

**KENYA  
NATIONAL  
SAFETY NET  
PROGRAM  
FOR RESULTS AND  
ADDITIONAL FINANCING**

**Environmental and Social  
Systems Assessment**



**THE WORLD BANK**

The Environmental and Social Systems Assessment of the Kenya National Safety Net Program for Results was prepared between November 2012 and April 2013 by Mary Nyamongo under the guidance of Nyambura Githagui and with support from Sarah Coll-Black, Judith Sanford, Michael Munavu, Cornelia Tesliuc and Will Wiseman. The report was edited by Fiona Mackintosh. Material and feedback were gratefully received from colleagues within the Ministry of Gender, Children and Social Development, the National Drought Management Agency, and development partners. An additional financing to the National Safety Net Program was prepared in January, 2017 and since the additional financing remains within the scope of the original program this Environmental and Social Systems Assessment remains valid for the additional financing as well.

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## LIST OF ACRONYMS & ABBREVIATIONS

AIDS	- Acquired Immuno-deficiency Syndrome
AIHD	- African Institute for Health and Development
ASAL	- Arid and Semi-arid Lands
BWC	- Beneficiary Welfare Committee
CBO	- Community-based organization
CBT	- Community-based Targeting
CDA	- Community development assistant
CFCA	- Christian Foundation for Children and Aging
CPU	- Central Program Unit
CT-OVC	- Cash Transfer-Orphans and Vulnerable Children
DCO	- District Children's Officer
DFID	- Department for International Development
DGSDO	- District Gender and Social Development Officer
DLI	- Disbursement-linked Indicators
DOGSD	- Department of Gender and Social Development
DSC	- Department of Children's Services
ESSA	- Environmental and Social Systems Assessment
FBO	- Faith-based organization
FGD	- Focus group discussion
GoK	- Government of Kenya
HIV	- Human Immuno-deficiency Virus
HSNP	- Hunger Safety Net Programme
ID	- Identity card
IDI	- In-depth interview
LOC	- Location committee
M&E	- Monitoring and evaluation
MGCSD	- Ministry of Gender, Children, and Social Development
MIS	- Management information system
MSDNKAL	- Ministry of State for Development of Northern Kenya and Other Arid Lands
MTP	- Medium-term Plan
NEMA	- National Environmental Management Agency
NDFPWD	- National Development Fund for Persons with Disabilities
NDMA	- National Drought Management Authority
NGO	- Non-governmental Organization
NSA	- Non-state actor
NSC	- National Steering Committee
NSNP	- National Safety Net Program
NSPC	- National Social Protection Council
NSPP	- National Social Protection Policy
OM	- Operational manual
OPCT	- Older Persons Cash Transfer
OPM	- Oxford Policy Management
PCK	- Postal Corporation of Kenya
PforR	- Program for Results
PMT	- Proxy means testing
PWSD	- Persons with Severe Disabilities
PWSD-CT	- Persons with Severe Disabilities Cash Transfer
SAGA	- Semi-autonomous government agency
SIDDIPEG	- Siaya District Disabled People's Group
TOR	- Terms of Reference
TWG	- Technical Working Group
UNICEF	- United Nations Children's Fund
UFS-CT	- Urban Food Subsidy Cash Transfer

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This report was prepared by by Mary Amuyunzu-Nyamongo (PhD), African Institute for Health & Development (AIHD).

## EXECUTIVE SUMMARY

### Background

1. **The Kenya Government plans to establish a National Safety Net Program (NSNP) that will provide a coordinated and harmonized framework for the five main cash transfer programs:** the Cash Transfer for Orphans and Vulnerable Children (CT-OVC); Persons with Severe Disabilities Cash Transfer (PWS-D-CT); the Older Person's Cash Transfer (OPCT); the Urban Food Subsidy Cash Transfer (UFS-CT); and the Hunger Safety Net Programme (HSNP). The main aim of the NSNP is to increase the efficiency and effectiveness of safety net support to poor and vulnerable populations in Kenya. Establishing the NSNP will be the first critical step in a longer-term reform agenda aimed at establishing a national safety net system.

2. **The specific objectives of the NSNP are to improve the welfare and resiliency of beneficiaries, with the aim of reducing poverty and vulnerability in Kenya.** The NSNP will target poor households that are particularly vulnerable because of where they live (the ASALs of Northern Kenya or informal settlements of major urban centers) or because of their circumstances (households caring for orphans and vulnerable children, people with severe disabilities, and older people). The objective of the NSNP is to be achieved by implementing activities in the following six areas: (i) the most vulnerable and poorest households enrolled in the NSNP; (ii) NSNP beneficiaries receive appropriate, reliable and accessible payments; (iii) Citizens are able to appeal and complain to improve program performance; (iv) monitoring and learning system is functioning; (v) cash transfer sector is harmonized and government-managed; (vi) programs are responsive to shocks.

3. **The World Bank proposes to support the NSNP (referred to also as the program in this report) with a new program-for-results (PforR).** The PforR is a new lending instrument through which the World Bank finances the achievement of results rather than the provision of inputs. Consequently, the project preparation and appraisal process has been revised such that it requires the World Bank to conduct a series of assessments of the program that the operation will support. These are a technical, a fiduciary, and an Environmental and Social Systems Assessment (ESSA). Each of these assessments reviews the relevant sections of the program, and together they constitute one integrated assessment.

4. **The ESSA was aimed at reviewing the existing government systems, as they relate to the NSNP, in terms of their capacity to plan and implement effective measures for environmental and social impact management.** More specifically, the ESSA reviewed the government's regulatory and administrative frameworks and the capacity of the relevant implementing agencies to put them into practice, including any previous relevant experience in the sector, and compared them with the environmental and social effects that are likely to be associated with the NSNP. The aim in undertaking this assessment has been to determine if any measures are required to strengthen the government's environmental or social management systems, which will then be detailed in a Program Action Plan to be mutually agreed between the World Bank and the Government of Kenya (GoK) and implemented by the government. The findings of the ESSA will also be taken into account in the design of the World Bank Program.

5. **The Constitution of Kenya 2010, the National Social Protection Policy (NSPP), and sector-specific legislation provide legitimacy and a framework for the implementation of social protection programs in general and safety nets in particular.** The implementation of the five cash transfer programs, which are currently operating in all parts of the country, has provided an evidence base of experience at both the national and local levels on which to build. The government and its key implementing partners have demonstrated a strong commitment to the sector through their current financial and human resource investments.

6. **This assessment focuses on the social effects of the five cash transfer programs as they are not considered to have had any direct environmental effects.** It mainly evaluates whether there is equitable access to the existing cash transfers and whether the programs are meeting the needs of vulnerable and marginalized groups. These issues were assessed by paying attention to how poor, vulnerable and marginalized groups are included in, and therefore benefit from, the five cash transfer

programs, specifically through the targeting of the transfers. The assessment also examines the measures put in place to ensure that vulnerable and marginalized groups have a say in the programs, for example, through consultative processes and grievance and appeals mechanisms. It also considers questions of targeting, power imbalances at the community level, the role of local administrators in controlling access to the programs, existing public complaints and grievance structures, social conflict, and gender.

7. **In a nutshell, the ESSA has considered the extent to which the NSNP can build on the experiences gained from existing programs while enhancing the social systems aspects.** The three areas on which the report focuses are: (i) promoting social sustainability in the design, avoiding, minimizing, or mitigating any adverse effects, and ensuring that policymakers can make informed decisions regarding the NSNP's social impacts; (ii) considering the cultural appropriateness of, and equitable access to, the benefits of the NSNP, giving special attention to the rights and interests of the marginalized groups and to the needs or concerns of these groups; and (iii) avoiding exacerbating social conflict, especially in areas inhabited by mixed groups, post-conflict areas, or areas subject to territorial disputes.

### **Key Results**

8. **Program planning and implementation:** Four of the five cash transfer programs have operation manuals (OMs), some of which are undergoing modifications, to reflect the outcomes of implementation reviews that provide the framework for their implementation. These OMs stipulate the targeting, payment, and grievance and complaints mechanisms and the monitoring and evaluation (M&E) processes. Some of the programs also have communication strategies. The Children's Secretariat, HSNP Secretariat and the newly established National Social Protection Secretariat provide a national coordination framework for the implementation of the NSNP and their respective programs. The government has recently created a cadre of county coordinators for the Department of Children and the Department of Gender and Social Development (DOGSD) who are already in place in most counties (those whom the assessment team met were deployed in July 2012). Government personnel at the County and groups at the location, sub-location, and community levels all support these coordinators. The current structures, if harmonized and consolidated, have the capacity to deliver cash transfers to beneficiaries in all parts of the country.

9. **Consultation:** The structures of the five cash transfer programs include consultative processes at all levels. The OMs include specifications about the composition of such consultative committees, their mandates, and the frequency of their meetings. They also specify that communities should be involved in the planning, implementation, and monitoring and evaluation processes. In practice, however, the effectiveness of these consultative processes differs between programs and between different levels. This assessment identified two key challenges – a failure to clearly communicate the program's objectives to all stakeholders and a lack of capacity (both human and financial) to enable the program teams to hold consultations at the community level.

10. **Grievance and complaints mechanisms:** The OMs of the four cash transfer programs set out mechanisms for addressing grievances and complaints. However, the implementation of these mechanisms varies greatly among the programs. The grievances are mainly concerned with targeting, the payment process, the low value of the transfer, and misuse of transfers by some beneficiary households. There is evidence that where the complaint mechanisms have been put in place (mainly in the HSNP and CT-OVC), the programs are able to manage and resolve issues as they arise although a lot more investment needs to be made. The assessment has found that the programs need to ensure that the grievance and complaints mechanisms are documented in a manner that is understandable to diverse audiences, that information about their existence is disseminated, and that they are used. Downwards and upwards reporting, response mechanisms, and feedback loops must all be clarified and put into use to ensure that communities and beneficiaries have an effective voice in the implementation of the programs.

11. **Benefits of cash transfers:** It is clear from the feedback received from the participants involved in this assessment and from the findings of the various impact assessments conducted on the cash transfer that these programs have various advantages. A common thread in the feedback on the

social benefits was the fact that the cash transfers are unconditional, thereby providing the beneficiaries with the flexibility to use them according to their needs. Respondents used terms such as “blessing” and “gift” to describe the cash transfers, indicating that the transfers were timely and performed a critical role in the lives of the beneficiaries. Some participants in the assessment observed that the cash transfers had given them hope and something to look forward to. The benefits identified by the community members and corroborated by the various evaluations conducted on the CT-OVC, the HSNP, the OPCT, and the UFS- CT can be categorized in four broad areas: (i) access to services (for example increased access to basic healthcare and education; and increased access to national identity cards and other official documents such as birth and death certificates); (ii) economic empowerment (for example, the ability to invest in small businesses, to access credit facilities, and to save money); (iii) social empowerment (for example, improved self-esteem and reduced stigma especially for PWSD); and (iv) improved quality of life (for example, reduced dependence on the community).

12. **Program inclusion and exclusion:** Most of the beneficiaries of the five cash transfer programs are eligible to be included in the program. This might be due to the fact that there are far more eligible households than there are places in the programs. However, this assessment has identified a number of requirements that can cause eligible households to be excluded. These include the requirement for applicants to have birth and death certificates and/or notifications, the absence of nomadic communities during registration, inadequate communication of information about the programs, and stigma (especially regarding disability). The requirement for medical certification was identified as a key challenge for PWSD-CT. Some of these conditions for eligibility are not contained in the OMs but have been introduced at the operational level to narrow down the large numbers of qualifying households. Other factors that contribute to exclusion include language barriers (most documents are in English) and limited access due to the remoteness of some communities (especially those occupied by marginalized groups).

13. **Marginalized groups:** The current cash transfer programs target most of the groups identified in the Constitution of Kenya 2010 as being marginalized, including orphans and vulnerable children, older people, the poor (the UFS-CT targets the poor in informal settlements in urban areas), and marginalized communities (the HSNP is implemented in four of the poorest counties in the country). However, there are some marginalized groups that may not be captured in these programs not due to deliberate effort to exclude them but as a result of the limited coverage. These include (but are not limited to) minority groups such as the Elmolo, Ogiek, Ilchamus, Sanye and Aweer (originally known as Boni)<sup>1</sup>. It should be noted that the visibility of these groups is often lost within larger communities or due to their residency in remote or marginalized areas. A visit to five of the marginalized groups by the assessment team – the Elmolo, Ogiek, Ilchamus, Sanye and Aweer - found that the cash transfer programs do not cover these groups to a large extent. It was noted that, in some cases, potential participants had been registered for OPCT, CT-OVC and PSWD-CT but no cash had been disbursed and there had been no communication from the programs on the follow-up actions.

14. **Social conflict:** The conflict mentioned in this assessment is mainly related to the fact that only a limited number of eligible households can benefit from these programs. Such conflict usually arises with regard to the targeting process, a process that is considered by some people to be unfair because of factors such as corruption and underhand deals. This conflict has led to tension between beneficiaries and non-beneficiaries, between local administrators and community members, and between program GoK personnel and local administrators. Although efforts have been made by individual programs to address some of these social conflicts (for example, making the targeting process more transparent by increasing community involvement), more needs to be done to ensure that the selection and payment procedures are understood by the beneficiary communities.

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<sup>1</sup>The assessment team was informed during consultations in Lamu County that the name *Boni* had been discarded because the community felt it was derogatory. The community has therefore reverted to its ‘original’ name of *Aweer*.

## **Key Recommendations for the NSNP**

**15. There are several measures that should be considered in the design and implementation of the NSNP as summarized below.**

- The Program scale-up should be based on an analysis of the poverty levels and be informed by clear objectives and an expansion strategy.
- A communications strategy should be developed to ensure that there is continuous collation, documentation, and dissemination of program information, especially information about targeting.
- A robust M&E framework that includes indicators for capturing and responding to the Program's social impacts should be developed.
- The program should build on the lessons learnt from the cash transfer programs, in particular the HSNP and to some extent the CT-OVC Program, to ensure well-functioning complaint and grievance mechanisms for all programs. Grievance handling mechanisms that enables marginalized and minority groups to provide feedback must be a key feature
- Efforts should be intensified to ensure that the NSNP limits both inclusion and exclusion errors. Measures should be put in place to ensure that people who are erroneously enrolled in the program are removed in a timely manner.
- Special attention should be paid to marginalized groups that could inadvertently be left out of the program. This could be achieved using affirmative action, for instance, by ensuring that they are represented on local committees, including the rights and beneficiary committees.
- Establish mechanisms for regular consultations that would ensure adherence to set rules and principles of implementing the Program.

# 1 INTRODUCTION

## 1.1 Background

1. The Government of Kenya (GoK) is in the process of putting into operation the National Social Protection Policy (NSPP), which was passed by the Cabinet in May 2012. The Policy provides a framework for defined institutional arrangements and other reforms in the sector that will enhance the coordination, harmonization, and consolidation of activities carried out by line ministries and other key players in social protection. The Policy is an integrated and multi-sectoral document that proposes several strategies and instruments for delivering three broad categories of social protection – social assistance, social security, and social health insurance. Through these approaches, the Policy seeks to: (i) provide a clear institutional framework and coordination mechanism for the sector by establishing a National Social Protection Council (NSPC) by an Act of Parliament; and (ii) create harmonized, program-wide delivery systems, including a single registry, targeting methods, monitoring and reporting framework, and payment system.

2. The Ministry of Gender, Children and Social Development (MGCSD) manages four of the five cash transfer programs being implemented by the GoK: the orphans and vulnerable children cash transfer (CT-OVC); cash transfer for persons with severe disability (PWSD-CT), older people’s cash transfer (OPCT) and urban food subsidy cash transfer (UFS-CT). The National Drought Management Authority (NDMA) manages the Hunger Safety Net Program (HSNP), which is implemented in partnership with non-governmental organizations (NGOs). As of June 2012 there was at least a cash-transfer in every constituency in the country mainly due to the rapid expansion of the OPCT and PWSD-CT.

3. One of the key commitments of the NSPP is to strengthen operational systems while expanding the coverage of cash transfers within the safety net sub-sector. To realize this policy objective, the government proposes to establish a National Safety Net Program (NSNP) as a coordinated and harmonized framework around the five existing cash transfer programs. The main objective of the NSNP is to improve the welfare and resiliency of beneficiaries, with the aim of reducing poverty and vulnerability in Kenya. The objective of the NSNP is to be achieved by implementing activities in the following six areas: (i) the most vulnerable and poorest households enrolled in the NSNP; (ii) NSNP beneficiaries receive appropriate, reliable and accessible payments; (iii) citizens are able to appeal and complain to improve program performance; (iv) monitoring and learning system is functioning; (v) cash transfer sector is harmonized and government-managed; (vi) programs are responsive to shocks.

4. The main aim of the NSNP is to increase the efficiency and effectiveness of the safety net support given to poor and vulnerable populations in Kenya. Establishing the NSNP is intended to be the first critical step in a longer-term reform agenda that aims to establish a national safety net system. The specific objectives of the NSNP are to: (i) create more robust systems for targeting, beneficiary registration, payments, and monitoring, among others, in order to strengthen the overall governance of these programs; (ii) increasingly harmonize the five cash transfer programs to increase the coherence of the sub-sector; and (iii) expand the coverage of the five cash transfer programs in a coordinated manner and progressively realize the right to safety net support.

5. The World Bank proposes to support the NSNP (also referred to in this report as the program) with a new program-for-results (PforR).<sup>2</sup> The preparation and appraisal process for the PforR requires the World Bank to conduct a technical, a fiduciary, and an Environmental and Social Systems Assessment (ESSA). Each of these assessments reviews the relevant sections of the program, and together they constitute one integrated assessment.

6. The objectives of the ESSA were to: (i) review the existing government systems in terms of the capacity to plan and implement effective measures for environmental and social impact

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<sup>2</sup> The PforR is a new lending instrument through which the World Bank finances the achievement of results rather than the provision of inputs.

management; and determine if any measures would be required to strengthen the existing procedures, which would be detailed in a mutually agreed Program Action Plan, to be implemented by the GoK. The findings of the ESSA would be considered in the design of the World Bank Program.

7. The ESSA and the resulting Program Action Plan are guided by the principles and elements for environmental and social impact management incorporated in the World Bank's OP/BP 9.00.<sup>3</sup> The OP/BP 9.00 stipulates that the ESSA should consider all applicable and relevant environmental and social issues related to the NSNP. Because the NSNP will be mainly concerned with the management of targeted cash transfers, it will not include any physical activities, land acquisition, or displacement of people. The ESSA also confirmed that neither the NSNP nor the PforR operation include any activities that are judged to be likely to have a significant adverse impacts that are sensitive, diverse or unprecedented on the environment and/or affected people.

## **1.2 The Scope and Approach of the ESSA**

8. The ESSA has focused mainly on whether there is equitable access to the existing cash transfers and whether the programs are meeting the needs of vulnerable and marginalized groups. These issues were assessed by paying attention to how poor, vulnerable and marginalized groups are included in, and therefore benefit from, the five cash transfer programs. It also considered questions on targeting, power imbalances at community level and in other community-based projects, the role of local administrators in controlling access to the programs, existing public complaints structures, and gender issues.<sup>4</sup>

9. The assessment team used various approaches to review the social systems that are relevant to the NSNP. A desk review was conducted based on several documents compiled by the World Bank Task Team. The assessment team carried out semi-structured interviews with the program leaders/managers at the national level to assess the performance of the five cash transfer programs, specifically with regard to social issues (the list of people and organizations interviewed for the assessment is provided in Annex 1).

10. The assessment team visited four counties that were deliberately selected according to several criteria including their main means of livelihoods, program mix, and accessibility by the assessment team. The counties included in this assessment were: (i) Siaya as this was an initial pilot site for the CT-OVC program; (ii) Uasin Gichu, located in the western part of the country, as it includes an ethnically diverse population; (iii) Mombasa as this is the only site currently implementing the UFS-CT; and (iv) Marsabit as this county represents areas covered by the HSNP (the team chose Marsabit in consultation with the HSNP Secretariat). In each of the counties visited, the team held focus group discussions (FGDs) with groups of adult men and women (in separate groups). In addition, in-depth interviews (IDIs) were conducted with the program implementers, local leaders, and other gatekeepers including CBO, NGO, and FBO representatives. A total of 14 semi-structured interviews, 14 FGDs (8 with women and 6 with men groups), over 30 IDIs, and four community discussions were conducted.<sup>5</sup>

11. The assessment team conducted additional data collection in March-April 2013 among five marginalized communities to assess circumstances that hinder and/or facilitate their involvement into cash transfer programs: (i) Elmolo in Loyangalani in Marsabit and Turkana counties; (ii) Ogiek in Nakuru County (around the Mau Forest); (iii) Ilchamus in Baringo County; (iv) Sanye in Lamu County; and (v) Aweer (Boni) in Lamu County. Focus groups discussions, IDIs and community gatherings were used to gather information on the cash transfers.

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<sup>3</sup>OP/BP 9.00 is the World Bank Operational Policy on Program for Results Financing, specifically in this context Paragraph 8 refers to the environmental and social systems assessment.

<sup>4</sup>The Technical Assessment provides a broader assessment of the NSNP, while the Fiduciary Assessment focuses on financial management and procurement.

<sup>5</sup>During the lead-up to the team's visit to a site in Uasin Gichu, the community members were informed that: "the people from the Ministry of Gender will be visiting." Over 60 people turned up for the discussion. The research team divided them into three groups, but even so the groups were too large to have focused discussions.

12. The data gathered from these multiple sources were processed to allow for triangulation. The semi-structured interviews were entered into an Excel spreadsheet for ease of analysis. The FGD and IDI data were transcribed and typed. Content analysis<sup>6</sup> was used to analyze the qualitative data according to the objectives of the ESSA. Quotes and boxes have been used as necessary to illustrate the opinions of the beneficiaries and program implementers at the community and national levels. The results from the primary data have been compared with numerous reviews, assessments and evaluations already carried out for the cash transfers to further substantiate the findings.

### 1.3 Consultations on the ESSA

13. Consultations were held in Nairobi on the draft ESSA on March 28, 2013, with members of civil society. Overall, the report was well received by the participants, who suggested that some of the issues discussed in the report would benefit from further emphasis. Participants observed, for example, that many of the concerns highlighted in the report could be mitigated through aggressive, well-planned and extensive communications and awareness raising community campaigns. It was also recommended that development partners consider investing resources to enhance the capacity of government and other stakeholders to implement and monitor programs more effectively. Similarly, the potential role of civil society to independently monitor the performance of the NSNP and in giving “voice” to marginalized groups was re-emphasized. The participants recommended that the ESSA include a brief discussion on the effects of the program on enhancing social inclusion in communities, as a number of studies have been undertaken in this area. Secondly, the complaint and grievance system should include enforcement mechanisms, so that such grievances are not only lodged and documented, but action is taken on those who abuse the program and the beneficiaries. See Annex 3 for an overview of the consultations, including a matrix of the issues raised and the team’s response.<sup>7</sup>

## 2 PROGRAM DESCRIPTION

### 2.1 The Legal Framework for Safety Net Programming in Kenya

14. Article 43 of the Constitution of Kenya 2010 expressly guarantees all Kenyans their economic, social, and cultural rights, including basic rights to health, education, food, and decent livelihoods. It explicitly asserts the right “*of every person... to social security*” and binds the State in Article 43(3) to “*provide appropriate social security to persons who are unable to support themselves and their dependents.*” This refers to social protection in its totality, including social assistance, social security, and health insurance. The Constitution pays specific attention to the needs of children, women, older people, people with disabilities, and minority groups. Section 53, for instance, provides for free and compulsory basic education as well as the protection of the best interests of the child. Article 54 focuses on persons with disability, Article 55 on youths, Article 56 on minorities and marginalized groups,<sup>8</sup> and Article 57 on older members of society.

15. The constitutional right to social security, in both the wide and narrow senses, is closely interlinked with other social protection rights. These include the right to the highest attainable standard of health. It also includes the rights to equality and freedom from discrimination and to human dignity, freedom of movement and residence, reasonable working conditions, fair administrative actions, access to justice, and the resolution of disputes in a fair manner and by a public hearing before a court or independent and impartial tribunal or body. Article 21 of the Constitution commits the state to working towards the gradual realization of the social and economic rights and binds the state “*to observe, respect, protect, promote, and fulfill the rights and fundamental*

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<sup>6</sup>This is a process that requires the assessment team to read through and categorize the results according to the study themes.

<sup>7</sup> According to the PforR guidelines this matrix will be revised to reflect any issues raised on this document once it has been disclosed.

<sup>8</sup> “*Marginalized groups are those that, because of their relatively small population, traditional lifestyles, and/or geographic isolation, have been unable to fully participate in the integrated social and economic life of Kenya*”: Article 260 of the Kenyan Constitution (2010).

*freedoms in the Bill of Rights.*” For this to be achieved, the state is expected to take whatever legislative, policy, and other measures as necessary, including the setting of standards.

16. The National Social Protection Policy (NSPP), passed by Cabinet in May 2012, defines social protection as: Policies and actions, including legislative measures, that enhance the capacity of and opportunities for the poor and vulnerable to improve and sustain their lives, livelihoods, and welfare, that enable income-earners and their dependants to maintain a reasonable level of income through decent work, and that ensure access to affordable healthcare, social security, and social assistance. The NSPP articulates nine key principles: (i) leadership and integrity; (ii) good governance; (iii) evidence-based programming; (iv) gender mainstreaming; (v) equity and social justice; (vi) common standards; (vii) public participation; (viii) adequacy, affordability, and sustainability; and (ix) flexibility and responsiveness to changing contexts.

17. Several acts of parliament, bills, strategies and policies address the safety net sub-sector in the country. These can be broadly grouped into three: (i) sector-wide; (ii) vulnerability-based; and (iii) geographical-based legislations. There are various acts guiding the education sector (e.g. the Education Act, Gender Policy in Education, Free Primary Education and Special Needs Education), health sector (e.g. the HIV/AIDS Bill and the Health Sector Strategic Plans); and agriculture (e.g. the Strategy for Revitalizing Agriculture and the Agriculture Sector Development Strategy). Various legal documents (acts, bills and policies) and strategies focus on specific vulnerable categories of people in the country (e.g. the Children’s Act, National Policy on Older Persons, and National Policy on Youth, National Gender and Development Policy and Disability Act). The main challenge for most of these frameworks is their lack of alignment with the changing social, political and economic contexts (for instance, they are not yet aligned to the Constitution).

18. The marginalization of certain parts of the country is widely recognized as a key driver of poverty, which has led to the enactment of specific legislation aimed at redressing historical and current injustices and inequalities. For instance, the National Policy for the Sustainable Development of Arid and Semi-Arid Lands (2007) was developed in recognition of the fact that, despite being endowed with a wealth of physical, natural, human, and social capital resources, the ASALs face the highest levels of poverty in the country. Although these anomalies are also addressed in national broad-based policies, correcting them requires specific interventions that will bring these areas up to the same development level as the rest of the country. The situation of the urban poor is also a key focus for development and constitutional interventions, as reflected in several interventions such as slum upgrading and the UFS-CT.

19. From a human development perspective, the Kenya Vision 2030 contains commitments that dovetail well with social protection and safety nets in particular. The Vision is built on three pillars – economic, social, and political. The social pillar seeks to build “a just and cohesive society with social equity in a clean and secure environment.” It makes special provisions for those with disabilities and those who live in marginalized areas. For the first five-year period (Medium-term Plan I: 2008-2012), the Vision’s goal was “to increase opportunities all round among women, youth, and all disadvantaged groups.” The second MTP (2013-2018) is currently being developed, and the NSNP will contribute significantly to the achievement of the social pillar goals.

20. The five cash transfer programs are largely targeted to the groups identified in the Constitution and other policies as marginalized, thus being in need of support. For instance, the OVC<sup>9</sup> program targets children who would otherwise have only limited opportunities to develop their human capital.<sup>10</sup> The UFS-CT targets poor people in urban areas who are now recognized as being among the neediest people in society (it is estimated that 60 to 70 percent of urban dwellers live in informal

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<sup>9</sup>For the purposes of the program, an OVC is defined as “a child who has lost one or both parents as a result of death; a child who is chronically ill or who has a caregiver who is chronically ill (defined as being bedridden or not able to perform normal duties for at least the last three months); and a child who lives in a child-headed household due to orphanhood.”

<sup>10</sup>There is some evidence to suggest that the CT-OVC tends to reach older children rather than the youngest children. This is because the likelihood of a child becoming an orphan increases with age. As a result, there may be a missed opportunity to influence the first two years of a child’s life through the cash transfers as currently implemented.

settlements). Furthermore, the four counties covered by the HSNP have some of the highest levels of poverty in the country – a situation that has occurred because of many years of marginalization.

## **2.2 Institutional Arrangements of the Five Cash Transfer Programs**

21. The Ministry of Gender, Children, and Social Development (MGCSD) implements four of the cash transfer programs that would constitute the NSNP. These four programs are operated by the Departments of Children’s Services (which implements the CT-OVC) and Gender and Social Development (which implements the OPCT, the Disability Grant, and the UFS-CT). The HSNP is managed by National Drought Management Authority (NDMA) and is implemented by non-governmental organizations (NGOs). These programs are considered in detail below.

22. The HSNP has four independent components that are coordinated by the HSNP Secretariat: (i) Oxfam GB is responsible for the administration component, including registration, targeting, enrollment, and case management; (ii) payments are managed by the Financial Sector Deepening Trust (FSD), which has sub-contracted the actual delivery of the payments to Equity Bank; (iii) the social protection rights component is managed by Help Age International; and (iv) the monitoring and evaluation component is managed by Oxford Policy Management (OPM).<sup>11</sup> An officer based at the Secretariat is responsible for the management information system (MIS). There are regular coordination meetings that bring together staff involved with the various components to discuss the program’s implementation.

23. The National Steering Committee for the CT-OVC (NSC-OVC) is a multi-sectoral committee that provides policy direction on OVC. The Department of Children’s Services (DCS) acts as the Secretariat, while the MGCSD is the Executing Agency under the supervision of the Permanent Secretary. The DCS is the official entity responsible for applying the procedures laid out in the OM. The Central Program Unit (CPU) is the technical arm of the DCS that coordinates and supervises the implementation of the CT-OVC program.

24. The OPCT, USF-CT and PWS-CT are implemented at the district level by the local DOGSD. The officers, together with the community development assistants (CDAs), are expected to train district committees and jointly conduct sessions to make the community aware of the existence and rules of the programs. Volunteers, who tend to be social workers, perform various tasks including organizing meetings and receiving beneficiaries at the district/county offices. The National Council for Persons with Disabilities has facilitated the formation of community-based groups that contribute to the activities of the PWS-CT.

## **3 DESCRIPTION OF THE PROGRAM’S ENVIRONMENTAL AND SOCIAL MANAGEMENT SYSTEM**

### **3.1 Consultation Requirements**

25. The charters and OMs of the cash transfer programs specify that consultative processes should be set up at the national, district, and community levels. The OMs recognize that for the programs to be effectively implemented all stakeholders need to have a common understanding of the programs’ objectives, to appreciate the roles played by the different partners (including communities and beneficiaries), and to adhere to the procedures and principles governing the programs’ operation.

26. The ESSA found that there is a better understanding of the objectives and the selection criteria among stakeholders in those programs (such as the HSNP and to some extent the CT-OVC) that have been participatory at the community level. For example, these programs have held consultative meetings, disseminated information on the programs, and used community feedback to improve their implementation. However, for those programs which have not held such consultations because of to time constraints and/or other logistical limitations community members are not as well-informed about their operations. Therefore, there is a need to invest in adequate planning, community participation and consultation, and effective dissemination of information to ensure that the

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<sup>11</sup>A procurement process is currently going for Phase 2 of the HSNP.

communities feel like they are an integral part of the program. Frequent consultations between the different implementers are also critical at both the national and district levels to enable them to share information on their activities and take remedial actions as necessary and in a timely manner.

### 3.2 Procedures and Requirements for Effective Safety Net Programming

27. The various program documents outline the procedures for selecting beneficiaries and stipulate measures for ensuring that the money reaches them in an effective, efficient, and predictable manner. The role of caregivers, caretakers, alternative caregivers, and/or secondary beneficiaries<sup>12</sup> is critical in the cash transfer programs. In the CT-OVC, OPCT and PWSD-CT, the caregivers tend to be offspring, spouses, and parents/guardians (mainly mothers) of the beneficiaries. The caregivers provide the necessary support to the recipients who otherwise may not know how to or be able to access and use the funds. The team's visits and discussions with the caregivers found that most of them use the funds to meet the needs of the beneficiaries. A mother of a child with a severe disability reported that *"I use the funds to buy diapers for my daughter and to pay for her medical care."* Caregivers for older people in Bondo reported that they purchase clothes and food for the beneficiaries and ensure that they receive health care when needed.

28. Several loopholes were, however, reported through which PWSD and the older people are robbed of their money as illustrated below.

- (i) Compensation demands by the people who are nominated to collect the funds on behalf of beneficiaries.
- (ii) The caretaker goes to the post-office, collects the cash and does not inform the beneficiary. Given that some of the PWSD and OPCT beneficiaries are incapacitated, they may not even be aware that the cash has been collected.
- (iii) Due to low literacy and numeracy levels among some of the OPCT and PWSD beneficiaries, the caretakers lie to them about the value of the transfer and pocket the rest of the money.
- (iv) In some cases post office workers colluding with caretakers to defraud the beneficiaries. In Bondo, there was a case where one person collected two payments using the same ID. In addition, the DGSDO reported that he had received several complaints from beneficiaries who went to the post office only to find that other people had collected their money.

29. The use of caregivers and/or secondary beneficiaries is necessary in safety nets given the vulnerability of some of the target populations (children, older persons and PSWD). However, given the potential of fraudulent use of the transfers, there is a need to strengthen community level structures (e.g. BWC) to monitor the use of the resources. Scrutiny of the recipients at the point of disbursement of funds would address the point-of-service level fraud. In addition, robust complaints mechanisms would arrest misuse and/or misallocation of the transfers.

### 3.3 Targeting

30. Targeting in social protection means the deliberate selection of certain groups or individuals in society that are deemed in need of support, which in the case of the cash transfer programs in Kenya, means the poor and vulnerable. Targeting is important because it provides a basis for setting priorities in and measuring the performance of social protection programs.<sup>13</sup>

31. *CT-OVC*: The OM<sup>14</sup> for the program lays out the following criteria for selecting beneficiary households: (i) they must have an OVC as a permanent member; (ii) they must be in extreme poverty; and (iii) they must not benefit from any other cash transfer. The targeting process entails: (i) listing of potential beneficiaries by community representatives; (ii) collecting detailed information on potential

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<sup>12</sup>The different programs and communities use different terminologies, but the main role for these people is to receive the funds on behalf of the beneficiaries.

<sup>13</sup>Mukui (2004).

<sup>14</sup>MGCS (2011).

beneficiaries; (iii) applying a proxy means test (PMT)<sup>15</sup> to create a priority list of eligible households; and (iv) validation of this priority list of beneficiaries by the community. The assessment team found that this process was followed in most of the areas visited. However, there were places where favors were sought from would-be beneficiaries, mainly in monetary terms.

32. *The HSNP*: The program piloted the use of three forms of targeting: (i) community-based targeting (CBT) in which communities both identify appropriate targeting criteria and identify needy households up to the specified quotas; (ii) a universal social pension (SP) that benefits those over the age of 55 years old who can prove their age with a national ID card or birth certificate and those over 60 years for those who have to prove their age using a historical calendar implemented by a vetting committee; and (iii) a dependency ratio approach that benefits households with a high number of dependents. These approaches have relied on ‘on-demand’ methodology, which requires households to request for inclusion in the program rather than relying on community leaders to identify eligible households. Monitoring information indicates that the procedures were generally followed and that targeting procedures were more or less seen as fair (96% of the HSNP beneficiaries thought the targeting process was fair compared to 50% of non-beneficiaries).<sup>16</sup> Key constraints in the implementation of the system include:<sup>17</sup>

- (i) The mobility of pastoral populations meant that some people may have missed the targeting window, which could imply that mobile populations are under-represented in the program. Inversely, there is a possibility that mobile populations have large livestock holdings, are less likely to include elderly people or households with high dependency ratios, therefore they would be less likely to meet the eligibility criteria;
- (ii) Limited awareness of the program, which would limit participation in the targeting process thereby inhibiting people’s access to the program;
- (iii) Elite capture during CBT approaches (e.g. in Turkana district); and
- (iv) Perceived lack of transparency with dependency ratio, which was an infringement from a rights perspective since beneficiaries were often not told how the final lists were derived.

33. *The OPCT*: The location committees (LOCs) conduct household targeting after communities have been made aware of the program and the registration process. The committees compile a long list list of eligible households and then rank them on the basis of the following criteria: (i) the age of the oldest member; (ii) poverty level; (iii) the number of OVC; (iv) the number of members with disabilities; and (v) the number of chronically ill individuals. The OM states that the community, through a *baraza*, should validate the resulting list of beneficiaries. This has, however, not been systematically done in all of the implementing constituencies as reported by the study participants.

34. *The PWSD-CT*: The OM<sup>18</sup> outlines three eligibility criteria for the program, all of which must apply: (i) households must be caring for people with severe disabilities (those who need permanent care including feeding, toileting, protection from danger from themselves, other persons, or the environment, those who need intensive support on a daily basis which keeps caregivers at home or close to them at all times); (ii) they must be extremely poor; and (iii) they must not be enrolled in any other cash transfer program or be receiving any pension or other regular income. Proof of the “severity of the disability” was identified as a silent criterion for eligibility in one of the sites visited by the assessment team.

35. *The UFS-CT*: The current program document does not include a clear statement of the program’s eligibility requirements.<sup>19</sup> However, the assessment team’s discussions with the program team members and the implementing partners suggest that the target population is poor households

<sup>15</sup>Prior to 2009 this ranking was purely done on the basis of the age of the caregiver (from the youngest to oldest if the caregiver was younger than 18 and from oldest to youngest if the caregiver was aged over 18).

<sup>16</sup>OPM (2012) *Consolidated Operational Monitoring Report*, Kenya Hunger Safety Net Programme: Monitoring and Evaluation Component.

<sup>17</sup>Information derived from OPM and IDS (2011) and OPM (2012a).

<sup>18</sup>MGCSD and National Council for Persons with Disability (2011).

<sup>19</sup>The program document lists some eligibility criteria but these are more of targeting criteria than eligibility criteria (OPM, 2012b).

living in informal settlements in large urban areas. The program document<sup>20</sup> describes the use of a poverty scorecard to target households. The list of selected beneficiaries should be posted locally in a public place and a period for appeals announced. However, the assessment team did not find any evidence of a public display of the list of program beneficiaries. It is however notable that the Concern World Wide assessment (2012) established an exclusion error of 13% and an inclusion error of 10%, which implies that most of the program beneficiaries were appropriately targeted.<sup>21</sup>

### 3.4 Program Inclusion and Exclusion

36. Reviews of the current cash transfers indicate that most of the beneficiaries are eligible to benefit from the programs. For instance, an assessment of the targeting effectiveness of the HSNP conducted in 2011 concluded that the CBT approach was the most effective mechanism for identifying the poorest households.<sup>22</sup> Beneficiary households in CBT areas were 50 percent more likely to be poor (falling below the 51 percent relative poverty line) than non-beneficiary households compared to 14 percent more likely in SP areas and 17 percent in areas using the dependency ratio. The performance of the dependency ratio approach was undermined by implementation errors, as it was found that 30 percent of beneficiaries were not eligible and 23 percent of eligible households were not covered. The OPCT has been shown to have various inclusion and exclusion errors, mainly due to the processes that were used to select the beneficiaries.<sup>23</sup> The UFS-CT has an inclusion error of 10 percent and an exclusion error of 13 percent as indicated above.

37. A key challenge facing the cash transfer programs is the limited number of places available on each program. Even with the best targeting and other beneficiary identification approaches, the programs with their current resource levels are largely limited in coverage. For instance, in some locations, only four to eight PWSDs are benefitting from the program, which leaves out a large pool of people who qualify for support. In the case of the CT-OVC program, the assessment team was informed that in some areas there were up to 1,000 households on the waiting list. Given this limitation, the potential for beneficiaries to see the process as being “*dubious*” and involving “*corruption and underhand actions*” is high. As noted earlier, the fact that some members of the local community are involved in the selection of the beneficiaries, with varied adherence to the guidelines, increases the likelihood of favoritism and nepotism.

38. The assessment identified factors that might be causing deserving needy households to be excluded, some of which are listed below.

- i. *Requirements for birth and death notifications and/or certificates:* Although these are not requirements for the CT-OVC program (which in fact promotes the acquisition of birth notifications and certificates), the assessment team was informed by several participants in Uasin Gichu, Siaya and Lamu that in order for a child to qualify for support, the parent/guardian has to present a birth certificate and proof of orphanhood.
- ii. *Identity cards:* The ownership of an ID card is critical for enrolment in the five programs. This means that, if a potential beneficiary does not have an ID, then he/she will be left out or will have to find other ways of accessing the program. The assessment team was informed that in some cases the beneficiary would nominate a neighbor or kin to act as a recipient for a fee.<sup>24</sup>
- iii. *Medical assessment reports for people with disabilities:* For a PWSD to access government support, the assessment team was informed that he or she has to get a medical certificate that confirms the severity of the disability (although the assessment team was informed by a national-level interviewee that this was in fact not a program

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<sup>20</sup>OPM (2012b).

<sup>21</sup>The results from the Concern World Wide evaluation (Concern (2012) are contradicted by the numerous complaints submitted to the MGCSD and the views expressed by the community members during this assessment.

<sup>22</sup>Hunger Safety Net Programme OPM and IDS (2011).

<sup>23</sup>ADR (2011).

<sup>24</sup>It is notable that the implementation of cash transfers, especially the HSNP, has facilitated the acquisition of ID cards in North Eastern Kenya (this has been identified as a key indirect effect of the program).

requirement). Apart from the cost of acquiring such a certificate (reported to range from Ksh 300 to Ksh 1,500), accessing healthcare facilities for some PWSD can be an uphill task. The plea by the study participants was for the government to cover the costs of acquiring these certificates and for outreach health services to be made available to serve those who are physically unable to visit existing health facilities.

- iv. *Stigmatization – both self and communal*: Some households may not have access to information and services because of certain conditions or life circumstances. For example, a household member might suffer from a stigmatized condition such as cerebral palsy (which is considered a curse by some communities), or schizophrenia. Such households might not want to be identified or, if community members already know of the person's condition, they might not want them to be involved in the program because of the "bad omen" their conditions portend. This is an important issue, which the PWSD-CT program is trying to address by providing information on these conditions and by using community-based groups as partners. Another challenge with the CBT in the HSNP (which included chronically ill people) was how to manage public selection/identification of people living with HIV/AIDS without affecting privacy.
- v. *Ethnicity*: This was alluded to subtly in some of the sites visited by the assessment team, mainly in places where there is a tendency towards resource-based conflicts. In such cases, if local leaders are members of one rival group, then it is unlikely that they will identify households from the other group as being eligible for cash transfers. The Aweer (Boni) and Sanye indicated that they were not receiving cash transfers because they did not have representatives from their communities ('one of their own') among the decision-makers.
- vi. *Distance from the center*: Communities that are far from the county headquarters have less access to information and services. Participants in the IDIs with the assessment team said that limited resources prevented them from undertaking outreach services and disseminating information more widely. As noted above, the HSNP relies on applicants seeking out the program which means that those who live in less remote communities are more likely to know of the existence of the program and to be able to apply at the recruitment centers. Also, the recruitment period may coincide with when pastoralists are away from their usual residence, however, regardless of their level of need, it is important that they participate in the identification of beneficiaries within their communities. Moreover, accessing the Elmolo, Ilchamus and Aweer is difficult due to the poor road networks and limited public transport.
- vii. *Negative perceptions and misinformation about the programs*: The perception that receiving cash transfers makes people lazy was prevalent even among some program implementers (both at the national and county levels), which might discourage households that do not want to be seen as lazy. Other forms of negative perceptions are related to the objectives of the cash transfers and the source of the money. It is notable that initially some people in Mombasa were not willing to be beneficiaries of the UFS-CT because it was suspected to be an election ploy. In Siaya, the assessment team was informed that the OPCT money is beginning to get a reputation for "killing the old people" ("*hii pesa inaua wazee*") as some beneficiaries had died within a short time after joining the program. This may have been due to the fact that the OPCT tends to target the old, the frail, and the poor who may not have had long to live, with or without the cash transfer.

39. It is important to note that some of the programs (the CT-OVC, the PWSD-CT, and the OPCT) are trying to reduce errors of inclusion by increasing community engagement and adherence to the procedures set in the OMs. Although for the OPCT and the PWSD-CT there is no documented evidence of how successful these efforts have been, the CT-OVC has succeeded in identifying vulnerable households that might have been left out of the initial selection process, who have now been placed on a waiting list.

### 3.5 Stakeholder Involvement in Program Planning and Implementation

40. Although the program documents for the five cash transfers specify the need for communities to be involved in and informed about program planning, it seems this often does not take place. The assessment team found that the targeting process was not well understood by the beneficiaries and communities, particularly on the OPCT, the UFS-CT, and the PWSD-CT. For instance, at one site (Uasin Gichu) a chief informed the team that he had been given less than 24 hours to identify 20 potential beneficiaries for the OPCT program. He, in turn, called the 22 village elders on his mobile phone and asked each to provide one name for the list. The chief then submitted those 20 names to the district office, and the next communication he received told him to tell eight or nine beneficiaries to go to the Post Office to receive their transfers. Therefore, this particular community wanted to know: *Why were the eight beneficiaries selected? Who selected them? What will happen to the 12 remaining names?* In the assessment team's discussion with the chief, he noted that it is possible that the elders selected people whom they knew given the "*limited time, limited slots, and self-interest.*"

41. It is clear from the assessment that the communities implementing the HSNP and CT-OVC programs had a clear understanding of the processes used by these programs. The same was not true for the OPCT, the PWSD-CT and the UFS-CT. Although it is not feasible for all communities to take part in the long and sometimes technical process of establishing a cash transfer, it is crucial to ensure that the communities understand the program's objectives, implementation processes, and expected outcomes.

42. Community meetings, mainly in the form of chiefs' *barazas* (public meetings), are the main method used to inform communities about the programs. This seems to work well in the HSNP program where the community members reported that they trusted the information received from the chiefs and the *madrassa* (Islamic school) leaders. A group of adult men observed that "*any other source of information is considered a rumor.*" However, the feedback from the other program sites indicated some concerns about the effectiveness of continuing to use chiefs' *barazas*.

- (i) Attendance at chiefs' *barazas* is so low in some sites that the information provided does not reach the intended consumers: for instance, in one site (Siaya) it was noted that, although there were more than 3,000 people in the area only 30 would attend a baraza.
- (ii) Discussions during such meetings are "stage managed" by the chiefs, with only people who have received prior briefings being allowed to speak; implying that those with divergent views or those considered "troublesome" are ignored.
- (iii) The fear of reprisals if anyone is seen to oppose the leaders in public forums may prevent people from airing any contradictory views.
- (iv) Some groups of people may never be able to attend these meetings such as the very old, the severely disabled; and those stigmatized by virtue of a condition or a life situation.

43. Challenges emanating from reliance on public meetings have been reported by other evaluations. For instance, an evaluation conducted by Kimetrica (2010) found that only between 10 and 35 percent of sampled beneficiary households were aware of the next payment dates. Notably, in Malindi District, none of the beneficiaries was aware of the next payment dates. This implies that although the chiefs have a role to play, public meetings should be supplemented by other strategies including word of mouth, home visits, and radio advertisements. For the not so visible marginalized groups, it is important that other strategies to involve them be considered. For instance, their traditional and informal leaders should be identified to ensure that information reaches them as appropriate.

#### 3.5.1 INVOLVEMENT IN MANAGEMENT

44. In each of the counties visited by the assessment team, there was a county coordinator for the Department of Children and another for the DOGSD. The coordinator for the DOGSD is responsible for the OPCT and the PWSD-CT (and for the UFS-CT in Mombasa). Although the county coordination positions are fairly new (many of the officers took office in July 2012), the office holders have had some prior experience with cash transfers so they are knowledgeable about the programs.

The CT-OVC program has facilitated the formation of beneficiary welfare committees (BWC) to assist with community-level program activities such as information dissemination, oversight, and monitoring. The Aide Memoire of 2011 indicates that the Location OVC Committees' (LOCs) TORs were revised to restrict their mandate to program targeting and enrolment. The BWC were established to strengthen the voice of beneficiaries in program implementation including oversight of payments. An IDI participant noted that: *"The LOCs were not functional because of incompetence. The targeting was done by the LOCs but the members rewarded their relatives."* The BWC members (who are themselves beneficiaries) are selected by the beneficiaries and serve voluntarily. In Uasin Gichu, several BWC members mentioned that they should receive some compensation for the money and time that they must spend on traveling and on communicating with the beneficiaries.

**Box 1: Siaya District Disabled People's Group (SIDDPEG)**

This group, which brings together people with special needs, was founded in 1996. It has received support from the Ministry of Special Programs with funding from the Western Kenya Community Driven Development (WKCDD) program, which is funded by the World Bank. Through this support, a shelter has been constructed where the group members engage in income-generating activities. The members are quite knowledgeable about the constitutional provisions regarding people with disabilities. They noted that the selection of the PWSD-CT beneficiaries was biased against some of them. Although some of the group members are totally blind, none was included among the 70 beneficiaries of the PWSD-CT program in Siaya. They noted that people with less severe forms of disability had been selected for support because the targeting criteria for the program are unclear.

45. To ensure that only the most deserving people are supported, the PWSD-CT program involves disability groups in the targeting process on the assumption that the members know each other and are able to identify those most in need among them. However, some of the community members claimed that favoritism had determined the selection of PWSD-CT beneficiaries. It may also be the case that some community members who choose to hide their disability are being left out of the program. For example, the assessment team was informed in Siaya that households tend to hide any members with cerebral palsy because the condition is considered to be a curse. Therefore, even if these households are among those most in need, they are likely to be excluded from the selection process. Box 1 describes the views of a disability group in Siaya on the PWSD-CT program.

46. The results illustrate the critical need for programs to identify and work with community structures. Program monitoring (as with the case of CT-OVC) would identify emerging issues for redress. Community members and groups would facilitate the identification of deserving members that may not be apparent to external teams. Local structures should, however, be appropriately sensitized and trained for them to act in the best interest of the program.

### 3.6 Communication and Information Disclosure Strategies

47. All of the cash transfer programs use community meetings as their main means of communicating with beneficiaries and local communities. A key challenge noted by the program teams in Siaya and Uasin Gichu is a lack of funding, which limits the involvement of the officers in these meetings. The county coordinator in the DOGSD in Siaya informed the assessment team that she had received an operating budget of slightly less than Ksh 100,000 to facilitate her work over a six-month period. She asked how she could be expected to achieve her targets with such a limited budget. The DGSDO for Uasin Gichu noted that a lack of transport prevented local officials from participating in many community meetings and supervising the implementation of the program. This implies that there is only limited interaction between the program teams and the communities in locations that are far from the center of operations.

48. *Availability of information materials:* Only at one station – the DCO's office in Siaya – did the assessment team find the Children's Charter displayed at the entrance. In Siaya the few information materials on the OPCT were for office use only and not for dissemination to the community members. There was no information on the PWSD-CT or the UFS-CT that could be easily accessed by the community members or even by the assessment team. When asked about this lack of information, some of the program teams intimated that they had not personally seen any information for public use for the OPCT, the PWSD-CT, and the UFS-CT. The teams for the HSNP and the CT-

OVC had access to some of the documents in English although some indicated that they had run out of copies to share with community members.

49. *Disclosure of information on the programs:* None of the programs had displayed the list of beneficiaries during the assessment period although it is understood that the HSNP and CT-OVC display the list of potential beneficiaries for two weeks after selection to allow for appeals. Although the list of CT-OVC beneficiaries is read to the community members and displayed for public scrutiny, there was no evidence that a copy had been left with the chief or assistant chief for ease of reference. Also, although a similar process is supposed to be used in the UFS-CT, there was no mention of this having been done by the people interviewed for this assessment. Discussions with community members and beneficiaries highlighted the fact that although the beneficiaries eventually know each other after having been in the program for some time, information on the identity of the recipients is not readily available to those in or out of the program. In Mombasa, a PWSD caregiver, who was in the program, did not know that her immediate neighbor was also a beneficiary, even though the neighbor had been receiving transfers for almost six months.

50. Mobile telephony is another means of communication being used by the programs. Typically, the chiefs receive information on payment by phone from the district officers and they in turn tell the beneficiaries through mobile phones or by word of mouth to go to the post office. The key challenges identified by the local leaders include lack of and/or unreliable network, cost of communication and limited access to handsets. Although text messaging is cheaper, some of the recipients are unable to access texts due to low literacy and/or disability. Word of mouth, although effective, is dependent on the availability of the beneficiary/caregiver and the ability to respond to the message in a timely manner. Some of the beneficiaries missed the payment window because they had not received the information or they were unable to respond to the messages when they were delivered to them.

51. *Opportunities for disseminating information:* During discussions with the county teams, the assessment team learned of several opportunities that could be used to inform local communities and increase understanding about the programs, such as the international days celebrating children, PWSD, and older people. The DOGSD team in Siaya noted that they had used the 2012 celebrations of older people and people with disabilities to inform the community about social protection.

### 3.7 Grievance Redress Mechanisms

52. One crucial element of any social protection program is a mechanism for redressing grievances and resolving conflicts because these measures are critical for ensuring transparency and accountability. Complaint mechanisms are particularly needed in relation to the targeting of program beneficiaries and the receipt of payments. Most grievance and complaints systems are expected to fulfill four key functions: (i) provide an effective way for clients to resolve problems with the services that they receive (and thereby receive their program entitlements); (ii) encourage feedback that can be used to improve systems and service delivery (including highlighting serious breaches in implementation such as fraud or abuse); (iii) enable program beneficiaries to participate in shaping the program's design, management, and service delivery; and (iv) build trust in and ownership of interventions on the part of beneficiaries, thereby increasing their sustainability.<sup>25</sup> The measures and experiences of the cash transfer programs are discussed briefly below.

53. The operational framework for the grievance and complaints mechanism for the HSNP distinguishes between two key types of grievances – appeals and complaints.<sup>26</sup> Rights committees<sup>27</sup>

<sup>25</sup> There are four key characteristics of a well-functioning complaints and grievance system: (i) there is widespread knowledge of program entitlements and complaints mechanisms; (ii) beneficiaries have easy access to the complaints mechanism and a belief that making a (rightful) complaint will result in change; (iii) grievance systems have the authority to make binding decisions; and (iv) the system informs complainants about whether and how their complaints have been resolved.

<sup>26</sup> "Appeals are grievances concerning targeting that should be documented and adjudicated prior to the finalization of the targeting process. Complaints concern breaches in service commitments (such as late and missed payments) and may occur at any time during program implementation *Hunger Safety Net Programme*." (MSDNKAL, 2011).

<sup>27</sup> The Rights Committees are bodies set up in the communities specifically to deal with any complaints about the functioning of the program. They are composed of representatives elected by the community. The members should be the

are expected to play a key role in the generation of complaints (by increasing beneficiaries' awareness of their entitlements) and the registration of both complaints and appeals. As of May 2012, the HSNP Secretariat had a list of over 5,000 complaints about the HSNP, including the date of the complaint and the resolution date. It was reported that about 4,000 of the complaints had been addressed. Verifying the details of the complaint and whether the complaints have been adequately addressed, however, remains a key challenge for the program.

54. The CT-OVC program uses a range of measures to promote its strong downwards accountability, including beneficiary welfare committees, an external grievance mechanism (including a telephone hotline) and appeals mechanisms, and beneficiary service charters. However, it was evident to the assessment team that how well the complaints were managed depended on the caliber of the officers in place. For instance, a DCO in Uasin Gichu carefully filed all of the complaints received by the office and made notes in the files about what actions had been taken in response, which is an example of best practice. In general, the program needs to do more to ensure that these accountability provisions are implemented. The availability of the hotline for CT-OVC was reported at the district level but none of the community members involved in the assessment made reference to it. The spot-check report by Kimetrica (October 2011) indicates that there was a general lack of knowledge and poor utilization of the complaints and grievance system in the CT-OVC. The level of awareness of the complaints process was very low, thus the risk rating with regard to the system was quite high.

55. The OPCT, the UFS-CT, and the PWS-CT have no formal grievance and complaints systems, although all three programs have received and responded to grievances by the communities. Again, their capacity to receive and respond to grievances is dependent on the officers in place. In Bondo, for instance, the DGSDO had kept a record of all grievances reported to him. Although there were suggestion boxes in some of the sites visited, it was not clear to the assessment team how they were managed. A review conducted by Kimetrica (2012) on the three programs has made recommendations on the strengthening of this component of programming including the establishment of a unit to be responsible for complaints and grievances and ensuring there are feedback mechanisms between the community and national levels.

56. The absence of complaints and grievance mechanisms for some of the programs does however not imply a complete absence of measures for redress. The 2008 MGCS<sup>28</sup> outlines a series of commitments by the Ministry along with a complaint mechanism people can use if they feel the commitments have not been fulfilled. These commitments are expressed in the form of sixteen service standards on a wide range of issues including the period of time between being targeted for the CT-OVC cash transfer and when targeted households should receive their first payment. In addition to these service standards, are a series of rights of clients, which include the right to be treated with courtesy and respect and to lodge a complaint if dissatisfied with the services rendered. However, the system for recording and monitoring complaints is still weak.

57. The key concerns reported by community members to the assessment team revolved around targeting, payment processes, the value of the transfers, the distance to the payment locations, and replacement of beneficiaries who have exited the program as shown in Table 1, and lack of information as the case with marginalized groups like Sanye. Given the limited coverage of the five cash transfer programs, the selection of a few beneficiaries from a large pool of eligible households was bound to lead to questions and speculation about the criteria used to select them. However, as noted earlier, most of the questions raised are due to a lack of an understanding of the programs by community members, which could be related to inadequate communication.

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first point of contact for individuals seeking redress if they are not well treated by the HSNP. The Committee is expected to report to the Rights component and receive responses to communicate to and answer people's queries. If they are able to solve the complaints themselves they should do so.

<sup>28</sup> MGCS (2008)

**Table 1: Grievances by Communities and Beneficiaries**

1. Targeting	<ul style="list-style-type: none"> <li>• The selection criteria</li> <li>• The involvement of local leaders in the process, which leads to suspicions of favoritism</li> <li>• Corruption in the selection process</li> </ul>
2. Payment process	<ul style="list-style-type: none"> <li>• Caretakers fleecing the poor, old, and those with severe disabilities</li> <li>• The 10-day collection period being too short</li> <li>• Information not reaching the beneficiaries that their money is available at the Post Office</li> <li>• Mistreatment by Post Office staff</li> </ul>
3. Amount of transfer	<ul style="list-style-type: none"> <li>• Amount too small compared to the needs</li> <li>• Staggered disbursements (bulk payments versus two monthly payments), which makes it difficult for the beneficiaries to plan</li> </ul>
4. Use of transfer	<ul style="list-style-type: none"> <li>• Recipients not using the money as intended (for example, consumption of alcohol, purchase of <i>miraa</i>, and neglect of the orphans)</li> <li>• Caretakers fleecing the beneficiaries</li> </ul>
5. Replacement	<ul style="list-style-type: none"> <li>• Criteria used to replace a community member (mainly in the OPCT where the replacements are from other locations not yet covered by the program)</li> <li>• Households hiding facts to continue benefitting (for example, an orphan no longer in residence or the death of an older person)</li> </ul>
6. Distance to payment locations	<ul style="list-style-type: none"> <li>• The cost of travel to the payment locations (in some cases the beneficiaries reported that they spent up to Ksh 1,000 shillings on travel, which erodes the transfer significantly)</li> <li>• Older people and PWSD being fleeced by those who assist them while traveling to and from the payment locations</li> </ul>
7. Network	<ul style="list-style-type: none"> <li>• In Marsabit, the biometric machines are rendered ineffective by the lack of or an unreliable network connection</li> </ul>

58. The main complaint made about payments was the limited payment period. It was reported that the beneficiaries have 10 working days to collect the money after it arrives at the Post Office. If they fail to collect it, the money is returned to Nairobi until the next payment period when it can be received along with the subsequent payment. Given that the money is paid bi-monthly and often inconsistently (particularly in the OPCT, the UFS-CT, and the PWSD-CT) the beneficiaries sometimes have to wait for longer than the subsequent two months. Some beneficiaries indicated that there were no mechanisms for those who failed to collect the money, even if they had genuine reasons that had prevented them from picking it up (for example, being indisposed). A beneficiary group in Siaya suggested that the government could open bank accounts with the Post Office so that the recipients are not forced to collect the transfers during a specific period. Some respondents mentioned that they felt vulnerable to thieves when they picked up their payments as it is common knowledge when the funds arrive at the Post Office. However, there was a counter argument that opening bank accounts would complicate the current system whereby, if someone does not collect three consecutive payments, he or she is removed from the program.

59. The assessment team found significant differences in the formats and numbers of complaints registered under the five programs. These differences highlight the different levels of knowledge about and utilization of the complaints mechanisms by the beneficiaries. The HSNP has recorded the highest levels of complaints, but there are indications that the beneficiaries still do not have a full understanding of the program’s entitlements and complaints mechanisms.<sup>29</sup> The effectiveness of the rights committees continues to be a challenge. As for the PWSD-CT, the OPCT, and the UFS-CT, the

<sup>29</sup>OPM (2012a)

team found that the mechanisms for managing grievances were mixed at best, with some respondents indicating that it was useless to report grievances to the very people who were culpable. Members of a women's group in Siaya stated in Dholuo: "*Wakia kuma water ywak* (We do not know where to take our complaints)."

### 3.8 Oversight and Monitoring

60. Internal oversight is an important function for ensuring that a cash transfer program is being implemented in line with its objectives and according to its specified procedures. Those carrying out this oversight function should take into account the social impact of the program and provide on-site support to the implementing teams to ensure that any issues that arise are addressed in a timely manner. All of the current cash transfer programs have oversight structures at all levels from the national level down to the community level.

61. All the OMs for the programs spell out provisions for oversight and monitoring. For example, the OM for the OPCT states that: "*all levels are furthermore engaged in monitoring activities, with the DGSDO primarily focusing on the satisfaction of beneficiaries, a smooth payment process, and the functioning of committees at the local and district levels.*" For the CT-OVC Program there are three structures that oversee the program: (i) the National Steering Committee (NSC) for OVCs, which puts the program within the context of broader support to OVCs in Kenya; (ii) the CT-OVC Program Management Oversight Committee comprised of all program partners and chaired by the Secretary for Children's Affairs, which offers strategic direction on policy and implementation issues; and (iii) a technical working group (TWG) that regularly reviews and discusses operational issues related to the program delivery.<sup>30</sup> In addition, Kimetrica was contracted in 2009 to develop a monitoring framework, which includes an external monitoring system with in-built guidance covering controls, risk ratings, and follow-up actions for the CT-OVC.

62. The assessment team noted that the current M&E frameworks for the programs are able to identify and respond to issues as they emerge. For instance, the MGCSO was prompted to form the BWCs in the CT-OVC program because of monitoring results that pointed to the need to strengthen the involvement of beneficiaries in the program. Close monitoring of the selection and payment systems that revealed fraudulent actions by some postal officers has led to the introduction of controls that ensure the security of the beneficiaries' funds. However, program implementers both at the national and county levels told the assessment team that there are gaps in the oversight and monitoring of the cash transfers due to three main factors: inadequate capacity; insufficient finances; and poor infrastructure. A respondent from an implementing partner institution noted that: "*There are challenges in verification especially in the UFS-CT due to the set-up of informal settlements in urban areas.*" Monitoring is also inadequately conducted in rural areas that are difficult to reach.

63. Inadequate capacity is a key issue, especially for the programs implemented by the DOGSD. In some districts the team found that there is only one officer who is responsible for the cash transfers as well as other departmental functions. The officers at the district level noted that they were unable to visit all of the locations because of time and logistical constraints. Instead, they relied on volunteers (who are sometimes unreliable because of a lack of motivation) and community structures whose capacity to conduct oversight and monitoring is not well-developed. The OPCT and PWSO-CT implementers cited a lack of finances as a key constraint to their ability to disseminate information about the programs to communities and to verify reported grievances and complaints. The CT-OVC program appeared to be better resourced financially, although in some of the sites visited by the assessment team, the program's personnel were thinly spread.

64. The MGCSO and its partners have invested in building the capacity of staff involved in delivering and administering cash transfers over the past two or three years. However, some of the staff interviewed during this assessment clearly lacked an understanding of the program's history, faced challenges in dealing with mistakes made by their predecessors, and expressed concern about the inadequacy of monitoring materials. They also stated that insufficient access to basic equipment

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<sup>30</sup>World Bank (2011).

(some offices did not have a single computer) and supplies at the district level are key constraints to effective oversight and monitoring. Such operational difficulties negate the point of having a monitoring framework.

## 4 SOCIAL IMPACTS OF SAFETY NETS

### 4.1 Social Benefits of Cash Transfers

65. A common thread in the feedback that the assessment team received regarding the social benefits of cash transfers was that, because the transfers are in cash and are unconditional, this gives beneficiaries the flexibility to use them to meet their particular needs. Terms such as “blessings” and “gifts” were used to describe the cash transfers – implying that they were timely and played a critical role in sustaining the recipient households. Some respondents observed that the cash transfers had given them “*hope*” and “*something to look forward to.*” As identified by the community members and corroborated by the various evaluations conducted on the CT-OVC, the HSNP, the OPCT, and the UFS-CT, the benefits of cash transfers can be categorized in four broad areas: (i) access to basic services; (ii) economic empowerment; (iii) social empowerment; and (iv) improved quality of life.

66. *Access to basic services:* The study participants identified a range of benefits, which are summarized below.

- (i) The OVC program has generally improved the health of the beneficiaries as a result of their increased access to healthcare, growth monitoring, and immunization.
- (ii) Rates of civil registration have increased, especially in the ASALs, as more people have recognized the importance of birth and death certificates and ID cards since they are required in order to participate in the programs.
- (iii) Acquisition of national IDs and other official documents has been a key benefit to all groups. These documents provide more opportunities to access broader range of social services.
- (iv) Access to food has increased and diets have become more diverse, and there is evidence that cash transfers have reduced dependency on relief food in the ASALs.
- (v) School enrollment, attendance, and retention rates have increased, and the beneficiaries are more able to afford to purchase learning materials and meet other schooling-related expenses.

67. *Economic empowerment:* The delayed initial disbursement of funds from the OPCT, the UFS-CT, and the PWSD-CT programs meant that the first payments made to recipients were large (some beneficiaries reported receiving between 8,000 and 20,000 during the first transfer), thus enabling households to make substantial investments. Statements such as: “*I bought a goat,*” “*I roofed my house,*” and “*I paid my child’s school fees in secondary school*” were echoed across the sites visited by the assessment team. Indeed, some PWSD-CT beneficiaries were of the view that the government should consider giving them bulk payments annually, which would serve as investment capital. In general, respondents identified the following key economic benefits of the cash transfer programs.

- (i) More money circulates in the local economy (this was articulated mainly in the HSNP program area).
- (ii) The beneficiary households have become creditworthy at local shops as there is reassurance that they will be able to pay up.
- (iii) The transfers have introduced a culture of saving that has enabled people to engage in small-scale businesses, for example, poultry keeping, goat rearing, and participating in merry-go-rounds (revolving credit schemes).

68. *Social empowerment:* The assessment participants cited several benefits.

- (i) Families no longer hide PWSD, which has resulted in reduced stigmatization in the communities.
- (ii) Some PWSD are now enrolled in vocational training and take part in formal education, which has given them a sense of belonging and capacity to generate income.

- (iii) Disinheritance has reduced because of the increased access to birth and death certificates;
- (iv) Orphans and older people have gained standing and recognition in society as a result of the interventions.
- (v) Families have become more stable as a result of having more income to buy food and other services.
- (vi) Beneficiaries have formed support groups that have given them a sense of social cohesion and purpose.
- (vii) The personal grooming of the beneficiaries has improved, which has had a positive effect on their self-esteem and dignity. An older person asked a member of the assessment team: *“What do you think about my coat? I never used to have clothes and I did not have shoes but through this program, I have been able to buy this coat and I have a pair of shoes. I can now attend meetings without feeling ashamed.”* In fact, the CT-OVC evaluation established that the program has had a positive impact on the mental health of young people. Beneficiaries aged between 15 and 24 years old were 15 percentage points less likely to suffer from depressive symptoms and 19 percentage points more likely to score above the median on the Hope Scale, an indicator of agency and self-efficacy in both cases (as illustrated in Box 2).

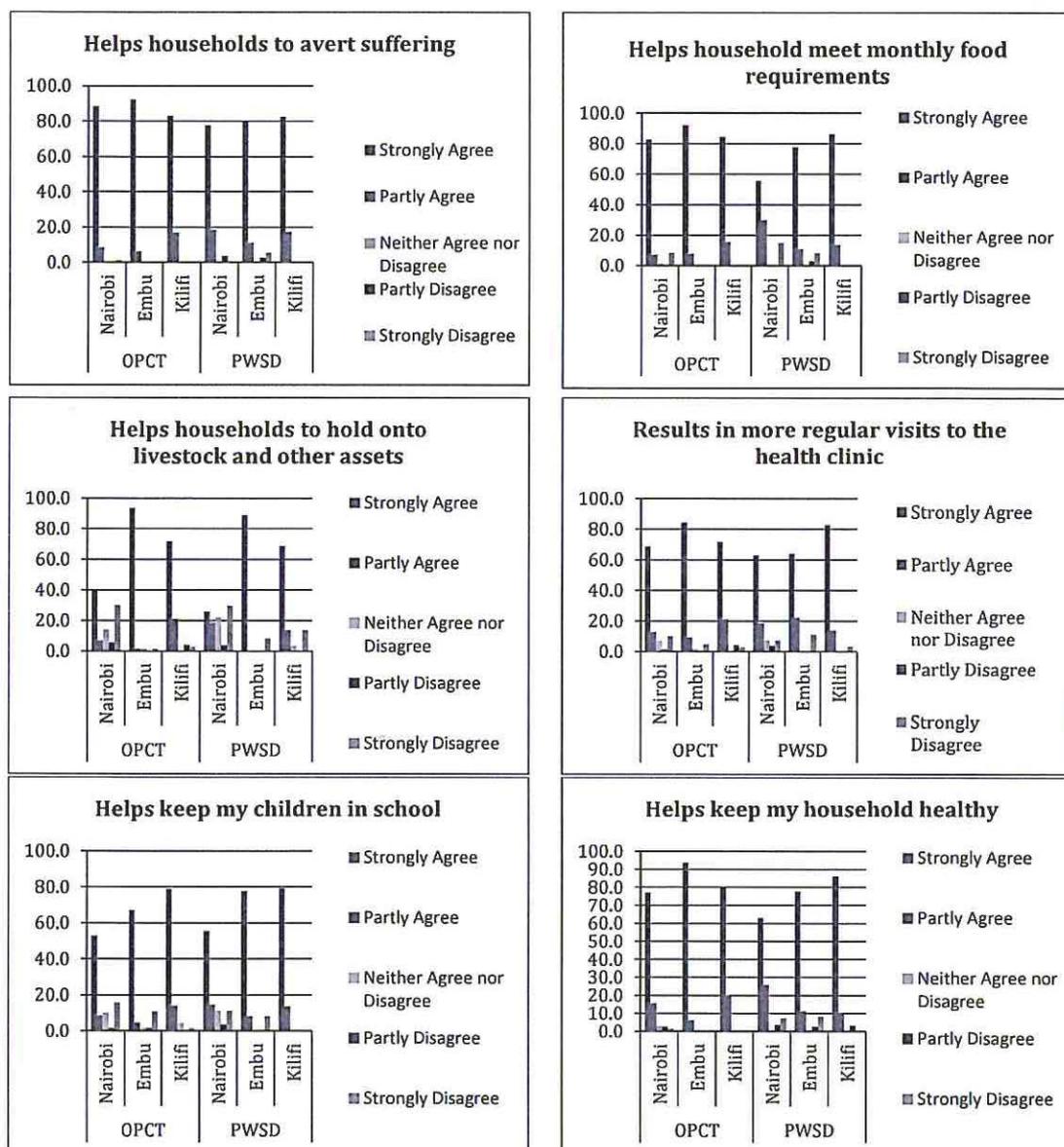
**Box 2: Social Benefits of the CT-OVC Program**

A recent study evaluated the impact of the CT-OVC program on adolescent social behavior that can increase their vulnerability to HIV and on their psychosocial status. The study found that beneficiaries aged between 15 and 21 years old were 7 percentage points less likely to have had sex (indicating a postponement of sexual debut) and were significantly less likely to have unprotected sex. In terms of psychosocial status, the research showed that the program significantly reduces depressive symptoms and that these effects are strongest for 15-19 age group. *Source: Handa et al. 2012*

69. *Improved quality of life:* There is a general perception that the quality of life of the beneficiary households has improved across all the programs. The fact that there is increased food security, access to healthcare, access to education, and increased social capital is indicative of this. What the respondents noted was that the programs have reduced the level of dependency, hence improving livelihoods. A District Children’s Officer noted that the CT-OVC had reduced child labor in the program communities. Respondents reported that the program had reduced the number of orphanages, which had hitherto been cash cows, because the OVCs now have access to care in a home environment. A key informant in Siaya observed the same trend among OPCT beneficiary households.

70. An assessment undertaken by Kimetrica on the OPCT and PSWD programs identified similar benefits, as shown in Figure 1.

Figure 1: Social Impact of Programs on Beneficiary Households



Source: Kimetrica (2012)

## 4.2 Negative Social Impact of Cash Transfers

71. Several examples of social conflict due to cash transfers were cited in the four sites visited during this assessment: (i) corruption, (ii) violence; (iii) tension at different levels; and (iv) conflicts, as described below.

72. The instances of corruption that were reported to the assessment team mainly consisted of program staff and/or local leaders demanding bribes to enroll or keep a household in the program. In one case it was reported that during the “pay” day, each beneficiary had to give the “powers” Ksh 300 to stay in the program. Failure to do so would result in the beneficiary being accused of misusing the funds and the transfer being stopped. There were reports of Post Office workers and caretakers conniving to defraud vulnerable beneficiaries, mainly in the OPCT and PWSD-CT. In Mombasa, some respondents believed that some recipients of PWSD-CT cash transfers were un-deserving since they already had sources of income but had been enrolled through underhand deals while others who

were completely incapacitated were excluded. While this anecdotal evidence is important, it is noted that a number of other program reviews have not identified corruption as a systemic issue.

Violence was reported in some of the sites visited during the assessment. In a few cases, men and women were accused of drinking or engaging in extra-marital affairs leading to domestic violence. In one case, a group of women noted that one had to have sex with the village elder responsible for selecting the beneficiaries to join and continue receiving the CT-OVC cash transfers. Miraa (also known as khat) was mentioned as a drain of resources in Marsabit leading to disaffection among household members. The behavior of second beneficiaries/caretakers and guardians, who fleeced the beneficiaries also led to social conflict and sometimes violence.

73. Several sources of tension were reported: (i) between those who were receiving the transfers and those who were not; (ii) between local leaders and community members; (iii) between local leaders and GoK employees; and (iv) between government employees at the headquarters and district levels. The tension could be related to the limited number of beneficiaries and the lack of clarity and/or implementation of the procedures for selecting beneficiaries. Although some level of tension is important for oversight (knowing that someone else is observing what is happening usually promotes compliance with procedures), the tension reported indicates that unless resolved, it had the potential to affect the achievement of optimal benefits from the programs. The key threat according to the assessment team was the conflict between local leaders and program teams due to its potential of interference with the implementation. The expectation that the recipients should buy goods from Equity Bank Agents (who also run local stores) was a concern in Marsabit where payment agents are employed to deliver the cash.

74. Conflict was reported at the location level and within households. For instance, notions of favoritism were expressed in Soi, where the assessment team was informed that *“those on the other side of the tarmac benefit from all programs but we are never considered.”* In Marsabit, there was a feeling that some locations receiving cash transfers were favored by the system. Furthermore, some people resented the approach of replacing exiting beneficiaries with people from other locations to improve the geographical spread of the OPCT program benefits. An IDI participant observed in relation to this: *“This is our chance and the replacement should be done within our sub-location. We do not understand why they take it to another sub-location when there are so many people in this community needing support.”* It was alleged that some women were deserting their homes due to the cash transfers – once they started receiving the grants they decided to leave because of economic and social empowerment.

### 4.3 Vulnerable and Marginalized People’s Rights

75. The Constitution of Kenya 2010 (Article 260) defines a “marginalized community” to mean:

- (a) *A community that, because of its relatively small population or for any other reason, has been unable to fully participate in the integrated social and economic life of Kenya as a whole;*
- (b) *A traditional community that, out of a need or desire to preserve its unique culture and identity from assimilation, has remained outside the integrated social and economic life of Kenya as a whole;*
- (c) *An indigenous community that has retained and maintained a traditional lifestyle and livelihood based on a hunter or gatherer economy; or*
- (d) *Pastoral persons and communities, whether they are—*
  - (i) *Nomadic; or*
  - (ii) *A settled community that, because of its relative geographic isolation, has experienced only marginal participation in the integrated social and economic life of Kenya as a whole;*

*“marginalised group” means a group of people who, because of laws or practices before, on, or after the effective date, were or are disadvantaged by discrimination on one or more of the grounds in Article 27 (4), which states that The State shall not discriminate directly or indirectly against any person on any ground, including race, sex, pregnancy, marital status, health status, ethnic or social*

*origin, colour, age, disability, religion, conscience, belief, culture, dress, language or birth.*<sup>31</sup>

76. Although all parts of the country are covered by one or multiple cash transfer programs, there has been no particular emphasis on the identification and inclusion of other marginalized groups other than the OVC, older persons and PWSN, with the exception of the HSNP that is implemented in counties occupied by some of these groups. Minority ethnic groups in Kenya include the Elmolo, Ogiek, Aweer (Boni), Sanye, Ilchamus, among others. These groups continue to practice a traditional way of life in the form of livelihood, education, health and clothing, among other aspects (see Figure 2). For example, the Ogiek, commonly known as the ‘forest people’ are present in some parts of Rift Valley and Mount Elgon Districts. The Aweer (Boni), Sanye and others are found in the coastal region. During the assessment, participants in Lamu referred to the Aweer as ‘marginalized among the marginalized’ since Lamu County is considered marginalized.

77. The assessment established that most of these communities have not benefited from the cash transfer programs. In some cases, some members of the communities has been identified for inclusion in the programs, but had not yet received any cash transfers (see Box 3). The notable exception was among the Sanye, where four OVC households had received a one-off payment in July 2012 of Kshs. 20,000. Elderly persons among the Sanye and the Aweer were enrolled in the OPCT but they had not yet received any payments. They did not know why they had not been paid and explained that they had no mechanism of finding out. In the same community, one person with a disability had been selected for the PWSN-CT. Among the Ilchamus, the OPCT had reached only those members of the community who live on the mainland, excluding those who reside on Lake Baringo Island. While these findings point to weaknesses in program implementation, there are reports of people experiencing long delays between their enrolment and receiving their first cash payment throughout the country, and, as such, it is not unique to these ethnic groups. Similarly, there are cases of programs making less frequent, but commensurately larger payments, to households in many areas, which arise from delays in the flow of funds to the programs.

**Box 3: The Aweer (Boni) – a marginalized group**

The Aweer traditionally lived in the forest but have moved their settlements to the roadside as a response to the insecurity arising from their proximity to Somali border. The assessment team visited eight villages inhabited by the Aweer, all of which were very remote. None of the villages have received any cash transfers. Although two villages reported having submitted identity cards for one or two people to be enrolled in the OPCT, none had benefited from the program. They also reported that no government official had talked to them about cash transfers. However, their main problem was access to education. Inadequate representation in decision-making structures with regard to cash transfers and development in general was also cited as a limiting factor.

<sup>31</sup>The World Bank OP 4.10 uses the term ‘indigenous peoples’ to refer to a distinct, vulnerable, social and cultural group possessing the following characteristics in varying degrees: (a) self-identification as members of a distinct indigenous cultural group and recognition of this identity by others; (b) collective attachment to geographically distinct habitats or ancestral territories in the project area and to natural resources in these habitats and territories; (c) customary cultural, economic, social or political institutions that are separate from those of the dominant society and culture; and (d) an indigenous language, often different from the official language of the country or region. The groups visited by the assessment team met this categorization.

**Figure 2: An Elmolo homestead**



Source: AIHD 2013

#### **4.4 Other Social Aspects of Cash Transfers**

78. *Traditional support mechanisms and cash transfers:* The study participants were asked whether the cash transfers had affected traditional sources of support. Although they agreed this was a possibility, they noted that given the current economic difficulties, people are no longer able to support each other as they had done in the past. A group of elderly women in Siaya observed that the cost of living is so high that everyone is struggling. They also noted that “*in the past there was love among community members but this is no longer the case.*” However, it is notable that the respondents acknowledged that those who receive cash transfers are more capable of contributing to the community’s needs. In essence, the beneficiaries are better able to access the community support that remains because they are also able to reciprocate.

79. *Culture:* The assessment team had to bear cultural differences in mind, especially when evaluating the complaints made by various communities. The team noted that some communities do not have a culture of complaining about certain issues, which means that they would be reluctant to raise questions about why some community members are accepted into the program while others are not. One IDI participant observed that they would “*consider this his/her luck as they waited for their turn.*” Culture may also affect the perceptions of people of certain conditions, including disease and disability. Although the evidence shows that the stigma associated with PWSD has reduced, there may be latent forms of stigma that are keeping some households from being able to access support. It is notable that the Sanye were considered generally ‘shy’ and fearful of their neighbours (hence their frequent movement as they run away from ‘intruders’), which would make it difficult for them to be accessed and targeted for cash transfers.

80. *Politics and cash transfers:* Politicization of cash transfers was cited in three of the four sites visited by the Assessment Team. In Siaya politics was cited as the reason for the OPCT’s presence in all constituencies. Furthermore, cases of politicians wanting to influence the lists of beneficiaries were also mentioned. If they failed to exert their influence they would complain about the selection process turning it into a political issue. A national level interviewee noted that: “*One time a member of parliament claimed that I had told him to compile the list of beneficiaries and forward it to me. When he came to my office he had a list of his own people that he wanted me to fix in the program. This was difficult since we had no one exiting the program and moreover it would have amounted to corruption.*”

81. *Supplementary services:* Respondents suggested a number of supplementary services that would support current beneficiaries: (i) soft loans for PWSD and for the community groups that have been formed with the support of the National Council for Persons with Disability; (ii) funding for groups of beneficiaries, some of whom are currently involved in IGAs while others have formed merry-go-rounds; (iii) introducing health fee waivers, especially for the older persons and PWSD; and (iv) building the capacity of beneficiary households; (v) investment in human capital development among the marginalized communities. Concern World Wide has an initiative that trains UFS-CT

beneficiaries on how to make prudent use of their transfer resources, and this was cited as an example of what else could be done to augment and complement the provision of cash transfers.

## **5 PROGRAM CAPACITY AND PERFORMANCE ASSESSMENT**

82. This section summarizes the assessment of the capacity of the relevant institutions to effectively implement the program's social management system as defined in various rules, procedures, and implementing guidelines.

### **5.1 Adequacy of Institutional Organization and Division of Labor**

83. The proposed NSNP will be designed in such a way as to consolidate the gains made so far by the five cash transfer programs. The current political goodwill will be critical for ensuring a robust program. The devolution of services to the county levels, which is expected to start in 2013, provides another opportunity to integrate the implementation of the NSNP into the devolved program structures that are already in place countrywide, and this will facilitate the expansion of the provision of cash transfers. The payment systems that are already in place, specifically the Postal Corporation of Kenya (PCK) and the agent model (as used in the HSNP) have yielded lessons that can inform the expansion of cash transfers nationwide. However, the use of other models, such as mobile money, should be explored to ensure that beneficiaries with different capabilities have easy access to their benefits.

84. The existing capacity in terms of infrastructure and personnel engaged in the various programs provides a framework for consolidation of efforts. For instance, the CT-OVC staff tends to work independently from the DOGSD yet the former are better resourced. Combined efforts would increase the efficiency in the delivery of the cash transfers. As the Program scales up it is important for the various staff engaged in the current programs to be brought together under the same umbrella. It is important for GoK to assess the capacities of the personnel and assign responsibilities not based on 'target population' but on 'target areas' for a comprehensive approach.

85. Considering the various social issues that were raised in section IV of this assessment report, it is critical that these should be taken into account in the design and implementation of the NSNP. Investments of both time and money will be needed to put in place participatory approaches to build ownership of and consensus about the NSNP. Also, skilled staff will be needed to ensure that the concerns of marginalized groups are addressed and resources to fund for training, technical support, and basic service delivery. Social development expertise with experience and understanding of social cultural dynamics and their influence in programs such as the NSNP is required.

### **5.2 Adequacy of Institutional Capacity**

86. The results of this assessment indicate variable capacity by the current cash transfer programs to implement the Program with a social systems lens. The HSNP and the CT-OVC, to some extent, have structures in place to ensure that grievances and complaints are addressed while the other three programs are putting similar measures in place. It is plausible that when the NSNP is rolled out, more households will be covered and grievances will reduce because so far most of the complaints are around targeting. Despite this possibility, there is need to ensure that community level conflicts are minimized and the Program does not adversely alter community structures. There is a need for better communication so that people understand the aims of the Program and the operational modalities.

87. Partnership with local organizations (CBOs, FBOs and NGOs) and other local partners would be one way of enhancing the institutional capacity to address the social issues. There are examples to learn from: the HSNP Secretariat is partnering with HelpAge International on the implementation of the rights committees; the PWSA is working with community groups in the selection of beneficiaries; while the CT-OVC has facilitated the formation of BWCs to address beneficiary-level issues and to give the beneficiaries a voice. There was however evidence that the current cash transfer programs are not effectively reaching out to non-state actors (NSAs) involved in initiatives that target the same categories of people. For instance, a discussion with two representatives of the Christian Foundation

for Children and Aging (CFCA)<sup>32</sup> in Uasin Gichu established that although the CT-OVC and OPCT were implemented in the same areas, these officers were not aware of the programs.<sup>33</sup> It is important for GoK to forge partnerships with NSAs.

### **5.3 Effectiveness of Inter-agency Coordination Arrangements**

88. The assessment identified various forms of inter-agency coordination within the five cash transfer programs that should be scaled-up and expanded within the scope of the NSNP. Although it has been agreed that the government should take the lead in coordinating the proposed program, it is also critical to recognize that the government is not capable of implementing all of the aspects of the program, including targeting, delivery, and M&E. Therefore, there is scope for multiple partnerships – between the government and the private sector, NSAs, and the communities including the beneficiaries as well as among government agencies.

89. Collaboration among government agencies is critical including semi-autonomous government agencies (SAGAs) such as the PCK. As noted earlier, the Children’s Department and the DG&SD may end up in different ministries, for example. For the Program to be effective, there would be need to identify the existing capacity and gaps – both human and material, to implement the Program and develop approaches to bridge the existing gaps to ensure an efficient NSNP. The current silo management of the cash transfers needs to be innovatively addressed to ensure that there are synergies at the national, county and community levels.

90. Private public partnerships (PPP) are key to the effective delivery of cash transfers. The experience of HSNP with its various partners, including FSD and Equity Bank with its network of agents, could be emulated in expanding the collaboration with private sector in the NSNP. However, care should be taken in drawing the TORs to ensure that such partnerships facilitate equitable access to transfers through, by and large, safeguarding the dignity and security of the beneficiaries, more so those who are marginalized. There is also a need to build linkages with other service providers, including the mobile telephone companies and other institutions that would support reliable and predictable delivery of cash transfers. The partnership with private sector would require service contracts that would aim for long-term commitment.

91. Non-state actors play a key role in the social sector in Kenya. Although some are involved in social protection (such as HelpAge International, Concern World Wide, and Oxfam that have been contracted to deliver a service), most have not been part of the ongoing effort to consolidate safety net programming. Efforts should be made to ensure that representatives of NSAs are included in the governance structures of the NSNP. In addition, the experiences of the HSNP and the UFS-CT could be useful examples for how to make the NSAs active stakeholders in the NSNP.

92. Community involvement is central to the success of any safety net program. All the cash transfer programs have worked with community level structures. Communities have organized themselves into groups (e.g. groups of PWSD) or beneficiaries have come together to form groups that have been instrumental in the delivery of cash. These partnerships have been critical and will continue to play a key role in the Program. Issues around information flow, involvement of communities in the formulation and dissemination of Program information, M&E and all other aspects of the Program should be strengthened. Most importantly, community structures need to be involved in the grievance and complaints management structures (with appropriate feedback loops) and also in the management/mitigation of social conflicts that could be wrought by the implementation of the NSNP, such as the conflict between local leaders and GoK staff.

### **5.4 Performance of the GoK in Ensuring that the Rules and Procedures are Followed**

The NSNP will be implemented by the Social Protection Secretariat, which will be based in the Ministry responsible for social protection. The ESSA has illustrated the structures that are already in

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<sup>32</sup>The CFCA enrolls children aged 12 years and below. It provides comprehensive support with a focus on human capital development. The program is currently supporting about 20,000 children in Kenya.

<sup>33</sup>In fact, our contact person, a member of a BWC, had taken her child to be considered for support by the CFCA.

place, the capacity to implement the Program (both human and financial) and the political will to continue meeting the needs of the poor, vulnerable and marginalized. The Constitution of Kenya 2010 makes it imperative for the country to focus on the needy in society, as clearly espoused through the Bill of Rights. Although it is stated that these rights will be progressively realized, it is important for such realization to be closely monitored.

93. The five cash transfer programs are operated based on rules and procedures that have been developed and reviewed over time. There are service charters that are ministry-based and program-based. The World Bank principles as contained in OP/BP9.00 will also be integral to the appropriate management of the NSNP.

94. There are however challenges that will need to be addressed to ensure that the Program runs effectively and efficiently. Existing rules and procedures will need to be developed and/or strengthened. These will need to be communicated clearly to stakeholders at all levels and monitored appropriately. The consolidated M&E framework on NSNP will need to be refined to include ESSA-relevant indicators. The Government will be responsible for ensuring that the Program is run in such a way that the cash transfers are designed equitably and are delivered in a reliable and predictable manner.

## 6 RISK RATING, RECOMMENDATIONS, AND ACTION PLAN

### 6.1 Social Risk Rating

95. The social risks for this program are medium. They are mainly related to the capacity of the programs to meaningfully engage with communities during the program's expansion, the communication channels used, and the measures put in place to address complaints and grievances. Table 2 presents the key risks and mitigation measures.

**Table 2: Key Risks and Mitigation Measures**

No.	Description of Risk	Mitigation Measures
1	<p><b>Program expansion</b> The initial process of implementing some of the cash transfers meant that, in some communities with low populations and low poverty, some households benefitted that would not have been eligible if poverty measures had been used. Economic equity should be a guiding principle in the allocation of beneficiaries in the different parts of the country</p>	<p>-The expansion of the provision of cash transfers through the NSNP should be based on an analysis of the country's poverty levels and be informed by clear objectives.</p> <p>-A communications strategy should be developed to ensure that there is continuous collation, documentation, and dissemination of program information. Information about targeting, including both the process and the criteria, should be clearly communicated to all stakeholders to ensure that the implementers, including the communities, have an adequate understanding of the program. This would limit the number of targeting-related grievances and other complaints.</p>
2	<p><b>Grievance and complaints mechanisms</b> The NSNP should learn lessons from the experience of the current cash transfer programs, particularly the HSNP.</p> <p>Grievance handling mechanisms that enables marginalized and minority groups to provide feedback must be a key feature</p>	<p>-Designate a unit and/or identify a partner to manage grievances and complaints. This unit/partner should have staff who are qualified to analyze grievances and should build the capacity of community-level teams to manage complaints at that level.</p> <p>-Build the capacity of community leaders including the chiefs, religious leaders, and other opinion leaders to listen to, document and forward complaints.</p> <p>-Institutionalize the management of complaints made to service providers, such as payment agents, including the use of program formats to record grievances. This can build on successful experience of the HSNP and to some extent the CT-OVC.</p> <p>-Develop and disseminate a comprehensive grievance and complaints communication strategy that reaches every community benefiting from cash transfers. The information should be illustrative and diversified to reach people with limited literacy levels. The strategy should include the use of radio, which has widespread coverage throughout the country.</p> <p>-Further work needs to be done to encourage people to lodge complaints as soon as possible so that targeting decisions can easily be revisited. This will make it necessary to leave a sufficient window of time between the posting of the tentative listing of beneficiaries and the final validation of the list.</p>

		-The development of a grievance module on the MIS system provides an opportunity to ensure that grievances are consistently recorded and analyzed across all interventions. The module should also capture complaints made about sub-contracted service providers. Consider how to identify grievance and complaints raised by people from minority and marginalized groups.
3	<b>Program exclusion</b> The NSNP will have to put measures in place to close the loopholes that have led to suspicions of and/or real exclusion and biases in the selection of beneficiaries.	-Efforts should be intensified to ensure that the NSNP limits both inclusion and exclusion errors. Measures should be put in place to ensure that people who are erroneously enrolled in the program are removed in a timely manner and without causing any social rifts.  -Special attention should be paid to marginalized groups that could inadvertently be left out of the program. Therefore, it is crucial to determine at the design stage where these groups are located and to put measures in place to ensure that they are included in the program in its entirety when they are eligible. This could be achieved using affirmative action, for instance, by ensuring that they are represented on local committees, including the rights and beneficiary committees.  -The Program implementers should make special efforts to engage formal and traditional leadership among the community implementing groups and particularly women.  -Ensure the inclusion of marginalized groups through mechanisms that are culturally appropriate through the involvement of respected and functional community structures such as clan groups, council of elders, age-sets, etc.
4	<b>Addressing the negative social effects of cash transfers</b> The fact that social protection is a constitutional commitment implies that communities might begin to take legal action against the implementers and the government in particular. There are also various signs of conflict in communities and among implementers that should be monitored and resolved.	-Regular consultations and adherence to the rules and principles of implementing the program will ensure that such conflicts are minimized and that, when they occur, they do not adversely affect the program.  -Measures should be put in place to monitor social cohesion. Regular community consultations would give people a forum to communicate grievances and resolve conflicts.  -There is a need to conduct spot checks and require proof of life measures to counter the tendency for households to conceal the death or graduation of beneficiaries from the program.
5	<b>Capacity for oversight and monitoring</b> The key challenge involved in program implementation is the lack of both human and financial resources. The number of staff in the five programs falls below the level needed to fulfill their mandates. The lack of equipment and funds for transport and other program needs limits the ability of the programs to provide the necessary oversight and monitoring for effective programming.	-There is a need to conduct a thorough assessment of the technical capacity, equipment, and other materials that are currently available for the five programs by program and by county. This will make it possible to identify clearly any capacity gaps.  -Policymakers should quantify the capacity requirements for the effective consolidation and expansion of the NSNP and the costs of providing that level of capacity. These costs should be factored into the costs of implementing the NSNP.  -Policymakers should draw up a plan for enhancing the capacity of the programs at the national, county, and community levels.
6	<b>Communications strategy for the NSNP</b> Inadequate communication about the program's objectives, processes, and expected outcomes has the potential to negate the positive impact of safety nets.	-It will be crucial to develop an effective communication strategy that makes use of multiple communication channels.  -It will also be necessary to use a wide range of channels of communication including traditional leaders, radios and mobile theaters in order to reach all of the people in the targeted communities. Explore how better to communicate to marginalized and minority groups in an appropriate manner.

## 6.2 Key Recommendations for the National Safety Net Program

96. The Program scale-up should be based on an analysis of the poverty levels and be informed by clear objectives and an expansion strategy. The initial process of distributing the beneficiaries of some of the cash transfers uniformly in selected districts (for instance, the OPCT) skewed the

representation of the poor and resulted in some communities with low populations and low poverty levels benefiting those who would otherwise have not qualified if poverty measures were used. Equity should be a guiding principle in the analysis of the magnitude of need for safety nets in the country.

97. A key rationale for developing the NSPP and the NSNP is to ensure coordination, harmonization, and the setting of standards. A communication strategy is also included in the NSPP to ensure that there is continuous collation, compilation, and dissemination of information from all of the cash transfer programs. Information about targeting in its totality, including both the process and the criteria, should be clearly communicated to all stakeholders to ensure that the implementers, including the communities, have an adequate understanding of the program. This would limit the number of targeting-related grievances.

98. Develop a robust M&E framework that includes indicators for capturing and responding to the Program's social impacts. Such a system should have indices on equitable distribution of the Program, capacity to capture and meet the needs of the marginalized groups; grievances and their resolutions (both on targeting and payment systems and covering government and external service providers) and the progressive realization of social protection as a right. The measures to be used would be developed by the national level teams with technical support from social systems experts.

99. The program should build on the lessons learnt from the cash transfer programs, in particular the HSNP and to some extent the CT-OVC Program, to designate a unit to manage grievances and complaints. This unit should have staff qualified to analyse and build the capacity of local teams to address grievances and complaints as they occur. This could be achieved by expanding the grievance function of the Rights Committees to support the communities and individuals to raise grievances and complaints on cash transfers and other social development issues.

100. Although the Program, in its expanded form, will absorb more beneficiaries there will be need to close the loopholes that have led to the suspicions and/or real corruption and nepotism in the selection of beneficiaries. Measures should be put in place to ensure that people who are erroneously enrolled in the program are removed in a timely manner without a backlash on the Program. Spot-checks and proof-of-life measures should be developed and implemented to ensure the efficiency of the Program.

101. Pay special attention to marginalized and minority groups. There is a need for the Program to determine, from the design stage, where these groups are located and how they can be effectively reached and involved. Those who qualify for inclusion in the Program should be included without discrimination. Affirmative action should be taken to ensure that they should also be part of the implementation structures including representation on the local committees including the rights committees.

102. Establish mechanisms for regular consultations that would ensure adherence to set rules and principles of implementing the Program. This would provide a common framework for addressing social conflicts in a timely manner thereby minimizing their negative impacts on the Program.

### 6.3 Action plan

Table 3: Action Plan

Core Principles	Key Elements	Key Considerations	Actions
1. Environmental and social management procedures and processes are designed to: (i) avoid, minimize, or mitigate any adverse effects; (ii) promote social sustainability in program design; and (iii) promote informed decision-making regarding the program's social effects.	<p>The World Bank will ensure that the program's procedures:</p> <ul style="list-style-type: none"> <li>-Are backed by an adequate legal framework and regulatory authority to guide the environmental and social impact assessments at the programmatic level.</li> <li>-Incorporate recognized elements of social assessment good practice, including by: (i) identifying measures to mitigate any adverse social impacts that cannot be otherwise avoided or minimized; (ii) clearly articulating institutional responsibilities and raising the resources to support the implementation of plans; (vi) promoting responsiveness and accountability through stakeholder consultation, the timely dissemination of program information, and responsive grievance redress measures.</li> </ul>	<ul style="list-style-type: none"> <li>-The Constitution of Kenya 2010 and various legal provisions articulate the core principles that underlie the NSNP.</li> <li>-Institutional responsibilities and resources for preparation, implementation monitoring, and inspection are clearly spelled out.</li> <li>-Public consultations are undertaken with relevant stakeholders, local authorities, and representatives of communities and of organizations directly affected by program.</li> <li>-Guidelines on public consultation are included in the OM of the NSNP based on the experience of the five cash transfer programs.</li> </ul>	<ul style="list-style-type: none"> <li>-Open the ESSA report for public scrutiny to ensure that all critical areas are addressed and included in the final version.</li> <li>-Use the outcomes of the public scrutiny to inform the programs' mandates including how to address the social effects of cash transfers.</li> <li>-Organize public consultation forum on the Program for input and buy-in.</li> </ul>
2. Program procedures should include adequate measures to protect communities against the risks associated with: (i) targeting beneficiaries; (ii) exposure to fraudulent use of cash transfers; and (iii) insecurity for the beneficiaries.	<ul style="list-style-type: none"> <li>-Ensures adequate community involvement in the programming including consultations before the initiation of the program, involvement in the targeting process, and the creating of mechanisms to address complaints and grievances.</li> <li>-Include structures to capture and address complaints and grievances on targeting and other program-related matters.</li> <li>-Pay the transfers in ways that will ensure the security of the beneficiaries, for example, by using multiple different modes of payment.</li> </ul>	<ul style="list-style-type: none"> <li>-There is an adequate legal framework to ensure that people are involved in decisions that affect them (Article 43 on the Bill of Rights of the Kenya Constitution).</li> <li>-Clear guidelines on complaints and grievances with upward and downward feedback mechanisms are key to successful programming.</li> <li>-Cash transfers have to be reliable and predictable in order to meet their objectives.</li> <li>-Capture the experience of programs where targeting is done properly as illustrated in targeting assessment, review of UFS-CT targeting, OPCT/PWSD-CT targeting.</li> <li>-Use a combination of targeting strategies based on the program objectives including CBT.</li> <li>-Sufficient Information Disclosure encouraged particularly posting of beneficiary information by implementing teams in a public space in the communities for a period of time to allow scrutiny.</li> </ul>	<ul style="list-style-type: none"> <li>-Set clear guidelines for targeting that ensure the accountability and transparency of the processes used for the various programs.</li> <li>-Establish a functional complaints and grievances mechanism for all five programs that handles complaints in real time.</li> <li>-Minimum information to be disclosed agreed upon and the manner in which this disclosure will take place determined</li> </ul>

Core Principles	Key Elements	Key Considerations	Actions
<p>3. Due consideration should be given to the cultural appropriateness of, and equitable access to, program benefits, with special emphasis on the rights and interests of marginalized people and groups, as well as the needs or concerns of vulnerable groups.</p>	<ul style="list-style-type: none"> <li>-Carry out free, prior, and informed consultations with marginalized people (in addition to older persons, PWS, and OVC) who are likely to be affected (positively or negatively) to determine whether there is broad community support for program activities.</li> <li>-Ensure that marginalized groups can suggest ways for them to benefit from the program.</li> </ul>	<ul style="list-style-type: none"> <li>-The Constitution of Kenya 2010 specifies various actions to safeguard the interests of vulnerable groups including their involvement in decision-making and their protection against any kind of adverse effects.</li> </ul>	<ul style="list-style-type: none"> <li>-Set parameters for identifying and including marginalized groups in the program as beneficiaries and as implementers (for example, serving on committees at all levels of the program).</li> <li>-Include indicators to assess how marginalized groups are benefiting from the program in the Program Implementation and Beneficiary Satisfaction Survey</li> <li>-Include indicators and tools for monitoring the involvement of marginalized groups in the program M&amp;E plan.</li> </ul>
	<ul style="list-style-type: none"> <li>-Ensure that program planning and implementation has taken account of groups vulnerable to hardship or disadvantage, including (as relevant) the poor, those with disability, older persons, disabled or marginalized groups.</li> <li>-If necessary, take special measures to promote equitable access to program benefits.</li> </ul>	<ul style="list-style-type: none"> <li>-This element is fully covered under the current policy framework in Kenya.</li> </ul>	<ul style="list-style-type: none"> <li>-Produce an accurate poverty map of the whole country to guide the expansion-up of the NSNP.</li> <li>-Ensure equitable distribution of NSNP resources based on the identified needs.</li> <li>-Carry out a Program Implementation and Beneficiary Satisfaction Survey to ensure program is broadly supporting the most needy, vulnerable and marginalized groups.</li> </ul>

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**ANNEX 1: GROUPS AND PEOPLE INVOLVED IN THE ASSESSMENT**

Site	SSIs with managers	IDIs	FGDs	Group discussion
Siaya	1. DCO	1. County Coordinator	1. Adult women - Yala	1. SIDDIPEG
	2. DGSDO Siaya	2. Beneficiary - disability	2. Elderly men - Yala	2. YIRO Group
	3. DGSDO Bondo	3. CDA - Gem	3. Female 65+	3. OPCT beneficiaries
		4. Acting County Coordinator and Siaya sub-County Coordinator	4. Male 30-49 years	
		5. CDA of KADENGE		
		6. KESPA Coordinator		
		7. Chief		
		8. Beneficiary – PWSD		
		9. Beneficiary - OPCT		
		10. Beneficiary - OVC		
		11. CDA (Bondo)		
Uasin Gichu	1. DGSDO	1. Chief, Segoro location	1. Women beneficiaries – PSWD-CT (30-49 (Cheptarit)	1. PWSD Beneficiaries – Men (5 people)
	2. DCO	2. Chairman, Council of Elders, Tapsangoi Location		2. Male community members (4 people)
		3. Chief - Soi		3. Chief and CDAs (Simbi)
		4. Non-beneficiary (Langas)		4. DO during debrief
		5. Beneficiary – PWSD, Langas		5. CFCA Eldoret
		6. Chief - Sosian		6. Beneficiary Welfare Committee (Langas) 5-7
		7. County Coordinator – Children’s Dept.		7. A group of 17 women in Soi
		8. Senior Chief - Tapsangoi		8. A group of 28 women in Soi
Mombasa	1. DCO	1. County Coordinator	1. Male 65+ (Majengo)	
	2. District Children’s officer	2. County Coordinator – Kwale, formerly DGSDO	2. Female 30-49 years (Majengo)	
	3. Task Officer	3. Chairman, Chaani Disabled Self-help group	3. Female 65+ (Mtopanga)	
	4. County Coordinator (DGSDO Mombasa)	4. Beneficiary PSWD	4. Female 30-49 (Mtopanga)	
	5. DGSDO	5. Beneficiary PSWD		
		6. Beneficiary disability		
		7. Beneficiary OVC		
		8. Chief – Kisauni		
		9. Non-beneficiary (Chaani)		
		10. Beneficiary – PWSD		
		11. Chief Chaani		
		12. Chief Changamwe		
		13. Chairman CBO – Magongo B		
Marsabit	1. Care Kenya	1. Chief	1. Male 30-49	
	2. County Coordinator	2. Assistant	2. Female 65+	
	3. DGSDO	3. Beneficiary HSNP (Majengo)	3. Male 65+	
	4. Equity Bank	4. Non-Beneficiary (Majengo)	4. Female 30-49	
	5. Assistant SP coordinator PISP	5. Beneficiary HSNP		
		6. Assistant Chief (Majengo)		
		7. Program Officer (Marsabit Child and Family Program)		
		8. Equity Agent – Badasa Location		
		9. Beneficiary HSNP		
		10. Beneficiary (PWSD)		
		11. Member of Social		

		Development Committee 12. Chief (Mountain Location)		
National level	1. Coordinator, NSP Secretariat			
	2. Manager, HSNP			
	3. Representative, Concern World Wide			
	4. CT-OVC Secretariat			

The assessment team made additional visits in March – April 2013 to selected marginalized groups. The groups met and people involved in the discussions are presented below.

**(1) Lamu County (Aweer and Sanye)**

- A meeting with opinion leaders in Lamu town.
- A visit to eight villages occupied by the Aweer (Boni) during which community discussions were held in 6 of the sites while in 2 sites the groups were split into three for ease of discussion.
- A visit to a Sanye village where discussions were held with three groups: older women (35+ years); younger women (20-34 years) and men (both youth and adults).

**(2) Turkana County (Elmolo)**

- A focus group discussion (FGD) was held with adult women (25 years – 50 years). These are Elmolos who have migrated to Kalokol area in Turkana in search of employment. Their original home is Loyangalani.
- Conducted in-depth interviews (IDIs) with the Kalokol location area chief and an elderly person, who before he migrated to Kalokol in 1999, he used to be a village elder of Layoni village in Loyangalani.

**(3) Marsabit County – Loyangalani (Elmolo)**

- A visit to two villages of Layoni and Moite where 3 FGDs were held: Adult women (25-50years), elderly male (above 50) and Youth male (18 years-24 years).

**In-depth interviews (IDIs)**

- 3 beneficiaries of cash transfers (2 receiving OPCT and one person receiving severe disability grants).
- Local CBO - Gurapau (meaning People of the Water). The main aim of the CBO is the revival of the Elmolo culture and way of life including language.
- 2 assistant chiefs representing the Elmolo community.

**(4) Nakuru County (Ogiek)**

- A meeting with opinion leaders in Nakuru Town (DGSDO - Molo).
- A visit to five villages around Nessuit during which community discussions were held in 3 of the sites (Nessuit centre, Sigaon, and Tagitech) for ease of discussions.
  - Nessuit Centre: IDIs - Chief, Member of County Assembly; FGDs - Older men, Younger Women, Younger Men, Older Women.
  - Tagitech - FGDs (Elders); IDIs (Village Elder).
  - Sigaon - IDI (Women Leader).

**(5) Baringo County (Ilchamus)**

- A meeting with opinion leaders in Marigat Town (DGSDO).
- A meeting with the Ilchamus Member of County Assembly at the Baringo County Assembly (in Kabarnet).
- A visit to Kokwa Island occupied by the Ilchamus during which In-Depth Interviews were held in 2 of the sites (Chief, Women Leader, Village Elder).

## **ANNEX 2: FOCUS GROUP DISCUSSION & IN-DEPTH INTERVIEW GUIDE ON FREE, PRIOR AND INFORMED PUBLIC CONSULTATIONS WITH VULNERABLE AND MARGINALIZED GROUPS (VMGs)**

### **Background**

- The objective of this guide is to engage the representatives of VMGs in discussions on safety nets in Kenya as part of the Environmental Social Systems assessment (ESSA) for the National Safety Net Program (NSNP).
- The main approach is to generate views from women, men, older persons and youth on NSNP in selected groups in Kenya (the Elmolo, Ogiek, Ilchamus, Boni and Sanye).
- The FGDs will be conducted with five groups per site: elderly men; adult men; adult women; male youth; and female youth.
- In-depth interviews will be conducted with opinion leaders to augment the information from the FGDs as appropriate. The participants will include chiefs, elders, women leaders, political leaders, etc.

### **Key considerations**

This is only a guide and the facilitator is encouraged to probe further or follow leads to the information provided that would enrich the understanding of the cultural appropriateness and intergenerational issues of relevance to the NSNP at the community level. The discussions shall be conducted in the local languages (through translation) and then translated in the field or soon after data collection into English. Key points will be agreed upon between the field team and the translators at the end of the each discussion.

### **The guide**

#### **(1) Social structure and organization**

- a. How is your community organized? PROBE on decision-making, the role of clans, age sets, etc.
- b. What are the characteristics of the kinship system?

#### **(2) Decision making and conflict resolution**

- a. How are decisions made in the community? Who is involved in decision-making on issues that affect community members more broadly? PROBE on the role of men, women, adults, the elderly and the youth.
- b. What are the main conflicts experienced by the community? PROBE on resource access, resource use and family disputes.
- c. How are conflicts resolved? What structures are in place for conflict resolution? PROBE on the effectiveness of the structures.
- d. What changes have taken place in the last 5 to 10 years that have had an influence on your society and those of your neighbors?

#### **(3) Relations with neighbors**

- a. What is your relationship with the other groups of people who live here? PROBE on the different ethnic groups and how they relate (marriage, trade, etc).
- b. What interactions do you have with the other groups? PROBE on mutual interactions, conflicts and their causes.
- c. What is unique about your group in relation to the other groups? PROBE on religion, culture, social organization, etc.

**(4) Access to government projects**

- a. What government projects are currently being implemented in this area? PROBE on education bursaries, health waivers, cash transfers, etc. **IF THERE IS A SAFETY NET PROGRAM FOCUS YOUR INTERROGATION ON THIS.**
- b. What is your view about the project(s)? PROBE on the duration of the project(s); targeting (how were the beneficiaries identified?), coverage, distribution and level of support.
- c. How is your community benefiting or not benefiting from these initiative(s)? PROBE on the reasons for benefiting or not benefiting.
- d. How is your community involved in the project(s)? PROBE on planning, management, decision-making, conflict resolution, etc.

**(5) Effective involvement of the community in safety net programming**

**a. IF THERE IS A SAFETY NET PROGRAM, FIND OUT:**

- What are the key strengths of the current program?
- What are the key weaknesses of the current program?
- How can this program be enhanced to ensure that your community benefits from it?
- How best can the community be involved to ensure that the challenges are addressed or minimized?

**b. IF THERE IS NO SAFETY NET PROGRAM, DISCUSS:**

- If the government were to introduce a safety net program, what suggestions do you have that would ensure its successful implementation?
- What structures in the community would be critical to engage in the intervention?
- What would be the potential challenges for the program? PROBE on how each of the challenge would best be addressed.

**(6) Grievances (IF THERE IS A SAFETY NET PROGRAM, FIND OUT)**

- What are some of the complaints about the program(s): PROBE on selection, disbursement of funds, accountability, transparency, etc.
- What structures are in place to address community members' grievances? PROBE: on the availability of committees, use of local administration, use of community structures (such as council of elders, etc).
- What are the views of the community members regarding the existing mechanisms? PROBE: on capacity; effectiveness; understanding of the issues, etc.
- What is your view regarding the capacity of the grievance mechanism to resolve issues? PROBE: if they have been resolved what made this possible; and if the issues have not been resolved what have been the hindrances.

**(7) Recommendations of additional/new measures to ensure the VMGs receive social and economic benefits that are culturally and gender and inter-generationally inclusive:**

- a. What measures should be put in place to ensure that your community receives maximum social and economic benefits from a government safety net program?

### **ANNEX 3: SUMMARY OF THE CONSULTATION ON THE ENVIRONMENTAL AND SOCIAL SYSTEMS ASSESSMENT OF THE NATIONAL SAFETY NET PROGRAM**

A public consultation on the ESSA was held on March 28, 2013. A number of civil society organizations representing social protection program beneficiaries, and the communities in which these programs are implemented, participated in the forum. Participants were drawn about 20 civil society institutions representing several categories of the poor and vulnerable population including older persons, women, and persons living with disabilities, women and other marginalized members of society. Following an introduction to the National Safety Net Program (NSNP) and the Program for Results (PforR) instrument that will be used to support the NSNP, the interim findings of the draft ESSA were presented. The presentation focused on the programs' environmental and social management systems, ranging from beneficiary and community consultation requirements, to grievance redress mechanisms and monitoring procedures. The social impacts of the programs, particularly on the marginalized and indigenous people, were also presented. Findings on program capacity and performance and related risk-ratings were discussed. Finally, the action plan arising from the report findings was shared with the participants.

The report was well received, with the participants indicating that it was comprehensive in scope. The participants appreciated the field work already undertaken, and the plans to include additional field data based on in depth discussion with indigenous people. The findings were considered to be valid and representative of realities on the ground. The participants also observed that the report recommendations were relevant and timely. During the discussions, participants sought clarification on a number of issues related to the design of the program. For example, they indicated that most CT programs require identification documents as a condition for enrolling people into the programs. Clarification was sought on how programs deal with child-headed household who do not have an adult member, for example. In response, it was noted that existing programs do make provisions for these situations, as reflected in their operations manuals. However, the meeting felt that there should be a clear distinction between program design and implementation realities. In other words, while operations manuals may provide for these situations, implementation in the field may depart from the expected procedure.

Participants also identified a number of areas already noted in the report that would benefit from further emphasis. These include, for example, the issue of communication. Participants observed that many of the concerns highlighted in report could be mitigated through aggressive, well-planned and extensive communications and awareness raising community campaigns. The discussion also took note of the limited capacity within government and also amongst civil society organizations. These institutions lack capacity to undertake consistent monitoring and evaluation. The participants recommended that partners consider investing resources not only on scaling up transfers, but on enhancing the capacity of government and other stakeholders to implement and monitor programs effectively. Similarly, the potential role of civil society in third-party monitoring of the performance of the programs and in giving "voice" to marginalized groups was re-emphasized. The participants also made specific recommendations for improving the report. For example, the report should include a brief discussion on the effects of the program on enhancing social inclusion in communities. A number of studies have been undertaken in this area, and the ESSA could reference such studies. Secondly, complaints and redress systems should provide clear enforcement mechanisms, so that such grievances are not only lodged and documented, but action is taken on those who abuse the program and the beneficiaries.

The meeting then discussed immediate next steps with respect to the ESSA. Participants were invited to send written comments by Tuesday next week. Both the comments from the discussion and the written input will be used to revise the ESSA. Once the additional field data is collected, the ESSA will be updated and finalized. As with the other assessments, the ESSA will be publicly disclosed toward mid this year, following internal approval processes.

**Environmental and Social Systems Assessment (ESSA)**

Public Consultation (March 28, 2013, Nairobi)

**Matrix of comments and responses**

<b>Participants Comments:</b>	<b>Response</b>
<b>General comments</b>	
The ESSA is comprehensive in scope. The use of field work lends credibility to the participatory and inclusive nature of the assessment.	This was noted. Further field work is being undertaken amongst selected indigenous communities. Findings of these interviews will be included in final ESSA report.
While the reviewed programs have designed some features (complaints and grievance systems, for example) to increase the participation of beneficiaries and to give them “voice”, implementation on the ground often departs from the design. There is need for the ESSA to note the disparity between shortcomings related to program design features on the one hand, and those related to implementation challenges, on the other hand.	The distinction between design and implementation shortcomings was acknowledged. A number of programs have developed mechanisms to check implementation against laid-down procedures (independent external monitoring systems for example). The importance of such checks will be highlighted in the report.
The recommendations and action plans presented in the ESSA are relevant and timely and will contribute to strengthening Program capacity for environmental and social risk management.	This was noted.
<b>Specific comments</b>	
The programs’ requirement to present national identification cards and birth registration documents, as noted in the report, excludes otherwise eligible poor and vulnerable people who do not have such documents, from registering in the programs. This problem is particularly problematic for child-headed households. How do the programs work around these issues?	The programs make some very specific exceptions to this requirement particular in the case of child-headed household. These exceptions are contained in the CT OVC program Operations Manual. The team will emphasize the need to ensure that implementation takes this into account.
The programs do not explicitly address the needs of street-children and do not specifically target them, yet this is an increasingly vulnerable sub-set of OVC. Are the programs (especially the CT OVC) planning to address this issue?	The objectives of the CT OVC program specifically relate to orphans and vulnerable children within the context of a household, as defined in the program operations manuals.
While the program’s Operations Manuals indicate that feedback is provided to communities on targeting outcomes experience from the ground suggests this feedback is not provided regularly. There is therefore need for programs to develop aggressive communications and awareness raising strategies in order to increase the “downward” flow of program information to beneficiaries and communities.	This was noted. The ESSA will highlight the importance of awareness raising and communication to beneficiaries and communities in building transparency and accountability, particularly amongst marginal and excluded people.
Civil society and Non-governmental organizations represent many of the poor and vulnerable communities in which the CT programs are implemented. These organizations, with enhanced capacity, can potentially play a critical role in monitoring the delivery of the programs and in building awareness amongst socially excluded communities.	This recommendation will be referenced in the ESSA.
Lack of capacity is often a constraining factor in the effective implementation of cash transfer programs. Does the Government have sufficient capacity to undertake extensive field monitoring activities in order to ensure the intended people receive the right amount of cash transfers at the right time?	The team agreed and noted that the issue of limited capacity amongst Government institutions has been noted in the ESSA (xx). The NSNP will implement a comprehensive Program Implementation and Beneficiary Satisfaction (PIBS) Survey which will provide regular and detailed monitoring information. Similarly, the NSNP will be supported by a Technical Assistance plan which will provide capacity building support to government in delivery of the program.

<p>Some qualitative evidence on how CTs in Kenya can improve social cohesion in communities exists. Reference to this social outcome of CTs would strengthen the report.</p>	<p>This is noted. The team will review these studies and consider referencing them in the report.</p>
<p>Complaints and redress mechanism should include clear enforcement mechanisms, so that once grievances are lodged and documented, there are clear procedures for taking some action against program agents and other stakeholders involved in abusing the program.</p>	<p>The team agreed with this point. The proposed recommendation will be re-emphasized in the report.</p>
<p>Politicians are often involved in pressuring program implementers to enrol certain individuals or communities into the program, even in cases where they are not eligible for registration. There is need to educate politicians on the objectives, aims and procedures of the CT programs. This could reduce negative interference, and build stronger political will for the programs.</p>	<p>The team noted the importance of this recommendation, particularly given the limited resources available to cash transfer programs, in relation to the number of poor and vulnerable people that are eligible for registration, and the political pressure that arises from this limitation. The recommendation will be referenced in the report.</p>
<p>The ESSA should take note of the role of party politics and political party affiliation in the exclusion of some potential beneficiaries. There are some examples of members of one political party being deliberately excluded from registration because of their political ideology, especially in communities where another political party has a large following.</p>	<p>The team noted that this reference will be included in the ESSA, and recommend how best to manage this challenge.</p>
<p>The impact of CT programs can be maximized by ensuring that the programs have graduation and exit mechanisms and by ensuring complementarity with other social protection programs and services. By working toward more effective cross-ministerial support, implementers of CT programs will encourage government to provide a more comprehensive package of support to those who need it the most, including the marginalized and excluded.</p>	<p>The team acknowledged the need for complementarity and graduation mechanisms and will consider how best to reference this in the report.</p>
<p>The Constitution of Kenya provides a strong basis for the expansion of CT programs in Kenya. However, the Constitutional imperative to devolve authority from central government to county structures may present some implementation challenges for CT programs. The programs should anticipate potential administrative and service delivery challenges (particularly at the early stages of devolution) and devise mechanisms to respond to such challenges.</p>	<p>The potential challenges associated with reducing the number of government ministries (from 40 to 22) and devolving key government functions to country governments was appreciated. The team will consider referring to this in the final report.</p>