AFRICA PLATFORM FOR SOCIAL PROTECTION (APSP)
SOCIAL PROTECTION BENCHMARKING PROGRAMME

BY EDMOND ODABA
Email eodaba@africapsp.org
Website www.africapsp.org

Introduction

The Africa Platform for Social Protection (APSP) is a network of organizations operating at grassroots, national and regional levels, with a commitment to promoting and strengthening the social contract between states and citizens. To achieve this, the APSP promotes active engagement of National Platforms in the shaping of Social Protection policies, programmes and practices in Africa. To date the APSP has supported the establishment of National Platforms of civil society organization (CSOS) in 26 out of 30 countries that participate in the APSP activities in Africa.

The National Platforms

National Platforms are groups of CSOS working to support the development and implementation of policies and programmes on Social Protection at the national level. National Platforms are composed of organizations working on a variety of issues including; children, older persons, people with disability, minority groups and trade unions.

The APSP Mission

The APSP exists to create partnerships with Civil Society and other organizations to engage with Governments, Regional and Continental Bodies and International Development Agencies (IDAs) to develop and implement innovative Social Protection Policies, Strategies and Programmes in order to make a difference in people’s lives in Africa.

Social Protection Benchmarking program

The APSP’s Social Protection benchmarking is a programme that analyses the impact of public social protection policy and programmes at the country level with a view to providing feedback from the
citizens to governments and create awareness on existing social protection programmes/processes. The programming is currently being implemented in 13 countries. The overall aim of the programme is to promote transparency and accountability and efficiency in the development and delivery of social protection programmes in Africa. The analysis is based on a series of benchmarks that look at different elements/ steps that can make social protection a reality for all.

The APSP considers social protection benchmarking as an ongoing activity that generates evidence for advocacy and for M&E. Each benchmarks has indicators that are realistic and in line with unique circumstances in a country. The benchmarks and their indicators are reviewed regularly to ensure that they are realistic and in tandem with objectives of the social protection programmes. The APSP uses the following general benchmarks as a guide when developing country programmes is;

- **Grassroots participation in social protection - including CSOs**
  
  *Expected outcome:* National Platform for Social Protection members are involved in defining priorities for the social protection and designing National development plans.

- **Investment/financing of Social Protection:**
  
  *Expected outcome:* Universal and comprehensive Social Protection Floors and systems are prioritised in national budgets.

- **Access to essential social services - as defined by national priorities:**
  
  *Expected outcome:* Creation of a society in which every individual has real access to

- **Income security:**
  
  *Expected outcome:* Building a society where everyone during its whole life cycle has decent income security

- **Promotion of Right Based Approach to social Protection:**
  
  *Expected outcome:* Ensure that social protection systems are designed, implemented, monitored and evaluated in respect of human rights principles, contribute to empower the groups at risk of marginalisation

**SASPEN Social Protection Index meeting**

The APSP will make a presentation on benchmarking of Kenya's Older Persons Cash Transfer programme, which started in 20061. The programme is funded by the Government Kenya.

The objective of the OPCT programme is to provide regular and predictable cash transfer to vulnerable older persons (over 65 years of age) in identified households (HH) to build capacities of the older persons so as to improve their livelihoods.

The programme started in 3 districts with 300 households receiving KES 1000 a month. This was scaled-up in 2009 to cover 44 districts and 33,000 HH each receiving KES 1500 a month. In 2011, the programme received further funding and was up-scaled to cover 36,036 HH each receiving a monthly transfer of KES 2000. To date, the program has reached all the 47 counties in Kenya reaching 164,000 beneficiary households.

---

The program has an Operational Manual (OM) that clearly stipulates how it should be managed with clear targeting criteria, recruitment and management processes. This manual formed the basis of the benchmarking exercise specifically focussing on grassroots participation.

**Benchmark: Grassroots Participation in OPCT**

The APSP and the Social Protection Actors Forum Kenya (SPAF) used the social accountability approach specifically using the Community Score Card (CSC) tool to gauge the knowledge and the level participation and involvement (if any) of the citizens in the planning and execution of the programme. The activity was carried out in local dialect (Kamba) and a total of 82 stakeholders participated from three districts which were selected randomly. The participants included; OPCT beneficiaries, caregivers, local administrators, CBO representatives, religious leaders and potential beneficiaries.

Using the Community Score Card tool, the following five indicators were measured and the results are as indicated herein.

1. Timeliness of payment.
2. Number of targeted beneficiaries.
3. Regular and accurate information on the program.
4. Transparency in recruitment and management process.
5. Distance to payment collection points.

**Timeliness of payment**

- Very Bad: 27%
- Bad: 57%
- Just Ok: 11%
- Good: 3%
- Very Good: 2%
## Challenges & Lessons Learned

The following table summarises the challenges we observed during the reporting period and the lessons learned for each challenge.

<table>
<thead>
<tr>
<th>Challenge</th>
<th>Observations /Lessons learned</th>
</tr>
</thead>
</table>
| Limited/ low individual awareness of SP rights and entitlements. | • We have learnt that there is still need for continuous sensitization exercises to increase the level of awareness of social protection programs. One off events may not be sustainable in the community especially when new developments or changes occur in the programme.  
• We noted that there was inconsistency on the information about missed payments and the entitlements of the caregiver when a beneficiary dies. Using the service charter developed by the DSD, we were able to clarify that missed payments should be factored in the next cycle of payment. We also confirmed that the next of kin to beneficiaries are entitled to additional payments of 6 months (KES 12,000).  
• We learnt that the community members were eager to learn more about SP and more sensitization exercises should be carried out in the community. |
| Suspicions and accusations | • We observed accusations and counter-accusations between different stakeholders. The local administrators complained that the SDO had not shared the list of beneficiaries with them thus making it hard for them to reach beneficiaries with relevant information from time to time. The SDO on the other hand maintained that the chiefs knew the beneficiaries living in their localities.  
• There were also complaints about some chiefs demanding for money from beneficiaries.  
• There were also reports that some beneficiaries misused the money received especially when they receive it in lump sum.  
• Another accusation was that some caregivers neglect the beneficiaries and do not use the money for its intended purpose.  
• We also noted tension between the SDO and some of the social auditors who accused the SDO of not availing the list of beneficiaries when requested. |
| Monitoring and evaluation | • We learnt that open communications and transparent management process is paramount to help alleviate suspicions between various parties.  
• We observed that the DSD office in Kibwezi West had only two staff and no vehicle for fieldwork. With no M&E officers on the ground and only two staff, the SDO and the clerical officer, service delivery is bound to suffer since there are no regular visits conducted to find out how beneficiaries are faring.  
• We learnt that lack of adequate funding affects implementation of the programme. |
| Presentation of information in local language | • We observed that during the message delivery, some of the information was lost in translation. For instance, the translation of the first indicator on timeliness of payment was misunderstood by respondents to mean whether they were happy with the lump sum amount or not. The indicator had to be translated again for clarity purposes. |
| Using the CSC tool | • With five indicators to be measured, the frequent movement to and from the board was cumbersome for some of the respondents.  
• We also observed that due to their age some of the beneficiaries could not read, write or see the board clearly and had to be helped.  
• There were also instances when the votes were tallied; some indicators had fewer votes due to a number of respondents stepping in and out of the meeting room. |