

manifesto
for
social
protection
of
vulnerable
children
in
Africa

This manifesto is presented to the Dutch government on 15 June 2007 on behalf of AWEPA, IAVI, STOP AIDS NOW! and UNICEF.

MANIFESTO FOR SOCIAL PROTECTION OF VULNERABLE CHILDREN IN AFRICA

To date, 12 million children in Africa have already lost one or both parents due to AIDS. This number is expected to increase substantially in the years to come. The customary care of these children in the extended family is evermore becoming difficult due to the increasing number of orphans and persistent poverty, which is likely to continue in each subsequent generation. Sheltering these children in orphanages is often undesirable and is in most African countries financially impossible.

In Africa, the Millennium Development Goals will not be attained with the means presently available: if policies remain as they are, the number of people living on less than \$ 1 a day may even increase to 366 million in 2015. AIDS hits the income of families directly as the working generation becomes ill and also erodes traditional care structures between generations.

During the High Level meeting on AIDS in 2006, governments all over the world appealed for more social protection, in order to diminish the vulnerability for HIV and AIDS of children and young women, through strengthening health care systems and the extension of effective and all-encompassing prevention and treatment.

Ministers from 13 African countries formulated the 'Livingstone Call for Action' in 2006 in which they plea for Social Protection as a fundamental human right. Their Plan of Action calls for income support through 'cash transfer programmes' that can – embedded in a broad framework of Social Protection – contribute directly to combating poverty and supporting economic growth. The Livingstone statement says that such programmes, amongst which social pensions and child support for vulnerable children and families, should get more attention in national development plans and African Governments' budgets and receive long term support from international donors. Such support would exactly target groups that are most severely hit by HIV and AIDS and save them from the poverty trap.

The Netherlands' Government is at present developing a strategy to make up arrears in attaining the Millennium Development Goals, in particular in the poorest countries.

AWEPA, the International AIDS Vaccine Initiative (IAVI), STOP AIDS NOW! And UNICEF appeal to the Government to include this Manifesto in that strategy.

What do we ask from the Netherlands' Government?

1. **Support for the innovative ideas** on Social Protection, amongst which income support for households and children made vulnerable due to HIV and AIDS, in order to obtain lasting care for such children in their own environment.
2. Opt for a **broad, holistic and rights-based approach**: Social Protection (incl. income support) is a basic right, together with primary education, health care (amongst which vaccinations) and drinking water/sanitation. These services are all and required together. The protection of vulnerable children should be a central aim of all basic services.
3. Give **financial support** to two or three Government initiatives of partner countries in Africa on the subject of Social Protection, amongst which income support like old age pension and child support; focus on countries where HIV and AIDS undermine development and on post-conflict countries.
4. **Co-operate actively** with like-minded donor countries, like the UK, Germany, Sweden, Norway and Finland, in order to obtain long term financial commitment for these programmes and also involve the European Union.
5. **Promote international debate and support** on this subject, e.g. by (co)organizing a High Level meeting in which Governments, UN Specialized Agencies and NGOs can exchange knowledge about effective strategies of Social Protection, including income support.
6. Promote extra investment in **preventive technologies**, like vaccines and microbicides, through which women and girls in particular can protect themselves better.

EXPLANATION

1. We should recall that the present state of welfare in Europe was partly the result of the construction of a system of social security in the previous century, moving from early forms of distribution of soup to the poorest to the building of structural systems of old age pensions, child support, social support and various forms of workers' insurance.

Drawing a parallel with the arrears on attaining the Millennium Development Goals and taking into consideration the consequences of the AIDS pandemic in Africa, we feel it is urgent to move now forward to a sustainable eradication of poverty through direct and regular financial support to the poorest of the poor, instead of continuing ad hoc charity.
2. There is more and more evidence that relatively modest cash benefits to households or their members individually, can make an important contribution to diminishing their poverty and the vulnerability of their children. In various countries outside Africa, large scale programmes exist with proven value in this context, in particular the 'Bolsa Familia' in Brazil and the 'Progresa Oportunidades' in Mexico. Their impact is visible on such different areas as:

 - more participation of children in education and improved access to health care;
 - less malnutrition;
 - less child labour and violence against children;
 - in programmes where women are the recipients, the power balance in the family is tilting.

Such cash benefits act as an investment in the poorest families that are so difficult to reach with other instruments: they become less vulnerable and dare to take greater risks in economic actions. In this way, income support contributes directly to poverty eradication and to attaining the Millennium Development Goals.
3. Experiments with income support to vulnerable households are presently under way in various countries in sub-Saharan Africa. Certain systems of child support and old age pensions do exist in Africa: there is child support in South Africa; there is support for families taking care of orphans in Botswana; and there is old age pension (from 70 years of age) in Lesotho. Based on such experience, the Commission for Africa recommended in 2006 income transfers as a crucial instrument for combating extreme poverty in Africa. The World Bank's World Development Report 2006 equally supports a more extensive application of income support in developing countries because of the effects on poverty and inequality and of the contribution to increasing and distributing economic growth. Research in African countries shows for example:

 - in Namibia and South Africa, a substantial part of the old age pensions within the 'extended family' is used for education of the grandchildren and for access of the whole family to health care;
 - where cash transfers contribute to combating malnutrition, children's achievements in school in later years turn out to be much better;
 - cash transfers can play a crucial role, as part of a package of care for families hit by HIV and AIDS; in small-scale projects in Kenya, AIDS orphans receive a modest child support payment as part of a strategy to have them cared for in foster families; the families receive around US \$ 15 per month and a similar amount goes to community activities for children. The early evaluations show the cash to be spent primarily on food, clothing, shoes and medical costs. Participation in education has increased and some infected children received anti-retroviral drugs.

The time has come to move now from experiments to national regulations, embedded in the development plans of governments and provided with long term financing arrangements by donors, where necessary.
4. A guaranteed and predictable income support means that the poorest households get more grip on their lives and become more independent. In that way, poor farmers in Ethiopia could arrange better deals with richer households on crop sharing when taking a lease or on caring for cattle. In the Kalomo district in Zambia, introduction of a modest cash payment to poor families produced a reduction in the numbers of beggars, increased the self respect of these people and improved their relations with the rest of the community.
5. Poor families that receive a regular income support, can take more risks in their economic activities, because they have this income to fall back upon in case of a misfortune. This means that they do not immediately have to break into their productive reserves, when something fails. Moreover, even modest amounts that come into the community by way of income support, contribute already to the strengthening of local markets. These amounts do not erode the readiness to work, on the contrary: sometimes exactly that modest support can finance costs of transport to find work elsewhere. Almost 30 percent of the support in the Kalomo district in Zambia is invested productively, e.g. by buying goats for breeding, oxen for ploughing, and seed for sowing. Others have paid a neighbour to have their land ploughed. This type of income support is often seen to reach the poorest of the poor, who have no access to systems of micro-credit.
6. Affordability: it was calculated for Zambia that extending the experiment in Kalomo district to a national level would cost US \$ 20 million per annum, or almost 1 percent of the government budget; in that case around 10 percent of the households (encompassing about 1 million people) would receive half a dollar per day, or \$ 15 per month.

The International Labour Organization (ILO) calculated costs of similar income support for comparable households for 7 African countries. Costs would not amount to more than 3 percent of government expenses in any of these countries; in Senegal, costs would only be 0.6 percent of these expenses. A general old age pension for everybody over 65 would be slightly more expensive, with costs between 1.3 percent of government expenses in Guinea and 3.7 percent in Tanzania. A means-tested old age pension would be considerably cheaper.

7. This type of income support would in many countries probably be considerably more cost-effective than existing methods to reach the poorest, which is to say there could be better results with considerably lower costs. Take areas where year-after-year emergency assistance has to be provided, because of predictable food shortages or other calamities. In 2003, such assistance required US \$ 3 billion in Africa, with minimal long-term impact.

A regular, predictable cash support for those known to be hit by emergencies time and again, can be cheaper and more effective. On top of that, there will be improved operation of markets, as food available elsewhere in the country will then be transported to the market that has purchasing power. Cash-for-work programmes often carry high costs of implementation; it was calculated in Malawi that costs to provide money to the poorest people in a cash-for-work programme were eight times higher than simply paying them the cash amount without asking the service in return.

8. Whether income support will be targeted to specific groups, or given universally, with or without further conditions, must be a matter of debate and decision-making in the country concerned. Experience has taught that systems that apply to everybody, are often more efficient. In case of universal systems it is, moreover, often simpler to obtain broad social and political support for this policy. Universal systems are less susceptible to fraud and do not easily lead to stigmatising. In South Africa, the implementation of the income-tested Child Support Grant had led to overburdening of the social workers that have to evaluate who is eligible for the grant. A universal system of child support for all families with children would cause less administrative burden. It is easier to convey the message that all families with children are entitled to financial support and that would simplify for children access to the assistance that is their right.

9. Programmes for cash support have to be embedded in a broad policy of Social Protection, with a central place for vulnerable children affected by HIV and AIDS. That policy should mention;
 - registration and protection of their rights and entitlements (many poor children have no registered rights because they have no birth certificate);

- ensure appropriate care and assistance in the environment known to them;
- promote their access to basic services; and
- prevent all forms of abuse of these children.

10. Research by Prof. Jeffrey Sachs (amongst others) on the Millennium Development Goals shows clear links between poverty, health and economic growth. Healthy people can earn higher incomes. Poverty is linked with higher percentages of HIV infections and lower chances for appropriate treatment. AIDS increases poverty in households and has a negative effect on national economic development. Through investment in Social Protection, including income support, the most vulnerable people get reliable access to health care and other basic services. In order to stop the increase of HIV infections, it is crucial to invest in strong health care systems and in preventive technologies.
11. AIDS was long ignored in Africa and its consequences for society in general were grasped insufficiently. Since in 2004 the Cape Town Declaration was adopted, governments and parliaments in Africa have agreed that special measures are needed for the future of Africa's children and 17 countries have in the meantime developed National Plans of Action for that purpose. Parliamentarians from 15 European countries were involved in the Cape Town conference of 2004. They are committed, together with their African colleagues, to a large number of actions, amongst which the renewal of Social Protection policies, in order to ensure that the most vulnerable children will in fact be reached. **Action is now urgently required to prevent the deepest poverty continuing from generation to generation.**



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