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Social Studies**

*Erasmus*

The Systemic Review of The Social Protection Policy on Social Cash  
Transfer Program Towards the Beneficiaries in Zambia at National Level

A Research Paper

by:

**Chipili Shibwela**

(Zambia)

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Proposed Supervisor:

Prof. Gerard McCarthy

Proposed Second Reader:

Dr. Shuaib Lwasa

The Hague, The Netherlands

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## **Disclaimer**

This document represents my own work, and it has not been previously submitted for a degree at the Institute of Social Studies. The views stated does not incorporate any published work from another thesis.

### ***Inquiries:***

#### **Postal Address:**

Institute of Social Studies

P.O.Box 29776

2502 LT The Hague

The Netherlands.

#### **Location:**

Kortenaerkade 12

2518 AX The Hague

The Netherlands.

Telephone: + 31 70 426 0460

Fax: + 31 70 426 0799

## **Dedication**

I dedicate this paper to my beloved parents who supported, believed in me and invested in my education since I was a little girl.

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## **List of Acronyms**

**CSO:** Central Statistics Office

**CT:** Cash Transfer

**DFID:** Department for International Development

**FAO:** Food and Agriculture Organization

**ILO:** International Labor Organization

**MCDSS:** Ministry of Community Development and Social Services

**NGO:** Non-governmental Organisations

**SCT:** Social Cash Transfer

**SADC:** Southern African Development Community

**SDG:** Sustainable Development Goals

**UNZA:** University of Zambia

**UCT:** Unconditional cash transfer

**SSA:** Sub-Sahara Africa

## **Abstract**

The aim of the study was to explore the effects and benefits of Social Cash Transfer (SCT) on the livelihood of the beneficiaries in Zambia. In this study a qualitative research approach was used. The approach focused on analysing past published literature in Zambia and data collected from an expert working in government. Both the literature and expert agreed that SCT improved food security, education and health of the beneficiaries. However, some empirical literature lacked consensus on the significance of the effects of SCT on the beneficiaries. Furthermore, the study revealed that the sustainability of SCT in Zambia can be questioned and there is need to develop more sustainable programs that are focused on building skills and allowing citizens to have means to provide for themselves. There is need to separate government SCTs and those provided by Non-Governmental Organisations. The implications of the results are that SCT are not as effective as government reports put it. The reality is that they are not sustainable given the needs and current economic situation. Therefore, the results of the study provide evidence that it is better to teach a man to catch a fish than to give them one. In the case of SCTs, government needs to come up with more sustainable means such as skills development for the needs.

**Keywords:** *Social protection policy, social cash transfers, poverty reduction, Zambia.*



## **Study Significance**

The SCT program like any other government-run program consumes resources, and its sustenance will depend on the levels of impact it is having on the destitute. If the SCT is having a positive effect on the poor in the communities, these results need to be documented as a means of promoting its continuity. However, the reviewed literature does not entirely agree that SCT alleviates poverty. There is no consensus on the impact of SCT on poverty as the results continue to vary. This shows a knowledge gap that exists in the literature that necessitates conducting this study. Moreover, past literature conducted in Zambia focussed on a particular type of respondents. This study sought to explore the issue at national level thus reducing the contextual factors that factors past studies. Furthermore, the study added to existing body of literature on the topic.

## **Structure of the paper**

The paper is organised as follows. *Chapter 1* looks at the introduction, background, research problem, objective, and significance. Subsequently *Chapter 2* highlights and looks at the conceptual frameworks, and literature surrounding cash transfers at a global and local level. Then *chapter 3* comprises the study methodology and ethics. *Chapter 4* presents the results and findings. Finally, *Chapter 5* concludes the study and give recommendations.

## CHAPTER ONE: INTRODUCTION

### 1.1 Background

Social protection programmes are essential for addressing poverty and ongoing vulnerability. Sustainable measures for reducing poverty must include social safety as a crucial component. Without social protection, people are more likely to experience economic instability and social marginalisation, which increases their risk of staying in poverty. Economically speaking, social protection promotes higher production, which leads to more inclusive growth and social cohesion. One of the Sustainable Development Goals, goal number one calls for an end to poverty (ILO, 2015. P.2-3). A social protection policy that is growing in popularity amongst developing countries; such those in the Sub-Saharan Africa is cash transfers (CT). CT are frequently given by governments to their citizens for a variety of reasons, including reducing poverty, promoting better uptake of health and education services, etc. These payments are frequently referred to as CT or SCT (Saeed & Haya, 2020, P.1-3). In some cases, the government can partner with a Non-Governmental Organisation (NGO) to provide SCT. For example, HelpAge International (2006, P.4) highlighted of a conference conducted in Livingstone for the purpose of getting funding for SCTs from funders such as SADC.

There is compelling evidence that economic expansion reduces poverty. This claim is backed up by several cross-national and cross-regional research (Izquierdo et al., 2001; Department for International Development (DFID), 2008, P.2; Roemer and Gugerty, 1997, P.14). So, one naturally questions why direct redistribution or financial transfers are necessary. CT are justified by the reality that not everyone, especially the most vulnerable, benefits from growth. CT, on the other hand, may benefit the poorest people more since they can be targeted effectively. Another good reason for financial transfers is disadvantages brought on by one's parents, "such as race, gender, or family background," which reflect opportunity gaps that the government should overcome (Saeed & Haya, 2020, P.2-3).

The Zambian government acknowledges and recognizes the importance of SCT and thus introduced and implemented unconditional CT programs in the country to support and improve the poor living conditions of vulnerable and marginalized populations.

With the assistance of the German government, the SCT program was implemented as a trial in the Kalomo District and has since been gradually expanded to other areas. Up to 2013, it was used in 19 realignment districts, which supported 62,240 families, of whom 23,117 were headed by men and 39,123 by women. The government decided to expand financing program to 700 percent which was K17.5 million to K150 million for the coming year (2014) (Richards and Bellack, 2016, P, 61).

Following the allocation of more financial resources, the Ministry collaborated with other interested parties to expand the program adding 12 more districts. This resulted in a total of 145,698 households benefiting from the program, and among these households, 56,527 are led by males, while 89,171 are headed by women. Funding for the initiative is provided by both the government, specifically through the Ministry of Community Development and Social Services (MCDSS), and its collaborating partners (Richards and Bellack, 2016, P, 61).

The funds are allocated into two distinct categories: direct disbursements to beneficiaries and administrative expenses, with 80 and 20 percentages being allocated to each category. In 2015, the initiative received a financial allocation of K150 million from government and K30 million from collaborators and cooperating partners (Kumar & Sakthivel, 2020, P. 2).

To become an eligible beneficiary of the SCT program, one must qualify at three levels of the selection criteria. The first criterion is that you must be a resident of the same catchment area for the past 6 months. The second criterion is that you must belong to one category; that is; (1) household with members with a severe disability, (2) household with members who are chronically ill or on palliative care, (3) child-headed household or female-headed household with at least three children. Then finally you must pass the

welfare test, which is based on a means and needs test, which calculates the living conditions index. Once all three criteria are met, applicants can be successfully enrolled in the SCT program (MDCSS, 2022, P.3).

Currently, households that are on the scheme are entitled to 200ZMK (10 USD) monthly of which they receive bi-monthly a total of 400ZMK (21USD), and for those households with members who have severe disabilities, the amount is doubled to 800ZMK (41USD) bi-monthly. Payments to the beneficiary households are made through cash, mobile money networks as well as bank account transfers, and the payments are received by the main recipient or an appointed representative (MCDSS, 2022, P.1). A total of 974,160 households have been enrolled since the program's inception in 2003 and by the end of the year 2022, it was expected that the number would increase to 1,027,000 households (MDCSS, 2022, P.1).

## **1.2 Nature of the problem**

Zambia has attained macroeconomic stability during the last ten years and is presently categorized as a lower-middle-income nation. Urban regions with capital-intensive industries, however, have been the main drivers of expansion. Thus, while inequality has grown, poverty has only slightly decreased. Despite these economic advancements, the most recent polls indicate and show that 54.4 percent of the population remained below the poverty line set by the government (Embassy of Sweden, 2018, P. 3).

The poor are still at risk because they have limited access to essential services like healthcare, safe drinking water, and education, as well as issues like food insecurity. Women, children, senior citizens, and those with impairments are among the most at risk (Remmy et al., 2019, P.1). To cushion this backdrop, the Social Cash Transfer (SCT) program, the social security program was introduced and created to address this issue. The program has gone through three significantly distinct transformations from the time it was introduced. It consisted of five pilots in the years 2003 and 2010.

To serve the lowest 10 percent of the population in the areas serviced, the design adopted the ultra-poor strategy, often known as the 10% inclusive model. The program then had two streams between 2010 and 2014, each with unique qualities. While the Multiple Grant looked at different types of vulnerability, the child grant as one of them intended to help beneficiaries with children. Since the program used a one-way criteria so it could reach out to all targeted beneficiaries, the program started functioning in a structure called harmonized targeting in 2014. Harmonized targeting means that program targeted households with dependants greater than three (Arruda and Dubois, 2018, P.1). The Zambian government opted to expand the SCT program to encompass all the districts in the country (Pedro & Laura, 2018, P.1). After nine years, information is scarce on the outcome of the government's decision to implement the SCT program countrywide specifically in the areas of education, food security, and healthcare access among the targeted households.

SCTs have been reported to improve educational outcomes; increase enrolment rates, reduce absenteeism and drop-out rates, improve food security, and increase health-seeking behaviour. However, since its trajectory from a set of pilot projects to its current state little is known about the effects of the SCT program at a national level in Zambia. The available studies on SCT in Zambia are developing from the rural districts where the program was piloted.

In Choongo district, it was reported that SCTs did not improve rural women's lives in several ways, such as education, health, and nutrition (Saphila, 2021, P.61). The results that SCTs did not result in any improvements is a significant a signal calling for attention and evaluation of the operations in this area. While in Mazabuka and Chibombo, contrary to the results in Choongo, SCT was responsible for lowering school drop-out rates and improving school attendance, and food security (Joyce, 2019, P.40-42; Kumar and Sakthivel, 2020, P.1-7).

These studies reveal different results, and the dynamics of these variations demand investigating if the SCT is to have a meaningful impact as a social protection strategy. Coupled to the differences in impact of the SCT in the various rural areas, is the lack of studies drawing out results from the urban districts. Although nine years have passed since the program was rolled out country-wide, the contradicting results show that there still more that needs to be known on how the vulnerable in urban districts are faring under the cash transfers they receive. Generally, there is a knowledge gap on the overall performance of the SCT, whether the beneficiaries are experiencing a positively significant or insignificant effect remains largely unknown. Hence, this study aims to review the existing literature on the impact of SCTs, because of its purpose to improve the live-hood and welfare of the most vulnerable in the Zambian community.

### **1.3 Research objectives**

The study's main objective is to review the existing literature on the impact of social cash transfers in Zambia at a national level.

The study will specifically aim to examine existing evidence regarding:

1. The benefits of the social cash transfer towards the beneficiaries of food security.
2. The benefits to the beneficiaries of educational outcomes.
3. The benefits of the social cash transfer towards the beneficiaries on health care access.
4. Define potential knowledge gaps in the SCT program requiring examination for possible future design of SCTs.

### **1.4 Research Question**

How does unconditional cash transfer improve the livelihoods of the beneficiary's concerning education, food security, and health care?

The study specifically questions:

1. How does SCT improve the food security of the beneficiaries and promote good nutrition by securing ample balanced meals?
2. Does SCT improve the educational outcomes such that the beneficiaries complete their formal education?
3. How does SCT increase access to health care towards the beneficiaries?
4. What are the key challenges and lessons learned from implementation of SCT program? (Improvement, failures, limitation on scale-up of the program)

### **1.5 Hypothesis**

The implementation of the SCT program as a social protection policy in Zambia at a national has knowledge gaps in terms of its impact on poverty.

### **1.6 Justification and Relevance of this Research**

The outcome of the research will contribute to the evidence base on SCT as a social protection strategy, highlighting its successes and/or pitfalls around the subject of education, healthcare access, and food security. The ministerial body running the SCT policy will find the data from this research advantageous, because of its reliability, validity, and non-bias nature. The ministry will find the study report a review of existing literature published in Zambia, thus supporting and encouraging strategic areas of productivity, and at the same time making appropriate amendments where implementation seems to be failing. On the other hand, the current literature shows inconsistencies in its results which does not support the reports from government. This creates a knowledge gap that needs to be investigated. Therefore, conducting this study closes the knowledge gap and provides additional literature.



## **CHAPTER TWO**

### **LITERATURE REVIEW AND THEORETICAL FRAMEWORK**

#### **2.0 Introduction**

The previous chapter presented the introduction, background and problem of the study. Based on the identified problem, the objectives of the study were presented. This chapter builds on the foundation laid in the first chapter. Guided by the objectives of the study, this chapter presents the literature and framework of the study. The study begins by discussing Social Cash Transfer (SCT). Furthermore, the chapter presents the empirical literature that governed the study.

#### **2.1 Conceptual and Analytical Framework**

In this section, we establish the foundational concepts and theoretical underpinnings that underlie the social protection policies and cash transfer programs in Zambia. A clear understanding of these concepts is crucial for a comprehensive review of the subject. In this section of the literature review, the definition of SCT and theoretical foundations are presented.

##### **2.1.1 Social Cash Transfers**

Gore and Chibombo (2020, P. 2) define SCT as a regular payment in form of money that is provided by the government or non- governmental organisations to individuals or households with the aim of reducing poverty. The amount of money is provided and given to them to cushion and mitigate the risk of vulnerability. Soko (2019, P. 2) explained that poor people continue to face several challenges such as food security, access to education, health and sanitation. Due to these challenges, it is only essential that they receive aid to help them survive. It is because of this aim that SCT programs have grown significantly especially in developing countries such as Zambia (Soko, 2019, P.3).

Arruda and Dubois (2018, P. 1- 2) explain that poverty remains a huge problem and concern in developing countries such as Zambia where a lot of

the people or citizens live in extreme poverty. In such cases, the employment of SCT becomes vital and essential as they are perceived as social assistance. Arruda and Dubois (2018, P.1) cited CSO (2015) to explain that in a country like Zambia, SCT are vital because close to 54.4 percent of the population live below acceptable poverty levels with 13.6 percent living in extreme poverty.

Bastagali et al., (2016, P. 13) indicate that SCT can have a variety and wide range of effects varying from education, income, nutrition and health. The Department for International Development United Kingdom (2011, P. ii) pointed out that there is several evidence that has shown that SCT has been important in reducing inequality among citizens. UNICEF (2015, P. 29) provided evidence from different countries as shown below on the impact of SCT.

Table 1: Effects of SCT

Impact area	Evidence
Livelihood	Led to an improvement in ownership of assets such as farm and animal in Ghana, Kenya, Zambia, Lesotho, Malawi and Zimbabwe.
Change in source of income	The results show that individuals only needed wages to supplement their income in Ghana, Zambia and Kenya.
Local Economy	In Zambia, Ghana, Ethiopia and Kenya, there was an improvement in income levels. Also, the local people were able to grow their businesses.

Source: Adapted from UNICEF (2015, P. 29).

Looking at the literature presented on SCT and its effects, the researcher holds the view there are reasons to question the positivity of the existing policy narrative about SCTs, at least in the context of Zambia. For example, Ministry of Community Development and Social Services (2022, P. 1) reported that individuals receive K200 (\$10) per month on SCT and while those with disability receive K400 (\$21). Currently, the price of mealie meal in Zambia is at K350 (\$18). So, the question is how does this help alleviate poverty? The

money they receive is not worthy and enough to support the nutritional needs and wants of a single individual in a typical and normal household (Gore and Chibomba, 2020, P.3). Yet, SCTs remain a favoured tool of Zambian donors and policy-makers. What explains the gap between perceptions and reality? By conducting a systematic review, the researcher was able to provide to some extent what could result in such an overall perception.

#### **2.1.1.1 Types of SCT**

UNICEF (2016, P. 1) defines conditional cash transfers as transfers that are provided and given to beneficiaries with certain instructions, specification or conditions on how the money should be used and utilised whereas unconditional cash transfers are transfers that do not come with any condition or specific requirements on how they should be spent. Hemsteede (2018) explains that the decision whether to use unconditional or conditional cash transfer simply depends on the ideologies of a country or region.

Hjelm and Palermo (2016, P. 1) highlighted that Unconditional cash transfers are not to blame for the high fertility rates among women. This was done in quest to find out if those put on unconditional cash transfer were not responsible in managing their fertility levels. However, it was encouraged that Unconditional cash transfers are better as they help to alleviate poverty. On the other hand, Afzal et al., (2019, P. 3) explain that Unconditional cash transfers are mostly used because they require easier monitoring and evaluation tools compared to conditional cash transfers.

Other than the issue of monitoring and evaluation, Haushofer and Shapiro (2016, P. 1973) point out that unconditional cash transfers progress the emotional security of the recipients. Haushofer and Shapiro (2018, P.1) add that unconditional cash transfers provide the beneficiaries an occasion to use the money they see right which comprises investing the money and buying assets. On the other hand, Baird et al., (2013, P.7) argue that conditional cash transfers have more targeted effect issues such as education, health and food compared to unconditional cash transfers.

From the presented results, there is a mixed perception surrounding which type is most effective. Nonetheless, looking at the amount that is given in Zambia, it would be cumbersome and costly to condition the transfer on beneficiaries spending it on specific goods such as food or education. Gaarder (2012, P. 130) argued that dealing with conditional SCT is better and easy to evaluate impact. However, the problem comes with deciding on what to condition and ensuring the condition is adhered to (Gaarder, 2012, P.130). Gaarder (2012, P. 131) concluded that conditional cash transfer is perceived not be hand out because the beneficiary must use the money to build a skill.

### **2.1.2 Effect of SCT on Health care**

Through an income effect and greater utilization of medical services, SCT may lower morbidity. Costs associated with fees, medications, transportation, and opportunity costs from missing income are some of the obstacles to getting health care in developing countries (Syed et al., 2013, P. 6). Thus, the improved economic stability offered by SCT may enable people to access health services sooner when ill and seek more preventative treatment, such as vaccinations. According to a multi-country qualitative study by Ebenezer et al., (2018, P.676), SCT eased demand-side barriers to access to healthcare. The resources available to households for health can directly be impacted by a SCT program. With more money, the household may upgrade its living quarters, such as by adding a concrete floor that has been shown to reduce parasite exposure. It can also make upgrades to its sanitary facilities.

Additionally, funds might be used to cover travel to medical facilities, medical supplies, and preventative medications like deworming pills. They could also be used to cover out-of-pocket costs associated with curative or preventive medical appointments. Therefore, a child's environment for health is improved because of the efficient utilization of these additional resources (Addo et al., 2019, P.108). Additionally, given the evidence that mothers' negotiating power affects children's health, SCT may increase women's intra-household bargaining power, which may have a favourable effect on women's

and children's nutrition and health status. By lowering participation in hazardous work, SCT may indirectly reduce morbidity brought on by injury.

According to García-Parra et al., (2016, P. 1), they explored the question, was there a change in nutrition of children on SCT in Mexico. It was found that 40.1 percent of the children who had been on the program for more than 9 years were stunted. It was found that although SCT improved the living conditions of the families, they still struggled with health issues such as malnutrition. Daalen et al., (2022, P. 1) pointed out that SCT directly influenced the health of the beneficiaries. This was supported by Afzal et al., (2019, P. 3380) who added that the beneficiaries of SCT are usually old people who really need access to medical facilities and medication. Through the SCT funds, they can be able to pay for such services.

According to UNICEF (2015, P. 39), there is convincing indication to suggest that receiving a cash transfer has a positive effect on improving access to healthcare in Zambia. The improved nutritional status resulting from cash transfers directly contributes to better health outcomes among household members. Additionally, the cash provided to households enables recipients to afford necessary medical treatment and healthcare services.

Furthermore, research conducted by MCDSW and AIR (2016, P. 3) in Zambia indicated a significant reduction in the incidence of illnesses, dropping from 42.8 percent to 35 percent. Likewise, the occurrence of partial sightedness decreased from 7.2 percent to 3.3 percent. These improvements in health indicators may be attributed, at least in part, to the fact that beneficiary households could now afford minor eye surgery and other necessary medical interventions. The positive effects of cash transfers extend beyond individual households. As UNICEF (2015, P. 28) highlighted that due to the presence of SCT, there was improvement in nutrition and health of the beneficiaries in Zambia.

Daalen et al., (2022, P.1- 23) conducted a mixed-methods systematic review using papers published from different part of the globe. From most papers that were analyzed, the results showed that SCT had a positive and significant

effect on health of beneficiaries. On the other hand, 11 articles from the analysis showed that SCT had no effect on health of beneficiaries. The *Zambian Ministry of Community Development and Social Services (2022, P. 2)* revealed that SCT reduced the chances of having diarrhea by 5 percent by children at national level.

### **2.1.3 Food Security**

The World Food Summit of 1996 defined food security as the point at which all people at all times have access to sufficient, safe, nutritious food to maintain a healthy and active life (World Bank, 2023). The availability, access, use, and stability criteria must all be satisfied for this to be realized. SCT can affect all four aspects of food security. Households with more buying power may invest in their farming methods and boost productivity at the household level. Families with greater financial access to food can buy a wider range of goods, including more food. Finally, a consistent household income may eliminate food gaps throughout the year and stabilize food intake over time. Currently, many complementary measures must be utilized to capture the four diverse aspects of food security because no single measure can capture all the dimensions involved. Spending on food, dietary variety and frequency, consumption patterns, experience of food insecurity, as well as self-assessed metrics, are common indicators of food security (Lisa, 2016, P.2-3).

According to Miller et al., (2011, P. 230-238), a randomized control trial (RCT) examining the initial implementation of the Malawi Social Cash Transfer Scheme (SCTS) in 2007 among 83,000 beneficiaries. The study revealed that the program's benefits enabled the recipient households to increase their food consumption and enhance dietary diversity. Even though the transfers were not provided on regular time intervals, the beneficiaries were able to survive. The mere assurance of receiving the SCT was sufficient for beneficiaries to utilize small amounts of credit for household expenses or asset accumulation. Additionally, they were able to borrow money from

family or friends, making this an essential and effective coping strategy, even though the actual monetary value of the transfers was relatively modest.

Finally, the concept of leveraging small amounts of credit or borrowing from family and friends, as highlighted by Miller et al., (2011, P. 230-238), offers insights into the coping strategies employed by beneficiaries of cash transfer programs. This aspect showcases the resourcefulness of individuals in making the most of limited financial support, underscoring the importance of social cash transfers as a safety net for vulnerable households in Zambia. García-Parra et al., (2016, P. 2-8) explored the effects of cash transfers on the nutritional well-being of households in rural Chiapas, Mexico. The results of the study revealed that the presence of SCT enables the beneficiaries to increase their consumption. However, even though they have access to food, it does not guarantee that they buy health food that will prevent malnutrition among children.

#### **2.1.4 Effect of SCT on Education**

SCT have been used to advance children's education in low- and middle-income nations all around the world. SCT improve educational outcomes such as better learning outcomes, higher enrolment rates, lower absenteeism rates, lower rates of early pregnancy and marriage, desired behaviour changes related to education, and higher test scores in cognitive ability, mathematics, and English comprehension (Baird, 2011, P.1709–1753). Cash transfers might interact differently with each of these educational outcomes. Transfers most plainly ease the burden of poverty. However, when restrictions are loosened, parents have more freedom to decide on and make significant investments in their children's education. The interplay between the loosening of the poverty restriction (to some extent) and other characteristics of the children and the home will determine how financial transfers impact educational attainment for diverse children and teens (David et al., 2021, P.14-15).

Soko (2019, P. 28) found that 42 percent of the beneficiaries of SCT in Lusaka used the money to enrol their children into school. This shows that SCT is vital in improving access to education. On other hand, Viberta et al., (2021, P. iii) conducted a study in Zambia that focussed on 2515 households. The study revealed that SCT improved women's access to resources that they can use to develop and access basic needs. Among the basic needs include education and health.

## **2.2 Global perspective of Social Cash Transfers**

Helming (2005, P. 9) highlighted that SCT has a lot of existing benefits. In the same article, a number of examples were highlighted. For instance, in Brazil, it was found that people on SCT had a 5.3 percent chance of reducing poverty in their homes; in south Africa, the reported percentage was 1.9 percent (Ibid, 2005). On the other hand, Saeed (2020, P. 1-34) conducted a study in Pakistan on SCT and poverty alleviation, and the results revealed that SCT had no significant effects on poverty alleviation when everyone on the program was analysed. However, when only individuals who had the lowest consumption quantities were analysed, the results showed a negative but insignificant relationship and the second results highlight that SCT can slightly reduce poverty levels, but the reduction can be difficult to notice (Saeed, 2020, P. 1-34).

DFID (2016, P.4) points out that SCTs have been on the increase as a formula of charitable aid and in this review, it was found that from 28 SCT programs globally, they all reduced and minimised poverty levels. MacAuslan and Riemenschneider (2011, P.1) used evidence from Oxford university from Malawi and Zimbabwe and the author argued that SCT instigate more harm and destruction than good. First the effect of SCT on poverty is not substantial and significant, second, SCT cause and lead to concerns in terms of social and common relations amongst residents or citizens and those with access to SCT are normally defamed by those who have no access and are usually considered to be lazy and sluggish by society (ibid). Meanwhile, Hagen-Zanker et al., (2016, P. 1-7) attempted to look at the what the evidence says about SCT in



low- and middle-income countries. The study reviewed 165 studies from 30 countries with 56 SCT programs. From the study results, 25 studies revealed that SCT improved food expenditure at both household and individuals and overall, the study concludes that SCT influences reduction of poverty, reduction in child labour and ability to save and investment (Ibid).

Esser et al., (2019, P. 32) disagreed with MacAuslan and Riemenschneider (2011, P.1) and added that SCT are vital in fighting poverty and the research added that women and children have been the main beneficiaries of SCT. It is quite surprising that although some authors claim that SCT are not effective, the number of people on the program are quite huge. For example, Bold et al., (2012) reported that Brazil had 12.9 million household, Colombia had 2.4; Mexico had 5.8 million; and South Africa had 9 million households. The programs in each country were covering 30 percent, 11 percent, 20 percent and 30 percent of the population in Brazil, Colombia, Mexico and South Africa respectively.

The question could be, why do SCTs continue to expand if their impacts are not clearly and significantly beneficial across contexts? The increase could reflect how entrenched poverty is across the countries, and the reality that the poor receive only small scraps instead of more transformative change. An increase does not necessarily mean effectiveness. On the other hand, the increase could mean that effectiveness of SCT is a contextual issue. While others find no effects in certain regions, it is not the same to all.

Chechini and Madariaga (2011, P. 9-211) explored Latin America countries on social cash transfers, and it was found that the program benefited more than 25 million families in form of funds to access food, education and health. Although the results show debates on the effectiveness of the programs, clearly many people are benefiting from them. Sengupta and Costella (2023) explored the role of SCT in climate change resilience in Indonesia, Bangladesh, Ethiopia and Zambia. Based on the conclusion of the study from the literature analysed, it was found that SCT had a limited effect on adapting to climate change.

### **2.3 African Perspective of Social Cash Transfers**

Garcia et al., (2012, P. 2) reported that traditional responses to disasters in Africa such as emergency aid have been perceived not to be enough and this is because the mechanism has failed to completely eradicate poverty by increasing food security, leading to what has caused the recent raise of SCT in different parts of Africa. Zezza et al., (2010, P.1) revealed the effects of SCT in both Eastern and Southern Africa and the focus of the study was on Kenya and Malawi.

The results showed that due to SCT, few individuals were involved in agriculture or other activities to bring in income in both countries. Just from these results, it can be noticed that SCT encourage people to be relaxed. Kilburn et al., (2017) examined SCT and education programs among children and it was found that SCT improves enrolments while reducing dropout rates, and the program improves access to education through covering school expenditures thus reducing financial constraints.

In addition, Vincent and Cull (2009, P. 2) focused on SCT in the southern region, it was found that between 2005 to 2008, SCT reduced poverty and the improvement was in terms of food security, health care and education, and the study goes further to claim that the improvement of SCT is not only to the recipient's households but also the neighbours. Given the amount of SCT in the southern regions, it is the opinion of the researcher that the funds received are not sufficient to even help the neighbouring household. The results of the study seem to be exaggerated and this provides an indication that more studies need to be conducted on the topic.

Owusu-Addo (2018, P. 106-118) focused on SCT and health in the Sub Sahara, the study recognised that SCT as a determinant of health is a topic that has been overlooked and the findings revealed that SCT impacts both physical and mental health. Lena (2020, P.1) on the other hand reviewed SCT payment in the Sub-Saharan region and the study recognised that the coming in of electronic transfer has improved the effectiveness of SCT but the technologies are still not being applied to the fullest thus, affecting the

consistency of remittance, making it hard for the program to effectively eradicate poverty. Levine et al., (2009, P. 1) reviewed papers to understand the effect of SCT on poverty and inequality and the overall conclusion was that SCT had a positive effect on poverty, and it was revealed that the effect of SCT is more significant amongst those that are extremely poor while on the other hand, the effect of SCT on inequality is limited.

In Zimbabwe, Bhalla (2017, P.1-5) reviewed public policies that are being applied to alleviate poverty, the publication was done in three essays with the first essay focusing on food security, the second essay was on well-being and the last was on life satisfaction and the study revealed that SCT increased food security, well-being and life satisfaction.

Ansel et al., (2019, P. 1-2) reviewed Lesotho and Malawi on SCT and its effects on youths, it was found that households had varying consumption levels in both countries due to inconsistent income and this applied especially to those on SCT because the remittance of SCT was not consistent. The study concluded that consistent SCT would result in improved food security and investment. This study presents highlights that it is not just about being on the payments are consistently distributed over time.

Another study in Zimbabwe by Pace et al., (2022, P. 1-5) revealed that SCT increase food security by 16 percent, it was also found that SCT encouraged agriculture activities by 21 percent. The overall indication of the study was that SCT improves both food security and diet diversity. Maliro (2011, P. 272) compared agriculture input subsidies and SCT in Malawi. The study revealed that SCT has a limited contribution to poverty reduction because SCT has inclusion errors. For example, the 10 percent target of SCT is usually arbitrary and does not include all definitions of poverty and in addition, due to food price changes, SCT fails to make a significant impact while on the other hand, agriculture input subsidies contribute to significant poverty reduction as it empowers citizens to have access to huge amounts of food (Maliro, 2011, P. 272). More sustainable programs that genuinely empower

citizens such as health insurance, free education and agriculture subsidy need to be expanded if poverty is to be eradicated.

In South Africa, Aguero et al., (2006, P. 1- 28) conducted a study on unconditional cash transfer and nutrition and the focus of the study was on SCT that was given to women, and overall, the study revealed that SCT increased nutrition of children in South Africa and using SCT, the children's parents were able to buy a variety of food for their children.

In Kenya, Ward et al., (2010, P.1-220) conducted a study on SCT for orphans and vulnerable children and the results revealed that a majority of the beneficiaries use the money they receive for food and basic education for the children. The study also showed that poverty reduced by 13 percent among the vulnerable and orphaned children due to the use of SCT and it also revealed that larger households diluted the value of the transfer (ibid). This is an indication that family size should be considered in the payment of SCT. In addition, it was found that diet diversity increased by 15 percent and the SCT income increased ownership of assets in some households and lastly, it was found that SCT did not improve access to health services such as medication and treatment (Ibid, 2010).

#### **2.4 Zambian Perspective of Social Cash Transfer**

Arruda and Dubois (2018, P. 1) pointed out that 54.4 percent of Zambia's population live in high poverty levels. Schubert (2005, P. 4) explain that it is hard to fully explain the vulnerability levels of citizens in Zambia. The articles add it is approximated that more than 2 million people suffer from moderate food poverty issues and 3 million suffer from critical poverty. Schubert et al., (2003, P. 28) indicate that approximately 10 percent of all households in Zambia require aid to meet all their requirements. It is based on this problem that the SCT was established in Zambia in 2003. Arruda and Dubois (2018, P.1) add that since the inception of the program, five pilots from different areas were conducted to assess its significance as shown in the table below.

**Table 2: SCT pilots (Arruda and Dubois, 2018, P. 3)**

District	Justification for district	Target	Selection process
Kolomo	Chosen on political basis and on local contexts such as poverty levels	Vulnerable people	Social workers as well as volunteers from the community assessed the households
Kazungula	Chosen on political basis and on local contexts such as poverty levels.	Vulnerable people	Social workers as well as volunteers from the community assessed the households
Chipata	Chosen on political basis and on local contexts such as poverty levels.	Vulnerable people	Social workers and community volunteers assessed the households
Monze	Chosen on political basis and on local contexts such as poverty levels.	Vulnerable people	Social workers and volunteers from the community assessed the households
Katete	Chosen on political basis and on local contexts such as poverty levels.	Elderly people	Social workers and volunteers from the community assessed the households

From the pilot studies, the overall indication of the results was that SCT were vital in Zambia because many of the citizens lived in extreme poverty.

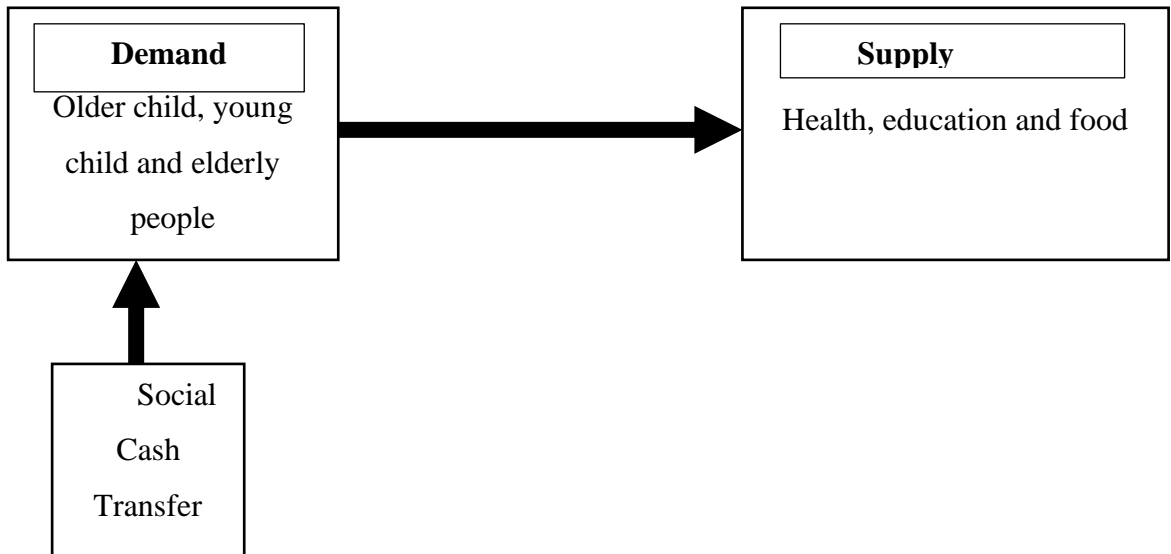
In 2014, the program adopted a new format referred to as harmonized targeting, which introduced a unified selection criterion based on households with a high number of extremely poor dependants and this approach aimed to

encompass a wider spectrum of vulnerable households (Arruda and Dubois, 2018, P. 1). According to Arruda and Dubois (2018, P. 2), before the starting of the program's second phase, these initiatives collectively reached a total of 7,337 households and an additional 4,580 individuals. The process of selection relied on the active involvement of community volunteers, social workers, and the Community Welfare Assistance Committee (CWAC), with essential support and help from the leaders in the community in identifying households that met the eligibility criteria (Arruda and Dubois, 2018, P.2).

The initiation of cash transfer schemes in Zambia marked the beginning of several initiatives aimed at evaluating and refining the approach to social cash transfers and The Kazungula cash transfer scheme was one of the initial programs implemented in 2005, functioning as a pilot project to evaluate the feasibility of dispensing cash transfers in lightly settled and geographically inaccessible districts (Arruda and Dubois, 2018). Subsequently, the Chipata scheme was instigated in the year 2006, with its primary objective being the appraisal of the competence preconditions essential for the successful implementation of a full scheme at the district level and in 2007, the Monze and Katete schemes were both established, each with definite aims, and lastly, the Monze scheme combined soft conditionalities, allowing for an evaluation of the influence of such conditions on the efficiency of the program (Arruda and Dubois, 2018). Meanwhile, the Katete scheme specifically targeted individuals aged 60 years and older, aiming to generate valuable insights into the cost-effectiveness and acceptability of social pensions within the Zambian context. These diverse schemes served as critical building blocks, offering valuable lessons that would inform the eventual design and implementation of a national social cash transfer scheme in Zambia (Tembo and Freeland, 2014: 387). Ministry Of Community Development and Social Services (2022) reported that by 2022, the program had grown significantly due it benefits and was found in 116 districts as of 2021.

### 2.1.5 Conceptual framework

This section of the study presented the conceptual framework of the study. The conceptual framework of the study helped to explain the factors surrounding SCT and its impact. The figure below shows the conceptual framework of the study grounded on the systems theory.



**Figure 1: Conceptual framework adapted from UNICEF (2015, P.7)**

### 2.3 Lessons

The literature on social protection policies and cash transfer programs in Zambia and other regions underscores the significance of accurate targeting mechanisms to reach vulnerable groups effectively. It emphasizes the distinction between conditional and unconditional cash transfers, advocating for context-specific program design. Gender considerations in program implementation, community involvement in beneficiary identification, and robust monitoring and evaluation systems are recognized as critical factors for program success. Cultural sensitivity and the alignment of cash transfer policies with broader development goals are highlighted. Furthermore, the need for long-term sustainability strategies, flexibility to adapt to changing contexts, and a focus on equity and inclusivity are valuable lessons gleaned from the literature, providing essential insights for the study of Zambia's social protection landscape.

#### **2.4 Gaps identified in the literature.**

The objective of the study is to explore the impact of SCT on education, health and food security. The literature conducted outside Zambia present contextual gap due to the differences in culture, values, policies and resources availability. The studies conducted within Zambia still necessitate the need to conduct this study. This is not the first of the study to be conducted in Zambia. There have been several studies that have been conducted in the country. For example, Ramesh and Cha (2017, p. 9-18) conducted a study on SCT in Zambia and Namibia using a literature review method; Goma (2021, P. 1- 62) conducted a study on SCT using mixed research among rural women. Bwalya and Lungu (2019); and Gore and Chibombo (2020, P.1-26) used a quantitative approach to study disabled people in Lusaka.

First, from the studies presented above that were conducted in Zambia, a knowledge gap exists. Most studies have focused on the food security that SCT brings leaving out the role it plays in education and health. The focus of the studies has been on poverty alleviation and in this sense having access to food (Bwalya and Lungu 2019, P. 1-30; Gore and Chibombo, 2020; Ramesh and Cha, 2017, P. 9-18). This clearly shows an existence of a knowledge gap that needs to be investigated.

Second, the studies reviewed, inclusive of those conducted in Zambia relied on secondary data to make conclusions and all the studies simply show to point to one thing, SCT is beneficial and is changing lives. There are few studies that used secondary data to make conclusions (Bwalya and Lungu 2019, P. 1-30; Gore and Chibombo, 2020). Moreover, the secondary data used focused on the part of government reports and previously published reports on the programs.

Lastly, a practical gap exists in the literature reviewed. Reports reviewed from UNICEF (2015, P.1); GRZ (2022) and Arruda and Dubois (2018, P. 2) found that SCT goes as far as improving the economy of the country. UNICEF (2015, P. 1- 26) showed that people were able to acquire assets because of SCT. Given the small amounts involved, how are these macro- and



microeconomic impacts possible? A person earns K400 (21USD) every two months and in a special case K800 (41USD). With this kind of amount, it is impossible to acquire assets such as livestock. It is even impossible to access quality education and food in the current economy if this was your only source of income. Could this be true only in rural areas? In contrast, some studies suggested that SCT had no effects in the lives of the beneficiaries (Gore and Chibombo, 2020, P. 24). This clearly shows a lack of consistency and practicality in the claims. Thus, the need to conduct this study which analyses past reports and primary data from beneficiaries.

## **2.5 Conclusion**

In conclusion, this chapter has provided a comprehensive literature review that serves as the foundation for the study on the systemic review of social protection policies and cash transfer programs in Zambia at a national level. The literature review has revealed several key insights and gaps in existing research. It has emphasized the importance of accurate targeting mechanisms, monitoring and evaluation systems, and contextual sensitivity in the design and implementation of cash transfer programs.

The identified gaps in the literature align with the objectives of the study, which are to explore the benefits of the social cash transfer program towards the beneficiaries' food security, educational outcomes, and healthcare access, as well as to define potential areas in the program requiring transformation for possible future remodelling. These objectives are designed to address the research gaps and contribute to a comprehensive understanding of the social protection landscape in Zambia.

## **CHAPTER THREE: METHODOLOGY**

### **3.0 Introduction**

This chapter outlines the research methodology employed in the systemic review of social protection policies and cash transfer programs in Zambia at a national level. This chapter outlines the research design, data collection methods, data analysis techniques, and ethical considerations that underpin the investigation. By explaining the research methodology, this chapter provides a framework for the systematic examination of social protection policies and cash transfer programs, ultimately contributing to the study's reliability.

### **3.1 Study design**

Developing a case study with a qualitative approach is particularly justified in this study for several reasons. First, the study focuses on the systemic review of social cash transfer programs in Zambia at a national level. Such a research topic demands an in-depth understanding of the factors that influence the policies and programs. Qualitative investigation, through case studies, delivers both elasticity and complexity essential to investigate social cash transfer in Zambia.

Secondly, a case study approach permits for a broad scrutiny of a detailed background, in this instance, Zambia. By investigating into the details and particulars of Zambia, the study can stipulate understandings that may not be readily acknowledged in quantitative analyses. Furthermore, a qualitative approach simplifies the examination of the understandings, observations, and descriptions of receivers and program overseers. The qualitative data therefore deliver appreciated understandings into the lives of the recipients and implementors of social cash transfer.

Moreover, the study also intentions to categorize probable parts for change and expansion. A qualitative case study approach is compatible for this resolution, as it acknowledges for the exploration and consideration of strengths and weaknesses. Such findings and results can lead to an

improvement and enhancement in policy recommendations and future program design.

This study proceeds systemic review examining the social cash transfer program in Zambia. The study uses secondary data as the main source of information and reviews the available and most recent literature on the research topic. The study also obtains qualitative information from a key informant directly involved in the implementation and monitoring of the SCT program, conducted via an online platform.

### **3.2 Data collection**

In this study, there are two types of data that were collected i.e., secondary and primary data.

#### **3.2.1 Secondary data**

This type of data includes already existing information from different sources. This type of data was collected through a systematic review of the already published literature.

##### ***3.2.1.1 Systematic review***

Lame (2019, P. 1635) pointed out that a systematic review implies a broad procedure of categorising, appraising, and merging all relevant studies connected to a detailed topic. This approach is valued in research developments where there is ambiguity concerning the usefulness of an intervention's results. Lame (2019, p.1635) outline a seven-step process for conducting a systematic review. These steps involve (1) evidently defining and outlining the research question or hypothesis, (2) indicating the styles of studies vital for the examination, (3) conducting a broad literature exploration to discover applicable studies, (4) inspection the recognized studies and assessing their appropriateness grounded on inclusion criteria or the necessity for extra investigation and analysis, (5) analytically measuring the studies chosen for inclusion in the systematic review, (6) joining the findings and results from these studies and evaluating their quantity of consistency, and (7) publishing the outcomes of the review. (ibid, 2019)

The reviewed papers were only those that were conducted in Zambia on the topic. A total of 30 paper were reviewed published by different organisations such as UNICEF, SAIPAR, World Bank, American Institute for Research, The Transfer Project, International Journal of Management and University of Zambia. These papers were selected because the publishers were deemed to be credible sources. The articles were accessed from Local electronic databases from Zambian Universities such as UNZA Repository, AERD: ESSA, Research Gate, Google Scholar, PubMed

### **3.3 Primary data**

#### **3.3.1 Inclusion criteria**

- Studies conducted in Zambia.
- Studies evaluating the social policy and implementation of social cash transfer programs.
- Studies assessing the impact of social cash transfer programs on poverty reduction and social well-being.

#### **3.3.2 Exclusion criteria**

- Studies conducted in other countries.
- Studies focus solely on program logistics or administrative aspects without assessing impacts.

#### **3.3.3 Assessing Study Quality and Risk of Bias:**

The Newcastle-Ottawa Scale was used to assess the quality and risk of bias of included studies.

#### **3.3.3 Qualitative data**

An online semi-structured interview in form of a questionnaire was used to collect data. This questionnaire was composed of three sections; Section A:

assessing educational outcomes, Section B: assessing food security, and Section C: assessing health care access.

### **3.4 Qualitative data analysis**

In this research design, the qualitative data collected was systematically analysed. Coding techniques was applied to identify meaningful units and categorized into themes. Lofland et al., (1984) identify familiarization, coding, theme generation, defining, and writing up as key steps in content analysis. Through data exploration and interpretation, relationships, meanings, and implications of the themes were critically analysed. Triangulation was used to enhance credibility, and the findings were reported using narrative descriptions.

### **3.5 Ethical Consideration**

Before commencement, a letter seeking permission to interview key personnel involved in the implementation and monitoring of the SCT via an on-line platform, was addressed to MCDSS. The letter and the on-line interview in form of a questionnaire was clearly stated that participation is completely voluntary, there were no rewards attached to participation and identification information such as names or ID numbers were not required to keep things confidential and encouraged participants honesty, and there were no risks or harm associated with participation.

### **3.6 Study Limitations**

The availability and accessibility of relevant studies and data was limited in this area of study especially on health care. Zambia is a low-income country hence, funding to promote research in this area is poor resulting in a scarcity of documented information.

Published studies tend to have a bias toward positive results, potentially overlooking studies with neutral or negative findings, the same can be said about secondary information obtained from informants in charge of the

implementation and running of a program. This bias can impact the comprehensiveness and representativeness of the evidence base.

There may be variations in the implementation of social cash transfer programs across the different districts or periods in Zambia. These variations can affect the outcomes and make it challenging to draw consistent conclusions.

### **3.7 Summary**

Chapter three outlines the research methodology employed in this study. The systematic review of existing literature laid the groundwork for the study. To ensure the validity and reliability of the research, established protocols and ethical considerations were followed. This chapter provides a clear and well-structured roadmap for the study's execution, ensuring robust data collection and analysis to address the research objectives effectively. Based on the methods presented in this chapter, the next chapter presents the analysis of data.

## CHAPTER FOUR: DATA ANALYSIS

### 4.0 Introduction

The previous chapter presented the methods that were employed to collect the data. Chapter moves forward to present the analysis of the data that was collected. The study employed qualitative analysis methods by looking at the common themes in the data collected. Based on the findings, the data was discussed.

### 4.1 Systematic review of publications

The following key words were used: “Social Cash Transfer” and “Zambia”. This first generated 322 records from the selected web databases. Then records were excluded if not in English and not journal articles, reducing the records to 156. Articles were finally filtered by applying key areas of interest, *food security, healthcare access, and educational outcome*. This resulted in a final sample size of 14 articles for this study (figure 1).

#### 4.1.1 Inclusion and Exclusion Criteria

The inclusion criteria that were used for the selection of articles were studies (1) that had been conducted in Zambia (2) that evaluated the benefits of SCT program (3) and primarily focused on benefits in relation to food security, healthcare access, and educational outcomes. In order to apply these criteria, a first preliminary reading of the title and abstract of each article was carried out, this allowed the author to rule out articles that did not meet the above-mentioned criteria. Then more thorough reading of the remaining articles was carried out by the author, hence, bringing a final sample of 14 scientific papers for discussion (figure 1).

#### 4.1.2 Article Coding

The following coding procedure was used to extract the important information from the articles: (1) author/authors and year of publication, (2) research title, (3) place/country of publishing, and (4) study findings (Cachón et al., 2020, P.4) (table 1).

#### **4.1.3: Risk of Bias Assessment**

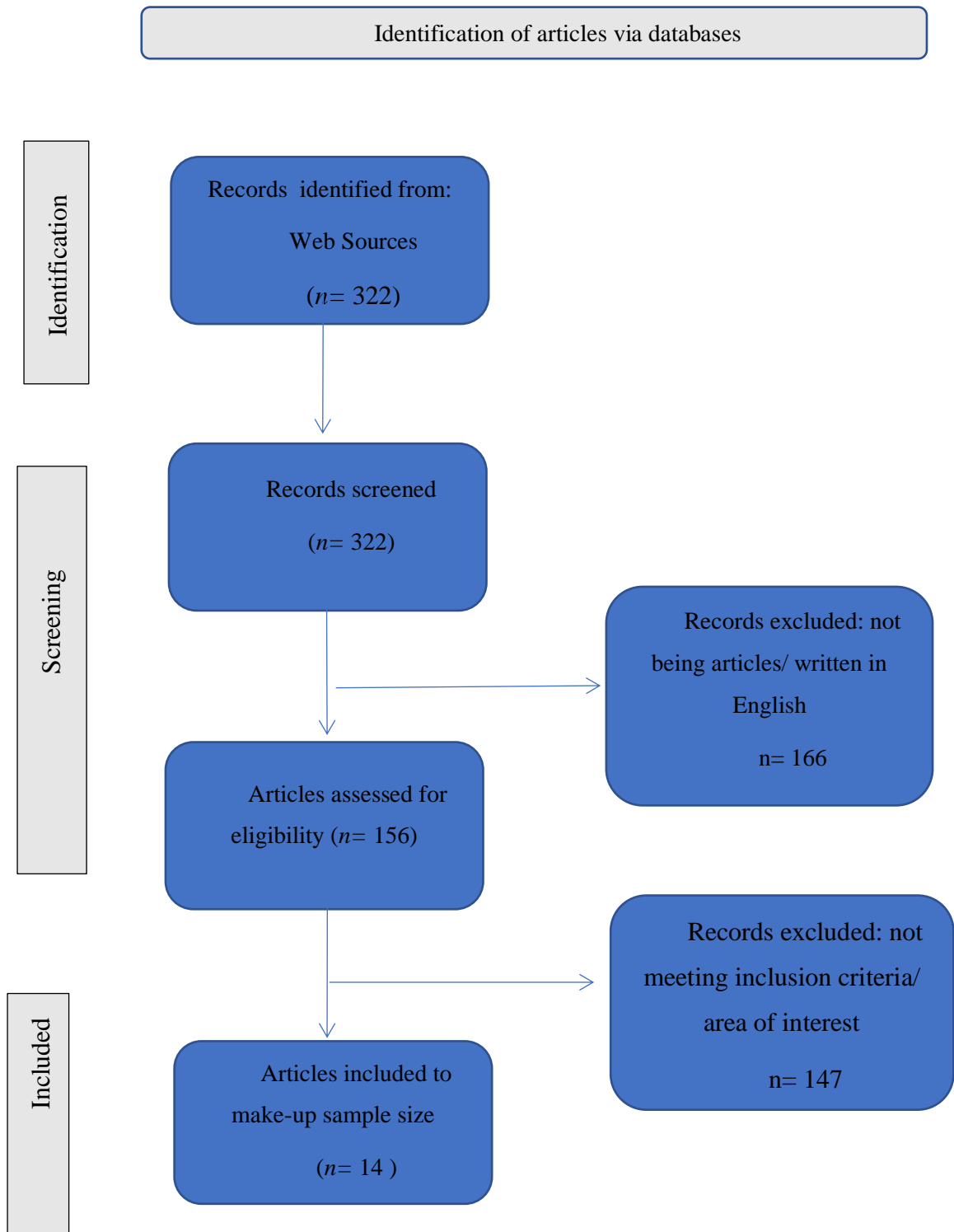
The Newcastle-Ottawa Scale was used to assess the quality and risk of bias of included studies; however, it was modified to fit the current study settings. The Newcastle-Ottawa Scale comprises of details within measurements such as selection, comparability as well as outcomes (Kim et al., 2018. 3). The result of the quality and risk assessment is summarized in (Table 4.3).

#### **PRISMA flowchart illustrating the article selection process.**

The Preferred Reporting Items for Systematic Review and Meta Analyses helps systematic reviewers report their studies transparently and reviewing why it was done, what the authors achieved and what was discovered (Page et al., 2020, P.2)



**Figure 2:** PRISMA flowchart illustrating the article selection process.



**Table 3: Article Coding**

Author	Title	Methods	Findings	Gap	Publisher type
The transfer project (2020)	Cash transfer and child nutrition in Zambia	Experimental design that was conducted over a period of 48 months from 2,519 houses. The study sample was children between 0 to 36 months.	The overall direction of the study was that SCT lead to increased levels of food security. The study revealed that food consumption among children on the program increased by 16 to 28 percent. Being on the program improved the availability of food among houses on the program. Other findings were that the variety of food in households increased by 32 percent. Findings revealed that there was increase in the availability of protein rich food due to the program.	The study findings are affected by the targeted sample. The researcher used measurements such as height and number of meals to establish food security. Nonetheless, if you look at, the type of respondents being studied, they feed mostly on mother milk and simple foods like porridge. Based on this, it is difficult to conclude that SCT influenced food security.	Published under UNICEF
Bwalya and Lungu (2019)	Effects Of Social Cash Transfer on The Livelihood Of People Living with Disabilities In Lusaka	Descriptive research design and primary data was collected using a questionnaire. 90 respondents were studied.	80 percent agreed that SCT improved food security while 20 percent did not agree that it did. 83 percent agreed that SCT influenced the health of household.	Due to the use of quantitative data, the individuals that indicated that SCT did not improve neither their food security nor health were not probed further to justify why. Furthermore, this paper did not establish the role of SCT in education. Lastly, the study only focussed on people with	The International Journal of Multi-Disciplinary Research

				disabilities in Lusaka. Collecting data from different areas is more likely to provide more diverse results.	
Kumar and Sakthivel (2020)	The Impact of Social Cash Transfer on Rural Livelihood in Zambia	Study collected data using a questionnaire from 50 respondents.	Study found that 60 percent of the beneficiaries used the money for food consumption.	The sample size was too small to generalise results to other areas.	International Journal of Management
FAO (2016)	From evidence to Action: The story of cash transfers and its impact in the Sub-Saharan Africa	Used secondary data.	SCT improved both food security and health.	The use of only secondary data enables the researcher make conclusions based on one side without really getting the perspectives of the actual beneficiaries.	UNICEF/OXFORD
Mwange (2019)	Assessment Of Effectiveness of Social Cash Transfer For the People with Disabilities In Nakonde District	Data was collected from 100 respondents using interviews and questionnaire.	It was found that SCT was used to buy food, access health and education. 68 percent of the time it is used for food, 10 percent of the time it is used for education and 15 percent of the time it is used to access health.	Establishing what it is used for is enough. There was need to establish the impact SCT had on food, education and health.	The International Journal of Multi-Disciplinary Research
Schubert, (2005)	Social Cash Transfers – Reaching the Poorest	Secondary data was used to make conclusions	It was concluded that beneficiaries of SCT use the money to food and meet other basic needs such education and health.	Establishing what it is used for is enough. There was need to establish the impact SCT had on food, education and health	Deutsche Gesellschaft für Technische Zusammenarbeit (GTZ) GmbH
UNICEF (2007)	The Impact of Social Cash Transfers on Children	Study used secondary data to make conclusions.	Study found that improved the lives of HIV/AIDS patient and their	The use of only secondary data enables the researcher make conclusions	UNICEF

	Affected by HIV and AIDS		children by increasing their food security, access to education and health.	based on one side without really getting the perspectives of the actual beneficiaries.	
Soko (2019)	Investigating the impact of Social Cash Transfer on poverty reduction among the beneficiaries in Zambia. A case study of Chisamba district.	The study collected data from a sample of 50 respondents. A questionnaire was used to collect data.	Study found that there was an 8 percent improvement in the number of meals by families due to SCT. It was also found that 42 percent of the respondents did not use SCT to improve their access to education in their household. The results showed 68 percent of the respondents had access to healthcare due to SCT.	The sample size was too small to generalise results to other areas.	Research gate
HelpAge International (2006)	Social cash transfers for Africa A transformative agenda for the 21st century	Study was based on secondary data.	SCT enabled the less privileged to access education and health.	The use of only secondary data enables the researcher make conclusions based on one side without really getting the perspectives of the actual beneficiaries.	HelpAGE International &GRZ.
UNICEF (2015)	Social Cash Transfers and Children's Outcomes A Review of Evidence from Africa	Secondary data was used to present conclusions. Data such as reports and past publications.	It was concluded that that SCT had a 28 percent effects on food security. SCT showed an impact on health and access to education.	The use of only secondary data enables the researcher make conclusions based on one side without really getting the perspectives of the actual beneficiaries.	UNICEF
MCDSW, (2016)	The Child Grant Programme -	The impact evaluation was designed and conducted	Families put on the program only one meal per day. The introduction of the program	The study used reports that were recorded during the time the 2515 respondents	American Institute for Research &GRZ

	<p>A Comprehensive Summary of Impacts (2010-2014)</p>	<p>by the American Institutes for Research (AIR). It included 2,515 households from 3 districts (Shangom'bo, Kalabo, and Kaputa) with randomized treatment and control groups, a baseline measurement (2010), and repeated post-intervention measures at 24 months (end 2012), 30 months (mid 2013), 36 months (end 2013), and 48 months (end 2014) after the start of programme implementation.</p>	<p>revealed that families were able to afford more food. The families had access to capital to start farming. It was also revealed that the CGP increased by 1.49 and overall living conditions improved.</p>	<p>were on the program. Therefore, the researcher did not collect data on the perspective of the beneficiaries.</p>	
Goma (2021)	<p>The Sustainability of Social Cash Transfers Among Rural Women: A Case Study of Choongo Community Welfare Action Committee (Cwac), Zambia.</p>	<p>A sample of 122 respondents was analysed using a mixed method.</p>	<p>It was found that SCT did not change the lives of women in rural areas in terms of education, were 11 percent (n=12) felt uplifted, health, 10 percent (n=11) felt uplifted Nutrition, 9 percent (n=10) felt uplifted and Investment 5 percent (n=6) felt uplifted. In addition, the SCTs amounts varies and the amounts were small. This made it difficult for the program to be meaningful.</p>	<p>The study only collected data from women and therefore this limits the perspective of the results.</p>	UNZA

Milimo (2019)	<p>The Role of Social Cash Transfer in Influencing Educational And Sexual Decision Making Among Girls</p> <p>In Mazabuka, Monze and Pemba Districts, Zambia.</p>	<p>Qualitative approach was used to collect data from 48 respondents. Interviews were used to collect data</p>	<p>It was found that SCTs helped girls to have a better future by reducing the number of school dropouts. On the other hand, the program improved school enrolments among girls. It was also revealed that SCT improved self-esteem among girls. Although it created social conflict because those who were not on the program were not happy, it was found that girls on SCT were less likely to engage in sexual activities.</p>	<p>Study only collected data from three selected areas (Mazabuka, Monze and Pemba) and therefore this creates a contextual gap because the conditions and economic activities in Southern parts of Zambia are not the same as other parts of the country. By the methods that were used to collect data, the results generalisation is limited.</p>	<p>UNIVERSITY OF ZAMBIA</p>
Chakrabartit, et al., (2020)	<p>Cash Transfers and Child Nutrition in Zambia</p>	<p>Experimental research design was employed studying a sample of 1700 under 5 children.</p>	<p>The study revealed that SCT did not results in any significant effect on the nutrition if the children on the program.</p>	<p>The study only focused on child under 5 therefore this limits the generalisation of the results.</p>	<p>UNICEF</p>

**Table 4: Common themes from the literature reviewed.**

Author	Main theme	Sub theme	Casual mechanism
Soko (2019)	SCT Impact on Food, Education, and Health	- SCT increases the number of meals. Varying results regarding SCT's role in education and health	SCT directly influences food security by providing financial aid for meals. SCT benefits on education and health may vary as a result of SCT funds given to the beneficiary.
HelpAge International (2006)	SCT Impact on Education and Health	- SCT enables access to education and health	SCT provides funds to beneficiaries to be able to pay for their access to education and health.
UNICEF (2015)	SCT Impact on Food Security, Health, and Education	- SCT improves food security, health, and education	SCT directly improves food security, health and education for beneficiaries through the provision of funds.
MCDSW (2016)	SCT Impact on Multiple variables	- SCT affects food security and diverse spending choices	Access to SCT improves access to food security and allows beneficiaries to buy different meals.
Goma (2021)	SCT Impact on Livelihoods of Rural Women	- Low levels of effects on livelihoods.	The impact of SCT on livelihood depends on the amount they receive. Food security can be improvement but the funds cannot be enough to cover other

			services such as education.
Milimo (2019)	SCT Impact on Girls' Education and Decision Making	- SCT improves the hope, dropout rates, and engagement in sexual activities of girl children.	SCT provides funds for girls to access education. The provision of SCT motivates ladies to go to school thus reducing dropout rates.
Chakrabartit, et al. (2020)	SCT Impact on Child Nutrition	- No change in child nutrition as a result of SCT.	SCT allows the child's parents to have options on the meals they can buy. This in turn improves the nutrition of a child.
The Transfer Project (2020)	SCT and child nutrition	- SCT improved the amount of money spent on food to between 16 to 28 percent.	SCT increases the amount a household can spend on food variety and this improves nutrition.
Bwalya and Dryson (2019)	SCT, Disability, poverty	- 80 percent used money for food security. - 83 percent improvement in health.	SCT is mostly used to buy food and this improves nutrition amount the disabled.
Kumar and Sakthivel (2020)	SCT, rural, poverty	- 60 percent used money for food.	SCT is mostly used to get food and this improves food security among households
FAO (2016)	SCT, poverty.	- Improved food security and health.	SCT improves food security and health because the



			beneficiaries have money to access their needs.
Mwange (2019)	SCT, awareness	disability, -68 percent used for food. -10 percent used for education. -15 percent used for health.	SCT leads to a positive improvement in food security, education and health of the beneficiaries.
Schubert, (2005)	SCT, poverty.	- Used for food, health and education.	SCT leads to a positive improvement in food security, health and education. The beneficiaries are able to have money to access the services required.
UNICEF (2007)	SCT, HIV/AIDS	children, -Increased access to food, health and education.	Access to SCT leads to increased access to food, health and education.

**Table 5:** Quality assessment of studies using a modified Newcastle-Ottawa scale for assessing studies in the systematic review.

Article	Selection		Comparability	Outcome	Overall
	Representativeness of sample	Sample size	Control for confounders	Measurement	
Goma, (2021)	* (study only focussed on 112 women, given the number of women on the program, the number is small)	* (A sample of 112 respondents was not enough to represent	*** (variables were food, education and health which are commonly acceptable)	*** (reliability of study was acceptable showing that measurement was okay)	**

		everyone on the program )			
Chakrabartit, et al. (2020)	*** (sample was big (1700 children)	*** (sample was large enough)	*** (Variables used were properly measured)	*** (secondary data was used from reliable organisations )	***
Mwange, (2019)	* (A sample of only 100 people was used from Nakonde using purposive sampling)	* (The sample was large enough)	*** (The study used variables that have been commonly used and measured by reliable organisations such UNICEF)	***	**
FAO, (2016)	*** (study collected secondary data from different regions)	*** (secondary data was used at national level.	*** (The study used the commonly acceptable variables, health, food and education)	*** (secondary data from reliable sources)	***
MCDSW, (2016)	*** (the sample studied was large, 2,515).	*** (sample used was large enough to rule out any biases)	*** (The study used the commonly acceptable variables, health, food and education)	*** (secondary data from reliable sources)	***
UNICEF, (2007)	***(study collected secondary data at national level)	*** (data was collected	*** (The study used the commonly acceptable variables, health, food and	***(secondary data from reliable sources)	***

		at national level)	education)		
Schubert, (2005)	*** (secondary data was used at national level	*** (data was collected at national level)	*** (The study used the commonly acceptable variables, health, food and education)	*** (secondary data from reliable sources)	***
Transfer project (2020)	*** (sample studied was large, 2519)	*** (sample was large enough)	*(study only focussed one variable, food security)	*** (study results were reliable thus showing that the measurement was acceptable)	***
Bwalya and Lungu (2019)	*(sample was 90 respondents only)	*(respondents were selected using purposive sampling)	*** (The study used the commonly acceptable variables, health, food and education)	*** (study results were reliable thus showing that the measurement was acceptable)	**
Kumar and Sakthivel (2020)	*(a sample of 50 was used)	*(sample used was small)	*** (The study used the commonly acceptable variables, health, food and education)	*** (study results were reliable thus showing that the measurement was acceptable)	**

FAO (2016)	*** (secondary data was used at national level)	*** (data was collected at national level)	*** (The study used the commonly acceptable variables, health, food and education)	***(secondary data from reliable sources)	***
Soko (2019)	* (a sample of 50 respondents)	*(s ample was small)	*** (The study used the commonly acceptable variables, health, food and education)	***(study results were reliable thus showing that the measurement was acceptable)	**

- a) **Representativeness of the Sample:** Was the sample of the study population representative of the target population from which it was drawn.
- b) **Sample Size:** Was the sample size adequately justified and sufficient to provide reliable results.
- c) **Control for Confounders:** Were potential confounding factors considered and appropriately controlled for in the analysis.
- d) **Measurement:** Were the exposure and outcome variables clearly defined and accurately measured
- e) **Overall Quality:** Considering the above criteria, how would you rate the overall quality of the study.
  - 1) **Low:** (\*)
  - 2) **Moderate:** (\*\*)
  - 3) **High:** (\*\*\*)

#### 4.1.4 Discussion of results from systematic review

According to the results in the table, Soko (2019); Transfer Project (2020); and Bwalya and Lungu (2019) found that SCT influenced food consumption while it was not conclusively clear on health and education. On the other hand, Helpage international (2006) and UNICEF's (2015) both found that SCT improved access to essential services such as food, health and education. It is important to notice that Soko (2019) concluded that SCT improves access to food but it was not clear on health and education. The respondents

examined showed varying results with a majority agreeing that SCT did not improve their access to education and health. Based on the methodologies Soko (2019) collected data from beneficiaries while the study by Helpage International (2006) and UNICEF's (2015) used secondary data from government reports.

Meanwhile, MCDSW, (2016) points out that SCT influences food security. The study went ahead to mention that SCT improved housing conditions, number of livestock and reduced debt. Amidst such claims by MCDSW, (2016), Goma (2016) collected information from beneficiaries and found that SCT had limited impact on the lives of people. The study went further by indicating that only 10 percent, 11 percent and 5 percent had their lives changed in terms of health, education and investment respectively.

Bwalya and Lungu (2019) reveal that a majority of the respondents used their SCT for food consumption. In their study, they illustrated that 80 percent of the respondents highlighted that SCT improved food security. On the other hand, Kumar and Sakthivel (2020) found that 60% of the beneficiaries agreed that SCT improved food security. There are plenty more publications agreeing to the effects of SCT on food security (FAO, 2016; Mwange, 2019; Schubert, 2005; UNICEF, 2007). Although there is a consensus on the effects of SCT on food security, there are varying results on to what extent the effects happen. This variation can be as result of differences in sample size and characteristics of the study.

Surprisingly, Milimo (2019) defied the notion that collecting data from beneficiaries showed that SCT had limited effects on education. In this study, it was revealed that SCT influenced education. In fact, the study revealed that it prevented girls from dropping out. Nonetheless, these results are an exception because the SCT the girls were on was not government SCT where beneficiaries received K400 every two months. The study focused on girls who were on the Research Initiative to Support Girls' Education (RISE). Moreover, if you look at the conditions of the RISE project, they are way better than the SCT under government. Beneficiaries of RISE received school

materials, schools' fees and parents were given a monthly grant of \$15.3 (K350) (Milimo, 2019, P. 1). Therefore, this clearly shows that it is difficult for the government SCT to make a significant effect on the lives of beneficiaries in its current configuration.

In the literature reviewed, Chakrabarti, et al., (2020) posits that SCT had no effect on nutrition while Transfer project (2020) argues increased access to food. Other studies by Bwalya and Lungu (2019) revealed that 80 percent used the funds for food and there was 83 percent that agreed to improved health. Kumar and Sakthivel (2020) reported a 60 percent use on food while Mwangi (2019) reported a 68 percent usage on food and 10 percent on education. The research papers consistently report that there are high levels of using the money for food. Nonetheless, all these studies employed quantitative approach which does not provide an in-depth amount of information.

If a majority agreed to using the money for food, that does not mean the program makes an effect in their lives. Based on the Maslow's hierarchy of needs, food is the first need. Clearly a majority rush to buy food in line with the psychological makeup of man. However, these statistics do not provide conclusive information that the amount of food they get is adequate or enough. Even though they do not provide adequate or enough evidence to show that there is an effect or benefits, the low numbers on the use of SCT on other services such as health and education are worrying.

From the literature review, there is one trend that can be clearly observed. Government and NGO studies relied on secondary reports, and all point that SCT influenced health, education and food security. Based on the analysis of the papers conducted in different Zambian contexts, it is clear that measuring the benefits or effects of SCT is a complex concept that provides different results. First, Milimo (2019) shows that SCT are different, and some are better than others. Second, there is need to understand that use of SCT does not guarantee effect on the life of an individual. Another thing this research informs us is that better transfer amounts result in significant improvement.

But what does this mean in line with papers that researcher government SCT and still found significant results, you will notice that most of the studies were conducted in rural areas such as Katete, Kalomo, Chipata etc where the needs of people are very minimal, and cost of food is low. This may suggest that SCTs are effective in rural areas but do not have the same effect in urban areas like Lusaka and Chongwe.

#### **4.2 Analysis of data from Key Implementer (Government)**

To have a thorough understanding and implementation of social cash program, information regarding the detailed of the program was collected through Monitoring and Evaluation Specialist from the Ministry of Community Development and Social Services under the Department of Social Welfare via online interview using a structured questionnaire targeting to capture information on four sections: Background of the Program, benefit on food security, education and healthcare. The last part of the interview was on the overall assessment of the social cash transfer in Zambia as social protection policy. The Specialist from the Ministry provided a background of the program with statistics summarised in figure 4 below.

##### **4.2.1 Background**

Based on the interview conducted from the implemental expert from the Ministry, the background of social cash transfer was started because of growing need of vulnerable people across the country in 2003. The program was aimed at providing basic needs assistance in form of cash towards extremely poor and vulnerable people to copy up with child stunting nutrition, old age pensioners, and disability people. The program had 169 beneficiaries at the start via piloting testing on various specific social issues affecting the vulnerable poor people across the country with the help from Germany Government.

##### **4.2.2 Eligibility**

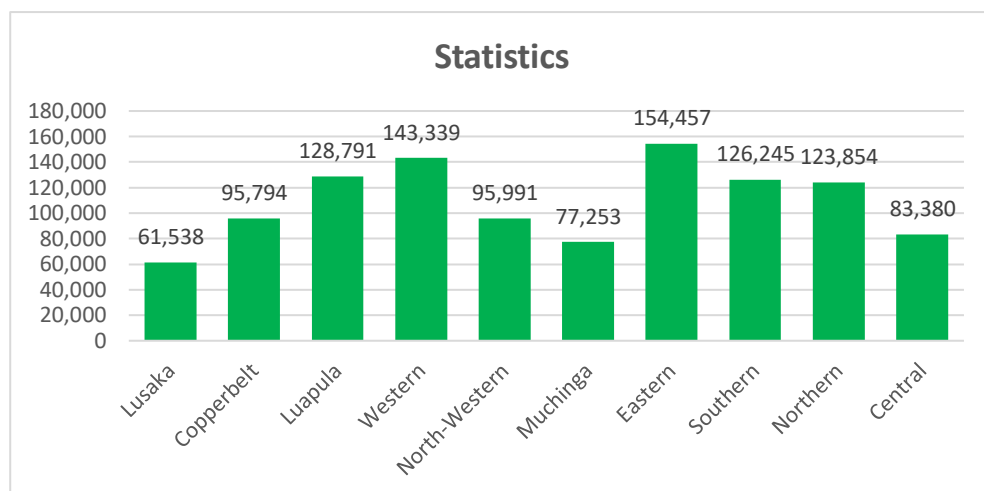
From the respondent, eligibility on social cash transfer programme depends on 3 criteria:

1. A member of the household or household must have lived 6 months in a particular location or area.
2. The household should be extremely and vulnerable.
3. The household should fall into 5 categories of incapacitated person as follows; either the member of the household must be above 65 years old, the member of the household should have a severe disability that makes them unable to provide for themselves, a member of the household must be bedridden and cannot sustain for themselves, a female headed household that has at least above 3 dependant member that are less 18 years old and lastly, children who are living by themselves or orphans who do not have anyone to support and care for them.

#### 4.2.3 Beneficiaries reached out

The statistics of the beneficiaries are summarised in the graph below. The total number was 1,090,642 countries wide. Based on the table below, from the statistics provided by the Ministry, Eastern province has the highest number of beneficiaries total of 154,457 and Lusaka has the lowest number of beneficiaries 61,538. The statistics show what the literature review showed, the focus of SCT has been in rural areas. Therefore, provinces with more rural areas show a greater number of beneficiaries.

Table 6: SCT beneficiaries





The Specialist added that “people in places like Lusaka and Copperbelt have access to a lot of resources such as education, health and capital compared to people in areas like Luapula, western, southern eastern and northern province”. This explains why there is a significant difference in the number of beneficiaries.

#### **4.2.3 Benefits of SCT on food security**

Based on the respondent from the ministry, the pathway in which social cash program improves food security towards the beneficiaries is through the ability of beneficiaries to hire labourers to do their work which in turn increases productivity of food output per household. Most of the beneficiaries are engaged in economic and business activities such as poultry, farming, cattle rearing which help them to improve their food security.

#### **Challenges in achieving food security.**

Based on the interview conducted from the Ministry of Community Development, the challenges in achieving food security towards beneficiaries emanate from natural shocks such droughts and floods which negatively affect the agriculture crop harvest. A response measure was put in place by providing a shock benefit towards the affected beneficiaries.

#### **4.2.4 benefits of social cash transfer on education**

According to the respondent from the Ministry indicated that, the last impact evaluation study conducted had positive effect on school enrolment and attendance. The specialist added that SCT reduced school dropout, increased enrolments and enhanced education access through financial aid.

#### **Challenges or constraints in enhancing education outcomes.**

On whether there are challenges and constraints or not in improving social cash transfers to effectively enhance education outcomes, the respondent mentioned that there is a problem on supply side especially on availability of schools in some districts where a rise in enrolment has created a demand for school.

#### **4.2.5 Benefits of SCT on healthcare**

The expert from the Ministry of Community Development and Social Service through an online interview revealed that SCT improved healthcare among the beneficiaries. Using the consistent income, they get from SCT, they can use it for transportation and procure small medication such as paracetamol as income is an intervening variable.

#### **4.2.6 Tracking improvement**

The Ministry of Community Development and Social Service (MCDSS) is unable to track improvement on household because of the overwhelming millions of households they have but they only conduct a sample assessment on SCT household which gives the average on the health outcomes or benefits.

#### **4.2.7 Overall assessment of SCT**

##### **Achievements**

According to the respondent interviewed, the program is a success. Coming from 169 to 1million plus households covered on the programme and 54 percent of poor people in the country, 24 percent of the population countrywide, the programme is a success on its own.

##### **Failures**

Based on the interview conducted, the Ministry has no strong systems to handle issues of transparency and accountability but they are doing better now than previous years as they are improving on issues of transparency so all complaints can be handled and addressed. One way to address the challenge is through the implementation of digital methods for payments. To ensure transparency in the use of money, government has introduced the use of mobile money for payments.

#### **4.3 Discussion of results from government**

Based on the interview conducted from the key implementers on the 9th of August 2023 via zoom at Dorus Rijkersplein at 16:00hrs, the SCT program is

effective in helping the beneficiaries towards education, food security and healthcare. As evidenced, from inception the number of recipients were 169 in 2003 and currently stands at 1,090,642 beneficiaries as of May 2023. Statistics provided by the Ministry as per province indicate that the number of recipients has increased but there is no record on actual assessment towards beneficiaries on education, food security and healthcare. According to the respondent interviewed from the Ministry, the last impact evaluation report, which was conducted at an unknown date, indicated that the program had positive effect on school attendance and enrolment. Also, the ministry has in place a program which engage and sensitizes beneficiaries on how to use a SCT in a productive and sustainable way.

The findings from the government official provide valuable insights on the program. First the findings are aligned with a majority of the literature reviewed which all showed that SCT improved food security, education and health (UNICEF, 2007, MCDSW, 2016; FAO, 2016). On the other hand, the results do not align with other studies that found that SCT had no effects on health and education (Goma, 2021). Even at this stage, inconsistencies in the results are observed. Therefore, this bring to attention one question, who is telling the truth? Does this reflect what is on the ground?

It is important to look at the words of the Specialist, he mentions, “*SCT improves food security because it gives them the capability to hire labour.*” He also adds that “*SCT beneficiaries engage in poultry, farming and cattle rearing.*” The credibility of such statements appears weak given the small magnitude of SCTs as a proportion of household livelihood. SCT beneficiaries in Zambia earn a maximum of K800 (41USD) every two months with a majority earning K400(21USD) every two months. Given the current economic situation of high inflation over the past few years, it is not clear how this small additional income would be sufficient to buy more than a small amount of food, pay school fees or hire labour. Much less purchase large assets such as livestock. Concerning education, he mentioned “SCT was responsible for increasing enrolment and dropouts in schools.” The credibility

of the information received is questioned given that there is literature indicating otherwise (Goma, 2021; Chakrabariti et al.,2020).

According to the Zambia Statistical Agency (ZSA) (2023, P. 5), the food basket of Zambia is currently at K1522.04 (80USD) per month. Therefore, receiving K400 (21USD) every two months cannot sustain someone. Furthermore, in 2015, poverty levels were at 54.4 percent in Zambia and stand at 60 percent national in 2023 (ZSA, 2023, P. 6). These results are a reflection that if what the specialist said about SCT was true, poverty levels would not increase national wide. It is therefore clear that what is being said by SCT in government related reports might overstate the impact relative to the household situation. This therefore also questions the Monitoring and Evaluation tools in SCT by both NGO and government and highlights the need for beneficiaries to be included in feedback loop of policy-making and design.

## **CHAPTER FIVE: CONCLUSIONS AND RECCOMENDATIONS**

### **5.0 Introduction**

In the previous chapter, the analysis and discussion of the findings were presented. Chapter five is the final chapter of the research and is centred on the conclusion and recommendation based on the results in the previous chapter. The results of the study were based on the data collected from past literature from within Zambia and the interview conducted with the Specialist from the Ministry of Community Development and Social Services under the Department of Social Welfare.

### **5.1 Conclusion**

A majority of empirical results showed that social cash transfer improved the food security, education and health of the households. The main highlight was that social cash transfer increases options for diet and ability to fund both health and education. This was also supported by the interview that was conducted with the Specialist. Since food is a basic need, the first focus of many beneficiaries of SCTs is to purchase food. Nonetheless, it still remains a mystery as to how much does SCT improve food security given that the money they receive is relatively small and has not increased proportional to the prices of food which have increased markedly in recent years.

However, it is the view of the researcher that given the current economic conditions and amount that beneficiaries of SCT receive, it is impossible for SCT to improve access to education and health. SCT pay way less for one to even manage their food security. Therefore, the results of the study from both empirical and interview are not consistent with the reality. While SCTs can help cover some healthcare expenses, they may not fully cover the full healthcare needs of beneficiaries. Moreover, using public health care, individuals can pay less, and this could explain why more empirical literature from Zambia supported that SCT enhance access to health care (Soko, 2019; HelpAge International, 2006; UNICEF, 2015).

Regarding the statistics, the Ministry Expert revealed that a total of 1,090,642 beneficiaries were on the program. However, from the literature, the statistics that were being studied were small with the minimum being 50 and maximum being 2519. Therefore, there is a huge difference between the respondents being investigated and the actual number of respondents receiving the benefits from the government. Other studies have not actually collected data from actual respondents but opted to only look at the reports of the program. However, getting actual information from the beneficiaries can provide more insightful information compared to just reviewing desk reports.

Based on the findings, the effects of SCT have two sides of the coin. The reality is that the amount they receive is not enough to sustain someone given the current economic difficulties. Most studies that collected data from respondents have shown this. Yet, a Government Informant continues to argue that SCTs are effective. This is case of something is better than nothing. But the true effects of SCT may not be best reflected in quantitative survey research with beneficiaries but also in qualitative examinations of the way SCTs change people's lives and livelihoods. This more nuanced understanding is something that requires mixed-methods and long-term research in order to better inform government policy making, including about alternatives to SCTs. Otherwise, the literature shows that there is need for more studies on SCT especially when it comes to the program's effectiveness, the reasonable amount that is required and the difference between SCT by government and NGOs.

In light all the findings and arguments presented, it is important to answer the question; are SCTs sustainable? SCTs have lower amounts, and this limits their effectiveness. Therefore, government SCTs are not sustainable in the long run. Firstly, they only benefit a selected number of people. In the case of the statistics provided by the government which shows that only 1,090,642 are beneficiaries. However, statistics shows that more 50 percent of Zambians live in abject poverty. The country has a population of about 18 million. The

figures show that a significant number of the eligible population in poverty have not been reached.

Therefore, the government should consider other policies such as improving public education, public health and skill development policies. These skills will be more of teaching someone to catch the fish instead of giving them a fish that cannot even fully satisfy them. Ferguson (2015, P. 98) argues that there is need to accept that people in informal employment will continue to live a life of limited capital and thus require social protection. However, Hemsteede (2018) argued that SCT need to be focused on building long term skills if they are to be sustainable and the author went further to bring in the idea of policy dialogue to ensure that SCTs are conditional. The purpose of making them conditional is to ensure that SCT only achieve long term sustainable benefits such as skills or asset development.

Ferguson (2015) asserts that SCT should not be based on work status but on citizenship. Ferguson argues that the concept of teaching a man to catch fish does not work because in certain cases, you might find that there are no fish tools to use to fish (ibid, 2015). This means that you will have a lot of fishermen. Nonetheless, for SCTs to be sustainable, the program needs to be designed in such a way that it goes beyond a hand out. The program should aim to help people in the program for a certain period and they should have the ability to fend for themselves. Current information shows that the poverty levels of poverty continue to increase in Zambia (Arruda and Dubois, 2018, P. 1) and the Zambian government resources are becoming scarcer. This is evident by the recent debt restructuring, and this implies that government will not be able to accommodate everyone in need on SCT due to the limited resources.

## **5.2 Recommendations**

Based on the findings, the following are the recommendations:

- It was found that SCT improved food security, education and access to health care. However, there was some arguments on the extent to

which SCT does it and whether it is meaningful given the current economic status of Zambia. Therefore, it is recommended that the SCT should be increased.

- The government should align the magnitude of the SCT to the rate of inflation. This will ensure that the SCT increases with an increase in cost of living to ensure beneficiaries benefit proportionally.
- Government needs to develop a mechanism for collecting feedback from beneficiaries.
- Government needs to focus on more sustainable policies to supplement SCT such as free education, health, agriculture cooperatives and vocational skills development. These policies offer long term and sustainable solution to eradicating poverty.
- If the government cannot explore other policies, they need to consider significantly increasing the monthly payment of SCTs.
- There is need for further research to fully understand the issue of SCT especially when it comes to the effectiveness of the results. There are inconsistencies between results.



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**APPENDICES**

**INTERVIEW GUIDE FOR THE KEY INFORMANT  
(GOVERNMENT, IMPLEMENTERS OF SOCIAL CASH TRANSFER  
PROGRAMME)**

**Demographic Information**

Gender: \_\_\_\_\_

Position: \_\_\_\_\_

Role:

Organization/Department: \_\_\_\_\_

**Section A: Information on the background of the social cash transfer  
Programme**

1. How did the cash transfer programme come about in Zambia?

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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. What criteria do you use to select the beneficiaries and who qualifies?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. How many beneficiaries have been reached out per province in terms  
of statistics since the programme's inception?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Section B: Benefits of Social Cash Transfer on Food Security**

4. In your experience, what are the key benefits of the social cash transfer program in improving food security among beneficiaries?

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5. What specific measures or strategies have been implemented to ensure that social cash transfers effectively contribute to improved food security among beneficiaries?

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6. What type of challenges do you experience in achieving food security towards beneficiaries?

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**Section C: Benefits of Social Cash Transfer on Education**

7. From your perspective, how does the social cash transfer program support education outcomes for beneficiaries? Do you have any record?

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8. Are there any challenges or constraints in improving social cash transfers to effectively enhance education outcomes? please describe.

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**Section D: Benefits of Social Cash Transfer on Healthcare**

9. How has the social cash transfer program contributed to improving access to healthcare services among beneficiaries?

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10. How does the Ministry of Community Development track the improvement in healthcare towards the beneficiary? Is there any record?

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**Overall Assessment of Social Cash Transfer Program**

11. What are the achievements and failures of the social cash transfer program in Zambia as a social protection policy?

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12. What are some areas that require improvement or further attention to maximize the impact of the social cash transfer program?

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13. How would you rate the effectiveness of the social cash transfer program in achieving its intended objectives?

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14. Based on your experience, what recommendations do you have to enhance the implementation and effectiveness of the social cash transfer program?

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15. How does the ministry monitor the implementation and progress of the programme towards the beneficiaries?