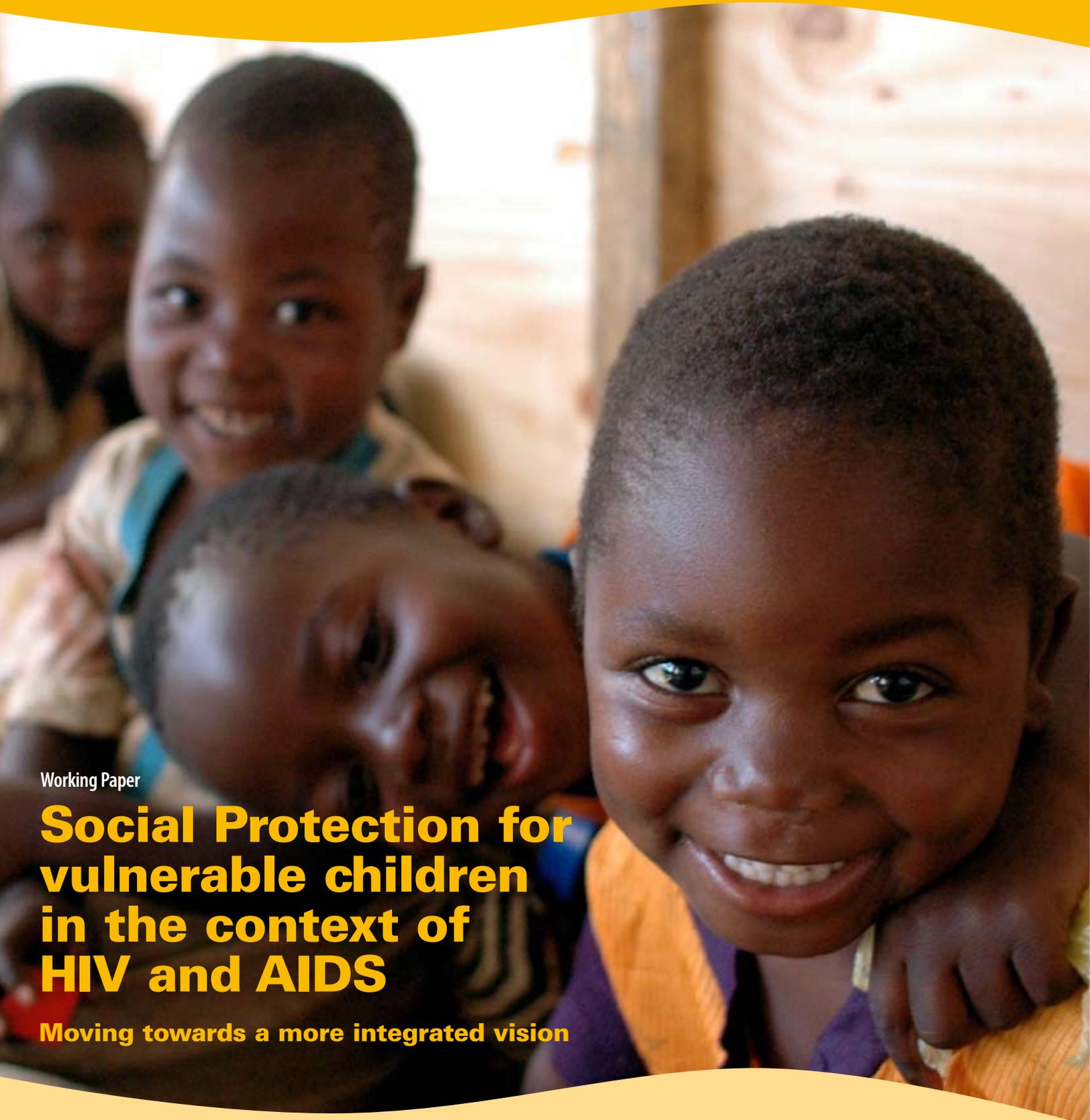


Inter-Agency Task Team (IATT) on Children and HIV and AIDS

Working Group on Social Protection

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Working Paper

Social Protection for vulnerable children in the context of HIV and AIDS

Moving towards a more integrated vision

The document was written by Kara Greenblot on behalf of the Working Group on Social Protection for the IATT on Children and HIV and AIDS. The content of the paper had the full participation of many Working Group members. The document has not gone through an endorsement process by each individual IATT member and therefore does not necessarily reflect consensus by all IATT members on its content.

Social Protection for vulnerable children in the context of HIV and AIDS

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1. Introduction

Divergent views on how to conceptualize, formulate and deliver social protection continue to draw healthy debate, both in global policy circles as well as within the resource-constrained, operational settings of many African and Asian countries. In the midst of these discussions, certain trends in thinking have begun to emerge.

First, social transfers (e.g. cash, food and other in-kind transfers) are a key component of social protection and have a central role in contributing to the protection, care and support of vulnerable children. The predecessor to this advocacy brief (see box at right) discusses the value of cash transfers in particular, and their real value for children affected by HIV and AIDS. The evidence to date points encouragingly toward the remarkable potential of social transfers for protecting the poor from the dire circumstances of destitution, and in particular for helping families and communities to better care for their children.

Second, social protection is also seen as an overarching framework, rather than a narrow set of social and economic support instruments. In line with this thinking, this advocacy brief proposes that in order to achieve maximum impact for vulnerable children, social transfers should be accompanied

by a range of support services and policies that focus on family support, child protection, alternative care and livelihoods promotion. In particular, these services and policies aim to enhance social equity by improving the quality of support received and extending programmatic reach to those children who are most vulnerable and frequently overlooked. Often referred to as 'complementary' to social protection, these support services and policies should instead be considered essential components of any well-designed (or integrated) social protection package, since they enhance the potential of social transfers to deliver their full value.

This brief focuses on social protection in support of vulnerable children living in high HIV-prevalence contexts. More specifically, it discusses the crucial need to address social vulnerability, in addition to economic vulnerability, when formulating social protection strategies that address the care, protection and support of vulnerable children in the context of HIV and AIDS.

Social Transfers support Children affected by HIV and AIDS

In October 2007, the IATT Working Group on Social Protection published the predecessor to this paper entitled *Cash Transfers: Real Benefit for Children Affected by HIV and AIDS*. The paper can be downloaded at: www.unicef.org/aids/index_iatt.html.

2. Understanding the risk factors and vulnerabilities for children

There is increasing recognition that the HIV pandemic, and in particular the Triple Threat (i.e. HIV, chronic poverty and the eroding capacity of governments to respond), has created a long-term humanitarian and development crisis which requires a response far more demanding than 'business as usual'. Unprecedented in scope and scale, this crisis not only affects those infected with the virus, but also has a disastrous impact on families, and in particular, children.

The risks and vulnerabilities for children living in high HIV-prevalence contexts are well documented. Some of the most significant to consider when discussing social protection include:

- The extra burden and reduced capacity of families (and communities) to care for and protect their children
- Fragmentation of households resulting in children living with extended relatives and outside of family care (e.g. on the street, residential care, etc...)
- Increased susceptibility to crime, abuse, exploitation and discrimination for those living outside of (or with limited) family care and protection

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- Life-cycle specific risks such as vertical transmission; child labour; school drop-out; transactional sex, early marriage and pregnancy; and threats to the development of identity, self-esteem and age-appropriate psychosocial well-being
- Resulting harm from all of the above to children's/youth's human capital and development prospects (health, nutrition, education and skills) and future livelihoods

How do we protect and care for these children on the massive scale required? To many, social protection has emerged as one of the most relevant paradigms from which to frame the answer.

3. What's new about social protection and why is it so important?

The social protection debate has pushed forward from the concept of simply providing protection for the poorest, to an agenda which takes a broader, more holistic, approach to poverty alleviation, and is referred to by some as 'the next generation' of social safety nets and welfare mechanisms. But while welfare and safety nets were disparaged by many for propagating 'dependency' and undermining economic growth, the new social protection agenda comes with a brand new portfolio of attractive features:

- First, there is new and mounting evidence that well-designed social transfers actually reduce overall poverty and they may be more affordable to developing countries than previously thought.
- Second, current discussions around social protection are infused with aspirations of livelihoods 'promotion', a concept which is

particularly relevant to vulnerable children in high HIV prevalence contexts. Similarly, 'transformation' is a novel piece of social protection puzzle and one which aims to address the root causes of poverty by tackling stigma and other causes of social inequity (see categories at right).

- Third, social protection supports a 'rights-based' agenda while also appealing to those more concerned with macro-economic growth.
- And finally, social protection is an overarching framework – not a quick-fix intervention -- of which social transfers (including both cash and food) are an integral part, but not enough on their own. The new social protection agenda moves towards an integrated vision which requires both an adequate supply of health, education and water and sanitation services, and draws on child and family oriented support services and policies for full impact (see below).

4. Moving towards a more integrated vision

Given the risks and vulnerabilities of vulnerable children in high HIV prevalence contexts (section two), and acknowledging the trend towards a more expansive concept of social protection (to include promotional and transformative elements noted in section three); the following sections look at how we can maximize the impact of social protection for vulnerable children by constructing a more integrated vision.

Basic entitlements: First, it is important to note that the provision of basic entitlements such as health care, education and water and sanitation is a core requirement in any country. And

Four Types of Social Protection Measures

Protective: Social assistance for the chronically poor which provides relief from deprivation. Examples include disability benefits, foster care grants and old-age pensions.

Preventative: Preventative measures that seek to avert poverty for those who face transitory livelihood shocks and risk falling into poverty. Examples include maternity leave, unemployment benefits or well-timed public works, food-for-work, and school feeding programmes. National ART and PMTCT programmes also contribute to prevention outcomes.

Promotional: Measures that aim to enhance income and promote livelihoods. Examples include life skills and agricultural/vocational training for youth, ECCD; child care for employed parents; and micro-credit and IGA for parents living with HIV.

Transformative: Measures that seek to address social inequity and exclusion. Examples include HIV anti-stigma / discrimination policies and awareness campaigns, laws to protect inheritance rights and the prevention of property / land grabbing. Family therapy/ counseling programmes may also be transformative.

NOTE: Many interventions fall into several (or all!) of the four categories, e.g. school feeding may be seen as protective, preventative, promotional and transformational depending on one's perspective.

Adapted from IDS Working Paper, 2004

in countries with endemic poverty and a high prevalence of HIV, the availability, accessibility and quality of these services are significant concerns and therefore a high priority. In addition, social protection itself is a basic entitlement; with social security recognised as a human right and social protection mechanisms understood as an enabler for realising the broader range of basic human rights.

Social transfers: Social transfers are a core element of any social protection system. Their principle role is to provide income security, thus helping to avert destitution, protect assets, and assist the poor to access health care and nutrition, education, and other basic entitlements. Social transfers (e.g. cash, food and other in-kind) have earned note-worthy distinction over the last several years, with long-term systems of categorical cash transfers in particular emerging as an increasingly accepted mechanism for poverty elimination.

Support services and Policies: An integrated concept of social protection suggests that support services (in the form of family support services, child protection services and alternative care) and policies (to regulate and guide these services) should go hand-in-hand with social transfers. Given exceptional levels of risk and vulnerability, and the need to address stigma and other factors that contribute to social inequity; it is only through the intentional strengthening and linking of these support services and policies with other social protection instruments that we will provide an enduring response to the unprecedented situation of children affected by HIV and AIDS.

5. What are the essential support services and policies that require attention?

- **Family support services:** Family support services that promote the care, protection and support of vulnerable children are important services in their own right, and can enhance the impact and social equity objectives of the larger social protection framework. Examples of these services include early childhood care and development (ECCD); support to carers of children with special needs (including children with HIV); individual assistance/advocacy in accessing entitlements (e.g. health care, education, birth registration, child grants, etc.); legal empowerment (e.g. protection of inheritance rights and succession planning); psychosocial support and bereavement counseling.
- **Child protection services:** As highlighted in section two, children affected by HIV and AIDS -- and in particular those living outside of (or with limited) family care and protection -- are at risk of increased exposure to crime, abuse, exploitation and discrimination. Social welfare departments, social workers, police and justice officials, teachers and health care providers can all play a key role in identifying those children most at risk and facilitating early detection of neglect, exploitation and abuse, including child labour and trafficking. Community-based child protection committees, local chiefs and opinion leaders also have an important role to play in enforcing child protection policies. These various stakeholders requiring training

in early detection, use of referral mechanisms, and a range of other protection issues as they relate to their local context.

- **Alternative care:** Many African countries (e.g. Kenya, Uganda, Zambia, Zimbabwe, Malawi, etc...) are experiencing a proliferation of residential care facilities and temporary shelters. The vast majority of the children living in orphanages have at least one surviving parent, and others have at least one contactable relative. With the right mixture of income and support services, many of these children could be reunified with families. There is an urgent need to explore alternative care options such as kinship and foster care, guardianship and domestic adoption as alternatives for those who cannot be reunified. Family re-integration services for street children and other children living outside of family care also need to be strengthened.
- **Support Policies:** Legislation, policies and regulations that promote youth and adult employment; that ensure equity in access to social transfers and other basic entitlements; and which enhance the quality and appropriateness of these services are essential to comprehensive social protection for children. Likewise, anti-discrimination legislation and policies that promote gender equality and inheritance rights are a crucial and transformative component towards assisting girls and women to overcome discrimination throughout their lives. Finally, improved gate-keeping and quality assurance is needed in the form of policies and regulations to ensure

appropriate use and standards for residential care facilities.

- **Services to Promote livelihoods of vulnerable youth:** Given the extremely deleterious impact of HIV and AIDS on human capital (health, nutrition, education, skills and labour), the future livelihoods of vulnerable youth has emerged as a particularly pressing concern. Education should be made available to all children – including the most vulnerable – to ensure the acquisition of literacy, numeracy and life skills, and to facilitate personal growth and entry into the workforce. Furthermore, programmes that promote livelihoods-oriented knowledge and skills among vulnerable youth are vital to their long-term prosperity. This includes economic empowerment programming, income generating initiatives, vocational and leadership training, in addition to initiatives that focus on building agricultural skills of young people. The UN and Partners' Alliance (in southern Africa) has dedicated significant resources to identifying promising practices in livelihoods-based social protection, though sustainable, cost-effective examples with the potential for scaling up remain sparse.

6. Guiding principles for promoting social protection for vulnerable children

As noted above, an integrated social protection framework is one where the impact on vulnerable children is maximized by strengthening vital support services and policies (described above), and intentionally linking them with social transfers and other social protection instruments. There are

several guiding principles to consider in the development of an integrated strategy.

Consider multi-dimensional child well-being: It is important to consider life-cycle specific and other special needs of vulnerable children and their families in HIV contexts. A multi-dimensional perspective of child well-being requires that each child's needs are considered and addressed individually. While this task may be beyond the mandate and affordability of a national social transfer programme; deliberate linkages to family support and child protection services in the design and implementation of social protection can help serve this purpose. For example, where grants are targeted through community structures and facilitated/monitored by social workers or other advocates, children are more easily referred to other services that are tailored to their particular circumstances, e.g. referrals to VCT, PMTCT, growth monitoring, food security/livelihoods support to families. Remember children living outside of family settings: Special attention needs to be paid to vulnerable children living outside of family settings where there is no adult to advocate for, and facilitate access to, their entitlements (e.g. children on streets, in shelters or in residential care). These children are often overlooked since most types of transfers target households. Evidence demonstrates, however, that the vast majority of children on the street or in orphanages are there due to poverty, not lack of family care. Social transfers, if designed properly (and linked to support services), can facilitate reunification.

Be aware of potential unintended consequences: When designing transfer programmes, care should

be taken to mitigate unintended, perverse incentives, such as taking in orphans in order to meet cash grant/food ration eligibility. Some experts cite the emergence of very large households (15-20 children) and unregistered, ad hoc institutions (in order to access carer grants) in South Africa as an indication of this phenomenon. **Poor intra household distribution** also warrants special attention. Child poverty is often related to abuse, neglect and intra-household inequalities in resource allocation, especially around food and labour demands. Targeting transfers to households caring for vulnerable children, for example, without dealing with intra-household constraints and abuse will do little to alleviate poverty among this group. Finally, the language around targeting can have harmful effects if not approached with care (see box below). While social transfers are unquestionably an important component of a strategy to address child vulnerability, there is a need to better understand potential unintended consequences, and examine how support services and policies around child protection can help mitigate these outcomes.

Avoid stigmatizing labels

HIV and orphan-related stigma is a cause and consequence of poor access to resources for children made vulnerable by HIV and AIDS. Stigma is also a serious concern where vulnerable children are being deliberately targeted for benefits. Language is important when dealing with communities and the terms 'orphan', and especially 'AIDS orphan', can do more harm than good by contributing to the stigma, abuse and exploitation experienced by these children.

Build on local capacity to assist the most vulnerable: Community-based OVC and child protection committees (in countries such as Zimbabwe, Malawi, Namibia and Swaziland), and their attached advocates, facilitators, or social workers can play indispensable and multiple roles towards: 1) improved targeting; 2) monitoring and reporting abuses (including child labour, sexual exploitation, etc...); and, 3) assisting the most vulnerable to navigate the system and to gain access to their entitlements. For children who do not have guardians to protect their rights and interests, the strengthening of community capacity to address these issues is critical.

Ensure programmes are context-specific: There is no single 'right' model of social protection. Each society must determine how best to ensure social protection of its members, and these choices will reflect a society's social and cultural values, its history, the structure and capacity of local institutions and overall level of economic development. African countries in particular have articulated a desire for social protection that is needs-based and context-specific, not just transplanted from Latin America and other regions of the world. Importantly, in countries with endemic poverty and high HIV prevalence, programmes should aim for universalism in order to reach the highest proportion of vulnerable children possible, without singling them out and potentially invoking stigma. The sharing of promising, evidence-informed practices among African countries will be the key to translating the goals of social protection in these contexts into reality.

Balance supply with demand: As noted earlier, the provision of basic services such as health care, education and water and sanitation is a core requirement in any country, and for those with endemic poverty and high HIV prevalence, they are an even greater concern. As social transfers begin to be scaled up in various countries, many experts predict a commensurate increase in demand for these basic services. Parallel investments in the supply of these services will be critical for transfers to achieve maximum impact.

7. Moving forward: current opportunities and issues to address

Despite the growing interest in social protection, and particularly in social transfers, most experts concur that this has yet to be translated to broad application within the resource-constrained, high HIV-prevalence context of sub-Saharan Africa. In fact, there are limited examples of sustainable, social protection programmes operating at scale in Africa today, with the exception of those in 'middle-income' countries such as South Africa and Botswana.

Current opportunities for advancing an integrated social protection agenda:

- Social protection is high on the agenda of several major donors, UN agencies and international NGOs, and continues to attract interest and funding in a variety of African countries. It is also gaining prominence within African venues where ministers and other heads of state have prioritized this topic on their domestic/regional agendas (e.g. Livingstone Two and the African Ministers Meeting in October).

- Research institutions such as IFPRI, JLICA and The UN and Partners' Alliance, along with good practice networks such as the Better Care Network, continue to dedicate resources to exploring and sharing promising models for social protection in support of vulnerable children, including more integrated models.
- Recent attention to the topic of social protection has begun to bring social welfare ministries -- traditionally among the most underfunded -- into the dialogue as potential wielders of resources and influence.
- Social protection is increasingly recognised as a vital component of the global response to rising food prices, and ongoing threats posed by climate change.

Issues to address towards advancing an integrated social protection agenda:

- A concerted effort should be made to enhance the **institutional capacity** of social welfare ministries and other key stakeholders to implement social protection programming, particularly where integration of support services and policies is concerned.
- Continuous efforts should be made to build **political will** among government ministries (where 'buy-in' remains weak), and to foster leadership among key stakeholders on social protection issues.
- New and creative financing mechanisms are needed in order to overcome the tenuous state of **long term funding**. Social

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protection does not fit into the usual projectised approach of many donors, and may be better supported through harmonized, sector-wide approaches and budgetary support.

- **Good governance** and the principles of sound, transparent social protection systems should remain an integral part of advocacy efforts. Civil society has an important role to play in fostering accountability and public confidence, and ensuring that social assistance is reaching the most vulnerable.

This advocacy brief aims to encourage an integrated vision of social protection; one where social transfers, support services and policies are mutually supportive, and inextricably linked to deliver maximum value to vulnerable children, while simultaneously mitigating discrimination, exploitation and abuse. It is hoped that this paper will stimulate dialogue and debate, and most importantly, will draw attention to the range of child and family-oriented support services needed to guarantee both economic and social equity to vulnerable children living in high HIV prevalence contexts.

For further details and additional copies of this briefing, contact: iattcaba@unicef.org

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