

Evaluation of the Child Grants Programme (CGP) in Lesotho (2014–2022)

Research summary

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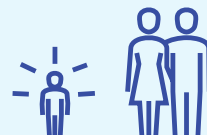


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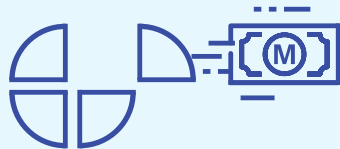
What is the CGP?



Unconditional cash transfer programme implemented by Lesotho's Ministry of Social Development (MoSD) with the aim of reducing children's malnutrition, improving health status and increasing school enrolment



Targets poor and vulnerable households that have at least one child between the age of zero and 17 years



Provides regular quarterly cash transfers of between Maloti (M) 360 and M 750, indexed by the number of children in the household. This transfer value has not changed since 2012.



Started in 2009 as a pilot reaching 2,000 households. Expanded to reach almost 50,000 households by 2022, representing about 20% of poor children in Lesotho

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About the CGP evaluation

Oxford Policy Management (OPM) and Sechaba Consultants have been contracted in 2022 by the United Nations Children’s Fund (UNICEF), in the name of MoSD, to conduct an evaluation of the CGP. The last evaluation of the CGP was conducted between 2011 and 2013 but since then the CGP

has not been evaluated, highlighting the need for a follow-up evaluation to take stock of the programme’s evolution over the past nine years.

This evaluation of the CGP was designed as a mixed-methods evaluation around two workstreams:



(i) **An impact evaluation** that assesses the CGP’s impact on its beneficiaries, its relevance for beneficiary households and the sustainability of its impact over time. It comprises a quasi-experimental quantitative counterfactual-based design measuring the impact attributable to the CGP, and a qualitative research component aiming to further explain the findings of the quantitative impact evaluation.



(ii) **a process review** that assesses to what extent the CGP’s operational processes such as targeting, payments and case management are effective and efficient and to what extent the CGP’s design is relevant to its target population. This involves an assessment of the CGP’s shock-responsiveness, sensitivity to the needs of children with disabilities and its effectiveness at linking beneficiaries to other services and programmes.

The evaluation draws on both primary quantitative and qualitative data that was collected by OPM and Sechaba between August and October of 2022. The quantitative survey interviewed over 1,600 beneficiary and non-beneficiary households in more than 300 villages in Lesotho and the qualitative research conducted over 100

interviews and focus group discussions with CGP beneficiaries, village chiefs, community councillors, social workers, CGP staff and government officials. The methodology was developed in consultation with UNICEF and MoSD and was validated by the evaluation steering committee.

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Research findings

Impact of the CGP

The overall effectiveness of social assistance programmes such as the CGP depends on the value of the transfer and on whether the beneficiaries use the transfer as intended.

The value of the CGP has not been adjusted since 2012 and as a result of inflation, its real value has severely eroded over time. In fact, the adequacy of the CGP transfer value is very limited with respect to the consumption and poverty gap faced by CGP households. In 2022, the CGP transfer value constituted merely 8% of average monthly household consumption expenditure, compared to 21% in 2013. International research shows that the lower the transfer value as a share of monthly household expenditure, the smaller the impact that one can expect from a cash transfer

programme. In addition, due to ineffective case management, 41% of beneficiaries receive a lower transfer value than they are entitled to when considering the number of children in their households. This issue is more severe for households with more than two children.

Beneficiaries spend the CGP transfer as intended, mostly on food and children's education, especially school uniforms and 92% of beneficiaries report having received messaging about the CGP's objective. However, given the severe depreciation of the transfer value they can now only buy smaller quantities of food, and are forced to decide which child to prioritize when buying school uniforms.



In 2022, the CGP transfer value constitutes merely 8% of **average monthly household consumption expenditure**, compared to 21% in 2013.

Food security and nutrition



- The CGP reduced the incidence of extreme food shortage: CGP beneficiary households are found to experience, on average, **18 days (0.6 months) less of extreme food shortage** over the year, when compared to non-beneficiary households.
- The CGP increased the proportion of household expenditure on food by **2.4%**.

- In qualitative research, beneficiaries highlighted the importance of the CGP in providing greater food security, but report that the size of the transfer is insufficient to address their food needs. This often results in food being available only for a few weeks after pay day, with windows of extreme shortage between payment cycles.

I used to buy oil, salt, washing powder, and many other things but now I only buy a 50kg bag of maize meal with that M360. I also have to top it up because that maize meal is around M450. (Current beneficiary, remote, Mafeteng)

Poverty and well-being



- Qualitative research with beneficiaries, community leaders and social workers indicates that the CGP transfer plays an important role in improving the perceived psychological wellbeing of CGP beneficiaries by reducing social stigma and stress attached to poverty.

The money has reduced my load of suffering because every expense for the family was on

me. (Beneficiary with a child with a disability, Qacha's Nek)

- There is no significant¹ impact on a range of monetary poverty indicators, including proportion of households living under the monetary poverty line and the poverty gap. These findings are expected given the erosion of CGP value over time and the fact that the CGP was designed to support the needs of children of poor households but not lift households above the poverty line.

Health



- The CGP has a significant impact on the prevalence of illness among young children, with an **attributable reduction of 7.3% in sickness** in the 30 days prior to the survey for children aged 0 to 5 years in CGP beneficiary households, when compared to non-beneficiary households.

- Additional findings on health indicators seem to suggest that this improvement in child health is not related to increases in either expenditure on, or access to health services for which we find no significant impact.
- Rather, it appears that the already discussed improved access to food (i.e. less time experiencing extreme food shortage and a higher share of expenditure allocated to food) could have led to better health outcomes for children.

¹ A significant impact generally refers to a statistically meaningful or noteworthy difference or relationship between variables. This can be determined by using statistical tests, such as p-values, to determine the likelihood that any observed differences or relationships are due to chance rather than a true effect. A p-value less than 0.10 is considered to indicate a statistically significant impact, meaning that there is less than a 10% chance that the results are due to chance.

Education



- In the qualitative research the Orphans and Vulnerable Children (OVC) secondary school bursary was often mentioned as the most important factor in supporting CGP children to stay in school. Under the OVC secondary school bursary the Government of Lesotho covers tuition, registration, books, supplies and fees on behalf of the beneficiary student.
- While eligibility for the bursary is automatic for CGP beneficiaries, enrolment is not. coverage rates are much lower than they ought to be, with only **23% of CGP households with children aged 14 to 19 having at least one child on the OVC bursary**.
- There are a range of barriers to enrolling children in the OVC bursary, including low levels of awareness and access to auxiliary social workers and a lack of fiscal space to increase enrolment numbers
- In 2022 the CGP does not appear to be effective at addressing poor households' constraints to children's enrolment. There is no significant impact attributable to the CGP on a range of child education indicators, including primary and secondary school enrolment or attendance. (contrary to results found by the 2013 impact evaluation).
- Over 90% of CGP children between 6 and 13 years are enrolled in formal education, but **only 50% of boys and 65% of girls between the ages of 14 to 18 are enrolled in school**.
- Several factors may explain the lack of significant impact on education in 2022:
 - (i) The OVC bursary is an integral part of the CGP's Theory of Change (ToC) that is supposed to facilitate the impact pathway on education, but coverage rates are relatively low.
 - (ii) The erosion of the transfer value means that it is not sufficient anymore to make sure CGP households can buy school uniforms and shoes for their children. Over a quarter of CGP children are found to still lack school clothes or shoes, even though purchasing school uniforms and shoes is the second most common reported use of the CGP transfer.
 - (iii) Other factors (besides financial constraints) may play a more important role in explaining poor secondary enrolment rates (e.g. cultural factors such as initiation schools, school accessibility, etc.).

Community impacts



- A full Local Economy-Wide Impact Evaluation (LEWIE) was not part of this evaluation, but qualitative evidence indicates that the CGP is widely perceived to have a positive impact on the local economy in communities with CGP beneficiaries as those are mostly spending the transfer with local businesses, stimulating local demand.

Since enrolment everyone is able to contribute in case of emergency like funerals or buy water taps, so it [CGP] promotes oneness within the community.[...] It also improves our community because they buy from local entrepreneurs (Leribe, village chief)
- In some villages, the findings also indicate that the CGP strengthened social cohesion and community solidarity. On the other hand, there is evidence that in some locations social cohesion may have been affected negatively due to the CGP targeting and recertification decisions and the way in which these were communicated.

Key Recommendation 1

Increase the size of the CGP transfer

The current real-term value of the CGP cash transfer is too low to achieve the full range of impacts intended by the programme's ToC. In the short term, the CGP transfer value should at least be adjusted to account for inflation as soon as possible. In the longer term, a protocol should be

established so that the transfer value is revised regularly, including inflation adjustments, with the indicative objective that it maintains a value of around 20% of households' average monthly expenditure.



Key Recommendation 2

Improve linkages between the CGP and the OVC bursary and expand OVC bursary coverage

The OVC bursary is key for the CGP's impact on education outcomes. However, despite its stated ambition of universal eligibility, the programme has low annual enrolment targets. An agreed process

should be established to systematically inform beneficiaries about the OVC bursary and support them in applying for it. Additional funding should be allocated to allow for higher coverage of the bursary.



Key Recommendation 3

Conduct further research on the local economy effects of the CGP

Qualitative findings suggest that there continue to be positive effects of the CGP on the local economy. An update of the CGP LEWIE analysis from 2012 could provide valuable insights and

evidence, constructing a more complete picture of the CGP's impact.



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Research findings

CGP programme design

The research on the programme design focused on assessing the programme's shock responsiveness, linkages to other complementary programmes and services, and its disability-sensitivity.

Shock-responsiveness

The CGP was used as part of the response to shocks for the 2016 and 2019/20 droughts and the COVID-19 pandemic. However, in all three cases design features and delivery constraints affected the timeliness and effectiveness of the response.

No social assistance programme in Lesotho, including the CGP, was explicitly designed to be shock responsive. However, the consensus amongst stakeholders is that compared to other social assistance programmes in Lesotho the relative strength of its delivery systems and its use of NISSA data for targeting make the CGP more suited for shock-response. At the same time, the delivery systems of the CGP and the currency of NISSA data need to be further improved to enable better shock-response.

Complementary services and linkages

The number of complimentary programmes and services that reach CGP beneficiaries and provide meaningful support are limited. Whilst some CGP beneficiaries access both complementary NGO and government-run programmes, there is no automatic process for deliberately targeting CGP beneficiaries or effectively layering of interventions. Access is found to depend on knowing about a programme, the individual's agency, and their level of access to the auxiliary social worker or social worker. There is no agreed process for informing CGP households about programmes or how they could access them.

The OVC bursary is viewed as the most important complimentary programme, but the number of CGP beneficiary children currently accessing the programme is lower than what ought to be achieved given that CGP beneficiaries are automatically eligible for the bursary. Only 23% of households with children aged 14 to 19 have at least one child on the OVC bursary.



Disability sensitivity

While the CGP reaches children with disabilities (**10% of CGP households have at least one child with a disability**), data included in the NISSA on adult and child disability in CGP households is not used for disability identification. As a result, social workers are found to have very limited awareness of the presence of children with disabilities in CGP households.

CGP households with children with disabilities face greater additional expenses, particularly to address their children's educational, and (health) care needs. However, the CGP transfer value is not adjusted for disability-related extra costs and the extent to which the CGP helps households with children with disabilities access complementary services to meet their additional needs is very limited. The proportion of CGP households with

children with disabilities who receive in-kind support from the government, Public Assistance (PA) or psychosocial support is only marginally higher than for CGP households without children with a disability.

The CGP has not been designed as a disability-sensitive programme, but it provides valuable support to households with children with disabilities who would struggle even more without it. Qualitative evidence indicates that the CGP's impact on perceived well-being of beneficiaries may be particularly pronounced for households with disabled children.

The CGP transfer value is not adjusted for disability-related extra costs

Key Recommendation 4

Expand the Disability Grant's coverage and transition CGP households caring for children with disabilities to the Disability Grant

In 2021, MoSD established a Disability Grant targeted at adults and children with severe disabilities. To better support households with children with disabilities, the new Disability

Grant should be expanded and current CGP households with children with a disability should be transitioned to the programme to provide them with better support.



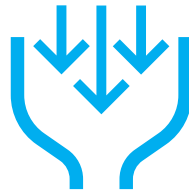


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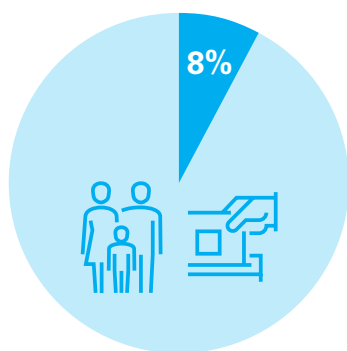
Research findings

CGP Operations

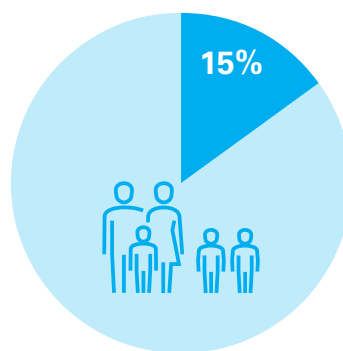
The operational research focused on identifying key bottlenecks that constrain an effective, efficient, and sustainable delivery of the programme, and on pinpointing areas for capacity strengthening. This includes an in-depth assessment of core CGP processes, such as case management, grievances and complaints, communications, payments, and targeting, including recertification.



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Only 8% of beneficiaries report ever having requested to update their information



only 15% of those households who had more children since their enrolment managed to have their transfer value adjusted accordingly.

Case management

Many case management issues are not brought to the attention of social workers and the ones that are raised, get addressed with varying degrees of effectiveness. Only 8% of beneficiaries report ever having requested to update their information and only 15% of those households who had more children since their enrolment managed to have their transfer value adjusted accordingly. A clear lack of awareness of case management processes and entitlements among beneficiaries was identified and across all study locations, beneficiaries reported a lack of access to and availability of auxiliary social workers.

The CGP case management system is highly centralised and manual, leading to inefficiencies. Case management forms and letters need to travel manually between community councils and the central office in Maseru and, as a result, often remain undelivered. Given the cumbersome process and the unavailability of some auxiliary social workers, many beneficiaries reported having given up attempting to have their records updated as the costs of doing so became too high.

Key Recommendation 5

Strengthen the effectiveness and efficiency of the case management system and develop pilot models that decouple case management from physical pay point interactions

While the decentralization of the case management system should continue to be a long-term goal, 'quick-win' improvements/actions could be implemented in the meantime:

- implementation of 'one-off' case management events to update records
- the development of case management pilots that involve auxiliary social workers regularly visiting villages

- the creation of communication materials to inform beneficiaries about the case management process and their entitlements
- the development of protocols that would allow social workers to send digital rather than physical case management forms
- the provision of viewing rights of the Management Information System for Social Assistance (MISSA) to auxiliary social workers and social workers via apps or dashboards.



Complaints and appeals

The CGP complaints and appeals system is generally effective when it comes to denouncements regarding beneficiaries misusing their grant money but inadequate when it comes to reporting concerns about the quality of service received. Despite several reports of behavioural issues, inaccessibility, or lack of communication from some (auxiliary)

social workers, no one reported ever having officially complained about such issues. The current system for addressing complaints and appeals is not designed to guarantee anonymity and impartiality and this affects the extent to which beneficiaries can be expected to complain about the quality of service received.



Key Recommendation 6

Develop an independent complaints and appeal mechanism

The choice of channel must be guided by confidentiality and cannot rely on personal interactions with (auxiliary) social workers. Offering multiple channels (e.g. complaints hotlines and complaints boxes) would increase the accessibility of the mechanism. In the context of the mobile

payments expansion, the complaints and appeal mechanism should distinguish between payment complaints that can be resolved by MoSD versus those that may need to be resolved by the MNOs.



Communications and outreach

CGP communications are found to be very effective with regards to messaging about the intended transfer use but not effective with regards to informing beneficiaries of the CGP's transfer value ranges that they are entitled to, nor about how to lodge a complaint or update their records. There

is no CGP-specific strategy for communications and outreach, nor Standard Operating Procedures (SOP), making communications highly sensitive to the level of proactivity and engagement demonstrated by individual social workers and local leaders.



Key Recommendation 7

Develop a comprehensive communication plan and strategy, including communications materials

This plan should define and standardize the messages delivered by auxiliary social workers and chiefs/councilors and define clear roles and responsibilities for communications. This should include communications materials such as posters and flyers to be distributed regularly in the villages that include information about the CGP with a focus on how to access case management,

complaints, and complementary services (especially the OVC bursary), in addition to general information about the programme. Information booklets for community councilors and village chiefs should be distributed that contain essential information and messages about the programme.



Recertification and NISSA updating and management

Between 2016 and 2019 a survey was conducted to update the National Information System for Social Assistance (NISSA) and in 2020 a number of households were exited from the CGP because they were no longer classified as 'poor' or 'ultra-poor'. The recertification process encountered a number of challenges and in the absence of an effective communications strategy, there was a lack of understanding of why households might become ineligible for the programme. **Only 3% of CGP households know that a household lose access to the CGP if no longer classified as poor.** It is important to ensure that the recertification process is well implemented and underpinned by effective communications and an appeals process

in order for it to be considered appropriate.

New approaches to updating NISSA are currently piloted, but it is too early to tell what the outcome of these pilot will be in terms of cost-effectiveness and capacity required. However, qualitative findings confirm that it is unlikely that the MoSD will be able to manage or update NISSA without further technical and financial support by donors or by other government entities. Discussions have already started to identify government-based solutions to update the NISSA database, which could reduce costs and insure sustainability in the future, while preserving the core role of social workers.



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It is important to ensure that the recertification process is well implemented and underpinned by effective communications and an appeals process in order for it to be considered appropriate.

Key Recommendation 8

Increase the financial and technical support for NISSA

Despite important investments, the evaluation identified severe capacity constraints and various software and IT issues which hinder the use, analysis and updating of the NISSA data. A

continuation of – and indeed increase in – financial and technical support should be part of any solution moving forward.



Payments

While 85% of CGP beneficiaries still receive their quarterly payments through cash-in-transit (CIT), a digital payment pilot started delivering payments via mobile phones to about 15% of beneficiaries since 2022. An expansion of mobile payments is envisaged with the objective to make payments both more efficient, effective, and relevant to beneficiaries' needs.

Preferences for payment modalities among current CGP beneficiaries are mixed with a slight **overall preference for mobile payments (58%)**, indicating that a further expansion of mobile payments could make payments more appropriate. Women are found to have a larger preference for mobile payments over CIT compared with men.

An expansion of mobile payments is feasible: **Over two thirds of CGP beneficiaries live in places with good network coverage** and in all but one district, the average distance to mobile money agents is significantly shorter than to CIT pay points. However, the survey results show strong geographical variations in mobile network availability and agent coverage which means that it may not be possible to transition all areas to mobile payments immediately and that a mixed approach of mobile and CIT will continue to be necessary in the short- to medium-term.

CGP payments are mostly predictable in terms of amount but unpredictable in terms of timing, with delayed and infrequent payments continuing to be a problem. Despite some initial challenges, mobile payments appear as effective, if not more effective, than CIT in the areas where they have been piloted so far. Mobile payments are found to be significantly **more cost-efficient than CIT** and have already led to workload reductions for central-level officers. CIT is also more expensive for beneficiaries to access compared with mobile payments, both in terms of money and time spent. The average CGP beneficiary could save up to 3.2 hours per payment in accessing the CGP transfer via mobile payments compared with CIT.

The average CGP beneficiary could save up to **3.2 hours** per payment in accessing the CGP transfer via mobile payments compared with CIT.

I like M-Pesa because I do not have to queue the whole day to get CGP as I am always busy working in the fields. M-Pesa is simple and convenient as I stay in my village unlike having to travel to the council to get the payment.
(Beneficiary, remote, Qacha's Nek)

Key Recommendation 9

Develop a feasible and inclusive mobile payments expansion plan

Mobile payments should continue to be scaled-up, guided by a detailed mobile payments expansion plan which ensures that the expansion's timing and coverage are both feasible and realistic. The plan should be informed by relevant indicators and thresholds, including network coverage

and presence of mobile money agents. This plan must take into account possible exclusion issues, including gender implications, and include alternative payment mechanisms to address these.





Regular coordination meetings between MoSD and UNICEF are found to be key for the effectiveness of the partnership

Capacity-building and partnership

UNICEF has supported MoSD and the CGP since its inception in 2009 and this partnership has been highly relevant for the CGP, as it provided the foundation for its implementation and expansion. The partnership between UNICEF and MoSD was found to be effective in terms of achieving its agreed activities, outputs, and outcomes as per the annual workplans.

At the same time, the process review found that the extent to which these activities, outputs and outcomes have translated into effective, efficient, and sustainable programme design and operational processes is more mixed. Important innovations, such as the mobile payment pilots have the

potential to improve the CGP's efficiency and may not have been possible without the partnership. However, bottlenecks remain in putting some other frameworks and manuals into practice, particularly in relation to community development and the integrated delivery of social assistance programmes. In addition, the effectiveness and efficiency of key CGP operational processes need to be strengthened (see above).

Regular coordination meetings between MoSD and UNICEF are found to be key for the effectiveness of the partnership and the recent entry of additional partners providing technical assistance to MoSD (i.e. the World Bank) will require close coordination among the partners and concerted leadership from MoSD.



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Looking ahead

The CGP and its objectives remain highly relevant to the families it targets, especially given the very high levels of poverty and child deprivation among its beneficiaries. All CGP households are extremely vulnerable to shocks, and this vulnerability has only increased in recent years with recurring droughts, the COVID-19 pandemic and recent food price inflation.

The CGP transfer value has not been increased since 2012 and its real value has been eroded severely as a result of inflation. As expected, this reduced the overall impact of the CGP.

This evaluation found that the CGP still plays an important protective role for its beneficiary households with small but significant impacts on extreme food insecurity and children's health. However, past evaluations of the CGP have shown that with a more adequate transfer value, larger and more wide-reaching impacts can be achieved, particularly in the area of children's education. It is urgent to adjust the CGP value for inflation and eventually return its real value to previous levels. An expansion of the OVC bursary and improved access would further facilitate the impact pathway related to school enrolment.

Since its inception in 2009, MoSD and UNICEF have made a lot of progress in building the foundational CGP's delivery systems. The focus of the coming years should be on increasing both their effectiveness and efficiency. The mobile payment pilot is an important starting point, but **improving the CGP's case management, complaints and appeal mechanisms, as well as programme communications should also be a priority.** This would not only improve efficiency, but also enhance the CGP's impact by ensuring beneficiaries get paid the amounts they are entitled to and can access complementary services. It would also further enhance the CGP's positive impact on social cohesion as well as improve the communities' perception of the programme. The partnership between UNICEF and MoSD is key in maintaining and enhancing the CGP's impact and operations going forward.



It is urgent to adjust the CGP value for inflation and eventually return its real value to previous levels

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