





COVERAGE OF SOCIAL SECURITY ALLOWANCE IN NEPAL

(A further analysis of MICS 2019 Nepal)

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GLOSSARY AND ABBREVIATIONS

CBO Community-Based Organization Central Bureau of Statistics CBS

CG Child Grant

DA Disability Allowance

EEA Endangered Ethnicity Allowance **EPRI** Economic Policy Research Institute

GDP Gross Domestic Product

NGO Non-Government Organization

NMICS Nepal Multi-Indicator Cluster Survey

NSO National Statistics Office SCA Senior Citizen's Allowance SSA Social Security Allowances Single Women Allowance SWA

UNICEF United Nations Children's Education Fund Nepal's transition from a unitary system of governance to a federal structure brought with it some implications for planning, budgeting, and implementing social security policies and programmes. Ensuring economic equality, prosperity and social justice are among the pillars of the Constitution of Nepal 2015, which prescribes social security as one of the measures to be adopted to achieve the constitutional goal of equality and social justice. Article 43 of the Constitution guarantees social security as a fundamental right for poor and vulnerable citizens, including indigent citizens, single women, citizens with disabilities, children, those who cannot take care of themselves, and citizens belonging to tribes on the verge of extinction. Several legislative measures have been taken to implement this fundamental right. These measures include Social Security Act 2018, Contributory Social Security Act 2018, and the Local Government Operation Act 2017.

Regarding the delineation of authority for social security between all three tiers of government, the Constitution defines social security and poverty reduction as both exclusive powers of the federal government and concurrent functions of the federal, provincial, and local-level governments. The Unbundling Report further details the functional distribution of powers between the federal, provincial, and local levels, and specifies that all three tiers of government may formulate and implement social protection and poverty reduction-related programmes within their jurisdiction. Budgets for the major social security programmes, including social security allowances, is held at the federal level. However, the actual delivery of most programmes including social security allowance (except social security fund and public pensions) is assigned to the local level. Provincial and local levels have also designed and implemented social security policies and programmes in their respective jurisdictions.

TABLE 1 Delineation of social security authority between three tiers of government according to the **Unbundling Report (GoN, 2016)**

FEDERAL

- National policy, law, standards and regulation relating to social security
- Policy, law, operation of fund and regulation relating to social security fund
- Relations, coordination and cooperation with national and international agencies and organizations relating to social security

PROVINCIAL

- Provincial policy, law, standards and regulation relating to social security
- Management and regulation of social security fund
- Relations, coordination and cooperation with national and provincial agencies and organizations relating to social security

LOCAL

- Programme implementation relating to social security locally according to standard determination by federal and state local policy,
- law, standards and regulations relating to social security
- Local plan, programme, resource utilization and management relating to identified and targeted groups,
- Relations, coordination and cooperation with national, provincial and local level relating to social security
- Local statistics and information management relating to social security

The Government of Nepal has demonstrated its commitment to delivering a strong programme of social protection support to its citizens. This commitment is set out in the Constitution of Nepal 2015, which guarantees social protection for poor and vulnerable populations. Nepal has a particularly well-developed social protection system given its level of development and provides more generous social protection support than many of its regional neighbours. Social protection is particularly important in the context of Nepal given the population's vulnerability to shocks due to chronic poverty, and susceptibility to natural disasters.

One of the key social protection mechanisms in Nepal is a set of five Social Security Allowances (SSA), targeted at particularly vulnerable populations. These include:

- The Senior Citizen's Allowance (SCA): All citizens aged 681 and above are eligible to receive the SCA, as well as Dalits and single women aged 60 and above and individuals aged 60 and above in five particularly deprived districts in Karnali Province.
- The Single Women Allowance (SWA): The SWA applies to widows; women who are divorced or legally separated; women whose husbands are missing; survivors of gender based violence; and unmarried women aged 40 or above. These women (except widow) need to meet certain conditions to be eligible for SWA.2
- The Child Grant (CG): The CG covers all children under five years of age in 25 select districts, as well as in Dalit children under the age of five across the country.
- The Disability Allowance (DA): All persons with a functional limitation (indicated by possession of a red or blue ID card, stating that they have a profound or severe disability) are eligible for the DA.
- Endangered Ethnicity Allowance (EEA): Every individual who is a member of 10 ethnicities, which have been officially recognized as endangered: Kusanda, Raute, Hayu, Kisan, Meche, Bankariya, Surel, Raji, Lepcha and Kuswadiya.

According to government estimates, the above schemes absorbed nearly half (43 per cent) of the Government of Nepal's Social Protection budget for the financial year 2019-20 and 1.71 pr cent of GDP. A total of 3.06 million most vulnerable individuals benefited from the SSA in 20213; over 10 per cent of Nepal's population. In FY 2022, 11.34 per cent of the federal budget is allocated for social protection. Despite significant efforts by local and national government, the actual reach (coverage) and effectiveness of some of these schemes, the CG and the DA in particular, are still low. Furthermore, emerging and anecdotal evidence suggests that some eligible populations are not receiving benefits in practice.

¹ The federal budget for FY2021/22 expanded the scope of the programme by lowering the age to 68 years from 70 years to be eligible for SCA

² These include: if the applicant earns less than minimum wage; the applicant does not have a family member who can provide nurture or care; the applicant's family member(s) are themselves indigent; the applicant's family member(s) do not support them

Understanding the coverage, reach and accessibility of SSAs is critical to improving their delivery and, ultimately, promoting the welfare and resilience of vulnerable populations. Given this, UNICEF Nepal, commissioned a situational assessment on the coverage of SSAs. The study draws on nationally representative data from Nepal's recent Multi-Indicator Cluster Survey (NMICS), conducted in 2019 by Nepal's Central Bureau of Statistics (CBS) (Currently upgraded to Nation Statistic Office) with technical and financial support from UNICEF.

This summary report draws out key findings from the 2019 situational analysis on SSA in order to capture how Nepal's five primary SSA mechanisms are functioning in practice. It presents evidence on the coverage, reach and accessibility of each scheme, sets out findings that help to explain any gaps in coverage, and explores emerging evidence on the outcomes and impacts of SSAs. Finally, and importantly, the summary report draws out recommendations that emerge from the findings and can guide the Government of Nepal and development partners as they seek to improve the coverage and effectiveness of SSAs going forward.



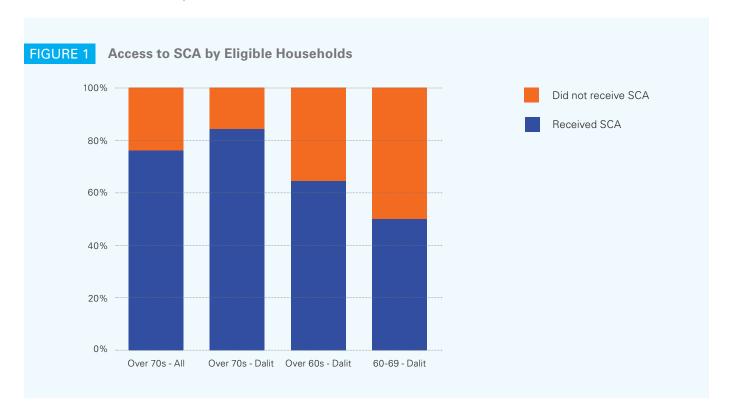
SOCIAL SECURITY ALLOWANCES IN PRACTICE: Coverage and Access

This section presents evidence from NMICS 2019 on the proportion of the eligible population⁴ that received each SSA benefit in the last 12 months. This analysis can give an indication of the level of coverage achieved by each scheme.

1.1 Senior Citizen's Allowance

NMICS data suggests that the SCA achieved the highest levels of coverage of the five SSAs. Of the eligible households included in the survey, households with a member aged 705 and above, and Dalit households with a member aged 60 and above, 77 per cent of the former and 65.2 per cent of the later reported to have received an allowance in the preceding 12 months. As demonstrated by the chart below, of households with over-70s, Dalit households were more likely to receive allowances than non-Dalit households. This suggests that the age relaxation applied to Dalit households is not being fully realized, and that this is the greatest coverage gap in the SCA.

Breaking down access by province reveals geographic disparities in access within the population of Dalit households with a member aged between 60 and 69. Rates of access were particularly low in Province 1 (36.3 per cent) and Province 2 (35.2 per cent).



⁴ A note on methodology: The NMICS did not contain questions specifically designed to determine respondents' eligibility for SSAs. For the purposes of the SSA analysis, eligible groups were determined based on demographic information available in the survey, e.g. information on caste, geographic location, age, disability, etc. It is important to note that this eligibility proxy is an imperfect estimate, particularly given that data on factors that might make a recipient 'ineligible' (e.g. already receiving remuneration/pension/retirement benefits from a government or semi-government organization) were not available.

⁵ Although FY 2022/23 budget lowered the age to be eligible for SCA, at the time of NMICS the eligible age was 70 years.

It was not possible to construct an 'eligibility group' for the Single Women's Allowance and Widow's Allowance using NMICS data, and is therefore not possible to draw meaningful conclusions about reach and access.

1.2 Child Grant

The Child Grant is provided to all households with children underfive years old in selected 25 districts and all households with Dalit children under-five throughout the country. Estimating an eligible population for the CG was also a challenge, because low Human Development Index (25) districts data couldn't be disaggregated by district. Previous studies suggests that places where the child grant was introduced earlier have greater coverage and the coverage is less in the districts where the programme was newly introduced. An early Impact evaluation of the child grant commissioned by UNICEF and EPRI reveals that coverage of the CG in five Karnali districts (Dolpa, Jumla, Kalikot, Mugu and Humla) where the CG was introduced in 2011 have 94.72 per cent coverage. Similarly, Achham, Routahat and Bajhang where the CG was expanded in 2016 have coverage of 73.396 per cent. Another study conducted by OPM on coverage of SSA in highly flood-prone districts found coverage of child grant ranges from 40 per cent to 85 per cent depending on the maturity of the programme.⁷

While CG coverage was found significantly different across provinces, it was lowest in Province 1 and highest in Karnali Province. This is likely due to the fact that the universal CG is in all nine districts 9 out of 10 in Karnali Province, whereas Province 1 and Gandaki province do not have universal CG except for Dalit children.

While it is clear that there is a need for greater efforts to improve CG coverage, analysis suggests that the CG is redistributive, with rates of access highest among the lowest wealth quintile of Dalit households (36.9 per cent), and lowest among the highest wealth quintile (20.6 per cent).



SUMMARY/CURRENT STATUS

- Eligibility/coverage: All children under five years old in 25 disadvantaged districts (including Karnali zone) with the vision of progressive universal coverage. All under-five Dalit children nationwide.
- Number of children covered: Over 1.2 million children under-five years old (approx. 46 per cent of all children under five).
- Financing: Tax-financed by government.
- Estimated total cost for national coverage: 0.19 per cent of the national budget
- Benefit description: NRs2,128 (US\$16) is paid every four months to the mother or primary caregiver of eligible children (up to two children per family). There are no behavioural conditions.



1.3 Disability Grant

Individuals with either a full or severe disability are eligible for the DG, but it is necessary to show a government-issued 'Disability ID Card' to access it. NMICS includes data on households included members aged between 2 and 49 years with functional limitations. This was used as the eligibility group to estimate DG coverage levels. This analysis suggests that DG coverage is worryingly low, with only 4.1 per cent of the households including members with functional limitations receiving the DG in the preceding 12 months. The proportion of households including a child with a functional disability was found to be even lower, at 2.6 per cent.

While small variations were found between geographic locations and income levels, these do not explain gaps in coverage, which were consistently low across the population. Low coverage may be partly explained by the fact that not all individuals reporting a functional limitation in NMICs meet government criteria for a full or severe disability. It is also very likely that many individuals who qualify as fully or severe disabled have not been formally recognized, and are not in possession of a government-issued ID. Finally, those who have been recognized and received an ID are likely affected by additional supply and demand side barriers to accessing the DG. In order to improve the coverage of the disability grant, there is a need for further research to identify where and why the breakdown in access has occurred.

1.4 Endangered Ethnicity Allowance

As set out above, the EEA is provided to all individuals belonging to 10 tribal groups that are at risk of extinction: Kusunda, Raute, Hayu, Kisan, Meche, Raji, Lepcha, Kuswadiya, Bankariya and Surel. Only 12 of the 12,655 households included in NMICS 2019 belong to one of these tribal groups, and seven of the 10 groups were represented.8

Only seven of the 12 households were aware of the EEA and six of those were receiving the allowance (the seventh household believed they were ineligible). Given the small sample, further research with a larger sample is required to accurately assess the coverage of the EEA. These ethnicities are settled only in some geographical pockets, so the MICS-2019 survey does not adjust the sample size accordingly. Similar challenges appear, for example in the case of the CG.

1.5 Trends on coverage

It is difficult to draw meaningful conclusions in a comparison of the coverage of the schemes discussed above, due to differences in how the eligibility group was calculated for each allowance. However, findings suggest that coverage is strongest for the Senior Citizen Allowance and that significant gaps exist in the coverage of the other SSA schemes – the CG and the endangered ethnicity allowances. Explanations for these gaps are explored in the following section.

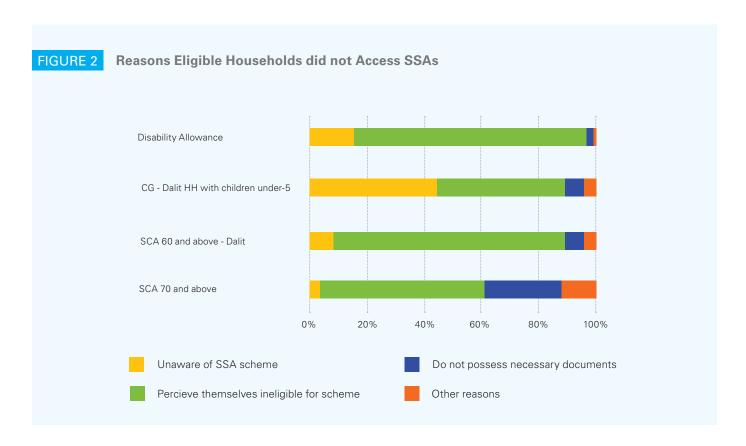
In addition to considering gaps in coverage, or 'exclusion errors', the analysis considered 'inclusion errors'. These are instances where ineligible households were receiving allowances. Overall, inclusion errors were found to be rare, occurring far less frequently than exclusion errors across the different types of allowances. The highest rate of inclusion error was found in the CG; 20.9 per cent of recipient households did not have a child under five years old. This is likely because households that were once eligible continued to receive the allowance even after their child reached five years of age.

Coverage was found to be consistently higher in some provinces than others. In particular, Gandaki and Karnali provinces tended to have higher rates of coverage, while Provinces 1 and 2 achieved lower coverage.

Finally, across all schemes, coverage was found to be higher among vulnerable groups. 9 Household heads with no formal education reported higher levels of access than those with a higher level of education. Female household heads reported higher levels of access than male household heads, and Dalit household heads reported higher access than other households. Access tended to be highest among households in the lowest income quintiles. This is a positive finding, which indicates that SSAs are fulfilling their intended redistributive function. Interestingly, analysis suggests that awareness of the different SSA schemes follows the reverse pattern; awareness levels were comparatively lower among more vulnerable populations. This suggests that levels of demand are higher among vulnerable groups. It also implies that increasing awareness among vulnerable groups through targeted awarenessraising activities could increase coverage of schemes, particularly among those most in need of their benefits.

1.6 Understanding coverage: Barriers to access and reasons for exclusion

NMICS 2019 included questions on the reasons why households did not access each SSA. By considering the reasons identified by eligible households, it is possible to identify the cause of their exclusion, helping to explain gaps in coverage.10 This chart sets out the reasons why households eligible for each SSA scheme were not accessing benefits.11



The chart suggests that lack of awareness is a primary reason for eligible households' exclusion from SSA schemes. This includes both complete unawareness about the scheme itself, and an inadequate understanding of the eligibility criteria for the scheme and how they apply to each individual's circumstances. Inadequate awareness about eligibility criteria was found to be a particularly significant barrier to Dalit populations accessing the SCA.

While lack of documents was not found to be a main reason why eligible households are not accessing allowances, the fact that it has served as a barrier in some cases is problematic. It suggests the need for adjustments in policy and practice to ensure that administrative barriers don't undermine access to SSAs, particularly for the most vulnerable households.

¹⁰ The SWA and EEA have been left out of the chart for the same reasons. Analysis of the coverage of these schemes was limited: due to the lack of an eligibility group (SWA) and the

¹¹ It is possible that a proportion of the respondents who perceived themselves to be ineligible were in fact ineligible because they were receiving remuneration/pension/retirement benefits from a government or semi-government organization. But that is likely only true in a minority of cases, particularly given that the majority of respondents who were aware of the scheme but believed themselves to be ineligible were in one of the bottom two wealth quintiles.

1.7 Effectiveness of SSA administration

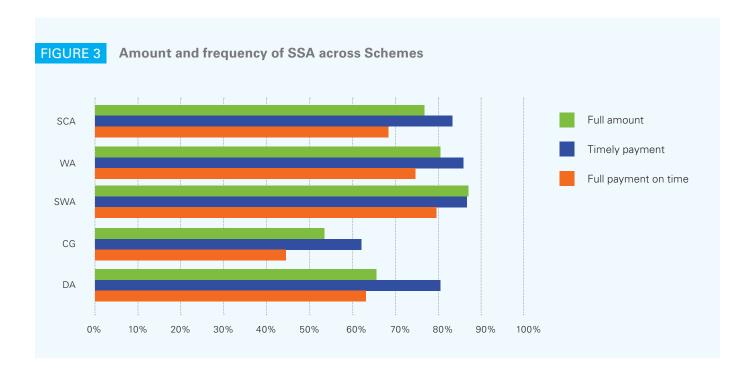
Issues around coverage are fundamental to assessing the performance of an SSA scheme. But it is also important to consider the effectiveness of distribution: namely, whether beneficiaries are receiving the correct amount and whether they are receiving it according to the intended timeframe. NMICS 2019 included data on both the number of times an allowance was received in a 12-month period, and the total amount received over that period.

1.8 Amount and Frequency of SSA Allowances

TABLE 2

Senior Citizen's Allowance	Beneficiaries are eligible to receive an allowance of NRs4,000 ¹² per month (for recipients aged 68 and above) and NRs 2660 per month (for Dalits and five districts of Karnali Province recipients aged 60-67).	
Child Grant	Children under the age of five from Dalit families (all across Nepal) as well as those living in 25 select districts are eligible to receive NRs 532 per child each month, with a restriction of two children per mother.	
Single Women Allowance	Nepali citizens who are eligible for the Single Women Allowance receive a monthly payment of NRs 2,660.	
Endangered Ethnicity Allowance	Every individual from one of the identified ethnic groups is eligible to receive a monthly allowance of NRs 3,990.	
Disability Allowance	Persons with disabilities holding either a Red or Blue Disability Identification Card, are eligible to receive a monthly SSA of NRs3,990 or NRs 2,128 respectively.	

The chart below presents an analysis of NMICS responses from SSA recipients. It sets out the proportion of recipients of each SSA who received: the full payment amount on time; the full payment amount; and a timely payment.



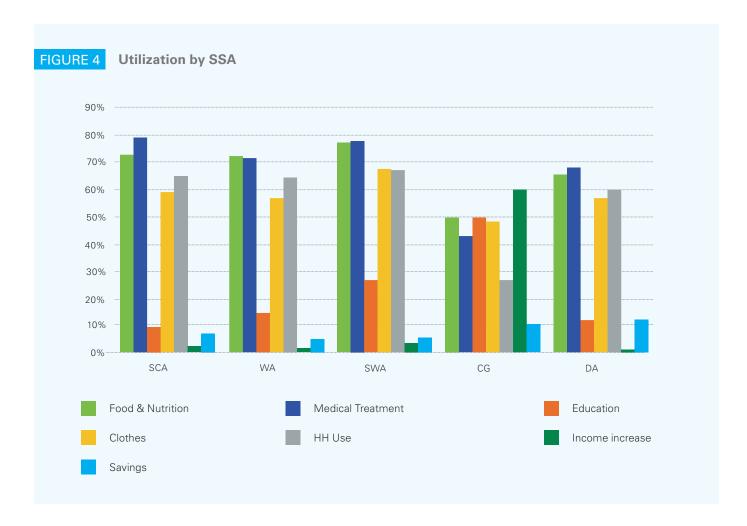
The chart reveals that **the majority of SSA recipients receive their payments on time** (over 80 per cent for all schemes except the CG, for which just over 60 per cent received timely payments). The proportion of recipients who received the full amount was slightly lower but still over 50 per cent for all schemes except CG, and 70 percent and above for three out of the five schemes. The CG appears to face the greatest challenges in distribution.

Disaggregating findings by wealth quintile reveals that households in the poorest quintile are slightly less likely to receive their payment on time when compared to all households,¹³ suggesting that access is more challenging for households that are most reliant on support. Further exploration of the data also suggests that recipients that receive allowances through bank transfer are more likely to receive the full amount in the correct timeframe, reinforcing existing evidence that suggests digital payment mechanisms are associated with more effective and reliable payment distribution. Yet relying on bank transfers may also have the effect of excluding some beneficiaries. Analysis of NMICS data suggests that travel time and expense are higher for beneficiaries who collect allowances from the bank. This highlights the importance of the Government of Nepal's current efforts to make banking more accessible.

1.9 Outcomes of SSAs

Utilization

Evidence from NMICS suggests that most households spend SSA support on basic consumption needs: food and nutrition, medical treatment, education, and clothes and other household needs. In contrast, allowances were rarely used for income generating activities or put into savings. This indicates that households' immediate consumption needs are absorbing SSA support.



This chart demonstrates that this pattern was observed across different schemes, with some variation, likely reflecting households' particular needs. For instance, expenditure on education was much higher among households receiving the CG and single women allowance, households that are more likely to have children in school.

When utilization is analysed by wealth quintile, other revealing patterns emerge. While expenditure on medical treatment remained high across quintiles, respondents in higher wealth quintiles were less likely to spend on general daily expenses (food and nutrition, clothes, general household use) and more likely to save their allowances or invest them in income-generating activities.



Outcomes and Impact

Robust evidence on the impact of SSAs, and in particular the CG, is limited. In 2019, UNICEF Nepal supported an early impact evaluation of the CG programme. The evaluation included a comprehensive baseline study that will be used to estimate the impact of the programme across a range of child rights indicators. Initial analysis presented in the early impact evaluation does provide a number of preliminary insights into the impact of the CG. In particular, while impacts of the grant on nutrition indicators were found to be mixed, the evaluation found a lower prevalence of wasting and underweight among children in beneficiary households. This suggests that the CG has the potential to improve nutrition outcomes for children, but should be supplemented with other interventions (as discussed in the recommendations section below). The evaluation findings also suggest that the CG has empowered beneficiary mothers, increasing their agency within the household and with regard to decisions about their sexual and reproductive health rights. Finally, evaluation findings suggest that children in recipient households are more likely to attend early childhood education.

Recommendations for Strengthening Social Security Allowances in Nepal

A number of recommendations to strengthen the delivery of SSA in Nepal emerge from the assessment. These are informed by analysis of NMICS 2019, but also draw upon qualitative interviews that were undertaken as part of the assessment. A summary of the main recommendations is set out below.

2.1 Policy recommendations

- 1. The assessment found conflicting information about SSAs across policy documents and implementation guidelines, leading to inconsistencies in implementation by practitioners. There is a need for greater harmonization to ensure a clear and consistent understanding across policy makers and practitioners.
 - It is recommended that all communication materials be harmonized to ensure consistency.
 - In addition, it is recommended that a comprehensive 'one-stop reference guide' be developed, to provide clear and practical guidance on the implementation of SSAs. This should set out the roles and responsibilities for implementation; instructions on coordination and collaboration for different government departments; and information on the timeline and periodicity for each task/activity.
- 2. Evidence from the assessment shows the CG to be redistributive, with greater access among more vulnerable households. Furthermore, emerging evidence on the outcomes and impact of the scheme indicates its transformative potential for children and families.
 - The Government of Nepal's recent expansion of the coverage of the CG is a welcome development. It is recommended that the coverage of the CG be expanded to include all districts in Nepal. Expanding coverage is also likely to improve the effectiveness of the grant's administration and reduce exclusion errors.
 - Investing in the CG will have a high rate of return and will support Nepal to reap the demographic dividend and take care of an aging society.
- 3. Assessment findings confirm that digital bank transfer is an effective modality for SSA payments and is likely to promote timely and correct payments.
 - The Government of Nepal should continue to promote e-payment modalities, but should take measures to promote their accessibility and ensure that vulnerable beneficiaries aren't excluded.

2.2 Programmatic recommendations

- 1. It is clear from the assessment that lack of awareness about SSAs and eligibility criteria serves as a major barrier that prevents eligible households and individuals from accessing benefits.
 - It is recommended that the Government of Nepal, with support from UNICEF, develops a communication strategy designed to promote greater awareness of SSA schemes, particularly the CG and EEA. The communication strategy should: include details of eligibility criteria and guidance on how to access benefits; be implemented nationwide, but target marginalized and remote communities (Communication materials should be made available in local languages as well); include standardized messages that can be distributed directly by ward authorities; and, utilize print and video materials, as well as any locally appropriate forms of communication.
- 2. While the CG has potential to significantly reduce malnutrition, preliminary findings suggest that supplementary 'cash-plus' interventions may be needed in order to more effectively improve nutrition outcomes for children.
 - The Government of Nepal should collaborate with UNICEF to develop and implement programming that promotes parenting education, handwashing behaviour and supports diarrhoea management (e.g. through oral rehydration and zinc supplements).
 - Dietary supplements should be provided to children and pregnant and lactating mothers.
 - Programming should promote exclusive breastfeeding, BFCF, and timely immunization.
- 3. Difficulties obtaining documents should not serve as a barrier to accessing SSA benefits for vulnerable groups, yet assessment findings indicate that in some circumstances lack of proper documentation is the reason that eligible individuals do not receive SSA.
- It is recommended that a more flexible system for identity verification be developed, for instance by accepting a broader range of documents, or engaging Female Community Health Volunteers (FCHVs), who can play a role in identifying potential beneficiaries.

2.3 Strengthening of delivery mechanisms

- 1. Qualitative evidence suggests that while ward officials play a key role in awareness-raising around SSAs, their level of engagement is inconsistent and depends on the personal initiative of each official.
 - Awareness-raising activities should be institutionalized through the development of a clear communication strategy defining roles and responsibilities, activities and timelines.
 - Local NGOs, CBOs, and volunteers should be engaged to supplement awareness-raising carried out by
 officials.

- 2. Evidence from the assessment revealed that many beneficiaries face significant costs in time and travel expenses to access benefits.
 - The Government of Nepal should continue to prioritize making banking services more accessible.
- 3. The CG is particularly susceptible to inclusion error, because all beneficiaries will ultimately become ineligible when children in the household reach the age of five.
 - As part of its Strengthening Systems for Social Protection and Civil Registration project, the government should take measures to address this issue, for instance by integrating the age of children in beneficiary households into a centralized information management system.
- 4. The assessment findings reveal that NGOs and CBOs play a very limited role in supporting the implementation of SSAs. This is a missed opportunity. NGOs have the potential to support local authorities in key aspects of implementation, and should be engaged in:
 - Awareness generation and social mobilization, particularly in hard-to-reach communities;
 - Supporting beneficiaries to obtain necessary documents and navigate the application process;
 - Supporting ward and municipal offices to identify both eligible and ineligible individuals, in order to reduce errors in beneficiary selection;
 - Identifying particular challenges faced by potential beneficiaries and advocating for systemic changes to improve access.

