to live in areas located in isolated areas, thus there is need to explore to what extent the government has been able to address the poverty situation in such environments.



4.3.1 DEMOGRAPHICS SAMPLED POPULATION

Table 1: PARTICIPANTS IN EACH WARD

WARD	2	3	5	11	13	7	22	25	19	28	24	30	33	35
PARTICIPANTS	4	4	3	7	5	3	2	7	2	6	4	3	6	4

The researcher was able to engage with 69 participants in 14 wards out of 35 wards in Zvimba Rural District. These participants included both 60 head of households who are taking care of OVC that are both beneficiaries and non-beneficiaries of the HSCT. The researcher conducted interviews with households heads included child headed households. A focus group discussion was also conducted in the study,

which involved mainly CPC members from the communities. The purpose of the group session was to obtain information on the targeting and selection procedures from the perspectives of the CPC members. CPC member's views were crucial to the study as they were the active members within the community who acted as medians between the community members and Department of Social Services. The study intended to focus more on the problems the CPC members when carrying out their duties of identifying and selecting orphans and vulnerable children legible for the cash transfer program.

4.3.2 AGE

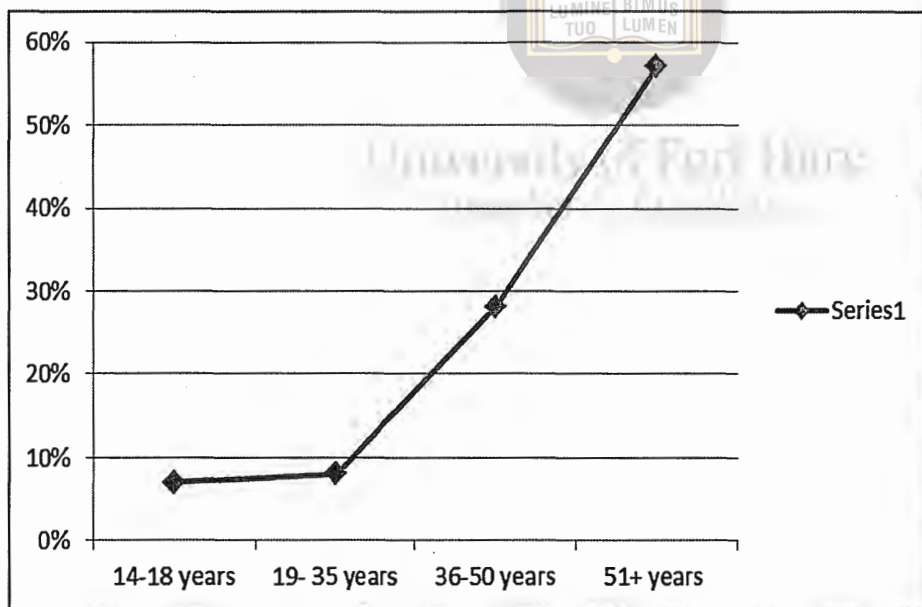
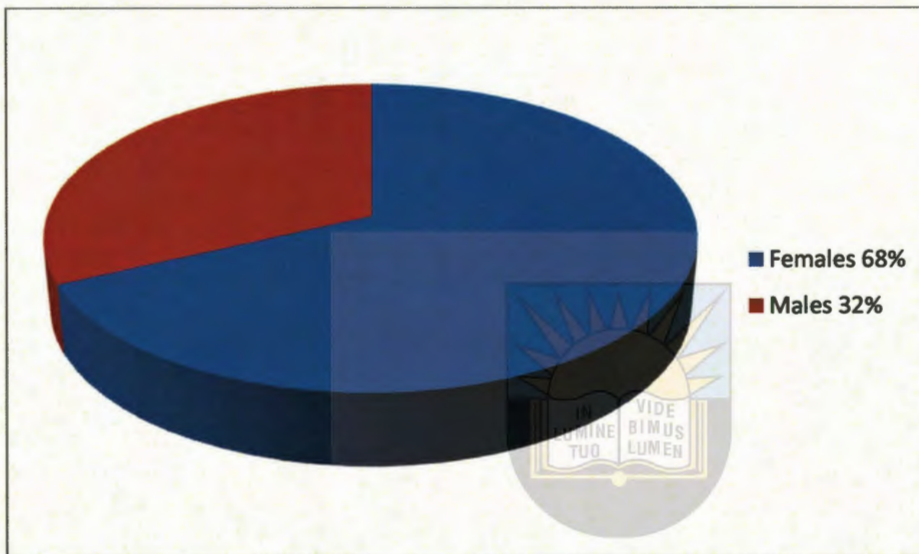


Figure 2: AGE RANGE OF HOUSEHOLD HEADS

The questionnaires distributed requested household heads to indicate their age. The age range varied from 14-18, 19- 35, 36-50, 51 and above. The mainstream of the respondents fell among the 51 years and above range. There were 34 (57% who were of the age range 51+ years). 17 were between the age range of 36-50years

which is 28%, with 5 (8% under the range 19-35) and 4 (7%) from the age range of 14-18 years (Indicating child headed households).

4.3.3 HOUSEHOLD INFORMATION



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Figure 3: GENDER

It has been observed that from this study there were more females who participated in the study. Approximately 68 % of the respondents were females and 32% males. An explanation for this large difference is that households headed by women are likely more to take responsibility for orphans. Not only do they take care of their own children, they are also prepared to take care of other orphans and vulnerable children. As a result female headed households usually have the highest dependency ratios. This also applied to households headed by children, in which the girl child took responsibility to take care of the family.

4.3.4 MARITAL STATUS

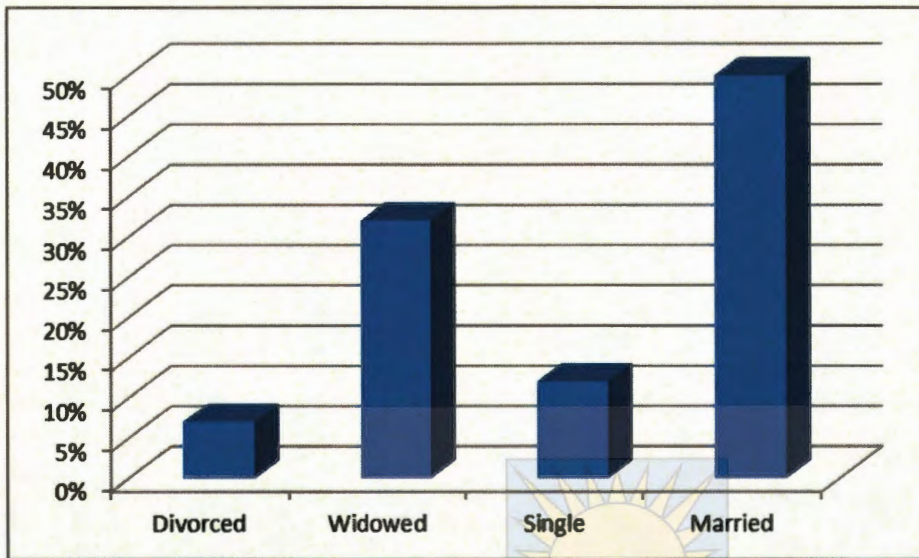


Figure 4: MARITAL STATUS

The study distinguished the marital status into four categories that is single, married, divorced and widowed. From the 60 participants who responded in the study, 4 were divorced, 19 were widowed, 7 were single and 30 were married. From the figure below it can be illustrated that 7% were divorced, 32% were widowed, 12% were single and 50% were married. The single category is inclusive of child headed household respondents and those participants who were never married. Whilst the married category consisted of those who felt the need to help orphans of deceased relatives. Divorced category constituted of mainly women who were once married and felt the need to care for OVC they were related to mostly for the need of companionship.

4.3.5 THE NUMBER OF DEPENDANTS

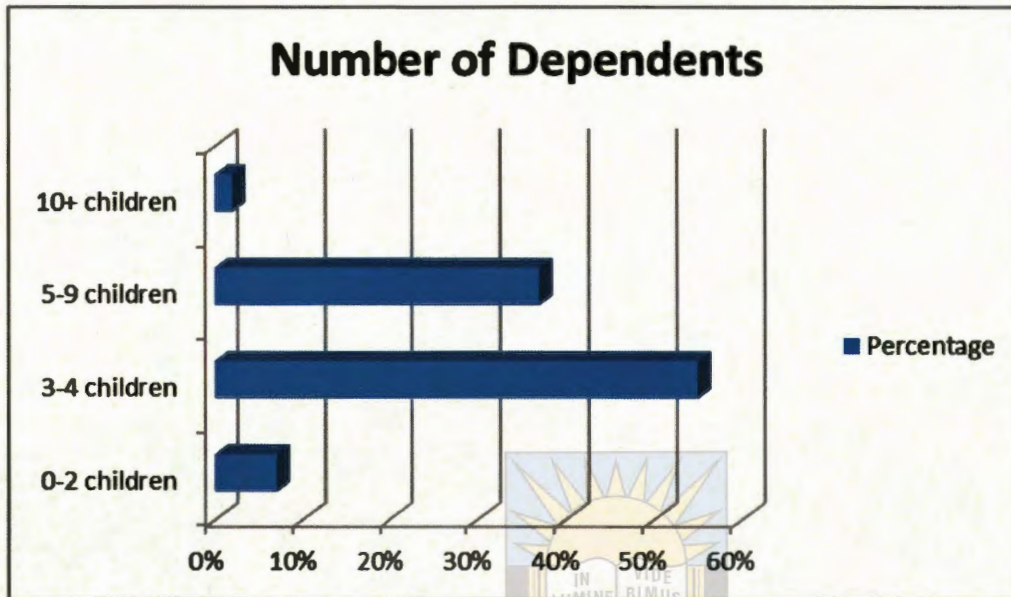


Figure 5: NUMBER OF DEPENDANTS

Number of dependants is a variable that may reflect vulnerability within a household. Interview guides requested respondents to indicate the number of dependants within their household. The number varied from 0-2, 3-4, 5-9 and 10+. It was observed that households in rural areas have large number of dependents, most of them being grandchildren. Analysis of the study showed that a large number of the respondents, that is 33, indicated that their dependents fell under the 3-4 range, which represented 55% of the respondents. 4 respondents (7%) indicated that their dependents were in the 0-2 range. 22 of the respondents (37%) indicated that the number of their dependents was under the range of 5-9 and only 2% were under the range of 10+ dependents.

4.3.6 THE OCCUPATION

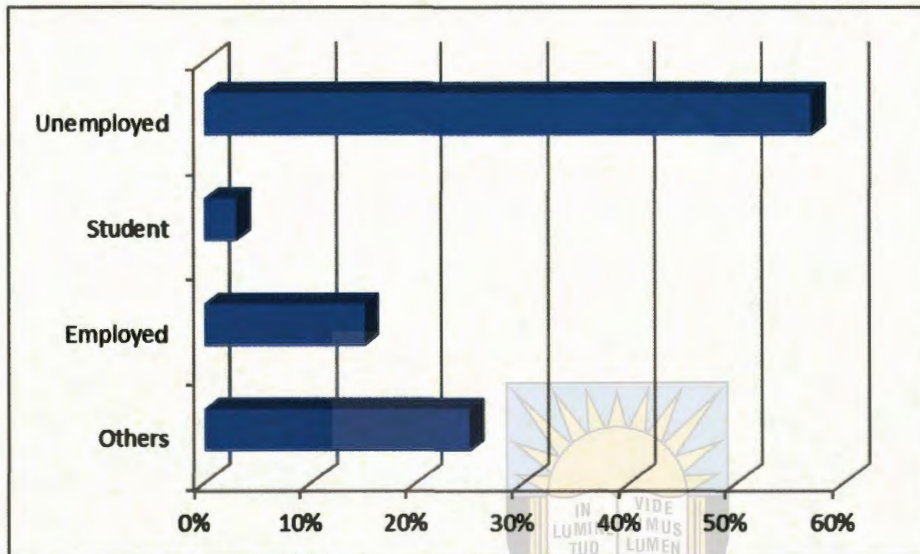
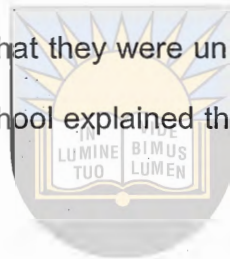


Figure 6: OCCUPATION OF RESPONDENTS

The study also requested respondents to indicate their occupation. Occupation can be reflective of sources of income for the household and status within society, which are all contributor factors towards obtaining a social cash grant. Occupation of the household head may also reflect the level of vulnerability within a household. This variable was divided into four categories that is student, unemployed, employed and other (such as entrepreneur, vendor, etc.). Approximately 57% (34 respondents) were unemployed and within the unemployed some of the beneficiaries were included. It was observed that most of them were unemployed due to the fact that they were elderly and chronically ill thereby making them labour constrained. 9 of the respondents (15%) were employed as teachers, farm workers, and engaged in piece jobs at local farms especially in times of harvesting. 15 of the respondents (25%) were in the other category which included small scale entrepreneurs, vendors, etc. 2 of the 4 were children who participated as head of households and were students.

It is important to note that the majority of the beneficiaries were found in the unemployed and other categories. During the course of the data collection it was observed that some respondents would indicate on two variables. For instance some respondents indicated that they were unemployed but engaged in small scale entrepreneurship through selling of fruits, sweets and airtime. In some cases child heads of households, would sell vegetables, fruits or freezits after school in order to obtain money for food or clothes. When put to them that it was against the law for children to engage in labour for survival, most of the respondents indicated that they had no option and others outlined that they were unaware of this. Those children (2 respondents) who did not attend school explained that they dropped out of school in order to provide for the family.



4.3.7 RELATION OF OVCS TO HOUSEHOLD HEAD

It was observed that just 32 children were under the guardianship of their grandmothers, while 11 children were being looked after by their mothers. Only 4 children were had their brother or sister as the head of the household, thereby resembling child headed households. 6 children were being taken care of by their fathers and 7 children were not related to their guardians. It was observed that the majority 53 children of the OVC were related and had known their current guardians before they started taking care of them. For those guardians that had taken in OVC, majority of them had indicated death of OVC parents as the reason for taking these children.

4.3.8 SAMPLING PROCEDURE

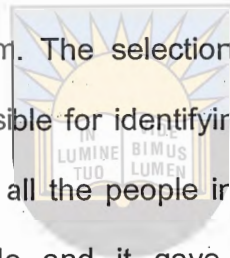
Purposive sampling, also known as judgmental, selective or subjective sampling, is a type of non-probability sampling technique. Non-probability sampling focuses on sampling techniques where the units that are investigated are based on the

judgement of the researcher. Purposive sampling is selecting a sample “on the basis of your own knowledge of the population, its elements, and the nature of your research aims” (Babbie, 1990:97). That is the population is “non-randomly selected based on a particular characteristic” (Frey, et al. 2000:132). The individual characteristics are selected to answer necessary questions about a “certain matter or product” (MacNealy 1999:157). It is important to note that the use purposive sampling means that the researcher understand the characteristics clearly and thoroughly enough to choose the sample and relate those findings only to that specific group and not to the population as a whole (Latham, 2007). With regards to the study purposive sampling was directed to orphans and vulnerable children households in selected wards in Zvimba Rural District. This is so to bring out the contrast of the role of cash transfers towards alleviating poverty amongst the OVC. Purposive sampling is appropriate as it enabled the study to focus on the selected population that are relevant to the study and provided relevant information.

4.3.9 UNITS OF ANALYSIS (SAMPLE SIZE)

According to (Frey et al. 2000:125), the sample method involves taking a representative selection of the population and using the data collected as research information. A sample is a “subgroup of a population”. Lohr, (1999:3) further outlines that the sample should be “representative in the sense that each sampled unit will represent the characteristics of a known number of units in the population”. In this research the sample came from orphans and vulnerable households within the Zvimba rural district. The study made use of purposive sampling method in the selection, mainly because purposive sampling gives the researcher justification to make generalisation of data obtained from the selected sample.

The study consisted of 69 respondents, which consisted of 60 respondents from orphans and vulnerable (OVC) households, 1 respondent from the Department of Social Services (DSS) mainly responsible for administrating the cash transfer program and finally a focus group which consisted of 8 respondents from the Child Protection Committee (CPC) members from respective wards. The researcher particularly looked at OVC households within the wards coming from Zvimba district rural areas as they were the main focus of the research. The households consisted of orphans and vulnerable children who were both beneficiaries and non-beneficiaries of the HSCT program. The selection also included child protection members (CPC) who were responsible for identifying and were more aware of the study area. Instead of interviewing all the people in Zvimba district, a sample was chosen because it is manageable and it gave in depth and more accurate information.



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The study also carried out interviews with the Department of Social Services (DSS) in order to understand the government's perspectives towards the cash transfer program in progress. There was need to understand the government's objectives towards the cash transfer, their implementation strategy and how far along they deem they have progressed. An interview was conducted with the social worker from the Department of Social Services (DSS) Zvimba district who was responsible for coordinating the cash transfer program.

4.4 DATA COLLECTION METHODS

In a qualitative study any number of strategies can be adopted when collecting data, including non-numerical questionnaires with open-ended questions, interviews (semi-structured and unstructured), participant observation, written texts such as

diaries or emails, and historical or contemporary documents (Ryan et. a, 2007:742). The study made use of semi structured interviews guides to obtain information from OVC household respondents, CPC members and respondent from the DSSO. The interview guide was basically designed in a way to get in depth information from the respondents. Interviews are by far the most common method of data collection and are mainly either semi-structured or unstructured (Holloway and Wheeler, 2002).

Using interview guides the study provided an opportunity for both the respondent and researcher to discuss emerging issues in much detail. The permission of the respondents was requested before the interviews were conducted. In this study interviews were carried out with Child Protection Committee members (CPC), who are mainly responsible for identifying and selecting beneficiaries for the cash transfer program. Furthermore the study conducted interviews with selective households of orphans and vulnerable children, both beneficiaries and non-beneficiaries. In Zimbabwe basically almost all functioning social-economic sectors are politically sensitive. Respondents were reluctant to comply; therefore the study ensured their confidentiality.

The purpose of the research interview is to explore the views, experiences, beliefs and/or motivations of individuals on specific matters (Britten, 1999). This ensures in depth findings in regards to the research, further aiding in the assessment of findings, thus accurate or reliable conclusions are brought about. The study also made use of secondary data in order to make assessment and comparisons of cash transfers programs to orphans and vulnerable children with other African countries.

4.4.1 FOCUS GROUPS

A supplementary type of qualitative research technique engages in interviews on a specific topic with a small group of people, called a focus group. This method can be efficient because the study can collect information about a number of people in one session. The group is usually uniform, such as a group of students, an athletic team, or a group of teachers. According to Wilkinson (2004) a focus group is an informal discussion among a group of selected individuals about a particular topic. A focus group, as a research method, 'involved more than one participant per data collection session. As such, the focus group method is sometimes referred to as a focus group interview, a group interview, or a group depth interview. Focus groups are group discussions which are arranged to examine a specific set of topics. The primary aim of a focus group is to describe and understand meanings and interpretations of a select group of people to gain an understanding of a specific issue from the perspective of the participants of the group (Liamputtong, 2009).

Methodologically, focus group interviews will involve a group of 9 people who come from similar social and cultural backgrounds or who have similar experiences or concerns. The focus group discussion was conducted with CPC members who came from different wards within Zvimba rural district. The researcher made use of focus groups due to the fact that they encouraged participation of respondents which enabled the researcher to obtain richer information in regards to their experiences as CPC members in the HSCT program. These Child Protection Committee members (CPC) are primary responsible for identification and selection of beneficiaries of cash transfers directed to orphans and vulnerable children. These representatives were selected from different wards, collective interviews conducted to try and understand their selection procedures and processes. Focus groups do

not aim to reach consensus on the discussed issues. Rather, focus groups 'encourage a range of responses which provide a greater understanding of the attitudes, behaviour, opinions or perceptions of participants on the research issues' (Hennink, 2007). The study conducted a session with focus group constituting Child Protection Committees members (CPC). Child Protection Committees comprised workers and volunteers with expertise in dealing with child protection issues and that meet regularly. CPC members operated on voluntary basis. There were dedicated to assist orphans and vulnerable children they did not receive form of incentive in relation to the services they provided. Discussion with the Child Protection Committee assisted in understanding the community role and contribution towards cash transfer provision and child protection.

4.4.2 SECONDARY DATA

Secondary sources were also used in this study with the intention of understanding the aspects revolving around cash transfers. The helped provide information required for the better understanding of the HSCT and the poverty situation of OVC in Zvimba rural district. Various secondary sources were used which included journals, published reports, published books, research documents, papers and reports. These sources assisted in supplemented fieldwork.

4.5 HSCT PROGRAM OUTCOMES

4.5.1 THE CONDITIONS OF OVC: MAGNITUDE OF OVC PROBLEM

The number of orphans and vulnerable children was reported to be increasing everyday as parents and guardians were dying at an alarming rate. The majority of key informants and community members cited HIV/AIDS to be the main cause of orphan hood. Generally, the orphans and vulnerable children living under difficult

conditions mostly are looked after by grandparents and widows with no reliable sources of income. Some were staying with cousins, aunts, uncles and other relatives while others were staying in orphanages. In some households with old grandparents, it was often the case that children would actually assume the role of head of household. There was also a number of child headed households in the district (Mashange, et al, 2008:17).

Housing conditions for OVC were very poor, with the majority of these houses needing some refurbishment or upliftment. Some OVC were said to be homeless and some houses were reported to have collapsed during the rainy season. OVC were living in pole and mud huts were in a particularly poor state. The OVC were reported to be facing a wide range of challenges and the commonly cited were; shortage of food, lack of school fees and stationery, clothing and shelter especially in child headed households. Failure to get these basic things is reported to be affecting the children psychologically and so care and love for the OVC are mentioned as important needs in their lives (Munyati et al, 2008:17).

4.5.2 CASH TRANSFERS ACCESSIBILITY PROCEDURES

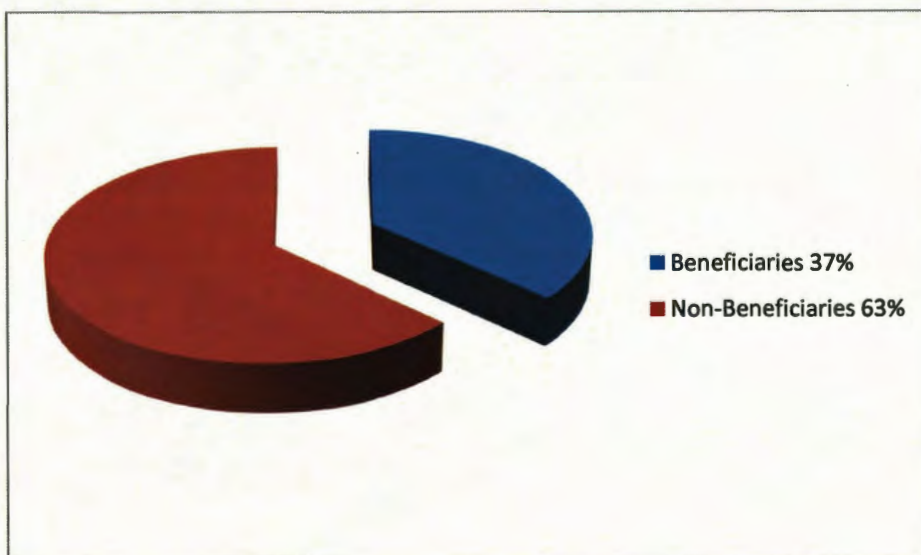


Figure 7: BENEFICIARIES AND NON BENEFICIARIES

22 households of the 60 respondents (37%) that indicated that they were beneficiaries of the Harmonized Cash Transfer Programme; indicated how they notified the CPC members within their ward. Households taking care of orphans and vulnerable children were requested to present their names to Child Protection Focal Committee members and in turn the Department of Social Services (DSS) came and assessed the situation of the OVC. Child Protection Committee members (CPC) would then request for the relevant basic identification documents of the OVC within the household, after being assessed the children's names were submitted to a list of pending beneficiaries to the relevant authorities that is the social workers from the Department of Social Services. However the majority of the respondents, 63% of interviewed households were not beneficiaries outlined of how they had submitted their names to CPC members but still have not received anything. Some of them argued that they were not aware of such a program and the procedures on how to acquire the social cash transfer.

4.5.3 THE HARMONIZED SOCIAL CASH TRANSFER DISTRIBUTION AND CONSISTENCY

Respondents who were beneficiaries of the HCTS outlined how they received their cash which is \$20 US dollars per month. They used to be notified of the days when the transfer would be available for collection; this has changed and the collection dates are now unpredictable. Some of the respondents expressed concern with the delay of the transfer in the previous months. 2 head of households of the beneficiary respondents outlined how the cash transfers had once skipped a couple of months before they were finally paid in their wards.

4.5.4 THE HARMONIZED SOCIAL CASH TRANSFER GRIEVANCES PROCEDURES

Respondents expressed concern about the grievances processes and procedures. They indicated that they take their grievances to CPC members within their ward. These CPC members in turn would take these grievances to the Department of Social Services (DSS) who are responsible for administering the cash transfer program. In most cases the respondents experienced delays in feedback and in some cases rarely received feedback. 19 head of households indicated that they were unaware of the criteria and procedures to take their grievances to.

4.5.5 COMMUNITY AWARENESS OF THE HARMONIZED SOCIAL CASH TRANSFER PROGRAM (HSCT) AND POLICIES PROTECTING THE ORPHANS AND VULNERABLE CHILDREN.

47 respondents of the OVC household sample confirmed that most people within the community were aware of the cash transfer program. However despite the program gaining reputation within the communities most people had lost confidence in the government funded programs. One respondent mentioned how most people tend to confuse the cash transfer program as an NGO fostered program. Those respondents that are not benefiting from the program have lost confidence to register as beneficiaries. One respondent argued that you have to know someone within the CPC members and traditional leaders in order to be a beneficiary. The 49 respondents of the head of households sample were not aware of the laws and policies that protect OVC. Other respondents argued that even government employees were not aware of the laws.

4.5.6 COMMUNITY PARTICIPATION TOWARDS THE CASH TRANSFER PROGRAMME.

Respondents expressed concern over the OVC plight and their interest to contribute towards the welfare of the OVC. Different perceptions were developed towards the cash transfer program. Most of the beneficiaries expressed appreciation of the cash transfer program as it intends to assist the efforts towards the care of the OVC. On the other hand non beneficiary households with OVC felt strongly that the government should expand the program so it could be inclusive of more households with OVC. However some respondents expressed concern over the selection criteria. They argued that they knew households with OVC who were extremely vulnerable to poverty. Though their names were submitted to CPC members they had not been attended to.

Their concern was that despite their contribution to identifying OVC within their community the selection of beneficiaries was done by CPC members and traditional authority who they do not trust in some situations. For example one respondent argues that if the guardian was politically affiliated there are higher chances of getting preferential treatment by traditional leaders during selection of eligible candidates. Thus selection of beneficiaries is not done on the basis eligibility but the social status of the guardian.

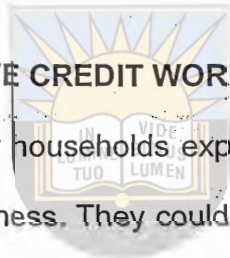
4.7 CASH TRANSFERS AND HUMAN CAPITAL DEVELOPMENT AND ECONOMIC DEVELOPMENT

4.7.1 INFLUENCE OF CASH TRANSFER TOWARDS CHILD'S EDUCATION

In regards to school attendance, beneficiaries showed positive remarks towards HSCT's impact on school attendance. HSCT beneficiaries explained how they were

spending a large proportion of their social cash transfers on school fees and educational requirements. The HSCT enable beneficiary household to negotiate payment plan towards the payment of school fees. Children now had few disruptions towards their attendance as they no longer faced problems of being sent back home because of school related problems. Furthermore the fact that they were HSCT beneficiaries meant they were also eligible for BEAM assistance. Thus respondents expressed how they used the HSCT to meet other school related requirement such as books, uniforms, food, etc.

4.7.2 CASH TRANSFERS IMPROVE CREDIT WORTHINESS



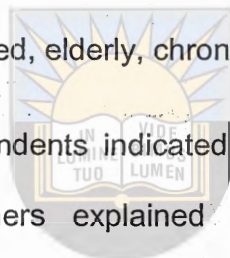
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Respondents who were beneficiary households expressed how the HSCT enabled them to increase their credit worthiness. They could acquire small scale debts from friends, neighbours and relatives due to the fact that they had some sort of income to look up to at the end of every month. In some circumstances the beneficiaries would be permitted to buy goods on credit and given a grace period of 4-6 weeks depending on the shop keeper and their relationship or how well the shop keeper knows the cash transfer beneficiary. However, some of the respondents outlined that some of the community members were hesitant to help due to the fact that at times the cash transfer was inconsistent and uncertain of the dates of distribution. Whilst the cash transfer was increasing the credit worthiness of beneficiary households they were wary of undertaking unnecessary borrowing.

4.7.3 ALTERNATIVE SOURCES OF INCOME FOR BENEFICIARIES

39 heads of household respondents indicated that they faced lack of money for basic needs OVC's food, school and clothing was their major constrain when taking care of orphans and vulnerable children. The study observed that more than half of the respondents (55%) indicated that they rarely had reliable sources of income that

would assist them. Although 22 out of 60 respondents of the OVC household group sample were cash transfer beneficiaries, they expressed concern over the cash transfer which at times delayed. Furthermore these beneficiaries indicated that the cash transfer of 20 US dollars per month was sometimes constrained by school related expenses particularly at the beginning of the year when schools are strict about school fees, uniforms and other related expenses. The 32 respondents of the heads OVC households sample who were not beneficiaries explained how their situation was not only worsened by the fact that they were not part of the HSCT but also that they were labour constrained, elderly, chronically ill, disabled, etc.



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However 4 household head respondents indicated that they engaged in periodic piece work at their farms. Others explained that they engaged in small entrepreneurship through the sale of fruits, vegetables, airtime and sweets. In most circumstances children are the ones who are assigned to these entrepreneurship activities after school and in some cases they do not attend school as happens with the 2 participants who were in child headed households.

4.7.4 CASH TRANSFERS REDUCE DISTRESS SALE OF ASSETS AND INDEBTEDNESS

Beneficiary respondents also indicated that the grants enabled them to reduce sale of assets and livestock of the households. Some of the respondents revealed how they at times sell their goats and livestock in order to pay for school fees and settle debts. The cash grants enabled many of the beneficiaries to reduce their debts. However there are some who indicated that despite receiving the cash grant they still depend on other sources of livelihoods as the cash grant was insufficient to meet the requirements of the households. Despite the few challenges, the cash transfer played a crucial role in retaining household assets. Nonetheless, there are non-

beneficiary households that are very poor and have nothing while looking after orphans; they have no cattle or goats, or even indigenous chicken even though they meet criteria to be receiving the cash transfer.

4.8 SOCIAL PROTECTION AND HEALTH AND NUTRITION

4.8.1 CASH TRANSFER PRIORITY SPENDING

Beneficiaries explicated that their main concern was feeding and keeping the children in school. One of the respondents outlined that “there is rarely any fertile land and the climatic conditions are poor to risk spending the child’s social cash transfer to agricultural inputs.” It was observed that the majority of the respondents spent a larger proportion of their cash transfer on household food requirements. The transfer increases the quantity and variety of food consumed. Some of the respondents indicated that they could now afford two meals per day, morning and evening. The most vulnerable and insecure beneficiaries’ households they purchased staple food (maize) and other basic foods that would enable them to sustain themselves for a longer period of the month as they await the next cash distribution. Basically the cash transfer has enabled beneficiaries to increase their access to food but was not sufficient for other basic needs of the beneficiary child such as clothing. One respondent explained how at times she felt ashamed about her children’s clothing. “The fact that my household is a beneficiary at times people within the community tend to give negative remarks towards the way I care for the orphans I have taken in due to the clothes they wear. They do understand that the amount is insufficient to also cater for the children clothing thus they think I’m misusing the child social grant.”

4.8.2 CASH OR FOOD TRANSFER

Respondents were also required to indicate whether they preferred social protection through food distribution or cash transfer. 20 beneficiary household respondents indicated that they preferred cash than food distribution. Reasons included cash provided them with greater options on food commodities to buy. Some of the beneficiary respondents explained that cash enabled them to cover small relevant costs that were encountered during the care of children such as transport money to hospital, payments of debts, school fees and other school related expenses.

Some respondents explained that at times they were forced to sell their food allocations in times of crisis, for example, in situations when a child is critically ill.

Some respondents indicated that food was difficult to sell and because you are desperate you would sell food stuff at a low price as compared to its market value.

Others stated that it was difficult to pay debts with food commodities. The majority of the non-beneficiary respondents also indicated that although cash had its added advantages as compared with food distributions, they were disappointed by the high exclusion experienced within the current cash transfers. CPC committee is made up of community members who are both men and women. They function as connectors between the DSS and beneficiaries. Each village is assigned two CPCs who are educated on OVCs and their duties in relation to the HSCT and other programs intended to support them. Some CPC members are assigned high positions such as Case Care workers who have the power to take measures when a child is facing any form of abuse in the beneficiary households. The CPC members outlined that they have power to take away a child facing abuse. The member can either stay with the child or refer him or her to the DSSO.

Another important aspect of the CPCs is that they are given the mandate to compile and submit names of potential beneficiaries for targeting. They have the power to decide who goes on the list and who does not. They have the power to influence the decision of the DSSO with regards to suspected inclusion errors, in the event that they suspect that someone was mistakenly captured to benefit they notify the DSSO for action. Besides this, the CPCs interact closely with beneficiaries and they meet with them once every month. They have managed to bring the beneficiaries together as a social networking group in which they share experiences, get taught on health and investment issues

4.8.3 THE ROLES AND RESPONSIBILITIES OF CPCs IN THE HSCT

- Disseminating information to beneficiaries
- Notifying the DSS when household head dies or migrates from the area
- Collecting and submitting names of potential beneficiaries to the DSSO for consideration
- Ensuring the safety of OVC especially in child headed households
- Make a follow up in case beneficiary misses his or her social cash transfer
- Stay in constant touch with beneficiaries
- Compile and submit monthly reports on their work to the DSSO

It was observed that though the CPC plays an active role in identifying the beneficiaries are not aware of the final selection criterion. They expressed that they had duly prepared and submitted to the DSS lists of potential beneficiaries who were left out though up to date nothing has been done. Some expressed frustrations as they were told to await the next phase of the cash transfer program to be conducted after 2 years.

Tensions were observed as some members expressed concern over the consistent involvement of the village heads whom they did not trust as they felt that these were biased and politically affiliated. Village heads were involved in the program as they closely interacted with CPC members and community grievances. Child Protection Focal persons of ward 3 and 5 explained that village heads in their ward submitted names of non-deserving beneficiaries to the DSS but nothing has been done up to present. Others argued that the DSS was hardly available to assist them with their grievances. When asked about the cash distribution dates the CPC members explained that at times they are informed late and that this pressurises them to sometimes cover up long distances by foot to notify beneficiary households. Though they had been promised bicycles they were meant to be given as part of their work it has not happened. Generally the CPCs demonstrated high level commitment and interest in the programme, however further support and capacity development is required for them to play an effective role in the implementation of this programme. Furthermore there is need to distinguish the participation role of these CPC members and traditional leader to avoid tension and manipulation.

4.9 GOVERNMENT'S PERSPECTIVES ON THE CASH TRANSFER PROGRAM.

4.9.1 THE EXTENT TO WHICH THESE PROBLEMS HAVE BEEN ADDRESSED

The respondent explained how after the cash transfer had been rolled out for the past two years; there are signs that the program has the potential to promote child protection. There has been improvement in household basic sustenance (food consumption) educational and health outcomes among others. Though it's too early to talk of graduation out of the programme, there are adequate signs that so

me households have built resilience and an ability to withstand future livelihood shocks. Other impacts may be visible later on, particularly impact on child labour and child exploitation. Furthermore the government still needs to develop the Department of Social Services (DSS) capacity to implement the cash transfer programme in order to deal with the increasing number of orphans and vulnerable children and bolster community participation towards the care of orphans and vulnerable children.

4.9.2 STRATEGIES TO ACHIEVING PROGRAM GOALS

The respondent indicated that the programme targets food poor and labour constrained households. Labour constrained households are mostly made up of the elderly 55+, chronically ill, disabled and children below 18 years. The programme delivers cash, links households with other livelihood programmes and community nets for example educational support, health assistance. The Programme is also hinged on a national case management system that seeks to capacitate national and sub-national structures to adequately respond to the needs of children. The programme is not universal, but is targeted at those households meeting the eligibility criteria. It has no universal coverage, but is being implemented in 20 select districts, whose poverty assessment survey results and vulnerability assessment results show the prevalence and incidence of extreme poverty. The overall plan is to continue scaling up depending on the availability of resources.

4.9.3 PROGRAM SELECTION CRITERIA AND ACCESSIBILITY OF SERVICES BY BENEFICIARIES

The respondent explained that the programme uses proxy means testing combined with elements of community based verification to identify food poor and labour constrained households. A household is expected to meet both criteria to be eligible. The proxy means testing uses a census approach in which all households in the

designated locality (district) are enumerated and those eligible are identified. To cut on end-user costs, targeting is done in the community; after which cash is disbursed to beneficiaries in designated ward focal points. Due to financial and human constraints the department would at times make use of community based targeting. Beneficiaries are expected not to travel more than 5km to a respective pay centre. Beneficiaries are given "hard cash" at the pay points. Though heads of beneficiaries households are expected to have basic identity particulars, where these are not available, beneficiaries can still access their cash. They are however encouraged to get these requisite documents, where possible to ensure that they have access to other services that may require such documents.

4.9.4 COMMUNITY INVOLVEMENT IN THE CASH TRANSFER PROGRAM.

The respondent outlined that initial targeting is done in a deceptive manner which tries to maintain confidentiality and mislead the community elite and leaders who might try and to manipulate the identification and selection process of eligible beneficiaries. After which a community verification exercise is done with key community focal persons to verify the results of the targeting. This latter phase aims to flag out inclusion and exclusion errors, and to build on community knowledge to address these. Child Protection focal persons (CPC) monitor beneficiary households to ensure child welfare issues are prioritized within the households. The CPC also follow up on households which fail to collect cash to establish reasons for failure. The CPC mobilise communities for cash disbursement. CPC are trained in all programmatic issues, and are resource persons at community level.

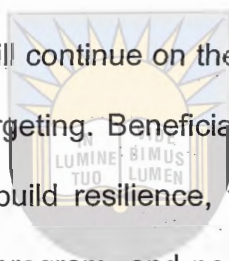
4.9.5 MONITORING AND EVALUATION OF THE PROGRAM.

Responsible implementers of the program include:

- Targeting is done by a DSS which contracts independent organizations such as (Zimstats) and also with assistance from CPC members.
- CPC (volunteers) mobilise the community
- DSS staff at district level administers the program
- MIS-DSS head office handles data transfer and data bank,
- Unicef provides technical backstopping

4.9.6 CRITERION USED TO TERMINATE SUPPORT UNDER THE PROGRAM.

The program runs on a two year cycle after which retargeting is done. If existing beneficiaries are still eligible they will continue on the program while those no longer eligible are removed after the retargeting. Beneficiaries are expected to invest the cash in restoring livelihoods, and build resilience, to ensure at end of the 2-year cycle, they can graduate from the program, and possibly graduate from poverty as well.



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4.9.7 POLICIES GUIDING THE IMPLEMENTATIONS OF THE PROGRAM

National orphan care policy which strives to encourage and maximise community participation in regards to the care and welfare of orphans and vulnerable children living in poverty (OVC). The National orphan care policy also led to the formation of the National Action Plan for orphans and vulnerable children (NAP for OVC) which is primary responsible for the implementation of the cash transfer program. The cash transfers are espoused within the National Action Plan for Orphans and Vulnerable Children (NAP for OVC II) which has a thematic area of strengthening the household economies of ultra-poor households so as to improve their child care.

4.9.8 CHALLENGES FACED BY THE DEPARTMENT OF SOCIAL SERVICES IN ADMINISTRATING THE PROGRAMME.

The respondent indicated that financial and human resources required to support the community participation within the implementation are the main challenges faced by the DSS. This has inhibited their active participation within the identification, selection, and implementation and monitoring of beneficiary households. Thus the department has mainly been dependent on the active participation of community members mainly the CPC and village heads. The DSS at the moment currently has two social workers mainly responsible for coordinating the cash transfer program of the whole Zvimba district which consists of 35 wards. Furthermore, the mobility of the DSSO members is impaired by the unavailability of transportation specifically allocated for the department. As a result, for assistance the DSSO has to request assisted from relative stakeholders such as the Ministry of Education, Culture and Sports, National Action Council (NAC) and the Zvimba Rural Council to assist them.

4.9.9 CONCLUSION

The cash transfer in Zvimba rural district has played a major contributor role in better enabling labour constrained households to take care of orphans and vulnerable children. The beneficiary households have moved from struggling to meet survival needs to meeting daily requirements. They are now better able to meet food requirements and diversified household diet. The Harmonized cash transfer has helped reduce sale of household assets, improved beneficiary household creditworthiness, improving health and nutrition of orphans and vulnerable children. Furthermore the cash transfer has improved children's access to education by reducing the number of orphans and vulnerable children withdrawn from school due to failure to pay school fees. It has enabled beneficiary households to meet other

school requirement. However, though the cash transfer has played an active role in enhancing the beneficiary households' economic capacity to address poverty amongst the OVC, there is still need for the government to develop its capacity to better implement the cash transfer program. The number of OVC living in poverty is still high and unattended. As the study has shown from the study were 22 out of 60 household respondents have benefited from the HSCT. This chapter has depicted how many eligible OVC households have been excluded. Though the community shows high commitment towards the care of orphans and vulnerable children, the government of Zimbabwe still has to develop its capacity to develop the community's commitment into actual valuables. The HSCT in Zvimba rural district has a lot of gaps which require state commitment in terms of financial, human and other resources required in cash transfer program. Though the study has shown that the HSCT has great potential in assisting the poverty situation amongst orphans and vulnerable children in Zimbabwe, the implementation gaps still have to be addressed in order to avoid manipulation and other problems that may prevent the HSCT from achieving its goals in eradicating poverty in Zimbabwe.

CHAPTER 5

HSCT EFFECTS AND IMPLEMENTATION CHALLENGES

5.1 INTRODUCTION

This chapter mainly constitutes an analysis and discussion of the findings obtained by the study with regards to cash transfers as a poverty intervention in Zvimba Rural District. Analysis would be made on whether the intended objectives of the study were fulfilled. The chapter will review the role, prospects and challenges faced by the government in implementing cash transfers in rural Zimbabwe. The chapter highlights the gaps in the current social protection mechanisms in sufficiently dealing with the OVC situation thereby suggesting the need to implement social cash transfers from sustainable livelihood perspective to replace some of the current social protection mechanisms. Using sustainable approach the chapter assesses the study objectives, whilst making use of comparative literature and case studies from different countries in order to illustrate and clarify the main points shown in the study.

5.2 ROLE AND EFFECTS OF THE HARMONIZED SOCIAL CASH TRANSFER ON CHILD POVERTY

5.2.1 IMPROVE FOOD SECURITY AND NUTRITION

The HSCT improved access to food through cash grants helped develop other livelihood activities crucial to the child's development capacity to sustainably graduate out of poverty in the future. DFID, (2012)'s livelihoods approach supports this view, as it considers people's assets and constraints, is a valuable tool for finding ways to improve food access of poor people. Access to financial assets (cash transfers) can improve food accessibility and security. The study observed that

through the HSCT, beneficiaries were better able to access to food, which in turn enabled them to improve their access to other livelihood outcomes crucial for the children such as improvement in health, school attendance and learning abilities. Households with poor food access and/or poor food utilization tend to suffer more from illness or other physical debilitations thereby impairing their labour productivity and/or their ability to engage in livelihood activities (Woller, 2009: 8). Hence, food security should be given much priority in improving children human development and poverty alleviation in general. In Kenya and Zambia despite the fact that the benefiting households were already considered to be food poor, improvements in food availability was noted by the measurement of the amount and number of meals per day among OVC under cash transfer program carried out in 2004 and 2005 respectively (DFID 2005: 15, 18).

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5.2.2. IMPROVED CHILDREN'S ACCESS TO EDUCATION

The essential role of education cannot be neglected in any attempts to alleviate poverty amongst orphans and vulnerable children. This is mainly because education is not only viewed as a consumption good but also as an investment (future employment prospects and better income) by both parents/guardians and children in any society. Analysis of information obtained from the field work of the study reflected that though the harmonized cash transfer was directed to OVC household's wellbeing and not child's education, parents or guardians seemed content about their children's education. The cash transfer was not sufficient to meet any real educational needs and requirements but parents or guardians made an effort to meet some of the school requirements. The amount 20 US dollars that the children receive is not sufficient and is only used to cater for day to day households survival needs of orphaned families.

OVC who were benefiting from the cash transfer were supposed to automatically be eligible for the BEAM program but due to the high number of OVC who have been excluded from the cash transfer program community members tended to excluded HSCT beneficiaries from the BEAM program in an attempt to rationalize the assistance. However the cash transfer did contribute to increasing the school attendance for the beneficiaries due to the fact that the transfer meets beneficiary's food requirements. Increase in attendance was reflected in both primary and secondary education. HSCT beneficiaries' attendance rates for primary school were high at over 80 % and 75% for secondary school-age children. This correlates to the sustainable livelihood approach which advocates for poor households' assets portfolio, livelihood strategies among recipients and the contribution of cash transfers to these livelihoods. Cash transfers contribute to enhancing households assets. The main asset for the poor people is human capital that includes education, skills and good health (Tembo and Freeland 2009:1). In South Africa the Child Support Grant is positively correlated with the beneficiary attending school: grant benefit appears to decrease the probability that a school-age child is not attending school by over half (Williams, 2007). In Namibia, interviews with a grade 12 class found that participation of 14 out of 16 learners was solely due to their grandparents receiving a pension (Devereux, 2010).

This was however in contrast to non-beneficiaries who struggled to meet their food requirements thus their school attendance was at a minimum as they tended to engage more in labour related activities in an attempt to meet their survival needs. There seems to be a relationship in regards to child labour, household income and education as consistent with findings from researches carried out in Brazil in 2003 and in 2008 on the effects of household income on child labour and education

(Cardoso and Souza 2003, de Carvalho 2008). Brazil's Bolsa Escola (now Bolsa Familiar) Conditional Cash Transfer Program was nationalized in 2000 to reduce child labour whilst increasing school attendance. Apart from some positive results recorded, it was also noted that the amount of income forgone by children was actually more than that received from the program (Gustafsson-Wright and Pyne 2002), suggesting that it is possible for household income support to reduce child labour and make improvements in school attendance even where no conditions exist.

5.2.3 CREATION OF INCOME GENERATING PROJECTS

Generally, cash transfers should allow the chronically poor, a guarantee that they will be able to meet their basic needs throughout the year without selling their productive assets. Receipt of cash transfers should also provide small amounts of capital for investment in productive activities, such as agricultural implements and tools, giving recipients the opportunity to not only protect but also improve their economic wellbeing (Vincent & Cull, 2009). In relation to the sustainable livelihood approach, Chambers (1988) outlines that the risk of livelihood failure is determined by the level of vulnerability of a household to income, food, health and nutritional insecurity. The greater the share of resources devoted to food and health service acquisition, the higher the vulnerability of a household to food and nutritional insecurity. Therefore, livelihoods are secure when households have secure ownership of or access to resources (both tangible and intangible) and income-earning activities, including reserves and assets, to offset risks, ease shocks and meet contingencies. Households have secure livelihoods when they are able to acquire, protect, develop, utilize, exchange and benefit from assets and resources (Ghanim, 2000).

Devereux (2002: 672) outlines that tiny cash transfers are often invested in income generation activities, education and acquisition of productive assets implying that they can play a key role in reducing chronic poverty. In the Kalomo social cash transfer scheme in Zambia 29% of transferred income was invested, either in purchases of livestock, farming inputs or informal enterprise (MCDSS/PWAS/GTZ, 2005). The increase of ownership of small livestock was particularly noteworthy: seven times as many households owned goats, and the ownership of chickens increased by 15 percentage points, 71% of all households indicated that they had invested part of the cash, and 52% of them indicated that they had generated extra income (MCDSS/GTZ, 2007). Evidence of investment in assets is also reiterated from cash transfer schemes elsewhere, for example a recipient of the Child Support Grant in Mdantsane, South Africa explains “I sell sweets and biscuits so that I don’t run out of paraffin. I buy them from the child support grant. I do this so that when the child support grant runs out, we are not in darkness” (Surender et al., 2007). In Swaziland the prospect of a guaranteed income through the Old Age Grant provides access to farm inputs on easy (concessionary) terms, and particularly through agricultural cooperatives and credit unions (Dlamini, 2007).

In Zvimba rural district, the amount of 20 US dollars is too small for the households to engage in any major income generating activities. Respondents were able to restrict from selling their households assets and engage in small income generating activities such as selling airtime, sweets, vegetables, etc. There were also able to purchase small livestock such as chicken, goats that boosted their household economy and reduced risks of vulnerability. Such activities helped the household supplement their cash transfer amount and meet other basic needs that were particularly relevant to the children’s welfare. However some respondents indicated

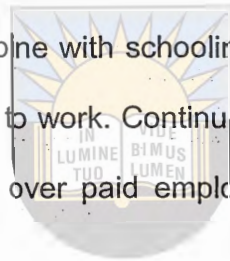
how they were hesitant to divert the money to such activities as the purchase of agricultural inputs as they were aware of the risks, Furthermore the study observed that failure to engage in major income generating activities was due to the nature of vulnerability of the beneficiaries. The fact that most of the beneficiaries were elderly and chronically ill diminished their capacity to engage in income generating activities especially those that required much considering the fact that some of the beneficiary households did not have economically active members.

5.2.4 REDUCATION OF ECONOMIC EXPLOITATION OF CHILDREN

Child exploitation refers to the use of children for someone's advantage, gratification or profit, which often results in unjust, cruel and harmful treatment of the child. These activities are often of impairment to the child's physical or mental health, education, moral or social-emotional development (SAVE, 2012:6). Orphans and vulnerable children due to their vulnerability nature in their struggle for survival are often victims of manipulation, misuse, abuse, victimization, oppression or ill treatment. Analysis from the study observed that orphans and vulnerable children in Zvimba rural district, who were not beneficiaries of the cash transfer grant tended to engage more in work activities in their strive for survival. This was more prevalent in child headed households and other excluded OVC households. Despite being in a family environment they engaged in activities such as selling of fruits, vegetables and be employed to the local farms especially during the harvest session. This affects their education as they tended to be more absent from school and engage in employment in their strive for survival and attempts to supplement household income.

The vulnerability nature of OVC impairs their ability to develop livelihood outcomes that can enable them to graduate from their poverty circumstance. DFIF (1999:3) acknowledged that, "the factors that make up the Vulnerability Context are important

because they have a direct impact upon people's asset status and the options that are open to them in pursuit of beneficial livelihood outcomes." In Cambodia, a recent study of a scholarship program involving modest transfers conditional on school enrolment of children of middle-school age found that recipients were over 20% more likely to be enrolled in school and 10% less likely to work for pay. A separate survey of CTP in Latin America and the Caribbean likewise concludes that they are effective in reducing child labour (IPEC, 2010). Explanation being that the additional income allows families to feel that they can afford to continue schooling. In addition paid employment is difficult to combine with schooling because of constraints in the minimum number of hours required to work. Continuing in school induces families to choose unpaid economic activities over paid employment (Edmonds and Norbert, 2011).



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5.2.5 ALTERNATIVE CARE FOR ORPHANS AND VULNERABLE CHILDREN

Alternative care can be taken as a form of informal or formal care, kinship care, foster care or other forms of family-based or family-like care replacements, residential or supervised independent living arrangements for children (SAVE, 2012:40). The government of Zimbabwe mainly advocates for community based care with institutional care being the last resort. The availability of a cash transfer is more likely to motivate community members to take care of OVC within the community. Analyses of the cash transfer grant in Zvimba rural district observed that beneficiary OVC households were more motivated to take care of orphans and vulnerable children due to the fact that they had support from the government to look up to. This was however in contrast with the households that took care of OVC, but were excluded from these social cash transfers.

Lack of financial support results in the deterioration of their economic households thus in most cases the OVC had to assist by engaging in income generating activities in order to support the household. Though the poor are willing to the care of OVC, lack of financial support impairs their contribution capacity to assist the OVC. Kollmair and Gamper (2002:7), acknowledged that among the five categories of assets financial capital is probably the most versatile as it can be converted into other types of capital or be used for direct achievement of livelihood outcomes (e.g. purchasing of food to reduce food insecurity). However, it tends to be assets that are the least available for the poor and this makes other capitals important as substitutes. In 2008 in Goma Congo under exceptional circumstances, due to the high number of separated and unaccompanied children identified and needing care arrangements rapidly, Save the Children set up FATs in camps on a voluntary basis. These FATs did not receive any money for the children in their care, though they benefitted from non-food items (NFIs) and food distributions given to the fostered children, which could be used by the whole family. Programme staff acknowledged that the fostering scheme in the camps was much more problematic. Most children placed with families were used for labour/household chores, more so than biological children. When receiving food and NFI distributions, foster families often took the food to feed their own children first, although some of this can be attributed to the disruption of livelihoods opportunities and comparative lack of financial support given to the caregivers (Save the children, 2012:14).

5.2.6 REDUCTION OF VIOLATION OF CHILDREN'S RIGHTS

Violation of children's rights may be one of the contributing factors to child poverty. Children have the right to food, education, health services and shelter. Orphans and vulnerable children because of social and economic deprivations tend to struggle in

accessing these rights. Analysis of the study observed that cash transfers play a role in fulfilling these rights. The fact that cash transfers improved beneficiary's access to food, education and health services reflected a positive movement towards the fulfilment of the rights. However the study also observed that this was not the case with OVC who had been excluded from the cash transfer program. Due to lack of awareness of the existence of social cash grants and lack of documentation required to be an HSCT beneficiary some eligible beneficiaries were excluded but in some cases the DSS was lenient enough to incooperate eligible beneficiaries that did not have enough documentation. The livelihoods approach recognizes the importance of enhancing accountability, though it takes as its starting point a need to understand the livelihoods of poor people in context. From this starting point it then tries to identify the specific constraints which prevent the realization of people's rights and consequently the improvement of their livelihoods on a sustainable basis (DFID 1999). Cash transfers present a sustainable approach to child poverty by removing the barriers that prevent children from accessing their rights to basic needs.

5.3 CHALLENGES OF IMPLEMENTING CASH TRANSFERS IN ZIMBABWE

5.3.1 INADEQUATE INSTITUTIONAL CAPACITY

Institutional capacity is essential for the fulfilment any social policy particularly social protection program such as cash transfers. According to Samson (2009: 54) "government administrative capacity in many low-income countries is limited, particularly in the social ministries that are usually responsible for social protection. It is vital to ensure that implementation program is sufficiently well-resourced at both national and local levels. Districts often operate in an environment with inadequate human resources, office facilities, transport, communications and field infrastructure."

The study acknowledged that there is limited institutional capacity to support community participation in Zvimba rural district. Evidence from the study has shown that the Department of Social Services (DSS), a government institution responsible for mainly implementing and coordinating the cash transfer program in Zvimba rural district, hardly has the resources necessary for effective implementation and monitoring of the cash transfer program. The DSS in Zvimba rural district has 2 social workers responsible for a district of 35 wards operating in a low budgetary forum. Due to lack of financial and human resources the DSSO capacity to effectively implement the HSCT and support and monitor community participation is restricted. Thus as a result potentially eligible beneficiaries are excluded within the identification and selection process hence limiting the accessibility of the cash transfer and other social protection interventions. Cash transfer is easily manipulated by community elite as the responsible government authority (DSS) lacks monitoring capacity.

This correlates with the livelihoods approach emphasis on the importance of macro level policy and institutions to the livelihood options of communities and individuals. The approach advocates for the bridging of the gap between macro and micro policy levels by enhancing the capacity of government institutions that interact with the community, thereby enhancing the capacity of the government institutions to support and monitor the community members in cash transfer programming (DFID, 1999). Garcia and Moore (2012) noted that in Zambia administrative capacity threatened the expansion of the cash transfer to other districts. They argue that the administration was short staffed and relied heavily on teachers and health workers in communities, who also had other responsibilities and could not commit themselves to the program. Most DSWO have inadequate accommodation such that increasing

the number of staff will be a serious challenge. Before rolling out a social cash transfer to a district, it is important that it should have adequate physical assets and infrastructure. The MCDSS should also review and improve the monitoring and evaluation system to ensure that there is adequate and good quality information for strategic decisions (Chiwele 2010:5).

5.3.2 COMMUNITY POWER STRUCTURES

The study observed that there were community power structures within the implementation of cash transfers in Zvimba rural district. These power structures such as counsellors, village headmen, traditional chiefs, etc. who negatively affected the transparency and accountability within the program. The fact that the cash transfer program was highly dependent on community members especially with regards to identification of beneficiaries made the cash transfer more vulnerable to manipulation. The situation was further worsened by the weak institutional capacity DSSO which faced difficulties in verifying, supporting community participation, monitoring and evaluation of the program due to financial and human resources constrains.

The study observed from its group discussion with CPC members that the cash transfer was vulnerable to manipulation from traditional leaders and other community elite who were largely politically affiliated. The sustainable Livelihood approach tends to undermine or overlook the inequalities of power within communities that can surely be influential for worsening of poverty. Power relations can have a negative impact of the contribution capacity of social cash transfers as community elite try to manipulate the program politically for their own personal gains (Moser, 2005). In some villages in Nigeria, it was noticed that households who received the transfer were taxed by the head of the village or the person in charge of writing the list of

beneficiary households (UNICEF, 2009). Farrington et al., (2007) report that in the case of the Productive Safety Net Programme PSNP in Ethiopia the most common reported problem is the pressure on the task force members to include their friends and family in the beneficiary lists. In addition, opposition supporters were excluded from the program and ruling party members made promises about inclusion and resource levels.

5.3.3 LOW BUDGET AND POLITICAL WILL

The study observed that out of the OVC households in Zvimba rural district slightly above 22 of the OVC head of households respondents were beneficiaries of HSCT, indicating high social of exclusion. The study also acknowledged that HSCT in Zvimba targets 20 wards out of 35 wards within the district indicating showing a limited number of OVC are targeted by the program. The primary reason for this is that there is lack of political will and low budget funded by the government towards social protection particularly cash transfers. The benefits of investing in human development, in as much as they appear noble, does not seem to be a priority for most politicians and policy makers (Kaseke, et al 1998). The livelihoods approach is also still perceived by many project planners and policy-makers as complex, and requires more administrative and financial flexibility to develop and implement than a more conventional approach firmly rooted within one sector or discipline (Conway, (2002:1). Inequalities of power and conflicts of interest are not sufficiently acknowledged by the sustainable livelihood approach (Murray 2001).

Lack of political will is a major challenge in determining the success of cash transfer programs. The implementation of cash transfers depends largely on the extent to which politicians are prepared to channel resources towards the realization of policy objectives (Ncube 2011). Such detrimental circumstances have affected the DSS

capacity to deal with the OVC crisis in Zvimba rural district as they basically do not have adequate resources relevant for their effective and efficient operation of cash transfers.

5.3.4 INADEQUATE HUMAN RESOURCE CAPACITIES.

The study observed that limited human resource capacities have constrained most stages of the program implementation. As a result there has been a shortcoming in the effect capacities of the program and which has received little attention from the national policy makers. In some cases staff members of the DSS have not been able to carry out their crucial role of means testing, supporting community participation within the care of OVC and other implementing activities due to the fact that they have to take care of their core professional social work tasks such as probation work, rehabilitation, administration work, etc. The DSS staff is basically overwhelmed with their social work task that they struggle to effectively participate in the program implementation, support, monitoring and evaluation on a regular basis.

This has been evident from high complaints from community members on the unavailability of the DSS staff, high errors of inclusion and exclusion and weak grievance procedures. This has resulted in most OVC households' dependence on CPC members who are at times unskilled professionally towards the HSCT program and merely relay information to the DSS. Furthermore, the CPC members tended to complain about the pressure they endure from the tasks in the HSCT which have tended to compete with their own livelihoods activities. Such a constrain has limited OVC households who are beneficiaries and non-beneficiaries as they are left unsupported with limited access to assistance from the DSS with regards to the HSCT and care of OVC. This limited accessibility due to lack of human resources on the part of the government is in contrary to the sustainable livelihood approach which

argues for a thorough scrutiny of existing policies and institutions that help in sustainable livelihoods. This indicates that there is a need to look beyond individual organization (community participation) but to consider partnerships with policy makers, in most cases the government (DFID 1999). For instance, the lack of human capacity negatively affected program implementation in the Katete SCTS of Zambia, in which the government initially had underestimated the demand for human resources in the design of the program. As a result there were some difficulties in the application of means testing criteria of selecting potential beneficiaries due to the low literacy at community level and low human capacity on the part of the government. Due to the high demand, other services provided by the Department of Social Welfare were suffering in the district as attention turned to the implementation of the social cash transfers. Though the Government of Zambia had turned to volunteers within the community for support, lack of a form of incentive, limited resources to carry out tasks and low and irregular transfers tend to demotivate committees (Chiwele 2010:5).

5.3.5 TARGETING PRECISION

Targeting is complex and can present a major challenge when implementing cash transfers, particularly when it comes to the selection of beneficiaries. This is due to the fact that targeting has the high risk of inclusion and exclusion errors. In Zimbabwe the DSS makes use of the proxy-means testing using household characteristics which are indicative of poverty such as productive assets and categorical for example based on physical status and age targeting criteria which have a higher likelihood of identifying the poor and deserving. However because of the costs of targeting and capacity constraints, the DSS frequently tends to use community based targeting which involves making use of community members who

have the advantage of knowing of the extremely poor and disadvantaged within their communities. These approaches are more transparent and are likely to receive public support.

However reliance on community based targeting has the risk of manipulation by community leaders. Evidence from the study reflected the concern of the CPC members in Zvimba district regarding the tendency of traditional leaders and community leaders to select potential beneficiaries on the basis of political affiliations. The scale of these errors and the balance between exclusion and inclusion is determined by the fit between the intended coverage level, the targeting method used, and the national poverty profile (Arnold, et al 2011:53). The general observation by experienced practitioners is however that targeting errors of inclusion and exclusion are inevitable in development interventions, but effort should be made to keep them minimal (Taylor and Seaman, 2004).

In 5.3.6 LACK OF COORDINATION OF COMPLIMENTARY SERVICES

In order to maximize the contribution capacity of cash transfers distributed, there is need to link the beneficiaries with other social protection services thereby minimizing unforeseen expenses and enhancing human development capacities so as to permanently graduate from poverty. The design of the HSCT initially intended benefiting children of the cash transfer to automatically benefit from other social protection programs such as the BEAM which covers education tuition and Medical assisted treatment orders (AMTO) free medication provision in government hospitals. However, evidence from the study acknowledged the realities in communities is that eligible beneficiaries are excluded from other social protection programs. This is mainly due to the high exclusion of eligible beneficiaries from the

HCST as a result community members tend to compensate the OVC that had previously been excluded from the cash transfer program.

5.3.7 DEPENDENCY SYNDROME, GRADUATION AND EXIT STRATEGIES

In reality graduation from social protection programs in developing countries has proved to be a problematic objective in many respects. The general aim of most social protection strategies particularly cash transfers is to enable beneficiaries to graduate out of poverty and be self-reliant after a certain designated period of time.

According to Handina, (2010:46) “most cash transfer programs have no clearly defined exit strategies. Assisting communities with cash transfers is quite noble as a social protection initiative, but this will require an associated exit package such that you do not provide cash transfers for the household for life.”

Analysis of the evidence from the study acknowledged that though the HSCT pilot program of Zvimba Rural district which was initially in 2011, intended to graduate beneficiaries after a period of 2 years, the government has been reluctant to terminate cash transfer distributions because of the vulnerability nature of beneficiaries. New beneficiaries are supposed to be identified but the Ministry of Labour and Social Services is failing to find appropriate exit strategies for the current beneficiaries. As one of the respondents (social workers) from the DSS had outlined “it is too early to talk of graduation out of the program, though there are adequate signs that some households have built resilience and an ability to withstand future livelihood shocks.”

Beneficiaries are mainly labour constrained households (the chronically poor) with OVC, who depend on long term social assistance. The concern is that Government welfare programs are presently not able to absorb a significant number of chronically

poor and exit strategies for the chronically poor are limited and also seem impossible. Although some of these households may also participate in livelihoods activities, many limited capability to lift themselves out of poverty, even with assistance, for example those with very high dependency ratios, or chronic illness or disability. For this small group of beneficiaries it is ultimately the responsibility of government to provide on-going, long term social transfers (Schubert 2011:25). Where cash transfers are targeted explicitly at those who are non-productive, or unable to participate in more developmental activities due to labour constraints or lack of physical assets such as land (as in the Zambia case and in some Malawi Cash Transfer programs) there is a tension between the expectation that cash transfers will lead to graduation, and the fact that it is the 'non-productive' segments of the poor who are targeted. This tension can undermine policy coherence and challenge the program outcomes anticipated by donors and governments (Slater 2009:2).

Nonetheless, it is important that cash transfers should be viewed from a sustainable livelihood approach to poverty as a long term intervention that may enhance the capacities and sustainability of livelihoods of beneficiaries for future prospects. Zambia views 'graduation' as a process by which household capacity is increased through social protection measures. For poor households with limited labour, graduation as a result of cash transfers is seen as a long-term objective whereby support to the human capital development of children through education ,for example, promotes the likelihood of inter-generational graduation (Slater 2009:3).

5.4 WEAKNESS OF POLICIES GUIDING CASH TRANSFERS IMPLEMENTATION IN ZIMBABWE

The HCST program in Zimbabwe is guided mainly by two main policies, which are the National orphan care policy and National Action Plan for Orphans and Vulnerable Children phase II. The National Orphan Care Policy developed from welfare to a transformative social protection for orphans and vulnerable children. It led to the drafting of NAP for OVC which has the primary guiding policy framework for social protection programs in Zimbabwe (Munyati, 2006:4). These social policies have been acknowledged to have a considerable number of weaknesses that have affected cash transfer implementation in Zimbabwe. The social policies in their reactive approach to the problems faced by the children especially orphans and vulnerable children fall far short in addressing the issues of most of these children due to the poor targeting mechanism, limited and other related resources (MoPSLW 1999:1).

The paucity of resources made available to the GoZ arm (DSS) responsible for the protection of children makes it impossible for that arm of government to effectively carry out in this regard. Investments in government delivery capacity at district level will not only support the implementation of social transfers but also the other social services delivered by these agencies (Samson 2009:55). The numbers of children that the traditional approaches are able to capture are limited due to the fact that it depends heavily on scarce human resources stationed at district and provincial offices. Targeting is problematic as the officers have limited capacity to adequately make appropriate screening investigation. Services are therefore mainly available to those people who are knowledgeable of them and can access the district offices. The vast majority of the poorest of the poor find it hard to have access to such

services. Orphans are among this group particularly those who have lost both parents. There is much that the communities could do to alleviate suffering of OVC but their efforts and capacities are not respected and appreciated by the service organizations and they remain untapped. The fact that there is weak accessibility between the DSS and community members and poor grievance procedures reflects that most of the community efforts and capacities are not maximized. This may have a demotivating effect on the part of the community members.

The National Orphan Care Policy mainly focuses on enforcing legislation directed to protect children, yet the legislation available is not orphan specific and therefore falls short to addressing and deliberately targeting this category. Most orphans risk exclusion from these programmes due to problems of their accessibility and lack of local adult help. The HSCT is directed to most disadvantaged population of the labour constrained households with OVC; however lack of adult guardianship result in the OVC being excluded from the cash transfer program. Both the National Orphan care Policy and NAP for OVC II tend to overlook the capacity constraints which may be one of the factors which explain policy implementation failure and poor performance of social programmes (Cruz, 2009).

The contribution capacity of the cash transfer is impaired due to the fact that it is not supported by other social protection programs initiated by the government. Most of the social protection programs are disintegrated and uncoordinated. One of the major challenges that have been encountered in the provision of social protection is that currently there is no comprehensive and overarching social protection policy framework. As a result, there is lack of proper coordination of social protection programmes and initiatives. Apart from aiding coordination, availability of such a

policy framework would provide a platform for coordinated resource mobilization and sustained funding of social protection programs (ZIMTA 2010:48).

5.5 CONCLUSION

The HSCT in Zimbabwe has the potential to enhance the poverty situation of OVC in Zimbabwe by providing by addressing the human, social and economic deprivations that inhibit their development. Despite the fact that HSCT in Zvimba rural district is not directly directed to OVC but households responsible for their welfare and development, they have reflected progressive remarks in progressing results in enhancing the lives of the beneficiaries. Cash transfer program in Zvimba district has been able to improve household nutrition and food security, children's access to education, helped create small income generating projects for beneficiary households, also assisted beneficiary households to progress from struggling for survival to coping mechanisms, reduced economic exploitation of children, violation of children's rights and have provide alternative care for OVC to a certain degree.

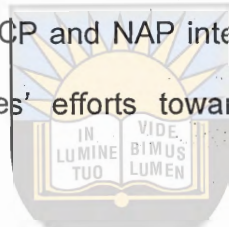
However, a considerable number of challenges and problems have inhibited the capacity of the cash transfer program. Such problems as inadequate institutional capacity, community power structures, inadequate human capacity, lack of political will and low budget, lack of coordination of complimentary services, dependency and lack of exit strategies have been attributed on the part of the Government tendency to neglect and overlook the impact of the social policy that guides cash transfers programs and the role of DSS in coordinating the cash transfer program. As a result the government is failing to address the increasing number of OVC who are trapped in the poverty situation despite the existence of social cash transfer programs.

CHAPTER 6

CONCLUSION AND WAY FORWARD

6.1 CONCLUSION

The HSCT introduced in 2011 is the main program directed to assisting OVC poverty situation. The HSCT program is used as a mechanism of fulfilling the policy objectives of the National Orphan Care Policy and National Action Plan for orphans and vulnerable children by reaching out to all OVC within the country with social grants. Through the HSCT, the NOCP and NAP intended to support and make use of community and local authorities' efforts towards the care of orphans and vulnerable children.



Despite the promises made by the NOCP and NAP for OVC, the study discovered that the HSCT, being administered by the Department of Social Services is struggling with implementation problems which have prevented the cash transfer program from addressing the poverty situation faced by orphans and vulnerable children within the country. The DSS struggles to identify eligible beneficiaries, monitoring and evaluating the cash transfer program. Hence considering these problematic circumstances the study's main objective investigated the role and effect of the cash transfer program towards alleviating poverty amongst orphans and vulnerable children. In a sustainable livelihood approach perspective poverty is as result, of poor people's lack of certain livelihood crucial for their survival and graduation out of poverty. In order to address poverty there is need to improve poor people's access to their livelihoods. Cash grants help poor people access and strengthen their livelihoods. Cash transfers can help increase OVC's access to education, health, nutrition and other basic services crucial for child development

and graduation out of poverty. The cash grant can help strengthen OVC household economy. After independence although racial grounds were removed and social protection slightly increase among the black people, the social ideology of keeping social protection minimal was adopted by the new government at independence. Despite; the introduction of several social protection programs such as Social Development Fund (SDF) in 1991, Poverty Alleviation Action Plan (PAAP) in 1995 and Public Work Fund in 1991, etcetera which were intended to eradicate poverty amongst the poor, failure of these social protection programs was attributed to underfunding towards social development.

The poor hardly have social safety nets to assist their situation and the same goes for orphans and vulnerable children living within communities. Social policies such as National Orphan Care Policy in 1999 and National Action Plan for Orphans and Vulnerable children of 2004 were introduced to try and address the poverty situation of OVC. These policies were designed in a way that they maximise community efforts with regards to the care of OVC and have been the main instruments guiding cash transfer programming such as the HSCT of 2011. However, as revealed by the study the same social ideology is still used as where provision for social protection is kept at minimum and its institutions underfunded. As acknowledged by MoLSS (2010), the Department of Social Services is most underfunded government institution with its social protection being less than 1% in 2009.

The cash grant of 20 dollars helps beneficiaries meet children's basic needs such as food and clothing. The social cash grant is able to improve children's access to basic services such as education, health and nutrition. The non-beneficiaries expressed concern over the identification and selection criteria as it has gaps that made it

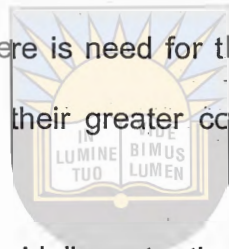
vulnerable to manipulation by traditional leaders and community elite. The CPC members verified these gaps and expressed concern over the lack of an effective grievance procedure.

In relation to the effect of the HSCT on the poverty situation of orphans and vulnerable children, the analysis of the research findings from a sustainable livelihood approach the study acknowledged that the HSCT is able to reduce child economic exploitation, provide an alternative care for OVC, reduction of the violation of human rights, improved food security for household, creation of income generating activities and improved access to child education. This shows that the HSCT helps improve the accessibility for the poor to livelihood assets. However, the DSS faces difficulties in implementing the HSCT, and the challenges have affected the effect of the HSCT towards poverty alleviation amongst the OVC. These challenges include inadequate institutional capacity, community power structures, low budget, inadequate human resources, targeting precision, dependency syndrome and lack of an exit strategy.

6.2 WAY FORWARD

After identifying the main areas of concern in regards to cash transfers and poverty alleviation amongst OVC, the study makes a few recommendations in regards to solving the gaps identified. Such issues as institutional capacity plays a crucial role towards the fulfilment of social policy and social protection interventions. Institutional capacity (Department of Social Services) cannot be neglected or overlooked as it primary responsible for supporting, coordinating community efforts and bringing accountability within the cash transfer program. Therefore there is need for the government of Zimbabwe to develop the capacity of the Department of Social Services in order to achieve actual realization of social policy and social cash

transfer objectives. Budgeting is one of the most crucial elements in relation to the achievement of program objectives. Low budgeting can decrease the program capacity and reduce the chances of fulfilling of programs and elimination of poverty. The government of Zimbabwe agreed to and signed a considerable number of regional and national treaties and commitments to fight for the fulfilment of the protection of orphans and vulnerable children and fulfilment of children's rights. It the primary responsibility of the government to ensure these children's rights are protected and child poverty is alleviated. Hence national budgets should be child friendly and sensitive. Therefore there is need for the government to address their national budgets in order to show their greater commitment towards the care of orphans and vulnerable children.



Social policies are the principle guidelines to the implementation of any social programs or interventions. Weaknesses or gaps within these social policies can in turn affect program implementation. Policy makers have to be part of the solution rather than the obstacles as shown by the government which neglects to support community efforts in regards to the care of OVC. In relation to the study it is pertinent to appreciate that child protection is not static but should be informed by and respond to socio-economic and cultural dictates prevailing at the time (Muronda, 2009: 136). Social policies should be responsive to the needs and problems faced by communities in regards to the care of orphans and vulnerable children. Social policies guiding cash transfers should consider the best interest of the child, so that cash transfer can better address children's rights. Social policies should be inclusive of all actors within the cash transfer program; that is government institutes, communities, NGOs and children.

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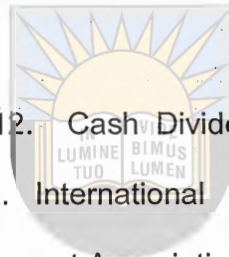
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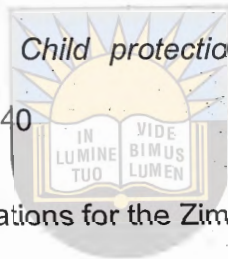
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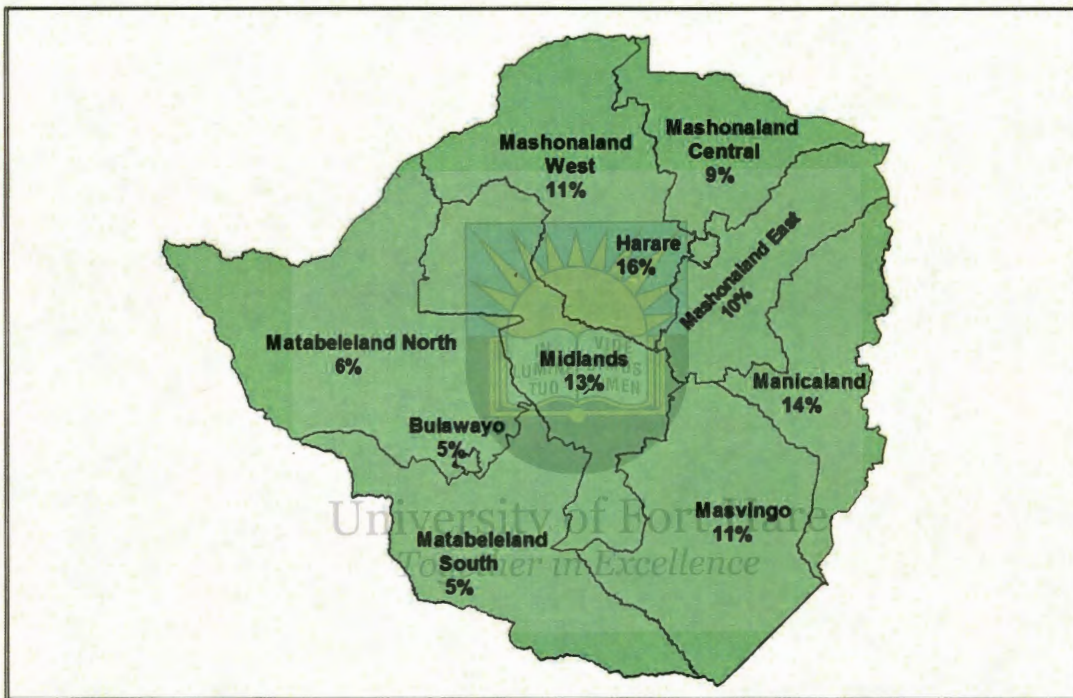
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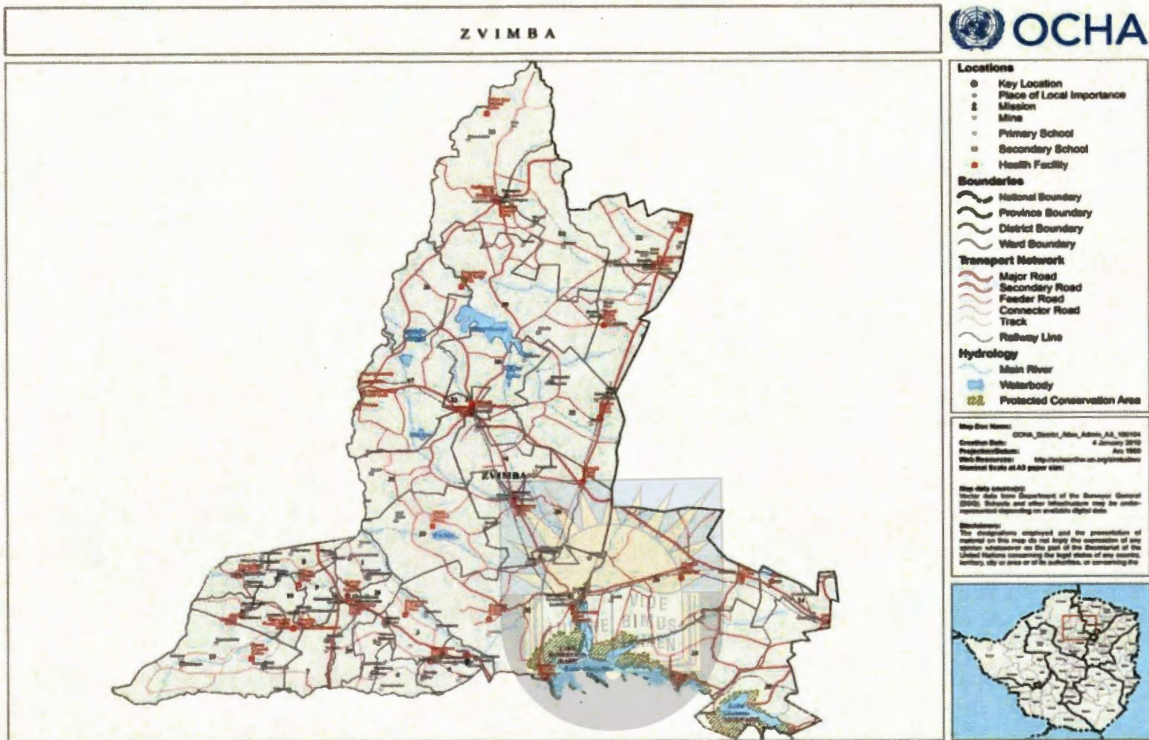


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Map showing population distribution within the provinces in Zimbabwe



Source: Fact book (2013)



Source: Fact book (2013)

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Table 2 : HOUSEHOLD POPULATION PER WARD WITHIN DISTRICT.

PROVINCE=4 MASHONALAND WEST

DISTRICT = 406 ZVIMBA

Population		Households				
Ward		Male s	Femal es	Total s	Number	Average size
Ward	01	2 134	2 364	4 498	1 070	4,2
Ward	02	1 094	1 239	2 333	639	3,7
Ward	03	2 590	2 838	5 428	1 311	4,1
Ward	04	1 324	1 516	2 840	654	4,3
Ward	05	1 636	1 854	3 490	830	4,2
Ward	06	2 770	2 956	5 726	1 383	4,1
Ward	07	2 577	2 722	5 299	1 148	4,6
Ward	08	1 808	2 048	3 856	878	4,4
Ward	09	1 619	1 787	3 406	735	4,6
Ward	10	1 080	1 206	2 286	540	4,2
Ward	11	1 710	1 875	3 585	842	4,3
Ward	12	1 665	1 951	3 616	853	4,2
Ward	13	6 327	6 120	12 447	2 759	4,5
Ward	14	3 701	3 516	7 217	1 707	4,2
Ward	15	6 644	6 623	13 267	3 265	4,1
Ward	16	868	901	1 769	439	4,0
Ward	17	5 594	5 292	10 886	2 331	4,7
Ward	18	3 588	3 417	7 005	1 636	4,3
Ward	19	4 791	4 658	9 449	2 233	4,2
Ward	20	4 892	4 827	9 719	2 328	4,2
Ward	21	6 416	5 716	12 132	2 940	4,1
Ward	22	3 383	3 805	7 188	1 878	3,8
Ward	23	1 507	1 608	3 115	704	4,4
Ward	24	4 537	4 424	8 961	2 220	4,0
Ward	25	4 104	3 581	7 685	1 933	4,0
Ward	26	8 997	8 968	17 965	4 453	4,0

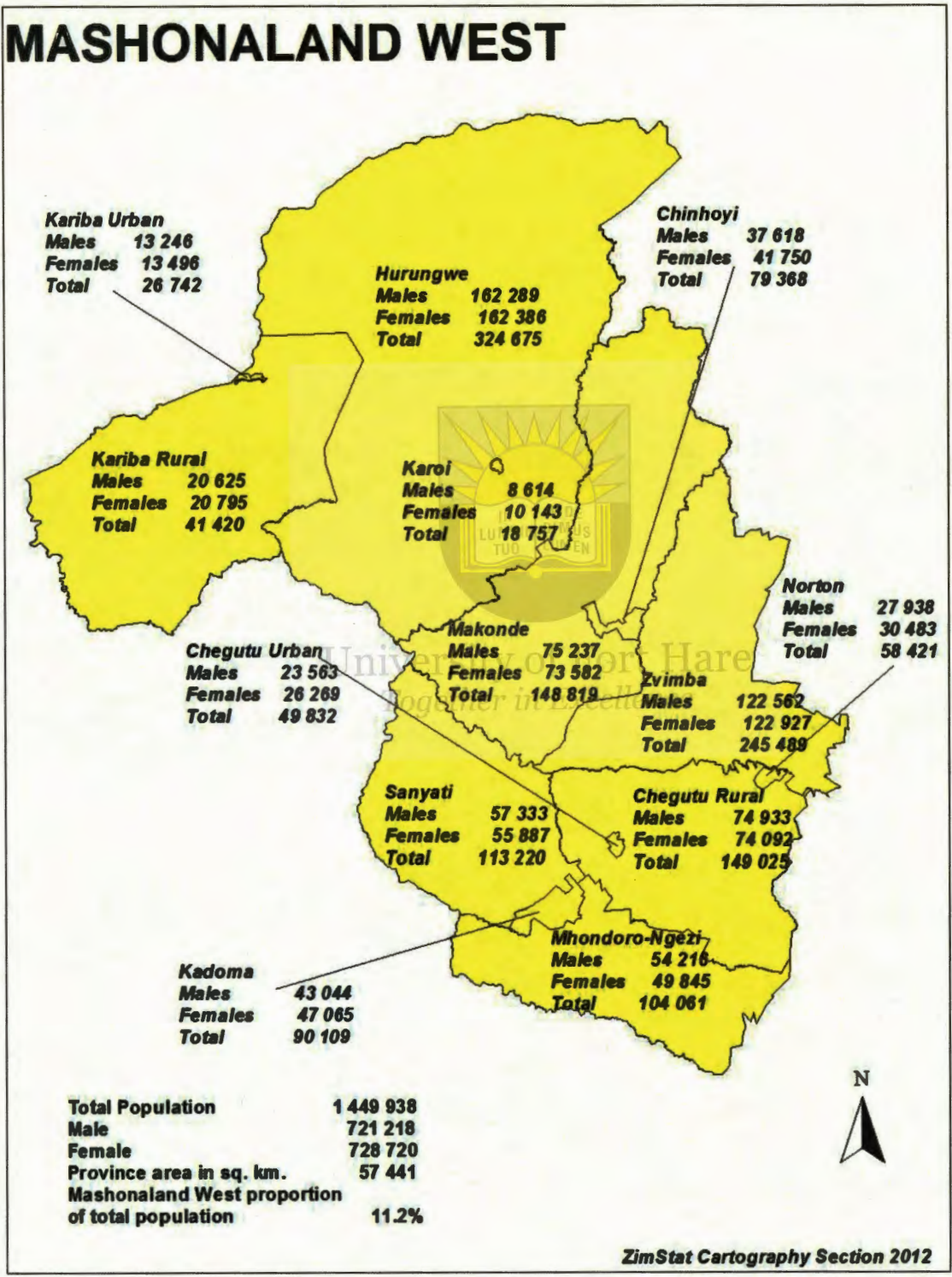
Ward	27	1 372	1 358	2 730	605	4,5
Ward	28	798	856	1 654	418	4,0
Ward	29	1 556	1 714	3 270	761	4,3
Ward	30	5 118	5 013	10 131	2 341	4,3
Ward	31	3 487	3 309	6 796	1 523	4,5
Ward	32	3 836	3 735	7 571	1 783	4,2
Ward	33	4 346	4 073	8 419	1 880	4,5
Ward	34	2 841	2 830	5 671	1 279	4,4
Ward	35	1185	12	24 079	6 005	4,0
		2	227			
District		122	122	245 48	58 304	4,2
Total		562	927	9		

Source: Zimstates (2013)

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MAP SHOWING THE POPULATION DISTRIBUTION IN MASHONALAND WEST

MASHONALAND WEST



ZimStat Cartography Section 2012

ASSESSMENT OF CASH TRANSFER AS A POVERTY ALLEVIATION INTERVENTION ON ORPHANS AND VULNERABLE CHILDREN IN ZIMBABWE.CASE STUDY OF ZVIMBA DISTRICT.

This research is conducted by Mr. D.K.K Mutongerwa in fulfilment for the requirements of Masters of Social Sciences in Development Studies.

Interview Schedule 1

Section A: Demographic Information

Interview Schedule Number	Date.....2013
Ward.....	

Personal Details

Rating

1. Sex

Male	Female
------	--------

2. Age

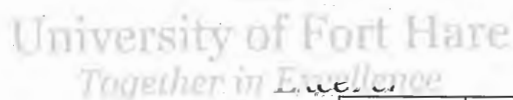
14 – 18 years	1
19– 35years	2
36 – 50years	3
50+ years	7

3. Marital Status

Single	1
Married	2
Divorced	3
Widowed	4

4. Occupation

Student	1
Employed	2
Unemployed	3
Entrepreneur	6



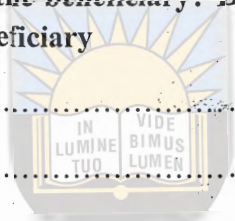
5. Number of Dependents

0-1	1
2-4	2
5-8	3
9+	4

6. Can you please state the number of beneficiaries in your household?

0	1
1-2	2
3-4	3
5+	4

7. Please state your relation with the beneficiary? Briefly explain the circumstances that led you to stay with the beneficiary



SECTION B: CASH TRANSFERS ACCESSIBILITY AND SUSTAINABILITY

8. Briefly explain how the beneficiary able to acquire the cash transfer grant and the procedures and difficulties that you went through?

.....
.....
.....

9. Is the cash transfer reliable, consistent and how frequent do you receive the social cash grant?

.....
.....

10. In case the beneficiary has grievances i.e. didn't receive grant how do you go about it?.....

.....
.....

11 .Is the Cash transfer program known to the community and laws and policies protecting OVC? And intended objectives of the Cash Transfer program.....

.....
.....

19. Does the beneficiary receive any other health assistance services despite being a beneficiary? Please state the assisting service and indicating how it assists you.

.....
.....

20. Has the social grant assisted you anyway in relation to your health and nutrition? In either of the answers state reason why?

.....
.....

SECTION E: RECOMMENDATIONS

21. Are there any concerns, you feel we might have not discussed and would like to state?.....

.....

.....

THANK YOU VERY MUCH FOR YOUR PARTICIPATION & TIME.



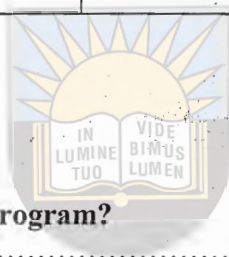
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INTERVIEW GUIDE 2

ASSESSMENT OF CASH TRANSFER AS A POVERTY ALLEVIATION INTERVENTION ON ORPHANS AND VULNERABLE CHILDREN IN ZIMBABWE. CASE STUDY OF ZVIMBA DISTRICT.

This research is conducted by Mr. D.K.K Mutongerwa in fulfilment for the requirements of Masters of Social Sciences in Development Studies.

Interview Schedule Number	Date.....2013
Department.....	District.....



Interview Guide

SECTION A: EFFECTIVENESS

- 1. What is the purpose or aim of the program?**
.....
.....
- 2. Briefly explain the historical factors that lead to the initiation of the program.**
.....
.....
- 3. What are the practical problems that led to the formation of the program?**
.....
.....
- 4. Briefly outline to what extent have these problems been addressed by the program?**
.....
.....
- 5. What are the strategies to achieve the goal? (Probe for implementation plans, services rendered and defined target groups – geographic and demographic Catchments)**
.....
.....
- 6. What is the selection criteria of the program? (Probe who is included and excluded).**
.....
.....
- 7. How are program services accessed by beneficiaries? (Probe for clarity on community outreach plan or disbursement / distribution plan).....**
.....
.....

.....
.....

8. Briefly outline the documents that are required to be a beneficiary of the program. (How easy or difficult is it to access the documentation)

.....
.....
.....

9. How is the community involved in the project/program?

- Identification and Selection 1
- Planning and Implementation 2
- Monitoring and Evaluation 3
- All the Above 4
- Other... 5

11. How is the program monitored and evaluated? (Ask for monitoring tools if any and frequency e.g. coverage, reporting forms, tally sheets, monitoring Committees, frequency of evaluations, quality assurance mechanisms or quality benchmarks)

.....
.....
.....



11. Who are the implementers of the program? (Probe for information on sectoral expertise amongst staff, volunteers, out-sourcing as necessary, adequacy of staff, roles and responsibility)

.....
.....

12. Are there any other cash transfer programs the government directs to Orphans and Vulnerable children? 1) Yes 2) No

If yes please state them.....

.....
.....

13. What is the criterion used to terminate support under the programme? Is there any exit strategy in place? Are families that exist the program able to re-join it?

.....
.....
.....

14. Are there any conditions implemented in regards to beneficiaries to the program?

- 1) Yes
- 2) No

If yes please briefly describe the conditions and the methods used to assess their fulfilment.....

.....

15. Are there any legislative or policies that support and aid in enforcing the cash transfers directed to orphans and vulnerable children?

.....

16. What is the average amount transferred to each beneficiary?

\$5- \$10 US dollars	1
\$10- \$20 US dollars	2
\$20- \$30 US dollars	3
\$30- \$40 US dollars	4
\$40+ US dollars	5

17. Can you state what the amount can buy roughly with relation to basic commodities?

.....

18. Any civil society or NGO involved in the design, implementing and monitoring of the program?

.....

19. Are there any protocols or procedures that can be taken if one has grievances towards the cash transfer program?

.....

20. Are there any challenges face by the Department in co-ordinating the program?

.....

SECTION B: CASH TRANSFERS AND HUMAN CAPITAL DEVELOPMENT AND HEALTH

21. To what extent do you agree that the program has increased school attendance or skill development?

.....
.....

22. To what extent has the program has helped improve the nutrition and health of beneficiaries.

.....
.....

23. Are there any programs that might assist the health of the beneficiary? If so please state them and how?

.....
.....



SECTION C: CASH TRANSFERS AND ECONOMIC DEVELOPMENT

24. Where there any changes in community productive activities?

.....
.....
.....

25. How does the additional cash affect beneficiaries choices on livelihood activities and production strategies? (Any decisions to invest)

.....
.....

SECTION D: RECOMMENDATIONS

26. Are there any other suggestions or contributions you feel may be necessary with regards to the cash transfer program?

.....
.....