From Protection to Production: impacts of cash transfer programmes at community levels
Why introduce qualitative research and mixed methods in impact evaluation?

- Interpret & contextualize quantified results through *triangulation*;
- Deepen understanding - *why and how*?
- Untangle complexities – catch averages but also variation, heterogeneity, unique cases;
- Understand CT impacts on different categories of population (women, HHs, wealth, youth, etc)
- Use of *inductive* & open approaches;
- Enables better understanding of intra-HH dynamics & decision-making, as well as attitudinal & empowerment dimensions (*emic* perceptions)
- Explain patterns/trends – indications of future pathways for HHs/local economy
Qualitative research forms part of PtoP impact evaluation covering six countries

• Completed:
  – Ghana (April, 2012); Kenya (July, 2012); Zimbabwe (October, 2012)
• Planned:
  – Lesotho (April, 2013); Malawi (October, 2013); Ethiopia (2013)

• A detailed research methodological guide has been prepared, includes:
  – Guidelines for the research process and approach
  – Sampling of social groups within communities
  – Guidelines of semi-structured questions
  – Use of focus group discussion, semi-structured interviews, case studies
  – A set of proposed participatory tools

Key questions driving the qualitative research:

- **Household economy**
  - How are households’ decisions and decision-making processes affected by SCT in livelihood choices, investments, savings, employment and consumption?

- **Local economy**
  - Do SCTs create multiplier effects, and how do these evolve and impact exchanges of local goods, services and labour markets through the injection of cash in the community?

- **Social networks**
  - How do SCTs affect social networks and how do social networks mediate affects of SCTs?
    - Do cash transfers strengthen risk sharing arrangements and economic collaboration underpinned by social capital (trust-based reciprocity)?
    - Do cash transfers permit greater inclusion for most vulnerable and least powerful people (in decisionmaking), further increasing their entitlement sets?

- **Operations**
  - How do SCT operational arrangements affect decisions and economic impacts at household and community levels?
3-stage sampling process

1. Select two regions
   – Reflecting differences in livelihood and vulnerability (e.g., Ghana North and Central)
   – One region should coincide with longitudinal quantitative survey to deepen analysis of trends emerging from data analysis

2. Select one district in each region
   – Representative of ‘average’ poverty and livelihood status of region, identified by district poverty maps, or equivalent

3. Stratifying and sampling communities
   – Within each district, select three study sites: two ‘treatment’ and one ‘control’ (comparison) community
   – Sites selected according to degree of market integration (proxied by distance from main road), sampling one relatively remote and one integrated community
   – Community with median number of beneficiaries are selected

Select control community with similar socio-economic profile
Informant selection

- Organized with specific goals, time frames and procedures, with groups of common interest (FGD) and key informants (KII)/resource persons
- Stratified FGDs
  - Beneficiaries and non beneficiaries disaggregated by gender; age, and general wealth rank/level of social exclusion
  - Interest groups: e.g. farmers, casual labourers, associations, local traders, ethnic minorities
- Non-beneficiaries and social groups selected randomly, from a list if available
- FGDs commonly conducted separately between men and women
- When possible, household case studies conducted
- Capture social difference and diversity within the selected communities
## Key informant interviews

<table>
<thead>
<tr>
<th>Key informant</th>
<th>Probable location</th>
<th>Importance</th>
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<tbody>
<tr>
<td>Village chief/head</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>Village committee member</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>Leaders of minority groups</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>CBO leaders/members/religious leaders</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>Member of a specific social network</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>Local business owners (employees)</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>Local farmers/agricultural merchants</td>
<td>Community</td>
<td>✓</td>
</tr>
<tr>
<td>Market traders</td>
<td>Will depend</td>
<td></td>
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<tr>
<td>Extension workers</td>
<td>Will depend</td>
<td></td>
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<tr>
<td>School teachers</td>
<td>Will depend</td>
<td></td>
</tr>
<tr>
<td>Community Health Workers</td>
<td>Will depend</td>
<td></td>
</tr>
<tr>
<td>Bank/MFI/SACCO staff</td>
<td>Will depend</td>
<td></td>
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</tbody>
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Research process

- 19 days overall
- 1 day briefing with key government and donor stakeholders
- 1 week of training for research team, including piloting, refining Research Guide, presentations e.g. SCT programme managers/UNICEF
- Fieldwork procedure:
  - District level stakeholder discussions and community access
  - District 1: Four days of parallel research in (1) Market integrated community and (2) Isolated community. 1 team of 2 researchers in each community; 1 day in comparison community, with both teams conducting separate FGDs
  - Repeat for district 2 (sometimes different research teams, same team leader)
  - Half-day final feedback session with each community
  - Evening debriefs with research team; one-day synthesis session at end of each week - combined with one-day consolidation session final week
- Debrief workshop with government and donor stakeholders
Fieldwork roadmap

District
Whole team starts off at district level
- Introduction and interviews with relevant government officials
- Introduction and interviews with programme implementing agents and committees etc.

Day 1
Community 1
(Sub-Team 1)
- Introductions with community head
- Group discussion with key informants + community poverty profile analysis
- Plan FGDs/KII's for the week
- Conduct 2 FGDs each day
- Conduct 2 KII's each day
- Evening debriefs

Community 2
(Sub-Team 2)
- Introductions with community head
- Group discussion with key informants + community poverty profile analysis
- Plan FGDs/KII's for the week
- Conduct 2 FGDs each day
- Conduct 2 KII's each day
- Evening debriefs

Day 2 & 3
- Conduct 1 FGD
- Conduct 2 KII's
- Community feedback session
- Evening debrief

- Conduct 1 FGD
- Conduct 2 KII's
- Community feedback session
- Evening debrief

Day 4
‘Control’ Community
Whole team goes to control community
- Conduct 2 FGDs with potential beneficiaries (male and female)
- Conduct 1 FGD with opinion leaders

Day 5
Team consolidation and synthesis day
- Produce draft field report with sub-headings and draft analysis
Participatory research tools

• Social mapping and community wellbeing analysis
  – Community poverty characteristics and distribution of poverty
  – Perceptions of differences in poverty amongst population, of characteristics of most vulnerable and of targeting effectiveness

• Household income and expenditure analysis
  – Sources, size and frequency of beneficiary household income
  – Distribution of beneficiary household expenditures
  – SCT impact on income and expenditure distribution

• Institutional mapping (venn diagramming)
  – Institutional landscape in communities;
  – Impact on (formal and informal) social networks and risk sharing mechanisms;
  – Impact on social connectedness/ exclusion among beneficiaries in their communities and SCT impacts

• Livelihoods analysis
  – Range and value of different livelihoods(risky, reliable, preference), SCT impact
  – Impacts on the local economy (markets, prices and employment)
Household Economy summary findings:

- SCTs largely functioning as a safety net, with evidence of HH investments in economic activities depending on HH situational context, enabling environment, local conditions;

- SCTs largely meeting broad objectives - people prioritize improved consumption/wellbeing, school attendance/retention, healthcare, basic needs, repayment of outstanding debts;

- Economic investments emerging - improving production activities e.g. inputs, farm assets, hired labour, small animals;

- Used as working capital to diversify/or expand income sources: e.g. farming (enter sugar cane), small business (e.g. milk production, moto taxi), petty trade, rotating savings (grain banks);
• Shifting labour patterns – towards own farm, less as casual labour (“maricho”) which is a “last resort” measure;

“I am now using my energy on my field because I can now afford fertilizer” (Goromonzi, Zimbabwe)

• Reductions in negative coping strategies (e.g. Kaaya-yei, eating food stocks) – progression of survival to coping to income generation;

• Indications SCT enable some “savings” - but limited “patience” as pressing needs prevail (already large portion of HH budget);

• “Intentions” to increase risks, e.g. poultry production, house building but still typically risk averse – avoid taking credit although greater creditworthiness and opportunities available;
-When women and FHH access SCT payments, in some cases making own decisions (IGAs), more often HHs decide CT use jointly;

-Little indication of transformation of patrilineal norms but indications of women’s greater economic empowerment and voice/influence in HH decisions;
Local Economy summary findings:

- Limited impacts on local markets to date – but marginal indications of an increase and boost in exchanges, and increase and diversification of goods and services (e.g. food preparation, soaps, HH goods, hair salon);
  “food bowls are now getting finished at the end of the day” (Dompoase, Ghana)

- Typical payment-day surge in purchases in local shops/markets;
- Some indication of changing purchasing practices - more in bulk, more luxury goods (e.g. sugar, meat, maggi) and in greater proximity to villages due to increase in demand – “the market is getting closer”;
- No price changes detected - yet;
- In smaller communities noticeably increased business competition;
• Increased beneficiary creditworthiness – trust – with SCT, but reluctance to borrow due to fear in debtedness:

“Mary refuses categorically to buy on credit because debts cause too much stress and worry.” (Zimbabwe)

• Beneficiaries reporting to withdraw/reduce activity in labour market when possible, prefer working own farm – and even some hiring in (e.g. Owendo, Kenya) depending on context;
Social networks & risk-sharing summary findings:

- SCTs have enabled beneficiaries to “re-enter” social networks-making contributions–re-investing in alliances and social security;

- Examples: rotating saving groups (susu), church contributory groups, funeral associations, welfare groups, social events;

- BENS viewed as less a “drain” on others. Re-building/broadening social capital base, trust, self-esteem, confidence, hope – “now we are able to mingle”–strengthens potential for agency/change;
• Extended family often not generous - but SCT could also be viewed as an asset, families more open to OVC caretaking with CT - Kenya);

• Beneficiaries perceived as more reliable, trustworthy/creditworthy with SCT payments (e.g. school payment plans in ZIM);

• Some beneficiaries beginning to be able to “help” others in need;

• Jealousies- some tensions created (those “deserving” are excluded)
Operational impacts summary findings:

• Payment delays create negative impacts: inability to plan, risk of greater debt, asset disinvestment, reversion to coping strategies;

• Limited communication causes misunderstanding – resentment, jealousies, tension - reduces potential impact of programme complementarities/messages - weakens transformational objective;

• Communities require information on programme - notably targeting measures, transparency requires emphasis – this promotes perceived fairness, limits politicization;

• Mixed views on “ideal role” of local power structures (e.g. targeting)– fears of elite capture but leaders are involved by default;
• Local implementation structures (CLIC, BWC, CPC) require much more support, backing - to effectively support programme (e.g. IEC) and livelihood development – great potential to make a difference;

• Absence of operational grievance mechanisms fosters tensions, and risks delaying problem-solving;

• Stakeholders see beneficiary rights and entitlements as important (Kenya “beneficiary charter” good example);

• High and increasing numbers of OVC and poverty generates perceived exclusion errors and dilutes impact of the SCT, which is not always aligned with household size;
• But community members (BENs and nonBENS) expressed preference for broader coverage rather than increased amounts – reflecting values of social inclusion, equity, collective responsibility;

• “General” preference for regular, frequent, predictable payments rather than lumpy–needs are immediate (but context specific);

• Conditions and complementarities with other programmes still “soft” and weak – missed opportunity to build human capital, productive assets, strengthen livelihoods, sustain HH self-reliance (e.g. health, education, youth, gender, IGAs)
Continuing questions and issues:

• How to pick up on quantitative findings and integrate this information during qualitative work— to triangulate and verify?
• How to strengthen quantitative research by integrating qualitative findings upstream?
• How best to combine quantitative and qualitative results into a holistic set of conclusions and recommendations?
• How to best optimize IE findings for Government/stakeholder information and use?
• How to build in more capacity development for local researchers/institutions during local research?