

# **Social Protection Issues in Liberia**



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*Photo on the cover page: Head of a labour constrained household in Bomi County*

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## Acronyms

AIDS	Acquired Immune Deficiency Syndrome
ATM	Automatic Teller Machine
CBO	Community Based Organisation
CDA	County Development Agenda
CFSNS	Comprehensive Food Security and Nutrition Survey
CWC	Child Welfare Committee
CWIQ	Core Welfare Indicators Questionnaire
DDRR	Disarmament, Demobilization, Rehabilitation and Reintegration
FAO	Food and Agriculture Organisation
GDP	Gross National Product
HIV	Human Immunodeficiency Virus
IAPT	Inter-Agency Programming Team of the United Nations
IDPs	Internally Displaced People
LDHS	Liberia Demographic and Health Survey
MDGs	Millennium Development Goals
MoHSW	Ministry of Health and Social Welfare
NGO	Non-Governmental Organization
NSF	National Strategic Framework
NSWP	National Social Welfare Policy
OVC	Orphans and Vulnerable Children
PRS	Poverty Reduction Strategy
UN	United Nations
UNDAF	United Nations Development Assistance Framework
UNDP	United Nations Development Fund
UNICEF	United Nations Children's Fund
UNMIL	United Nations Mission in Liberia
USAID	United States Agency for International Development
USD	United States Dollars
WFP	World Food Programme

## Summary

This study has been commissioned by the United Nations in Liberia and has been overseen by the Inter-Agency Programming Team of the United Nations (IAPT). The purpose of the paper is to serve as a starting point for an inclusive process in which Government, the UN and other development partners analyse, prioritise and eventually improve social protection in Liberia. In order to serve this purpose, the paper gives an operational definition of social protection (chapter 1), analyses the social protection needs in Liberia (chapter 2) and identifies to what extent ongoing and planned social protection interventions meet these needs (chapter 3). Based on the needs analysis and on an analysis of the frame conditions for social protection interventions the paper gives recommendations for improving social protection in Liberia (chapters 4 and 5).

The needs analysis reveals that 300,000 households (48% of the population) live in extreme poverty. Members of these households are not able to meet their most basic needs in terms of food, shelter, clothing, basic health care and education. This is partly due to income poverty and partly due to a lack of social services such as basic health care and education. While one of the four pillars of the Poverty Reduction Strategy is focussed on infrastructure and social service delivery, neither the Poverty Reduction Strategy (PRS) nor most other policy or planning documents contain interventions that are specifically tailored to increase the income of extremely poor households.

Of the 300,000 extremely poor households, approximately 50,000 households (8% of all households) are at the same time labour constrained. They are households with no adult members that are fit for productive work. They consist of people who are too old or too young to work or disabled or chronically sick. As they are labour constrained they are not able to access the labour based interventions planned in the PRS. They are the worst off and at the same time the most neglected category of households in Liberia.

In order to fill the social protection gap summarized above, the PRS should be complemented by a social protection policy which ensures that extremely poor households are not bypassed by the development interventions of Government, the UN and other development partners. To start the process of developing a social protection policy Government, the UN and the development partners could take the following initial steps:

1. Jointly discuss the social protection needs based on chapter 2 of this report. This should lead to a consensus on the role of social protection in Liberia and on social protection priorities
2. Analyse all ongoing and planned employment and productivity oriented interventions with regard to their actual and potential contribution to social protection. The analysis should determine to what extent these interventions are already tailored to the needs and frame conditions of the 250,000 households that are extremely poor but not labour constrained. The analysis should also determine what could be done to explicitly tailor some of these interventions to the needs of extremely poor households and which additional interventions may be required to cover this group. The analysis has to be done separately for different sub-groups of extremely poor but not labour

- constrained households like small farmers lacking seeds, fertilizer and tools; landless households, fisher folks lacking nets or boats, etc
3. Simultaneously the feasibility, cost-effectiveness and impact of a social cash transfer scheme for the 50,000 extremely poor labour constrained households should be tested through operational research. A preliminary estimate (see chapter 5.3) arrives at the conclusion that a cash transfer scheme could reach 25,000 households by 2012 and all the 50,000 extremely poor labour constrained households by 2015. The annual costs would be USD 12 million by 2012 and USD 24 million by 2015. The impact of the scheme would be a reduction of the ultra poverty rate to 44% by 2012 and to 40% by 2015. This coincides with the target of the PRS to reduce extreme poverty between 2008 and 2011 from 48% to 44%
  4. Finally it has to be assessed to which extent social services reach the extremely poor households and what can be done to improve access of these households to basic health care and education.

These initial activities can form the starting point for elaborating a social protection policy and programme that complements the PRS. The process should be led by Government and assisted by the UN and by other development partners. As social protection is a multi-sectoral task it is recommended to establish a Social Protection Steering Committee which oversees the development of a social protection policy and coordinates the plans and interventions of the Government, the UN and other development partners.

# 1. Introduction

The Liberia Poverty Reduction Strategy (PRS) 2008 – 2011 summarizes the social and economic situation in Liberia as follows: *Liberia is recovering from more than two decades of civil conflict that killed an estimated 270,000 people, created hundreds of thousands of refugees and internally displaced people (IDPs), leaving a legacy of damage and destruction to institutions, to infrastructure, to social capital and to traditional norms and customs. The economy collapsed, impoverishing much of the Liberian population with the result that Liberia has some of the worst social indicators in the world.* Some of these indicators are:

- GDP per capita in 2007 was USD 135<sup>1</sup> dropped from USD 525 in 1988
- 64% of all Liberians live under the absolute poverty line<sup>2</sup>
- 39% of children under the age of 5 suffer from chronic malnutrition while 27% are underweight<sup>3</sup>
- Under 5 child mortality is 235 per 1,000 live births<sup>4</sup>
- 16% of the people of Liberia live with disabilities

The indicators given above are averages for the whole of Liberia. They mask the fact that the rural population is worse off than the urban population and that people living in the South Eastern regions are much worse off than the population in other regions. The Greater Monrovia CFSNS (page XIII) states: *While in the rural sample, only 9% were considered to be food secure, 51% of the urban households are food secure.*

Unfortunately, the statistical data given above and in the other chapters of this report are not very reliable. Different documents used (see References) contain widely differing data (see Annex 3).

The PRS emphasises the need to maintain peace and security as a precondition to achieve a rate of economic growth that will enable the country to recover and to develop once again. However, economic growth will not benefit all households in Liberia. The poorest and most vulnerable sections of the population require social protection interventions that are tailored to their specific needs. In order to improve the socio-economic situation of all Liberians and in order to achieve progress with regard to the Millennium Development Goals (MDGs), employment, investment and infrastructure policies have to be supplemented by social protection interventions.

In this paper social protection is defined as:

- Public actions taken in response to levels of vulnerability, risk and deprivation which are deemed socially unacceptable within a given polity or society. Social protection thus includes support provided by government, non-governmental actors or a combination of both
- The concept covers direct support to those who are currently in extreme poverty and insurance for those who are not currently amongst the poorest in order to protect them from the impact of potential future shocks

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<sup>1</sup> World Bank: African Development Indicators, 2007

<sup>2</sup> Republic of Liberia: Poverty Reduction Strategy 2008 - 2013

<sup>3</sup> Republic of Liberia: Government and UN Joint Programme on Food Security and Nutrition, 2008

<sup>4</sup> UNICEF: The state of the World's Children, 2008

- Direct support to the poorest is usually called social assistance and insurance against future need is called social insurance or social security. Social protection measures are distinctive in that whilst they do focus on poverty alleviation, they do not focus on economic growth.

This consultancy has been commissioned by the United Nations in Liberia and overseen by the Inter-Agency Programming Team (IAPT). The purpose of the consultancy is to analyse the social protection needs and the ongoing and planned social protection interventions in Liberia in order to identify gaps in the current social protection arrangements. Based on this analysis the consultancy has to propose options for social protection interventions which seem to be feasible within the institutional setting and capacity restrictions of Liberia, are cost-effective and have a high impact with regard to improving the food security and access to other basic needs of the neediest sections of the population. The paper will finally outline the process of elaborating a social protection policy and of designing, planning, testing and eventually scaling up effective social protection interventions (see TOR in Annex 1).

## **2. Social Protection Needs**

Like other West African countries Liberia has a large number of extremely poor and vulnerable households. This is partly due to income disparities, which existed already before the war, and is partly the result of many years of armed conflict. In addition to income poverty, which is reflected in the high number of absolutely poor and extremely poor households, the country also suffers from scarcity of social services (education, health, water and sanitation) and from the inadequacy of physical infrastructure (especially roads), of economic infrastructure (financial services like rural banks) and of administrative and security related infrastructure.

Most affected by all these deficits are vulnerable groups like children, women, the elderly and people living with disabilities and living with HIV and AIDS. In addition there are large groups of people who suffer from specific problems resulting from the war: Internally displaced people, people who fled to neighbouring countries and are repatriated, combatants who have been demobilised and have to be reintegrated. There are also orphans many of whom are living in sub-standard orphanages, former child soldiers and women and girls, who have been abducted, used as slaves and exposed to sexual violence by the different armies and rebel groups.

Members of the groups listed above suffer not only from income poverty but also from war related traumata and are stigmatised. Many have not been able to attend school. They require psycho-social support, basic education, vocational training and employment or self-employment in order to become self-reliant and well integrated citizens. Women need protection from sexual abuse which has led to adolescent pregnancies and the spread of HIV and AIDS.

The long list of social protection needs given above shows that income poverty is only one of the problems faced by a large number of Liberians. However, income in cash and/or kind is the precondition for meeting basic needs such as food, clothing, shelter, basic health services, sanitation and education. Lack of income results in reduced access to basic needs. Extreme lack of income means hunger and

starvation and can lead to harmful coping strategies such as child labour, transactional sex and criminality.

The Liberian Demographic and Health Survey 2007 provides data on how the access to education is correlated with household income. While the net primary school attendance rate of the lowest quintile is 22.6, it is 66.4 for the highest quintile. For secondary school the relation is 4.5 to 38.2. School absence all days in the week preceding the survey was 42.2% for the lowest quintile compared to 10.5 for the highest. Lack of school fees and child labour were the main reason for absenteeism. In summary: **While there is a multitude of different social protection needs of different groups of Liberians, the most common and most basic social protection requirement is a reliable minimum income.**

Without social protection of the of the poorest categories of the population, the peace building efforts and the efforts to built an inclusive society based on justice and on the protection and provision of human rights cannot succeed and the MDGs will not be achieved. Even economic growth will not be sustainable if a substantial part of the children of Liberia grow up under conditions that deny them the right to food, to basic health care and to education. Social protection is an investment in human capital which ensures that all children have the opportunity to become healthy, well educated and productive members of the society.

## **2.1 Categories of households needing social welfare interventions**

The following needs assessment is done to determine which categories of households most urgently require social protection interventions and what are the main social protection needs of the prioritized population groups. The assessment is based on poverty headcount data resulting from the Core Welfare Indicator Questionnaire Survey (CWIQ) and on rough estimates on household structures which still have to be verified by further analysis (see Annex 3).

2008 census results indicate that Liberia has a population of 3.5 million living in 650,000 households (average household size 5.4). According to the CWIQ results 64% of the 3.5 million people fall under the national poverty line and 48% fall under the extreme poverty line. This means that 2.2 million people living in 400,000 households are absolutely poor of which 0.5 million living in 100,000 households are moderately poor while 1.7 million living in 300,000 households are extremely poor.

The distinction between moderate poverty (household which are absolutely poor but not extremely poor) and extreme poverty is important. Persons living in extremely poor households suffer from severe hunger during most of the year, become physically weak, tend to sell or consume their productive assets (e.g. livestock, tools, seed), give up investing in their future (like sending children to school), and die from infections that other people survive. For these reasons extremely poor people are slow to respond to programs, which demand a certain amount of effort and contributions (like credit and saving schemes).

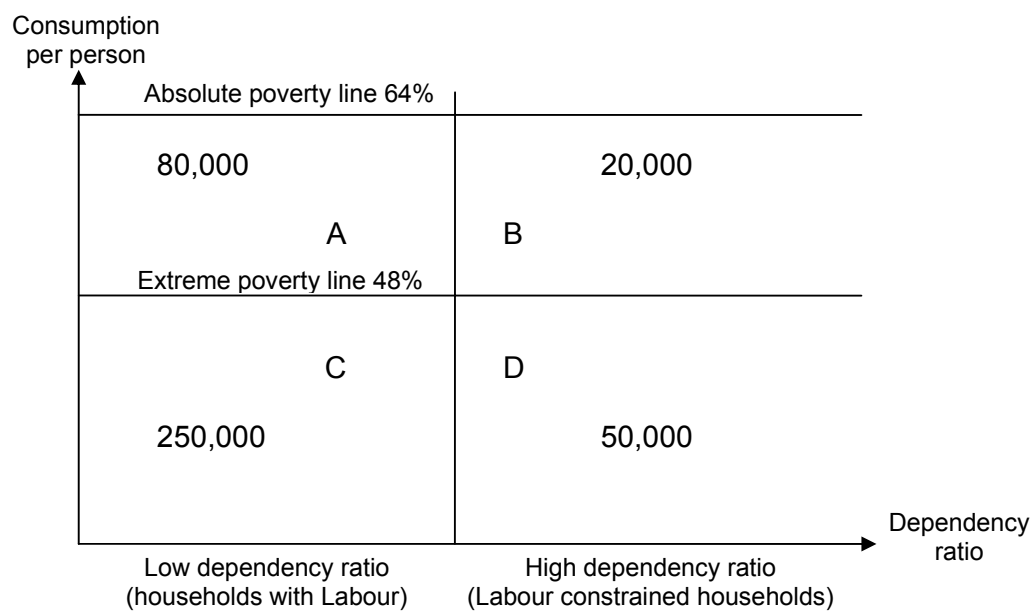
In line with the Liberia PRS and the MDGs, the core objective of social protection should be to reduce and eventually eradicate extreme poverty. A second objective should be to prevent moderately poor households from sliding into extreme poverty.

With regard to the causes of poverty it is estimated that out of the 300,000 households suffering from extreme poverty, approximately 250,000 are poor because of conjunctural factors. Conjunctural poverty is caused by unemployment or underemployment. It involves households with able-bodied adults who have no access to productive employment. If these households get access to skills training, to productive assets, to employment, or to well designed public for work programs, they are able to escape from poverty.

The extreme poverty of the other 50,000 households is structural as it is related to the structure of the household. These households have few or no able-bodied adult household members. In statistical terms these households have either no household member who is fit for productive work or have a high dependency ratio. They are labour constrained. As a result of the war or due to HIV and AIDS the breadwinners have died leaving grandparents, who are too old to work, and orphans, who are too young. Labour constrained households cannot react to self-help oriented or labour-based projects or programs. Single mothers with a large number of children, households headed by disabled people and child-headed households also belong to this category.

Figure 1 summarizes the four categories of poverty described above. The 80,000 households in Category A are in a relatively favourable situation. They are just moderately poor and include household members able to do productive work. They are able to respond to self-help oriented projects and programs in order to overcome their poverty and hunger.

**Figure 1: Households in Liberia suffering from different categories of poverty**



The 20,000 Category B households are labour-constrained and are therefore unable to respond to labour-based interventions. Households headed by a pensioner, who receives a small pension, or households regularly supported by the extended family are typical for this group.

The 250,000 Category C households suffer from extreme poverty in spite of the fact that they have household members able to perform productive work. Many small-scale farmers and fishermen fall into this category. To improve the economic situation of these households they have to be targeted by programs specifically tailored for vulnerable but viable households.

The 50,000 households in Category D are in the most unfavourable situation. They suffer from extreme poverty. At the same time they cannot respond to development projects or programs because they have no household members able to perform productive work. They have no or little self-help capacity. This group – the 8% worst off households in Liberia – most urgently requires social protection interventions. Most of the approximately 270,000 persons living in Category D households are children.

In the process of economic development, which will be accompanied by increasing opportunities for employment and self-employment, a number of households in Category A and C will be able to escape from poverty. Category B and D households will, however, not automatically benefit from economic development, because they lack employable adults who can make use of such opportunities. Demographic trends (growing number of old people) and the impact of HIV and AIDS (more orphans and more generation gap households) could increase the number of incapacitated households within the next 10 years.

In summary: 48% of the Liberian population live in extreme poverty. This means that approximately 1.7 million of the 3.5 million Liberians suffer from chronic hunger. The inadequacy of social services (health, education) combined with the inability to pay for transport and fees (if services are available) prevents them from meeting their most basic needs. Their problems are aggravated by rising food prices. Costs of a basic food basket have risen by 22% in the period January 2007 to January 2008. Lifting these 1.7 million people over the extreme poverty line, while at the same time caring for the specific problems of those effected by the war (psycho-social support, reintegration, basic education and vocational skills training, protection from sexual abuse), are the challenges which require an effective social protection policy and programme. Simultaneously with providing social protection the Government is faced with the task to improve infrastructure and social services.

## **2.2 Specific social protection needs of households that are extremely poor but not labour constrained**

Extremely poor households, which have household members that are fit for productive work, need employment or income generating activities in order to work themselves out of poverty. The CFSNS (page 108) gives percentages on how many households face the following constraints which prevents them from increasing agricultural production:

- Lack of seeds 50%
- Lack of tools 50%
- Lack of fertilizer/pesticides 12%
- Lack of household labour 28%
- Lack of cash/money 31%

There are a number of reasons why extremely poor households often fail to access employment or income generating interventions or any intervention that reduces their constraints:

- Due to extreme poverty household members may be weak and may not qualify for hard work
- As they have no collateral they may not be accepted as members of credit and savings groups or other community level activities that are based on the principle of reciprocity
- Because of their low economic and social status they may not get priority when community leaders decide on who will get access to interventions offered to the community
- In case they manage to receive an investment grant like a starter package (seed and fertiliser) they may be forced to sell it in order to meet their urgent immediate need for food or health care.

In order to address their specific social protection needs this category of households requires temporary consumption transfers which meet their immediate needs especially for food over a period of 6 to 12 months. In addition they require employment opportunities or self-employment promoting interventions that result in generating sustainable incomes. In summary: **The 250,000 extremely poor households which are not labour constrained require a combination of welfare and productivity oriented interventions.**

### **2.3 Specific social protection needs of extremely poor households that are at the same time labour constrained**

Typically these households consist of members who are either too old to work or too young or disabled or chronically sick. They are generation gap households (grandmother with orphans), households headed by people who live with disabilities or with HIV and AIDS, child-headed households and single mothers with many children. The CFSNS (page 97) states that on the average 26% of all households are headed by chronically ill or disabled persons. In Grand Bassa County 55% of all households are disabled-headed. The CFSNS (page 123) also states that 36% of all households received food assistance. Due to the transition from emergency to development, food assistance will be phased out leaving the extremely poor labour constrained households (which do not benefit much from development) in distress.

Extremely poor households which do not have any household member who is fit for productive work or households where one fit household member has to care for more than 3 dependants require regular and reliable social transfers which will empower them to meet their basic needs and to invest in human capital (the health and

education of their children). In summary: **The 50,000 extremely poor households, which are at the same time labour constrained, require social transfers until their household structure has changed and they are no longer labour constrained.**

### **3. Assessment of existing and planned social protection interventions in Liberia**

#### **3.1 Social protection in the Poverty Reduction Strategy 2008 -2011**

The PRS starts out with a chapter on poverty in Liberia in which it provides data on the extent of absolute poverty and extreme poverty based on the CWIQ survey. The targets of the PRS are to reduce absolute poverty from 64% in 2008 to 60% in 2011 and to reduce extreme poverty from 48% to 44% in the same period. The PRS then proceeds to lay out how poverty will be reduced by achieving rapid, inclusive, and sustainable growth (chapters 4 to 7) combined with strengthening governance and the rule of law and rehabilitating infrastructure and delivering basic services (chapters 8 and 9). These basic services include health and education.

The terms social protection or welfare or safety nets are not found in the PRS. There is also no indication of interventions that target persons or households living in extreme poverty and vulnerability and are not able to fend for themselves.

#### **3.2 Social protection in the County Development Agendas 2008 – 2012**

The PRS on national level is mirrored by County Development Agendas (CDAs) for each of the 15 counties. Like the PRS the CDAs are based on extensive consultations on district and community level. The consultant analysed the CDAs of Bomi and Bong Counties (the two counties visited).

In both counties the population prioritised 1) roads, 2) health facilities and 3) educational facilities. A need for social protection, for welfare or for any other form of assistance to extremely poor and incapacitated persons or households is not mentioned in any of the documents.

In the face of obvious social protection needs this is surprising. It may be that the voice of the extremely poor households was not heard because they either had no say or did not even attend the consultations. It could also be that social protection needs were not expressed because neither the Government nor the donor community has ever offered social protection interventions making social protection an unknown quantity. You cannot ask for what you have never seen or heard of. It could also be that in the process of aggregating people's needs and demands, social protection was screened out.

The interventions planned for both counties coincide with the four pillars of the PRS:

- Peace and Security
- Governance and the Rule of Law

- Economic Revitalization
- Infrastructure and Basic Social Services

Like in the PRS there is no indication of interventions that target persons or households living in extreme poverty and vulnerability and are not able to fend for themselves.

### **3.3 Social protection in the draft National Social Welfare Policy (NSWP)**

The NSWP identifies a wide range of social welfare needs to be addressed by the policy and respective social welfare programmes. It also analyses to what extent these needs are met. It concludes that currently hardly any of the needs are met and that there is a big gap between the social welfare needs of the many vulnerable groups in Liberia and the social welfare services actually provided. The NSWP then describes in detail which services should be provided in future and what capacities have to be built in order for the MoHSW and other implementers to provide these services.

The NSWP summarises the interventions to be implemented in five pillars. The first pillar is called 'Sustainable Livelihoods'. Under this pillar the following interventions – once implemented - would contribute significantly to social protection as defined in chapter 1:

1. *Social assistance and/or life skills or employment readiness programs to foster socioeconomic security*
2. *Food security and nutrition assistance to curb malnutrition and other food security deficits or difficulties*
3. *Care and support for vulnerable people, including child care, elderly care.*

Under Key Strategies the NSWP opts for direct interventions in order to '*provide financial, material, and training support directly to vulnerable people and households so that their capacity to take care of themselves may be strengthened over the long run*'. The NSWP also strongly supports decentralised implementation through local government, CBOs and the private sector and to involve community leaders as much as possible. It finally gives some useful recommendations with regard to effective targeting and with regard to forging community consensus on who are the most vulnerable in the community.

### **3.4 Social protection in the HIV and AIDS National Strategic Framework (NSF) II 2009 – 2012**

For 2008 the number of people living with HIV is estimated at 107,751. More women are infected than men (female : male ratio 1.5 : 1). This information is based on limited data. There is no data on the number of orphans resulting from HIV and AIDS. The NSF quotes that in 2007 8,167 children lived in 117 orphanages of which only 50 were accredited and regulated by the Ministry of Health and Social Welfare.

The NSF contains chapters on prevention, treatment, care and support, on monitoring, evaluation and research and on impact mitigation. The output to be

achieved by impact mitigation activities is stated as follows: *Social, cultural and economic effects of HIV and AIDS successfully mitigated at individual, household and community level (page 69).*

The chapter on impact mitigation indicates that at the moment only very limited activities are going on. *Through the Global Fund, two NGOs are providing a support package including counselling, payment of education and health care fees, and psychosocial support for OVC. At the end of 2007, a total of 761 OVC were being provided counselling, educational and health care support; 653 OVC are receiving educational support... In addition, the Catholic Church supports a small group of OVC by providing educational support and placing children in the homes of extended family or friends (page 55).*

For the future the NSF foresees community empowerment and food and nutrition interventions. With regard to food and nutrition support the NSF refers to the UN supported activities laid down in the Government and UN Joint Program on Food and Nutrition (see chapter 3.5).

In summary: HIV and AIDS mitigation activities and plans do not seem to meet the enormous needs for social protection resulting from the pandemic.

### **3.5 Social protection in the United Nations Development Assistance Framework (UNDAF)**

The UNDAF sets out how the UN organisations in Liberia will contribute to the PRS of the Government of Liberia and to achieving the MDGs. It summarises the contribution of the UN to Liberia's national development strategy in the following five outcomes:

1. Peace and security
2. Equitable Socio-Economic Development
3. Good Governance and the Rule of Law
4. Education and Health
5. HIV and AIDS Prevention, Treatment and Care

The terms social protection, safety nets, social welfare, social assistance or social cash transfers are not mentioned in the UNDAF. In order to contribute effectively to the outcomes 2, 4 and 5 social protection interventions may be required.

The description of outcome 2 starts out as follows: *A key national objective is to rapidly accelerate the pace of economic growth as a foundation for poverty reduction and sustained development... and ...job creation is a top priority...and...a key result necessary in achieving this UNDAF outcome is a dramatic boost to the food security, nutrition, and poverty reduction efforts of the government.* However, in order to achieve equitable development and food security on household level, the employment and productivity oriented interventions prioritised under output 2 will have to be complimented by social protection interventions.

Outcome 4 is restricted to improving educational and health care services. It fails to acknowledge that children living in extremely poor households will have difficulties to

access education and health care unless the improvement of educational and health care services is complemented by social protection interventions.

Under outcome 5 the UNDAF states: *There is an urgent need to scale up towards access to HIV and AIDS prevention, treatment, care, and support for those infected and/or affected.* The UNDAF does not specify what kind of support is required for HIV and AIDS affected households. It is silent on what priority is given to HIV and AIDS impact mitigation.

### **3.6 Social protection in the UNICEF country programme action plan 2008 – 2012**

*The overall goal of the country programme is to contribute to the reduction of child mortality and vulnerability and to the development of a safe, secure and peaceful environment for children.* In order to contribute to this goal, UNICEF has planned interventions in child survival (health, nutrition, water), basic education and gender and child protection.

*Child protection...will focus on development of systems for the legal and **social protection** of children throughout the country.* One of the intervention areas to achieve social protection of children is *...community based social and economic reintegration to enable vulnerable children (OVC/CABA) to embark on a sustainable livelihood.* More specific: *Services such as psychological support, life skills development, and **income generating activities** aimed at mitigating the impact of HIV/AIDS will be managed by the Child Protection Programme.* To test options in this area UNICEF is involved in two pilot activities.

In order to contribute more effectively to reducing child mortality and vulnerability, the interventions planned will have to be supplemented by social protection interventions for households that are too poor to access education and health services and who have to resort to child labour, early marriages and transactional sex to survive.

When designing and testing social protection interventions, UNICEF could immediately apply the following lessons learned from previous cooperation:

- *Owing to weak national and local government structures, the country programme implementation since 2003 depended on international and national NGOs and faith based organisations....This mode of operation is not sustainable in the long term and will be addressed by shifting support to the Government to strengthen infrastructures at all levels*
- *Some 12,000 children were released from armed groups with 9,200 of them receiving reintegration assistance. The programme of cooperation established community support networks based on **child welfare committees (CWCs)** to facilitate the reintegration of demobilized children and monitor, report and respond to cases of child abuse and exploitation.* These committees could possibly form the grass root structure for designing, testing and implementing social protection interventions.

### **3.7 Social Protection interventions by the World Food Programme (WFP)**

WFP provides monthly food rations to over 1,200 Ivorian refugees and third country nationals residing in two camps. These groups were determined as vulnerable by a comprehensive food security and nutrition survey.

School feeding is provided to 450,000 children in 2,500 schools and take home rations are provided to 15,000 girls.

In cooperation with UNICEF, WHO and specialised NGOs the Ministry of Health is assisted to implement therapeutic feeding for 1,000 children and 1,000 mothers, as well as supplementary feeding for 4,500 children and 1,500 mothers. Food is also provided for 3,000 PLWHAs and their caretakers, 2,500 TB patients and 2,000 hospital inpatients.

WFP also supports food insecure communities through food for work to restore rural livelihoods and community assets particularly through agricultural rehabilitation (1,200 persons), skills training (1,600 persons), and road rehabilitation and other infrastructure works (1,000 persons).

### **3.8 Social Protection in the Government and UN Joint Programme on Food Security and Nutrition**

This document summarises the food security and nutrition related interventions supported by UNICEF, WHO, FAO, WFP, UNDP, World Bank and USAID. It includes interventions in the field of emergency preparedness and response as well as medium term support to the PRS. Medium term interventions are:

- Support for access to markets and factors of production
- Support for access to basic services and safety nets
- Support to nutrition priority interventions

Of all the policy and programme documents this is the only document which emphasises the need for social protection. The interventions to be strengthened under social protection measures/safety nets are:

- School feeding (however, only 37% of the primary school age population is enrolled in school)
- Supplementary food provision or cash grants.
- Employment generation to provide 800,000 person-days of employment during the dry season
- Measures to prevent the termination of user fees on education, health and welfare services
- Revitalisation of child welfare committees, youth groups and children's clubs
- Protection of adolescent girls through a nation wide sensitisation campaign
- Accelerating action to improve water and sanitation
- Paying attention to under-served areas, including the south-east

These measures should also contribute to cushioning the impact of food inflation on the most vulnerable. The programme document emphasises the need for better targeting of the poor.

One of the specific outputs to be produced by UNICEF reads: (D.03.02) *Capacity to deliver a cash transfer programme for vulnerable groups, including pilot programme for vulnerable families.*

### **3.9 Ongoing social protection interventions assisted by UNDP**

UNDP in collaboration with other development partners has been involved in a number of interventions which laid the ground for the transformation from emergency to development and which form the basis for the growth oriented interventions of the PRS. They can also be seen as the basis for developing a social protection policy and programme. The main UNDP interventions in this category are:

- The completion of the Disarmament, Demobilisation, Rehabilitation and Reintegration (DDRR) programme
- Institutional capacity building interventions including the formulation of a 10-Year Capacity Development Strategy and Action Plan
- Supporting a number of diagnostic studies and surveys which were required as a basis for elaborating the PRS and are also used for this study
- Coordinating the Liberia Decentralization and Local Development Program which restores the functionality of county administrations in 15 counties.

Interventions that explicitly target extremely poor persons or households are:

- 735 orphans and vulnerable children receiving health, educational and psychosocial support
- 8,789 vulnerable ex-combatants such as women and the disabled are receiving vocational skills training, apprenticeship/job-placement training and agricultural training

Interventions that do not explicitly target extremely poor persons or households but could possibly be tailored to their needs are:

- The Economic Empowerment of Women in Lofa County Project, which provides approximately 600 women with entrepreneurship and business management skills and with micro-finance loans which will be revolved to include 2,000 over the project period
- The UNDP Micro Finance Outreach Programme in the Central Bank of Liberia reaches 13,650 clients of which 85% are women
- The UN Joint Programme for Employment and Empowerment of Young Women and Men in Liberia which will start in January 2009. One of the outputs of this scheme is: *10,000 young women and men will be trained and made employable through CBT, at least 5,000 will be adolescent girls.*

### **3.10 Ongoing social protection interventions assisted by bilateral donors and NGOs**

A large number of NGOs has been involved in the reintegration of children that had been used as child soldiers or misused in other ways during the armed conflict. For this purpose Child Welfare Committees (CWCs) have been set up on community level. The NGOs provided the CWCs with bicycles and stationary and used them for implementing reintegration programmes. Bomi County e.g. has 30 CWCs which were all founded in 2004.

Since the reintegration has been completed, the NGOs moved out and terminated their assistance to the CWCs. They had been funded for emergency interventions, but such funds are no longer available. The shift from emergency to development and the shift from NGO interventions to Government interventions have left them stranded.

The CWCs are still meeting and try to assist where children face problems. They could possibly become a mechanism for targeting social welfare interventions. However, without any assistance from Government or NGOs these grass root structures will be demotivated.

According to county level officers in Bomi there are no programmes in Bomi District that provide any assistance to destitute households. Social protection interventions do not exist in Bomi District.

NGOs also implement a variety of food and cash for work programmes as well as livelihood programmes. These programmes are not specifically targeting extremely poor households but may be suitable for category C households if tailored to their needs.

### **3.11 Assessment to which extent ongoing social protection interventions meet the needs for social protection**

Social protection as defined in chapter 1 does not feature prominently in the policy and programme documents of government and of the UN. This can be said even though the list of interventions analysed above is most probably incomplete. There are hardly any interventions that clearly target the extremely poor. Those interventions that do target the extremely poor are labour based (skills training and income generating activities). An extremely poor household which is at the same time labour constrained, like a grandmother caring for orphans, needs long term social assistance in order to be able to provide household members with the most basic needs like food and to access health care and education. Households with no able bodied members, who are fit for work and can make use of labour based interventions, are bypassed.

The extremely poor labour constrained households consist of all those citizens who are most vulnerable – OVC, elderly, disabled persons and persons living with HIV and AIDS. They are the poorest of the poor who are not able to fend for themselves. Most of the MDGs and of the social objectives given in the Government and UN policies and programmes can only be achieved, if the interventions planned are

supplemented by social protection interventions that clearly target the two categories of extremely poor households – those that are labour constrained with social assistance type of interventions and those who are not labour constrained with a combination of welfare and employment/productivity-oriented measures. Chapter 5.3 of this report shows how a single social protection intervention – a social cash transfer scheme – could reduce extreme poverty by 4% by 2012 and by 8% by 2015. This means that social protection interventions could go a long way to achieve the PRS targets (see chapter 3.1).

Exceptions to the general neglect of social protection issues are the Draft Social Welfare Policy and the Government and UN Joint Programme on Food Security and Nutrition. The Social Welfare Policy advocates social assistance. The Joint Programme aims at strengthening capacities for the implementation of a social cash transfer programme.

#### **4. Recommendation to complement the Liberia PRS with a social protection policy and programme**

Liberia needs a consistent social protection policy and programme which will guide the process of designing, testing and eventually implementing social protection interventions. The social protection policy has to complement the PRS and other policies listed in chapter 3. It will have to be elaborated in a joint effort led by the Government and supported by civil society and development partners. One of the first steps in the process leading to a social protection policy may be to establish a Social Protection Steering Committee and a Social Protection Technical Committee.

While the policy formulation process is going on, one or two social protection interventions should already be piloted in order to establish if certain interventions are feasible, cost-effective and have a significant impact under the prevailing frame conditions in Liberia. The results of the pilots will inform the policy process.

The policy will define the rational, objectives, principles, target groups, types of interventions, institutional set up and implementing structures, funding mechanism, coordination arrangements and monitoring and evaluation requirements. Based on the policy a social protection programme has to be worked out, costed and funded.

The social protection policy and programme have to ensure, that a mix of interventions is planned and implemented, which is tailored to the needs of the different categories of extremely poor households and lifts them above the extreme poverty line. At the same time the policy and programme has to include interventions that protect moderately poor households and non-poor households from falling into extreme poverty.

The core problem of all extremely poor households is under-consumption caused by a lack of purchasing power. In order to overcome this problem the social protection policy and programme has to empower all extremely poor households by directly or indirectly increasing their incomes. Extremely poor households, which are at the same time labour constrained, require direct income support in the form of social assistance. The non-labour constrained extremely poor households require a

combination of temporary consumption grants combined with assistance that results in employment or in sustainable income generating activities.

A more detailed analysis of options for assisting extremely poor labour constrained households (category D in Figure 1) is given in Chapter 5. Interventions for non labour constrained extremely poor households (category C in Figure 1) are a rather complex issue because the 250,000 households in this category are heterogeneous. Landless rural households require different interventions compared with subsistence farmers, fisher folks, returnees or adolescent mothers. Interventions which may be suitable for a number of these categories are ongoing (like skills training for adolescent mothers or the provision of training, training allowances, seed, fertilizer and tools for small farmers). However, the challenge is to integrate these interventions into a consistent social protection policy which ensures that a large share of category C households is reached by interventions that are tailored to their specific needs.

Social protection is a multi-sectoral task. A social protection policy and programme therefore has to establish linkages to social services (welfare, health and nutrition, education), to economic services (agricultural extension, micro-finance) and to emergency and disaster management activities. It is the role of social protection to ensure that all these services reach the extremely poor which are often by-passed as they are more difficult to reach compared to the better off population.

## **5. Recommendation to explore the feasibility of social cash transfers as a core component of the social protection policy**

### **5.1 The rationale for social cash transfers**

Social cash transfers are an intervention to economically empower those persons or households, which for reasons beyond their control are not able to fend for themselves (category D in figure 1). They transfer purchasing power to those in urgent need. They facilitate that beneficiaries are able to access food, basic health care, shelter, clothing and education. They transfer money - not food or vouchers. Except for situations of market failure, cash transfers are more beneficial to recipients than any other form of transfers. They give beneficiaries the flexibility to use the transfers in accordance with their own needs and priorities. They also have lower transaction costs compared to transfers in kind. They do not interfere with agricultural production and marketing (like food transfers often do) but stimulate economic activities by injecting purchasing power into local markets.

In order to serve this purpose social cash transfer schemes have to be designed, tested and scaled up in such a way as to meet the following criteria:

- owned and implemented by the Government and supported by partner organisations
- feasible with regard to the implementation capacity of the respective country
- effectively targeted (low inclusion and exclusion errors)
- meeting the main social protection needs of their target group

- providing a reliable service in terms of timely delivery
- linking the target group households to other social and welfare services
- having the potential to be scaled up to achieve national coverage
- cost-effective and free of corruption
- sustainable financed

## **5.2 Pros and cons of different types of social cash transfers for the specific frame conditions in Liberia**

Social cash transfers differ with regard to the following characteristics:

- Beneficiaries can be individuals or families/households
- Target groups can either be specific vulnerable groups like orphans or elderly persons (these schemes are called categorical schemes because they target a specific category of persons) or the scheme targets all persons or households that are poor or extremely poor (inclusive schemes)
- Categorical schemes can be universal (targeting all orphans or all persons beyond a certain age) or means tested (targeting only poor persons of the respective category)
- Transfers can be conditional (e.g. given under the condition that children will attend school) or unconditional

The most common types of cash transfers implemented in developing countries are:

1. Universal categorical programmes like social old age pensions for all persons beyond a certain age (e.g. the universal social pensions in Mauritius and Lesotho) or a child grant for all children under a certain age (e.g. in Bolivia)
2. Categorical programmes that are means tested. Programmes of this type are the social old age pension in Namibia, the child grant in South Africa and the OVC scheme in Kenya
3. Large conditional social cash transfer schemes are found in a number of Latin American countries. They target poor families with children under the condition that the children regularly attend school
4. Inclusive social cash transfer schemes targeting extremely poor households that are not able to fend for themselves because they are labour constrained are implemented in Zambia and Malawi.

In general all the types of social cash transfers listed above provide social protection to their beneficiary households. However, the degree of poverty reduction resulting from various types of cash transfers and the cost-efficiency of the respective schemes differ. Universal transfers equally benefit poor persons and non-poor persons. This means that only part of the transfers contributes to poverty reduction while a large part is paid to people who do not really need it.

Categorical programmes – even if they are means tested – focus on certain categories of vulnerability and exclude all other categories. In order to reach all vulnerable groups South Africa implements seven categorical schemes simultaneously. If poor countries, that do not have the financial resources and/or the

implementation capacities to run more than one scheme, focus on a categorical scheme, they exclude many extremely needy households from social protection. This is the case in Kenya (they only have a means tested OVC scheme) and in Lesotho (they only have an universal old age pension).

Conditional cash transfer schemes are not only categorical (they target households with children) but also penalise those households that are not fulfilling their conditions like regular school attendance. The penalised households are often the poorest households. In countries where many children are unable to enrol because of supply deficits (lack of schools), conditional transfers do not make sense.

The highest impact on poverty reduction per Dollar invested is achieved by programmes that focus on the poorest persons or households of a country and do not apply conditions. Evaluations of the programmes in Zambia and Malawi, which focus on the poorest households, indicate that beneficiaries spend the transfers mainly on food and other basic needs. They also invest in food production by buying fertiliser and hiring labour. Reports of a detailed external evaluation of the Malawi scheme are accessible at [www.childresearchpolicy.org](http://www.childresearchpolicy.org).

Criteria for selecting the most appropriate type of social cash transfer scheme for Liberia are:

- The scheme should contribute to the reduction of extreme poverty (the main objective of the PRS and of the MDGs), by reaching those households that cannot benefit from employment and productivity oriented programmes
- The severe restrictions of administrative capacity on national, county and sub-county level in Liberia demand that the programme has to be as simple and administratively undemanding as possible

Using these two criteria the most appropriate type of social cash transfer programme for Liberia is an inclusive scheme that targets extremely poor households which are at the same time labour constrained.

### **5.3 Vision of an inclusive social cash transfer scheme in Liberia**

Considering that social protection of extremely poor and labour constrained households in Liberia is presently zero, and considering infrastructure, capacity and budget limitations, a vision of what could be achieved by the year 2012 has to be modest.

We have to assume that a significant number of households in Liberia are in urgent need of social protection interventions. A preliminary estimate, which still has to be verified, arrives at 50,000 households that are extremely poor and are unable to fend for them selves because they are labour constrained. Providing these households with regular welfare transfers is vital for the survival of the OVC and other vulnerable household members.

The amount to be transferred can only be established on the basis of additional research. The following criteria can be used for a preliminary estimate to establish the appropriate volume of the monthly transfer per household:

- The amount should be sufficient to lift the beneficiaries over the extreme poverty line which according to the PRS is USD 242 per person per year. This figure is based on CWIQ survey results using a food energy requirement of 2,400 kcal per adult equivalent. The extreme poverty line based on 2,100 kcal is USD 211 per person per year.<sup>5</sup>
- It should permit the beneficiary household to purchase one 50 kg bag of rice per month which would facilitate that household members are able to increase their energy intake to the minimum food energy requirement level. However, the beneficiary households should be free to spend the money in whatever way they consider appropriate.
- The transfer per household should not exceed the amount that an unskilled agricultural worker can earn per month.

Using these criteria an average volume of USD 35 per household per month could be appropriate. This amounts to USD 6.5 per person per month or USD 78 per person per year. Administrative costs of the scheme are estimated at USD 5 per beneficiary household per month. Using the above assumptions total annual costs of the scheme amount to USD 480 per household or USD 89 per person.

It may be ambitious but not completely unrealistic to assume that by the year 2012 about 25,000 households could be reached at annual costs of USD 12 million. By 2015 all the 50,000 households could be reached at annual costs of US Dollar 24 million. The types of persons benefiting from the scheme and the impact that will be achieved are estimated as follows:<sup>6</sup>

- By 2012 about 135,000 people would benefit from the programme. This includes 86,000 OVC (64% of all household members are 18 and under) and 9,000 elderly people (6.5% of the household members are 65+). An unknown number of the other household members are disabled or chronically sick or otherwise vulnerable people. By 2015 the number of people benefiting will be 270,000 including 172,000 OVC and 18,000 elderly
- This will reduce the extreme poverty rate by 4% between 2008 and 2012 and by 8% by 2015. In this way social cash transfers alone would achieve the PRS target of reducing extreme poverty from 48% to 44% (see chapter1)
- As a result of the transfers households will be able to meet some of their most urgent needs in terms of food, medical expenses and /or schooling expenses. Some would even invest part of the transfers in seeds, fertilizer, and hiring labour for cultivating their fields or in small livestock in order to improve their livelihood. This in term will significantly impact on child mortality, malnutrition, schooling rates and other welfare indicators. Reducing malnutrition and school drop outs of OVC is an investment in human capital
- The additional purchasing power which is immediately used by the beneficiary households to buy local products and services will stimulate economic activities of the productive households. It should not be underestimated how effective the economic multiplier effects of additional purchasing power can be in cash stripped rural economies that lack market outlets.

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<sup>5</sup> Both extreme poverty lines seem to be on the high side compared with the a GDP per capita of only USD 135

<sup>6</sup> Estimates are based on QWIC data analysed by Anthony Dewees

## **5.4 Activities for designing and testing a social cash transfer scheme**

Before starting the activities listed below Government and development partner's commitments with regard to the following issues are required:

- Decision on Government lead agency and Government cooperating agencies (Ministries or Departments) and on human resource commitments. It is essential that Government on national level commits a senior officer as a full time team leader. In the medium term a inter-ministerial secretariat with transport facilities, fully equipped office, budget and accountant is required to manage the programme
- Development partners also need to agree on a lead agency and on cooperating agencies. The lead agency will have to commit a full time officer to function as a counterpart to the team leader
- Arrangements for Technical Assistance to ensure that experience with facilitating the process of establishing social cash transfer schemes in other countries is made available to Liberia
- Funds required are estimated as roughly USD one million for 2009 and USD two million for 2010

### **Phase 1 (I + II 2009): Operational research to prepare a social cash transfer pilot scheme :**

1. Selection of a county (as near to Monrovia as possible) and of the implementing institutions on national, county and sub-county level. Formation of a management team. Financial arrangements (funding and responsibilities for accounting) for phase 1
2. Organising an exposure trip of the management team to study the social protection policy and the inclusive social cash transfer scheme in Malawi
3. Analysis of the census results to obtain more accurate data on the number of different categories of poor households in Liberia
4. Rapid appraisal of administrative, human resource and infrastructural frame conditions in the area where the operational research will be carried out
5. Preliminary agreement on key parameters like objectives, target group, targeting mechanism, volume of transfers and delivery mechanism
6. Drafting, testing and evaluating targeting and delivery procedures including training of officers for the testing of the procedures
7. Designing and costing a 18 months pilot scheme (Logframe, plan of activities, detailed budget, institutional set up, Manual of Operations) and presenting it to decision makers
8. In case of approval – sourcing of funds for the pilot phase

### **Phase 2 (III 2009 – IV 2010): Implementation of the pilot scheme**

1. Setting up and on-the job training of management units and supervision and reporting arrangements on national and county levels
2. Organising funding and accounting procedures
3. Organising a monitoring and evaluation system
4. Rolling out the scheme in accordance with the Manual of Operations

5. Organising frequent workshops of stakeholders involved in order to identify lessons learned
6. Corrective action and replanning based on monitoring and evaluation results
7. Biannual progress reports and final report giving an assessment of the feasibility, cost-effectiveness and impact of the pilot scheme as well as recommendations with regard to scaling up to national level
8. In case of approval – planning and funding the scale up of the social cash transfer scheme.

### **5.5 Preliminary information with regard to options for targeting and delivery of social cash transfers**

While a detailed assessment of the options for targeting and delivery has to be done in phase 1 (see chapter 5.4) the following information is already available:

#### **Targeting**

During the emergency Government, UN and NGOs have established Child Welfare Committees (CWCs) on community level. The task of the CWCs is to assist in reintegrating and protecting children who for various reasons related to the armed conflict have been separated from their families and communities. Bomi County has for instance 30 CWCs. Each CWC covers a population of 500 to 1,000 households. A CWC has 12 members who work on a voluntary basis. They received training, bicycles and stationary from the supporting NGOs.

With the transformation from emergency to development the NGO assistance to the CWCs was terminated. This means that they do not even get stationary to do their task of monitoring and reporting on child welfare issues. However, the CWCs are still functioning. As they have a thorough knowledge of the social protection needs of the households in their area of operation they could possibly be entrusted with the task of assisting in targeting and in counselling beneficiaries of a social cash transfer scheme and could also get involved in other social protection programmes.

UNHCR monitors who form part of the County Support Teams maybe able to assist in ensuring a high quality of targeting.

#### **Delivery**

One of the options for the delivery of monthly or bi-monthly cash transfers to beneficiary households is to channel the money through the banking system. A discussion with one of the Liberian banks revealed that this specific bank has branches in 6 counties and is in the process of opening branches in a number of other counties. Accounts can be opened and accessed in each branch. All branches will get ATMs. Bank cards to access ATMs are issued without charges. Annual fees for maintaining an account are USD 10. Fees per transaction are USD .35.

The bank is also providing mobile banking for UN programmes and for an NGO programme. Costs depend on the specific conditions of the area in which the transfers have to be paid. Once a decision on details of a pilot scheme has been

taken, the bank is prepared to work out specific cost estimates. In order to identify the best conditions, offers other banks should also be solicited.

Other options are to strengthen the financial management capacities of the county administrations to such an extent that they would be able to pay transfers at pay points like it is done in Malawi or use the headmasters of schools as pay point managers like it is done in Zambia.

## 5.6 Risks factors

When designing and testing a social cash transfer programme the following risks have to be taken into account and have to be closely monitored:

- **Leakage and corruption** on all levels have to be controlled by organising the programme in a transparent and well documented way and by putting emphasis on professional accounting and financial monitoring
- At the same time the danger of leakage and corruption should not lead to **overly bureaucratic and cumbersome financial procedures** which would stifle the implementation of the programme
- The **effectiveness of targeting** is a problem of many social transfer programmes and has to be ensured by transparent targeting procedures and effective monitoring
- Creating a **dependency syndrome** has to be avoided by targeting exclusively households which are already dependent on external assistance because they are labour constrained and therefore not able to fend for themselves
- **Envy and conflicts** on community level (we are all poor!) can only be avoided if the scheme is carefully explained to local leaders and to the community at large and by emphasising that the scheme targets a category of households which can not benefit from any other Government intervention because they have no manpower
- **Lack of leadership and commitment** on national and sub-national level would seriously undermine the feasibility of the programme and can only be addressed if Government takes full ownership of the programme
- **Capacity constraints** that could hamper the implementation of the programme have to be addressed by providing capacity building assistance to all levels of Government units involved in the programme
- Because of the multi-sectoral nature of a social cash transfer programme serious **management problems** are to be expected if the programme would be managed within the limitations of a single line-ministry. It is therefore essential to have a management unit on national level, which has a full time manager, facilities (transport, office, computer etc.), budget and accountant and reports to an inter-ministerial committee.
- In the initial phase of operational research to test the feasibility of different targeting and delivery procedures on the ground, **scarce management resources on national level would be wasted** if the region for testing is distant from Monrovia. To avoid unnecessary travel and to facilitate close cooperation of national and county officers, agency personnel, consultants, grass root structures and communities, the operational research should be done in a region that can be reached from Monrovia within an hour.

## Annex 1

### **a** **ADJUSTED TERMS OF REFERENCE CONSULTANCY TO WRITE AN ISSUES PAPER ON SOCIAL PROTECTION IN LIBERIA**

**Title:**                    **Lead the development of issues paper for Liberia**

**Location:**    **Monrovia, Liberia**

**Duration:**    **4 weeks**

**Start Date:**   **10 November to 8 December 2008**

**Reporting to:** **IAPT Social Protection task force team for social protection**

### **BACKGROUND AND JUSTIFICATION**

Liberia is struggling to emerge from the devastation and deep poverty caused by 15 years of war. Pre-war disparities have, if anything, been increased. The country is striving to maintain peace and security so that it may achieve the rate of economic growth that will enable it to develop once again. Basic social service provision is also a priority.

While many people will benefit from the economic growth that is looked for, some will not. Even if the growth is pro-poor, it is well recognised that not all poor people are able to participate in the growth or to access its benefits. They are likely to be the most vulnerable, the very young, the old, those with disabilities and those unable to work. While the intention is for all Liberians to be able to access basic social services, food, clothing and shelter – commonly the provisions of welfare - will not be provided, nor will income supplements, unless special measures are put in place. What sort of measures might these be? A consultancy is proposed to answer this question, developing options that interested parties, most notably government and the development partners, could consider.

However in order to be able to develop practical options there is also the need to firstly understand the context and the underlying critical issues which might warrant the choices of specific options over others. In practice this requires a study that explores in depth, the full range of critical issues involved; specifically in the context of issues affecting the social well being and protection of Liberians. The consultant is therefore also required to include such a study as part of its contractual terms and should use the outcome to inform choice of appropriate options.

### **SCOPE OF WORK**

The broad scope of work required include a description of different forms of social protection and related measures, including pensions and/or other cash transfers and

other welfare measures that would address the socio-economic challenges of families who, for a variety of reasons, are unable to achieve adequate livelihood opportunities. This also includes critical analysis of the advantages and disadvantages – including the costs - for vulnerable families and the government of Liberia.

### Main tasks

- Describe the social protection needs and the main social protection measures that are currently implemented and/or planned in Liberia. Identify gaps in the social protection system that need to be filled by improved or additional social protection programmes. This task requires the analysis of existing documents, a rapid appraisal on national, sub-national, community and household level and discussions with the IAPT task force team for social protection
- Identify appropriate social protection and measures and analyse their advantages and disadvantages, their impact on poverty and the costs for both government and beneficiaries
- Present and discuss the results of the above in a meeting with different Ministries and agencies with the view to synthesise most common critical issues which might form a good basis for strategic interventions
- Develop an issues paper detailing the above outcomes as well as recommendations for practical options for consideration as strategic interventions for Liberia.
- Where appropriate, recommendations must take into account relevant requirements of the recently launched Poverty Reduction Strategy for Liberia for consistency.

### EXPECTED DELIVERABLES

Tasks	End Products/Deliverables	Time frame 4 weeks
Review of documents, meetings with stakeholders and rapid appraisal in order to identify social protection needs and programmes currently implemented or planned	Preliminary draft of an analysis of priority social protection needs, existing social protection programmes and options for improving social protection in Liberia to be discussed in a meeting with relevant Ministries and agencies	1 <sup>st</sup> and 2 <sup>nd</sup> week
Identification of appropriate social protection and measures and analysis of their advantages and disadvantages, their impact on poverty and the costs for both government and beneficiaries		

Collection and analysis of additional information in order to accommodate the recommendations resulting from the discussion of the preliminary draft (review of additional documents, meetings with resource persons from Ministries and agencies)	Issues raised by Ministries and agencies have been resolved, recommendations have been taken into account and a consensus has been reached on critical points	3 <sup>rd</sup> week
Developing an issues paper detailing the above outcomes as well as recommendations for practical options for consideration as strategic interventions for Liberia in the context of the Poverty Reduction Strategy for Liberia	Full fledged issues paper taking into account all key elements of the tasks above and incorporating key issues as well as policy/strategic intervention recommendations	4 <sup>th</sup> week

## DESIRED BACKGROUND AND EXPERIENCE

### ***For institutions:***

- Should have a good track record in policy development
- Should have experienced team with at least five years experience in the field of policy development.
- Have capacity to coordinate meeting of various stakeholders.

### ***Individuals***

- Advanced University Degree in Social Sciences with specific reference to social policy or public policy management or related technical field.
- Proven experience in preparing social policy reports/documents
- Proven ability to conceptualize, plan and manage programs as well as transfer knowledge and skills;
- Must be fluent in English with excellent writing skills;
- Ability to plan and maintain project schedules and meet required deadlines
- 6 years or more of working experience in the area of social/public policy
- Ability to coordinate different interest groups
- Good analytical, communication, managerial, leadership and advocacy skills.
- Experience working in a conflict/post-conflict environment.

## REPORTING

Will report to the IAPT task force team for social protection. Members of the task force team will provide respective agency inputs as well as contribute to relevant chapters of the paper. The consultant will have access to key UN publications on the subject matter and his/ her work will be facilitated by the IAPT as much as possible. The consultant will be provided with work tools such as a desk and a computer.

## **Annex 2: Schedule and persons contacted**

### **Thursday, 13<sup>th</sup> November 2008**

- Rozanne Chorlton, Representative UNICEF
- Susan Namondo Ngongi, Deputy Representative UNICEF
- Pierre Pichart, Head of Security UNICEF
- Fred Odongkara, Communications Officer UNICEF
- Ibrahim Sesay, Chief Child Protection UNICEF
- Harald Bredesen, Communications Officer UNDP
- Anna Ichangai, Human Resources Specialist
- Euphemia Brewer-Fasama, Executive Assistance

### **Friday, 14<sup>th</sup> November 2008**

- Ralph Midy, HIV/AIDS Specialist
- Discussion with the UN Inter-Agency Team (IAPT) on ongoing social protection interventions in Liberia and presentation of lessons learned in Zambia and Malawi

### **Saturday/Sunday 15<sup>th</sup> / 16<sup>th</sup> November 2008**

- Discussion with Maria-Threase Keating, Deputy Representative UNDP, Philippe Assale, Programme Support Specialist DDDR, Monroe Outland, Programme Analyst and Masaneh Bayo, Gender Specialist on UNDP interventions in the field of social protection
- Meeting with the regional Director of German Agro Action, Bernd Scwenk
- Analysis of documents

### **Monday, 17<sup>th</sup> November**

- Meeting with the Deputy Minister for Planning and Administration of the Ministry of Gender and Development, Mr. Rufus Kaine, and Assistant Minister Mr. Jerolinmek M. Piah
- Meeting with the Deputy Minister Social Welfare, Ministry of Health and Social Welfare, Mr. Josef W. Geebro
- Analysis of poverty data assisted by UNICEF consultant Anthony Dreewes

### **Tuesday, 18<sup>th</sup> November**

- Analysis of additional Government and UN documents

### **Wednesday, 19<sup>th</sup> November**

- Meeting with LISGIS deputy director Mr. Francis F. Wreh
- Start drafting preliminary report

### **Thursday, 20<sup>th</sup> November**

- Drafting preliminary report

## **Friday, 21<sup>st</sup> November**

- Field trip to Bomi county accompanied by UNICEF Child Reintegration Officer Alfred Mutiti, Director Children's Protection and Development, Ministry Gender and Development Robert Taylor and Social Worker, Ministry of Health and social Welfare Tarnue K. Kandakai  
In Bomi meetings with the County Gender Coordinator J. Bosco Seh, the Child Welfare Officer Mamie Kiryon, the District Commissioner of Klay District, a number of chairpersons of Child Welfare Committees and of the Bomi Branch of Don Bosco. We also had discussions with the heads of two destitute households

## **Saturday/Sunday 22<sup>nd</sup> / 23<sup>rd</sup> November**

- Finalising preliminary report

## **Monday, 24<sup>th</sup> November**

- Meeting with the DFID Representative, Mr. Desmond Curran, the World Bank Resident Representative, Mr Ohene Owusu Nyanin, the UNDP Programme Specialist, Mr Ishmael Dadoo and the UNICEF Chief of Child Protection, Mr Ibrahim Andrew Sesay. The meeting was chaired by the UNICEF Representative, Ms Rozanne M. Chorlton

## **Tuesday, 25<sup>th</sup> November**

- Distributing preliminary report and analysing additional documents

## **Wednesday, 26<sup>th</sup> November**

- Discussion with Eco Bank Sales Officer, Ms Nepce Nepe, on possibilities of delivering cash transfers through county level bank branches, ATMs and/or mobile banking

## **Thursday, 27<sup>th</sup> November**

- Presentation and discussion of preliminary results at a meeting of the Humanitarian Action Committee (HAC)

## **Friday, 28<sup>th</sup> to Sunday 30<sup>th</sup> November**

- Integrating comments on the preliminary report received from different stakeholders
- Planning of next steps in meeting with Rozanne Chorlton and Susan Namondo Ngongi

## **Monday, 1<sup>st</sup> December**

- Meeting with the WFP senior Adviser – Cash & Vouchers, Mr. Waheed Lor Mehdiabadi

**Tuesday, 2<sup>nd</sup> December**

- Field trip to Bong County accompanied by Director Children's Protection and Development, Ministry of Gender and Development Robert Taylor, UNICEF Chief Child Protection, Ibrahim Sesay, and UNICEF Intern Dana Rosen. In Bong meetings with the County Superintendent Lucia F. Herbart, the Gender Coordinator Anita Rumire, the Social Worker Onetha T. Tuagnethi and with a number of chairpersons of Child Welfare Committees.. We also had discussions with the heads of two destitute households

**Wednesday, 3<sup>rd</sup> December**

- Discussion with the Deputy Special Representative of the Secretary General and UNDP Resident Representative, Mr. Jordan Ryan

**Thursday, 4<sup>th</sup> December**

- Discussion of study results and debriefing at UNDP

**Friday, 5<sup>th</sup> December**

- Distribution of final report and debriefing at UNICEF

### **Annex 3: A note on the availability and reliability of data on economic and social indicators in Liberia**

The list of publications given below (see references) shows that the Government and the development partners have made considerable efforts to generate data on the social and economic situation in Liberia. However, comparing different sources often leads to widely differing data for the same parameters. While this is understandable in a post-war situation where extrapolations from pre-war data have to be combined with data from surveys that have just been completed, the interpretation and analysis of statistics have to be done with caution. Some examples are:

- While UNICEF, *The State of the World's Children, 2008* gives a under 5 child mortality per 1,000 birth of 235 (which would be extremely high), the Liberia Demographic and Health Survey 2007 records it as 110 (which would be one of the lowest in West Africa)
- While the World Bank, *African Development Indicators, 2007* gives a GDP per person at USD 135, the PRS for Liberia gives an extreme poverty line of USD 240. However, one would expect that the extreme poverty line is substantially lower than the GDP per person
- While the Demographic and Health Survey 2007 puts the average households size at 5.0, the Comprehensive Food Security and Nutrition Survey 2006 puts it at 5.6
- HIV/AIDS prevalence is given as 1.7% according to one source and 5.7% to another source
- The population of Bomi County estimated in the County Development Agenda is 159,779 while the Population and Housing Census 2008 puts it at 82,036

As the calculations made in this report are based on whatever data are available in Liberia, they have to be seen as preliminary estimates which may have to be corrected once additional data sources are available. In order to facilitate the planning of social protection interventions it is recommended that LISGIS tries to triangulate and consolidate the results from different surveys. It is also recommended that LISGIS disaggregates poverty data with regard to:

- Provide data not only for the number of individuals but also for the number of households because households are the economic units which have to be targeted by social protection interventions
- Always provide the number of persons and households in absolute poverty as well as the number in extreme poverty in order to facilitate the targeting of the poorest
- Provide a sensitivity analysis which shows how poverty lines change when the base for calculating food poverty is reduced from 2,400 kcal per adult equivalent to 2,100 kcal. This is recommended because the extreme poverty line of USD 240 seems to be on the high side compared with a GDP p.c. of USD 135
- Combine data on the degree of poverty with data on the household structure (dependency ratio) in order to be able to determine exactly how many households fall into the four categories given in Figure 1.

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