

The Transfer Project at UNC

Ashu Handa

Public Policy, College of Arts & Sciences

Audrey Pettifor, Epidemiology, Gillings School

Heels in the Field

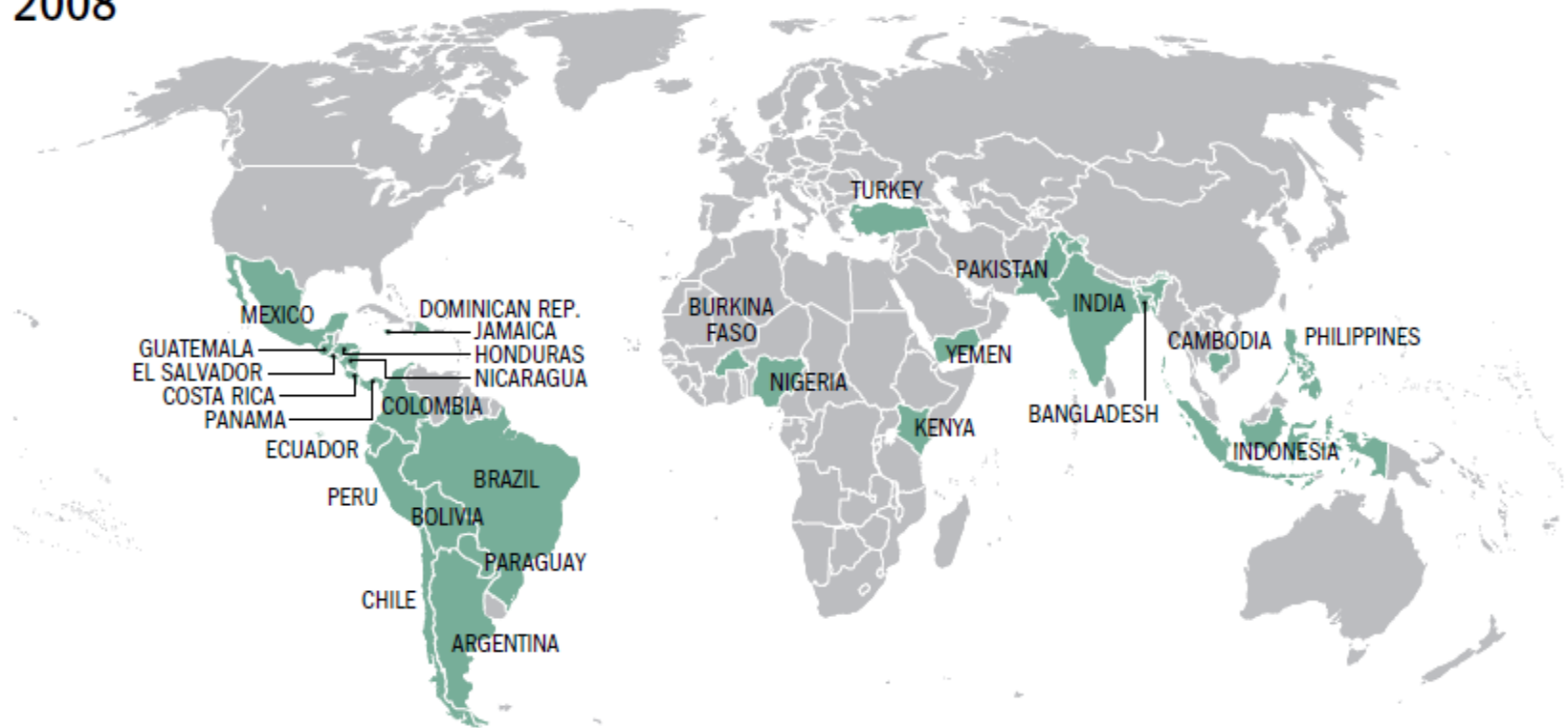
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www.cpc.unc.edu/projects/transfer



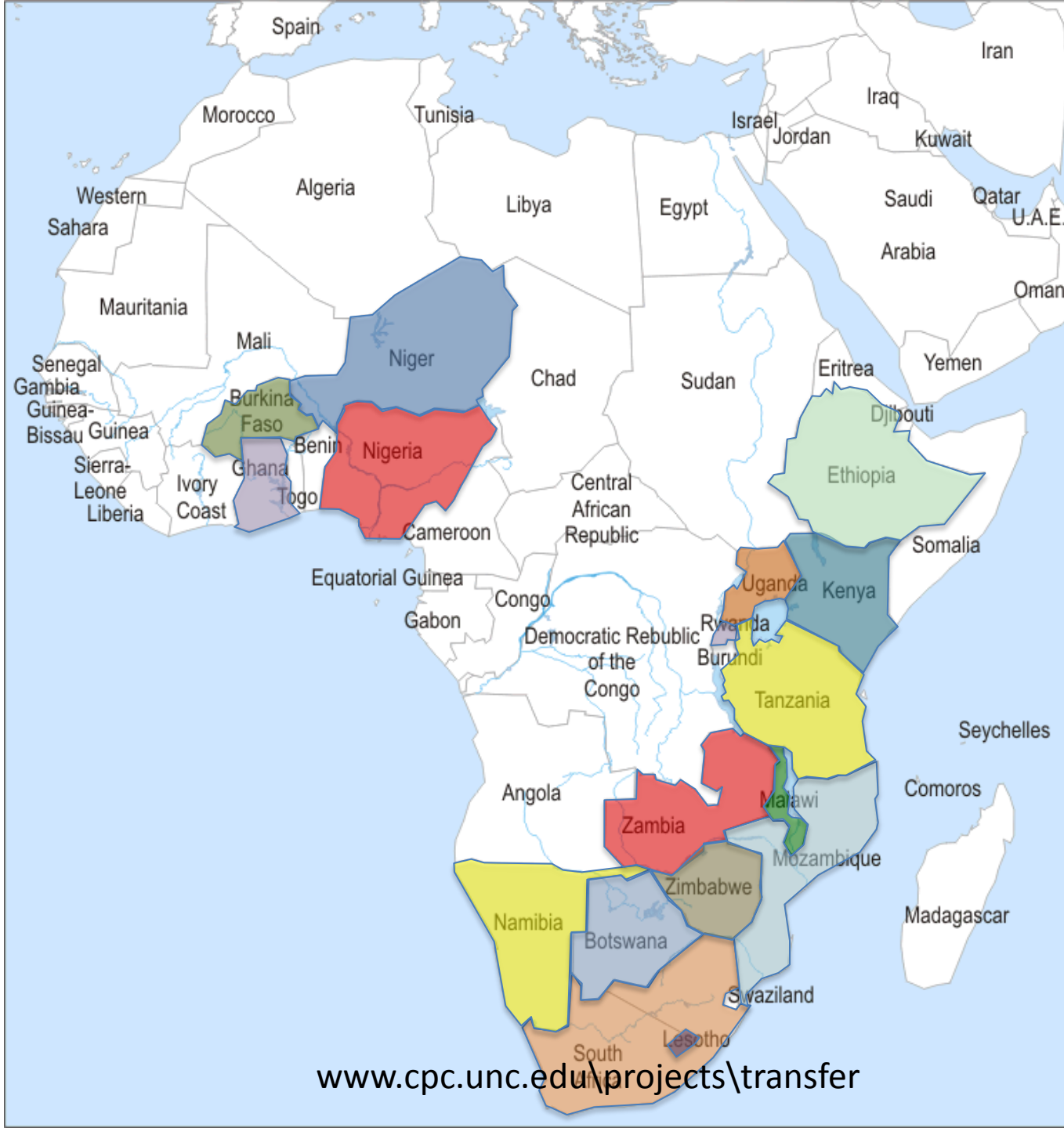
Social Cash Transfers: The Quiet Storm

2008



Source: World Bank.





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The (recent)African Explosion

South Africa CSG – 1994	Nigeria - 2008
Mozambique PSA – 1994	Tanzania TASAF – 2008
Botswana – 1999	Rwanda – 2008 (PW)
Namibia – 2000	Burkina Faso – 2008
Ethiopia PSNSP – 2005 (PW)	Lesotho CGP – 2010
Kenya CT-OVC – 2005	Uganda SAGE – 2011
Zambia SCT - 2005	Zimbabwe SCT – 2012
Malawi SCT – 2006	Niger – 2012
Ghana LEAP – 2007	



What are Social Cash Transfers?

- Cash payments targeted to poor and vulnerable families
 - OVC, labor-constrained, high dependency
 - Mitigation for HIV/AIDS affected families
 - In Malawi, 80 percent of recipients considered 'AIDS affected'
 - AIDS sensitive but not AIDS exclusive
 - Stigma, perverse incentives



How do SCTs work?

- Ministry of Social Welfare/Social Development
- Community based targeting (CBT)
 - Varying degrees of checks at central level
- Cash delivered through postal system or under tree
- Transfer level usually varies with family
 - US\$10-US\$25 per household per month



Malawi SCT Payment Mchinji District



Kenya CT-OVC Beneficiary

Kwale District, Coast Province



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Kenya CT-OVC Beneficiary

Migori District, Nyanza Province



Zambia CGP Family

Kalabo District, Western Province



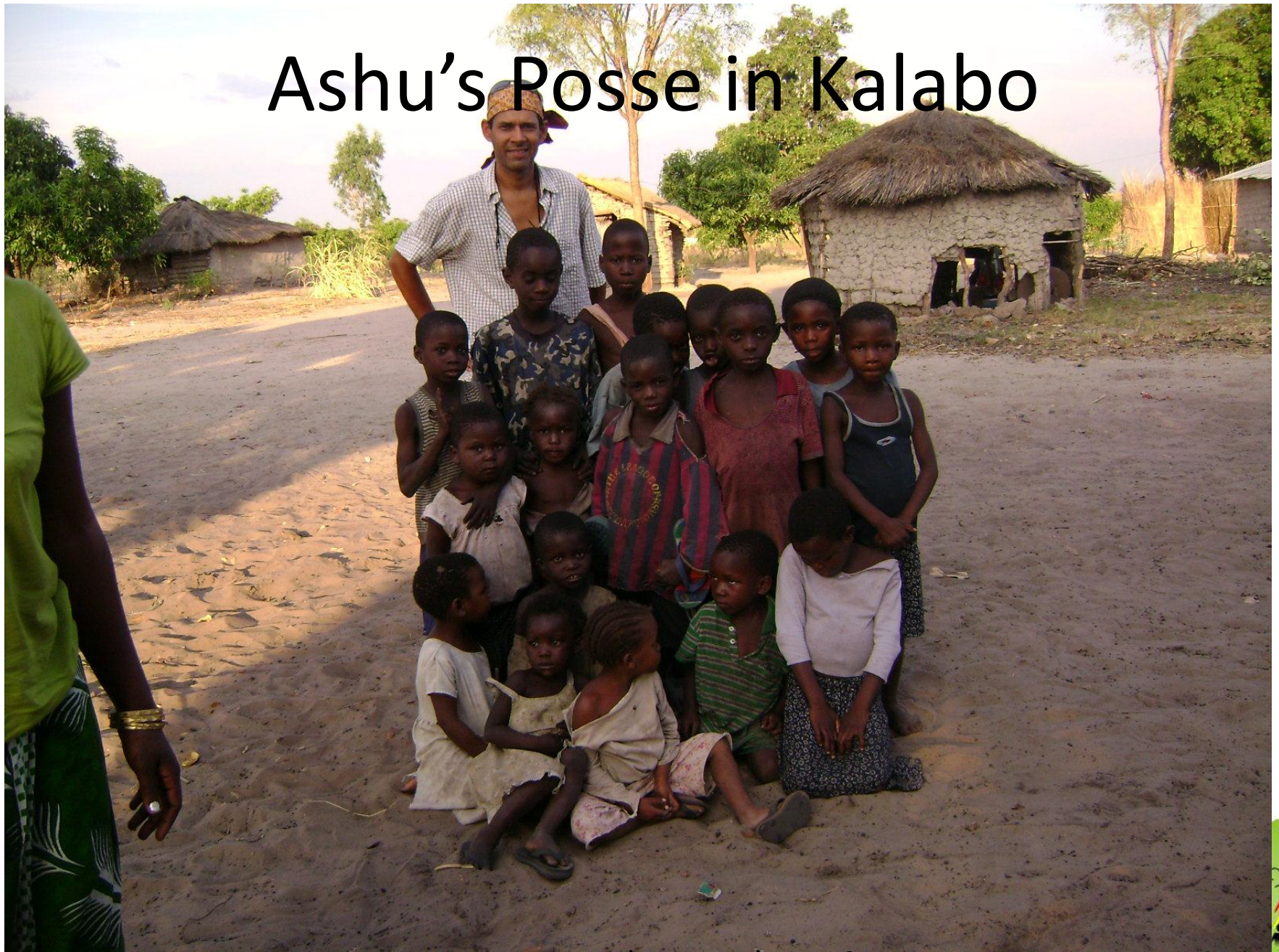
Measuring kids



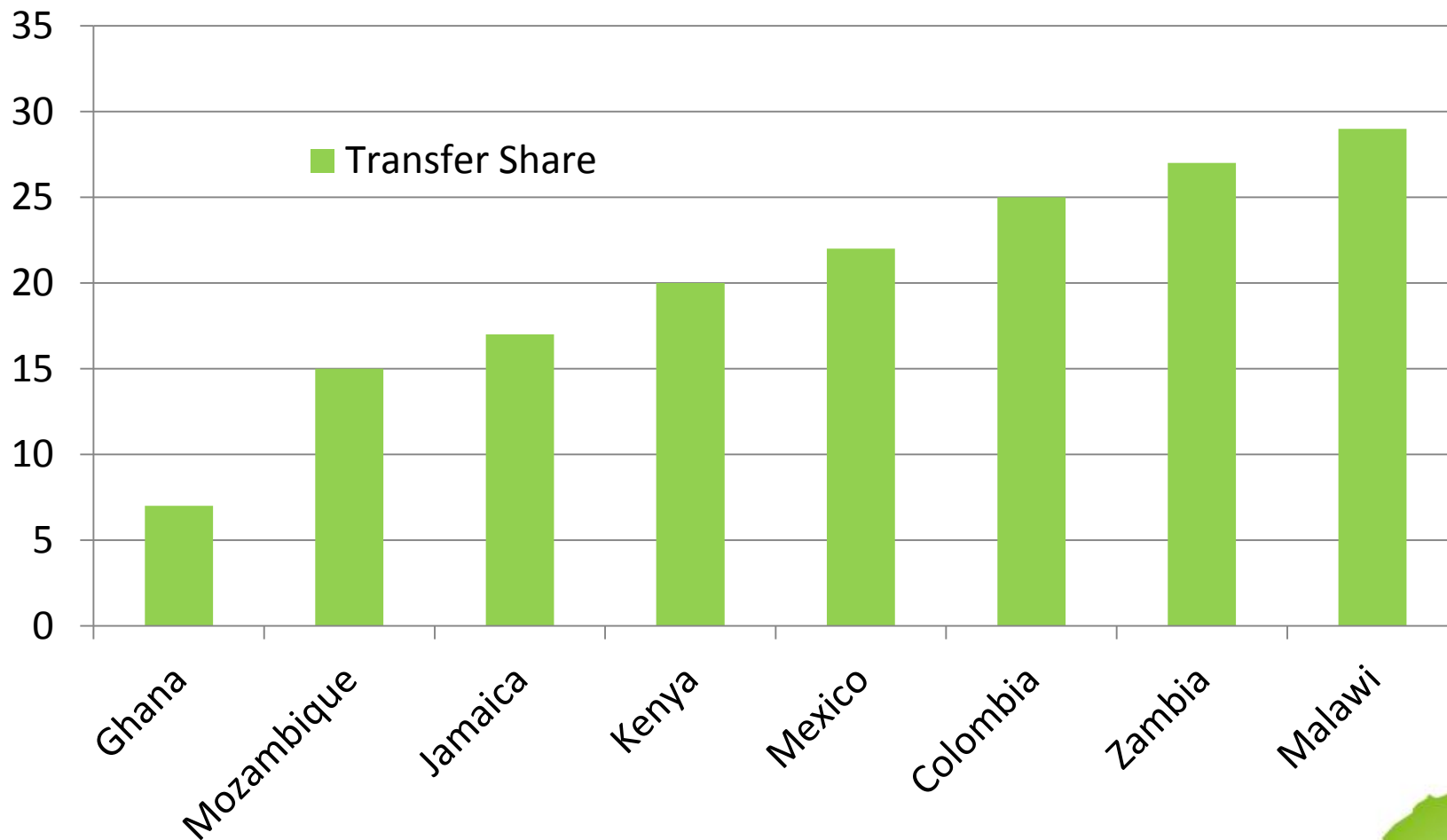
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Ashu's Posse in Kalabo



Transfer share of recipient consumption



Participatory Portion of the Evening!

Can poor countries afford SCTS? An example for Kenya

- Average consumption of target population is 60 US cents per day. Transfer should cover at least 20 percent of that, so 12 cents per day
- Kenyan population is 41m. Say program targets poorest 20 percent--~8.2m people
- $12 \text{ cents per day} \times 8.2\text{m} \times 365 \text{ days} = \sim \360m per year
- Kenyan GDP (2010) is \$31.4b. So annual budget is ~1.1% of GDP
 - Assume budget is 25 percent of GDP, then program would cost ~4 percent of national budget! Not a budget breaker



Poverty **and** Vulnerability: Malawi

SCT reaches smaller households with older heads,
and fewer very young children

	All Rural	Ultra Poor Only	SCT Households
Age of head (yrs)	43.21	45.07	62.20
Household size	4.57	6.09	4.07
# children 0-18	2.52	3.84	2.44
# children 0-5	0.95	1.37	0.37
# Orphans	1.25	1.95	1.53
Dependency ratio	2.03	2.79	3.14



Poverty **and** Vulnerability: Kenya

SCT reaches smaller households with older heads,
fewer very young children and more orphans

	All	Poor Only	SCT Households
Age of head (yrs)	44.88	47.94	61.96
Household size	5.09	6.20	5.61
# children 0-17	2.53	3.35	3.33
# children 0-5	0.90	1.13	0.69
# orphans	0.34	0.47	2.50
Dependency ratio	1.31	1.69	2.33



Transfer Project: Objectives

- **Provide evidence** on the effectiveness of social cash transfer (SCT) programs in achieving impacts for children
- **Inform** the development and design of social cash transfer **policy** and programs
- **Promote learning** across the continent on the design and implementation of SCT evaluations and research



Transfer Project: Activities

1. Regional learning, information exchange and network/ community of practice
2. Technical assistance on design and implementation of impact evaluation and identification of research areas
3. Synthesis of regional lessons on program design



Transfer Project Current Impact Evaluation Work

- Zambia 2010-2015 (with AIR) (UNICEF)
 - CGP, OVCP, SCT
- Ghana 2010-2013 (3IE, GoG)
 - LEAP
- Kenya 2010-2013 (NIH)
 - CT-OVC
- Other possibilities
 - Zimbabwe, Malawi



What do we know so far on impacts?

- Secondary school enrollment
 - Kenya (7pp), RSA (7pp), Zambia (9pp), Malawi (4pp)
- On-age entry into school
 - Kenya (12pp), Zambia (20pp)
- Food security and diet diversity
 - Food intake (Kenya, Malawi, Zambia)
 - Reduction in hunger (RSA)
 - Diet diversity (Kenya, Malawi)



What do we know so far on impacts?

- Some evidence of productive impacts too!
 - Increase fertilizer (Zambia)
 - Purchases of farm tools (Malawi)
 - More hired labor (Malawi)
- No evidence of increase in alcohol or tobacco
- Some evidence of decline in rural wage work
 - Worst form of labor, maybe not a bad thing
 - Increase in own farm work



What to look out for....

- New evaluation results in 2012
 - Kenya on HIV risk
 - Zambia on young child development and nutrition
 - Ghana health care use
- Major conference ‘State of evidence on Cash Transfers in Africa’ 2013
 - Present accumulated evidence of six years of research
 - Make your reservations now!! Don’t miss this

