

# **Social protection and child protection: two sides of the same coin?**

**Keetie Roelen**

**Institute of Development Studies (IDS), Brighton, UK**

**Paper prepared for the Conference on Child Poverty and Social Protection**

**10-11 September, Jakarta**

**- do not quote without author's approval -**

## **1. Introduction**

There is widespread recognition that children are a particularly vulnerable group; they have different basic needs than adults do, they are dependent on others for the fulfilment of their needs and the denial of those needs can have far-reaching and long-term adverse consequences (Roelen and Sabates-Wheeler 2012, White, Leavy, and Masters 2003, Sabates-Wheeler, Devereux, and Hodges 2009). The policy areas of social protection and child protection are part and parcel of the response to children and their vulnerabilities. Nevertheless, both policy areas have largely developed in silos (Roelen, Long, and Edstrom 2012). This holds in both academic and policy terms. Whilst issues of child protection are mostly dealt with in disciplines of child psychology and childhood studies, social protection is largely appropriated by economists and social scientists. Similarly, national governments, international organisations and NGOs often deal with issues of child protection and social protection in different departments and through distinct sectoral policies. It is increasingly recognised that this dichotomy is artificial (Shibuya and Taylor 2013), and that it compromises the effectiveness of the response to the wide set of needs of vulnerable children.

The issue of poverty is a case in point to demonstrate the blurry boundaries of the fields of social protection and child protection. Poverty and economic vulnerability in and of itself can be considered a violation of children's rights and their protection. In addition, it is an important factor in causing or reinforcing other types of child protection violations, including child labour, trafficking, abuse and neglect (Jones 2011, Barrientos et al. 2013). Given social protection's remit in terms of protecting people against and lifting them out of poverty, it can play both a direct and indirect role in preventing child protection violations. Linkages between social protection and child protection are further exemplified when considering the response to such violations. Social protection programmes have the potential to play an important role in responding to child protection violations, both in terms of ameliorating its effects as well as supporting recovery and redress. The potential for linkages between social protection and social protection is also evident when exploring response mechanisms on the ground and at community level, particularly in resource-constrained contexts. The frontline response to issues of poverty, vulnerability as well as child protection concerns is often provided by community members, and increasingly so by volunteers. An integration of efforts makes sense; at household level, a strong delineation between issues of child protection and social protection is not relevant.

This paper explores the potential for synergies and linkages between the policy areas of social protection and child protection, and examines entry points for providing a more comprehensive response to vulnerable children. Firstly, it establishes a framework that sets out the causes and consequences of child protection violations and the role that social protection can play in preventing or mitigating the impact of such violations. Against the backdrop of this framework, it then challenges a number of assumptions underlying the design and delivery of social protection programmes and their foreseen impacts in terms of child protection, most notably the aspects of conditions and receipt of cash. Next, this paper considers issues of implementation in working towards a more comprehensive and coordinated response to vulnerable children building on synergies in implementation and delivery. In particular, it will address questions around the appropriate role of community volunteers in the provision of services at household level. Finally, this paper provides a critical reflection and concludes that opportunities for synergies and linkages are plentiful, and should be taken advantage of to their full potential, but that design, implementation and delivery of social protection programmes need to be subjected to due scrutiny and a healthy dose of realism rather than romanticism.

## **2. Social protection and child protection – a conceptual framework**

Several papers have considered the link between social protection and child protection, both in terms of the issues it aims to address as well as the policies or programmes to respond to such issues.

Jones (2011) considers the drivers of child protection violations in Nigeria and how social protection interacts with those drivers, thereby seeking to identify different pathways through which social protection can prevent such violations. The main violations include child trafficking, harmful forms of child labour and domestic abuse, with key drivers being poverty and economic vulnerability, health shocks and chronic illness, socio-cultural attitudes and practices and institutional weaknesses. A number of different entry points for existing social protection policies in Nigeria were identified that could lead to a more coherent response to these various violations, ranging from reducing child labour through higher income to cross-referral to other services using the community-based mechanisms employed in health insurance schemes (Jones 2011).

A concept note by Roelen and Delap (2012) considers the causes and consequences of loss of parental care for children and the role of social protection in preventing and responding to the loss of such care. Loss of parental care can have far-reaching adverse consequences for children: *“Children without parental care find themselves at greater risk of discrimination, inadequate care, abuse and exploitation. Inadequate care can also impair children’s education, emotional and physical development and health.”* (Roelen and Delap 2012). Poverty and economic vulnerability play an important role in the loss of parental care but also has an effect on alternative care choices for children and the quality of care provided by parents or other carers. Social protection was considered key in preventing the loss of parental care as well as in supporting preferred care solutions for children without parental care, such as kinship or foster care, through reducing levels of poverty and vulnerability. Barrientos et al. (2013) find that social transfers can indeed prevent family separation by avoiding involuntary migration.

The acknowledgement that social protection can play a role in protecting and addressing the needs of vulnerable children is not new. In policy debates around the response to Orphans and Vulnerable Children (OVC), social protection and cash transfers are widely considered to be an appropriate policy measure (JLICA 2009 in Shibuya and Taylor (2013)). The adverse impacts of poverty and vulnerability on child protection outcomes have been widely documented. Richter and Naicker (2013) point out how the resultant stress can seriously undermine parent-child and carer-child relationships, particularly in HIV/AIDS contexts. Cash transfers have been considered a suitable and preferred social protection mechanism to help HIV-affected households to cope with poverty and vulnerability as a result of being affected by HIV and AIDS; they are fairly easy to implement and administer, faster to scale up and more effective in reaching large parts of the population than other programmes may be (Adato and Bassett 2012). This potential role of social protection in terms of preventing or mitigating the effects of child protection violations holds beyond the specific context of HIV and AIDS.

Barrientos et al. (2013) provide a useful overview of the link between social transfers and child protection and consider the potential impact of social protection at three different levels: (1) direct effects; (2) indirect effects; and (3) implementation effects. Whilst the direct effect refers to elements of social protection programmes explicitly designed to address a certain child protection issue (such as the requirement for birth registration or rules on child labour in public works programmes), the indirect effect pertains to unintended outcomes of transfers and services delivered through programmes (such as a reduced risk of family separation due to lower levels of poverty). The implementation effect refers to how particular elements of implementation and delivery may have unintended consequences for child protection, either positive or negative (such as the potential of greater harmonisation with other services through cross-referral but also school drop-out amongst girls given increased care responsibilities due to lack of care facilities at public works sites). Evidence on these different effects of social protection programmes is thin; this is largely due to the outcome variables – birth registration, child marriage, domestic violence, child labour – and the pathways for reaching such outcomes not being part of programmes' theories of change and therefore not being included in impact evaluations<sup>1</sup>. The evidence that is available points to mixed results. Certain programmes – conditional and unconditional cash transfers in particular, have been shown to increase school attendance and reduce child labour as well as child marriage. By the same token, the increased burden of conditionality in conditional cash transfers has led children to do more informal and domestic work at the expense of leisure time (Barrientos et al. 2013, Sanfilippo, De Neubourg, and Martorano 2012).

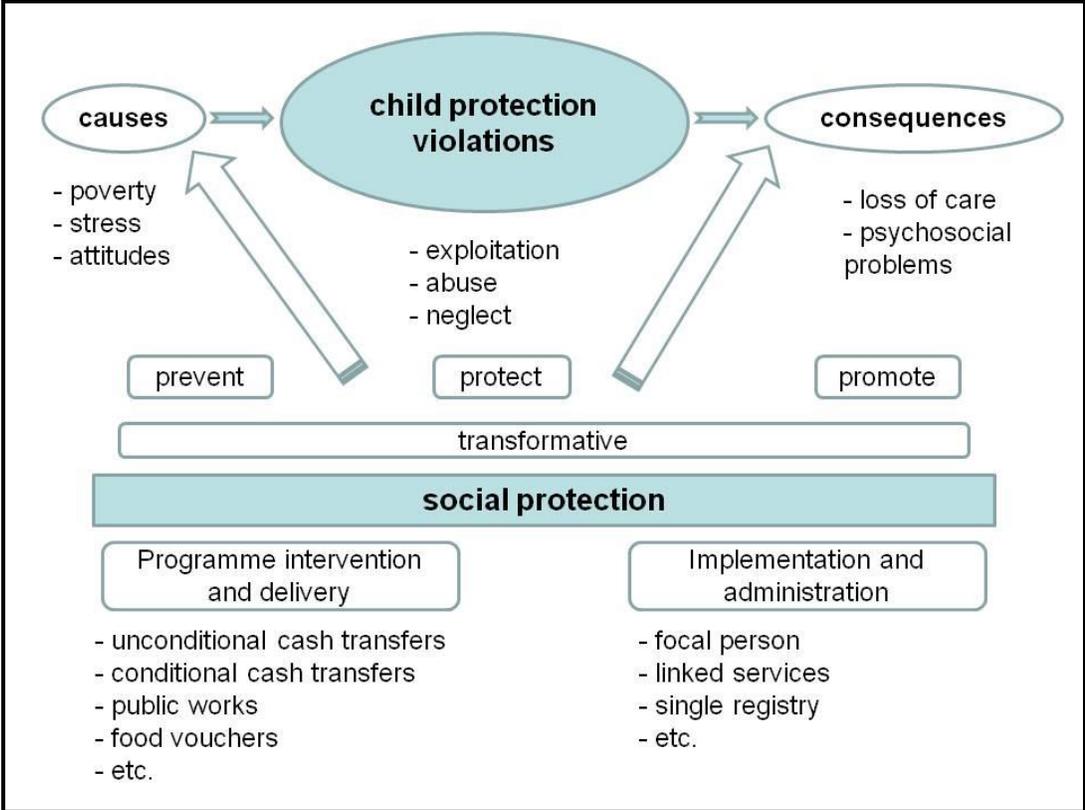
Against the backdrop of existing studies, the proposed framework in this paper explores the potential of social protection in preventing and responding to child protection violations. The framework is illustrated in Figure 1. The diagram illustrates that social protection has various entry points into the field of child protection when considering child protection violations in terms of its manifestation as well as causes and consequences. Social protection can be thought of having different functions, as outlined by Devereux and Sabates-Wheeler (2004). These consist of i) preventive, ii) protective, iii) promotive, and iv) transformative roles. Although most

---

<sup>1</sup> Devereux et al. (forthcoming) provide a more general critique of conventional impact evaluations of social protection programmes and argue for an alternative framework that takes closer account of pathways leading to impact that are outside of programmes' theories of change, including programme processes and social dynamics.

commonly understood in terms of social protection’s impact on poverty and livelihoods, thinking along the lines of these functions is also helpful when considering the potential impact of social protection on child protection. Social protection can play a preventive role by impacting on factors that increase the risk to child protection violations, including most notably poverty and vulnerability. This fits the widely recognised need for a greater focus on prevention of child protection violations (Forbes et al. 2011). The protective role refers to the potential of social protection interventions to ameliorate the effects of child protection violations. School feeding programmes present one example as they ensure that children receive adequate nutrition despite neglect at home. Finally, social protection’s promotive role refers to interventions that help overcome the consequences of child protection violations, such as loss of care or psychological harm. One example is the potential for social protection to incentivise or support alternative care solutions for children after family separation (Roelen and Delap 2012). The transformative function is overarching and pertains to the effect that social protection may have on people’s overall attitudes towards child protection, which could be addressed through awareness programmes linked to conditional cash transfer programmes or child transfers, for example.

**Figure 1 Framework Child Protection and Social Protection**



Social protection can perform these various functions through its particular programmes as well as through the particular implementation, delivery and administration structures underpinning such programmes. The provision of transfers or food vouchers, for example, can address the factors causing child protection violations and respond to physical harm that result from such violations. The way in which these transfers or vouchers are delivered will also have an effect in terms of child protection; a transparent registry may make it easier to link to other services, for example.

The remainder of this paper explores those programmatic effects and implementation synergies in more detail. It points towards the potential benefits of particular programmatic and implementation considerations but also provides a critical reflection of commonly held assumptions about what works best for children and the response to their needs.

### **3. Programmatic effects - challenging assumptions**

The framework illustrates the potential role that social protection can play in preventing and responding to child protection violations. That said, little evidence is available about the extent to which different programmes can promote positive outcomes for children and about the pathways towards such outcomes (Barrientos et al. 2013). We discuss programmatic effects two different programme design elements – conditions and delivery - to illustrate the potential impact that social protection can have in terms of child protection and to refute assumptions about what works best. Programme design (including imposing conditions on receipt of transfers) and delivery (giving cash to women/ female caregivers or children directly) might create perverse incentives or side effects that need more consideration.

#### *3.1. Conditions*

Conditional cash transfer (CCT) programmes are widely applauded for their positive effects on a range of different outcomes, ranging from poverty reduction to improved school attendance and better nutritional status for children. CCT programmes are based on the premise that poverty presents people with financial barriers to make investments in human capital and require the monetary (or in-kind) support to overcome such barriers as well as an incentive to ensure it is being invested in human capital, as opposed to being spent on other items to meet more short-term needs (Browne 2013). Evidence for positive impacts of CCT programmes is most widespread in Latin America but can also be found in Asia and Africa. A conditional cash transfer programme in Pakistan led to improvements in school enrolment rates for girls and a food for education scheme in Bangladesh resulted in greater attendance rates for participating schools (Sanfilippo, De Neubourg, and Martorano 2012), for example.

Despite their positive effects, the imposition of conditions can also lead to unforeseen perverse incentives or negative side-effects that have repercussions in terms of child protection. Perverse incentives refer to adverse outcomes due to the programme having the opposite effect on the outcome that it is trying to influence. Examples include experiences with CCT programmes that aimed to improve nutritional status for children but achieved rather the opposite due to how conditions were perceived and interpreted. The requirement for children to be underweight in order to qualify for Brazil's Bolsa Alimentacao programme, for example, led to negative perverse effects as children were kept underweight in order to remain on the programme (Morris et al. 2004). By the same token, the requirement for children to gain enough weight between check-ups as part of a CCT programme in Nicaragua resulted in children being overfed prior to such check-up to guarantee the receipt of transfers (Adato 2008). A study on a food voucher programme in Dabaab refugee camp in Kenya, where the receipt of benefits depended on the number of children in the household being malnourished,

highlighted the risk of associating the receipt of benefits with negative outcomes for children (i.e. having your child to be classified as malnourished) (Dunn 2009).

Side effects of programmes, either positive or negative, are usually more difficult to capture than the extent to which programmes lead to (perverse) incentives; the realm of potential side effects is large and many of the domains in which these occur may not be part of programme evaluation's remit (Barrientos et al. 2013). Nonetheless, evidence on a number of programmes give rise to concerns with respect to child protection outcomes when attaching conditions to programme participation. Public works programmes offer a useful insight into how the attachment of conditions can result in both positive and negative side effects for children<sup>2</sup>.

Public works programmes have grown increasingly popular in recent years and wide range of evidence is now available confirming increased school enrolment and attendance rates as well as reduced number of hours in paid and unpaid work (Barrientos et al. 2013, Sanfilippo, De Neubourg, and Martorano 2012, Hoddinott, Gilligan, and Taffesse 2010). Despite these positive effects, studies also point towards a large substitution effects that lead to concerns when it comes to child protection outcomes. Firstly, the work requirement in public works leads to children, and especially girls, substituting for the work in and around the house (including caring for other children) that was previously done by an adult household member, as was found with respect to Ethiopia's Productive Safety Net Programme (PSNP) (Hoddinott, Gilligan, and Taffesse 2010). A second substitution effect refers to the exchange between time spent on work and leisure, such as in Colombia where the Familias en Accion programme was found to improve school participation at the expense of other activities that children are engaged in that included work as well as leisure (Orazio Attanasio et al. 2010). Depending on the compatibility of school attendance and the kind of paid or unpaid work, children may end up moving into different types of work that can be performed after school hours or sacrificing their leisure time (Barrientos et al. 2013).

Finally, the imposition of conditions upon the receipt of transfers implies a power transfer that can put children and their caregivers in a vulnerable position and at risk of abuse. Someone will have to attest that conditions have been met – a teacher to confirm school attendance or a doctor to sign a vaccination card. Although to our knowledge no evidence of systematic abuse of power is available, the potential implications of such power transfers when imposing conditions are to be kept in mind, particularly with respect to children. Their lack of autonomy and relative voicelessness make them particularly vulnerable to the abuse of power, causing conditions to reinforce and perpetuate their vulnerable position rather than lessen it (Sabates-Wheeler and Roelen 2011).

### 3.2. *Direct delivery*

The distribution of a transfer to the target group directly is widely considered to lead to empowerment of that specific group. It is commonly asserted that the direct transfer of cash or food to women will lead to greater autonomy and reduce intra-household inequalities (Soares Veras and Silva 2010). It is also often assumed that such direct transfers will be to the benefit of the household as a whole and children in particular as women are

---

<sup>2</sup> Although not generally considered a CCT programme, public work programmes can be considered the ultimate conditional programme as the receipt of cash is tied to work. This work requirement can have quite distinctive positive and negative effects for children that merit a more detailed discussion.

more likely to spend the cash on food or other items for children (Sabates-Wheeler and Roelen 2011). However, the extent to which a direct delivery of transfers to women actually addresses patterns of gender inequality is questionable (Molyneux 2006), and dependent on context at best. As Jones and Holmes (2011) point out, many programmes target women in their role as mothers and primary caregivers, thereby reinforcing and perpetuating patterns of gender inequality rather than lessening their levels of vulnerability. Indeed, very few social protection programmes make explicit provisions for informal care, with even fewer programmes addressing engendered patterns of care (Chopra, Wanjiku Kelbert, and Iyer 2013). In some programmes, such as in Mexico, a direct transfer of cash to women was found to increase domestic violence, leading to transfer being complemented with awareness campaigns and involvement of social workers. Other evidence has also shown that cash in and of itself cannot change the power dynamics within a household or change traditional gender patterns (Holmes and Jones 2013). An evaluation of the Child Support Grant (CSG) in South Africa, for example, has shown that although the receipt of the transfer by women works empowering, the entrenched gender patterns prevent any alleviation of women's care burden or improvement of income-earning activities outside of the house (Patel, Hochfeld, and Moodley 2013). An evaluation of Indonesia's Program Keluarga Harapan (PKH) concluded that husbands and male household members need to be more closely involved as, after two years of implementation, the programme had been proven ineffective in changing intra-household gender patterns or the relative position of women within the household (Arif et al. 2013).

Another vulnerable group often directly targeted by social protection programmes are children. Often these benefits are provided to (female) caregivers as opposed to children themselves, such as in the case of the Child Support Grant (CSG) in South Africa. In other contexts these are delivered directly to eligible children, including in Botswana's Orphan Care Programme. Although such a direct delivery ensures that children themselves actually receive the benefits, it can also have repercussions in terms of intra-household dynamics and create perverse incentives with respect to adults' motivations to care for children. A study in Botswana found that especially adolescents are very aware of their position as direct programme beneficiaries and that this 'status' can cause tensions between carers and children as well as between biological children (who are not programme beneficiaries) and programme recipients.

In contexts with high rates of single or double orphans, most notably in Sub-Saharan Africa, the use of cash transfers is also increasingly considered as a policy option to incentivise kinship or foster care (Roelen and Delap 2012). Although this could provide an important alternative to the eroding traditional support mechanisms provided by extended families, one should also be wary of perverse incentives. Care for orphans or other vulnerable children being accompanied by a substantial transfer may lead to the 'commodification of children' (Roelen et al. 2011). The provision of care to children being motivated by monetary considerations may result in worse rather than better quality of care and even put a child at a higher risk of abuse and neglect. Generally, the more closely related children are to their kin, the better the quality of care is (Barrientos et al. 2013).

#### **4. Implementation synergies – limits of volunteerism**

An integration of efforts in the implementation of social protection and child protection policies makes sense; at household level, a strong delineation between issues of child protection and social protection does not exist. As

pointed out in reference to children affected by HIV/AIDS, it is the cumulative risk and multiplicity of shocks that does the greatest harm (Long and Bunkers 2013). Experience, and particularly evidence of that experience, trying to link implementation of social protection and child protection programmes is thin on the ground. Implementation synergies that are practised often entail social protection programmes aiming to ensure access to services that are important for child protection, including training and information and birth registration. Addressing the problem of child vulnerability also opens up opportunities for a more integrated frontline response, whereby the identification and assessment of needs and referral to appropriate services is harmonised (Barrientos et al. 2013).

Countries in Latin America hold most experience in streamlining services by integrating information systems and harmonising eligibility criteria. A single registry system in Brazil – CadUnico, and similar mechanisms in Colombia, Chile and also India allow for great improvements in a coherent response to vulnerable children and their needs (Barrientos et al. 2013). Zimbabwe provides one of the practical examples in Sub-Saharan Africa where implementation of social protection and child protection policies has been integrated. Following evaluation findings of National Action Plan I for Orphans and Vulnerable Children suggesting that the provision of material support successfully tackles material hardship but is less effective in addressing other violations of child protection, National Action Plan II combines the provision of material support with facilitating access to child protection services (Long and Bunkers 2013).

An important requirement for such a comprehensive response is to have a clear focal point that can identify and assess the problems at hand, respond to problems, make appropriate referrals when necessary and provide follow-up (Roelen and Long 2012). This requires knowledge of and linkages to the various different services available to vulnerable children, including social protection and child protection but also education and health. Community-based mechanisms and the engagement of community volunteers present an appealing option in resource- and capacity-constrained contexts for the implementation and delivery of services in a coordinated manner given the fairly low level of required resources and the close links to individual children and families. Communities also form the interface between government and civil society (Wessels 2009). The importance of community support structures is compounded in contexts where traditional coping mechanisms, such as provision of care by extended families, has been eroded due to for example HIV and AIDS (Germann et al. 2009).

Community-based schemes have a long tradition in providing health services to rural and remote areas (Chandang'oma and Kakoma 2008) and have played a crucial role in the response to HIV/AIDS (Krivelyova et al. 2013), both as a result of organic organisation of Community Based Organisations (CBOs) (Cook and Seymour 2013) and donor-funded mechanisms (Rodriguez-García et al. 2013). Community-based schemes are now increasingly being used in implementation of social protection and child protection programmes and sometimes a combination of such programmes, such as in Zimbabwe's National Action Plan II for Orphans and Vulnerable Children (Long and Bunkers 2013). Bottom-up involvement through community involvement is often claimed to increase ownership of programmes at community level and can create social cohesion as well as social inclusion and solidarity (Chandang'oma and Kakoma 2008). In addition, community members themselves can be said to be at the forefront of issues faced by those most vulnerable in the communities and thus most able to respond in an adequate and timely manner (Roelen et al. 2011). The fact that the involvement of community structures considerably lowers the cost of implementation is undoubtedly another important reason for their popularity. A

cross-country evaluation of community responses to HIV/AIDS illustrates the significant contribution that community volunteers make in monetary terms; the value of unpaid volunteers' time ranges from 40 to 69 percent of CBO and NGO budgets in respectively Kenya and Zimbabwe (Rodriguez-García et al. 2013). A review of different care models for children without parental care – institutional care, home based care and support, and community-based care with micro-income generation – in Nepal showed that community-based care models are most cost-effective (Pradhan, Bhatta, and Bam 2012).

Community volunteering indeed holds many benefits for the community, those benefiting from the services and the volunteers themselves. Members of the Areas Coordinating Committees (ACCs) and the Community Welfare Assistance Committees (CWACs) in Zambia, who play important roles in implementing the Social Cash Transfer (SCT) programme and other services, pointed towards increased popularity with and respect from community members, greater involvement in community issues and being perceived as more trustworthy by the community as personal benefits. The provision of support to the poorest and most vulnerable in the community and capacity building were seen as community-wide benefits (Chandang'oma and Kakoma 2008). Members of the Community Care Coalitions (CCCs) in Tigray, Ethiopia also pointed towards the personal fulfilment that acting as a volunteer brings and the benefits of helping the most vulnerable in the community (Berhane et al. 2012). Child Protection Community Committee (CPCC) members in Mozambique stressed the importance of knowledge within the community about who the most vulnerable in the community and how the use of community volunteers allows for using that knowledge to its full potential (Roelen 2011). The proximity to orphans and vulnerable children in their communities was part of the rationale behind the development of World Vision's CCCs in various countries (Germann et al. 2009). In many countries where a qualified social work force is unavailable, community volunteers can play an important role in filling the gap. In other cases, they can relieve social workers of their increased work burden, such as in Botswana and South Africa. Resulting from an extension of their tasks and responsibilities, such as the implementation and administration of social protection, and greater demand for such services, social workers have come under increased pressure (Jamieson 2013, Roelen et al. 2011).

Notwithstanding the positive contribution that community volunteers can make, relatively little attention has been paid to the limits of volunteerism in fulfilling these different roles. Little is known about underlying motives to act as a volunteer, and the pressures that volunteerism brings to individual volunteers and their families in terms of community pressure and lack of time for income-generating or other activities. Members of Community Care Coalitions (CCCs) in Tigray, Ethiopia, for example, indicated that their involvement in the implementation of the Social Cash Transfer Pilot Programme (SCTPP) interferes with their own daily activities. This proved not only a problem for the community volunteers themselves; social workers in charge of programme administration reported that cooperation with volunteers was complicated by the lack of dedicated time (Berhane et al. 2012). The absence of clear incentives also gives rise to questions over the effectiveness and quality of their work (Chandang'oma and Kakoma 2008). There is little knowledge about the pathways between community engagement and impact (Cook and Seymour 2013). In addition, it is uncertain to what extent committees are actually able to provide the wide range of (complementary) services given lack of required resources (transport, supplies), human capacity and training (literacy) and weak supply of statutory services. Research on Community Child Protection Committees (CPRCs) in Mozambique showed that despite the best of efforts, their support hardly moves beyond the provision of basic needs such as food and clothing. Illiteracy,

resource constraints, lack of awareness and weak statutory services were identified as main obstacles (Roelen 2011). A review of World Vision's Community Care Coalitions (CCCs) confirms such capacity constraints and highlights the need for better training and more solid knowledge base and set of skills to be able to provide an adequate response (Germann et al. 2009).

Finally, the role of community-based mechanisms is also subject to concerns over sustainability. Many community-based committees, coalitions or groups struggle to perform their activities once no longer supported by the NGO or donor that was instrumental in their establishment (Germann et al. 2009, Wessels 2009). Funding dries up and capacity levels is often too low to be successful at acquisition of funds. These insecurities consequently lead to concerns over sustainability of programmes relying heavily on community involvement, and volunteerism in particular. A rethink of funding modalities and of capacity building efforts is required, both of individual volunteers and CBOs and NGOs as a whole (Rodriguez-García et al. 2013). There also needs to be greater recognition of the context-specificity and the ways in which community-based engagement can lead to both positive and negative effects depending on place, problem and type of policy under consideration; there is no one-size-fits-all solution. Finally, community-based efforts should be firmly placed within the wider landscape of policies so that it becomes part of a coherent response rather than a parallel mechanism (Campbell et al. 2013).

An important step towards such a coherent response would be the establishment of a case management and referral mechanism, with one focal point that holds responsibility and oversight of service provision to children. (Roelen, Long, and Edstrom 2012). Current ongoing initiatives, such as the community-managed case management system in Zimbabwe (Long and Bunkers 2013) may offer valuable lessons learned or best practices. Lessons can also be learned from experiences with the development of a workforce that sits between a statutory social workforce and community volunteers. One such example is the Isibindi model in South Africa. The increased need for service provision for children, largely as a result of the HIV/AIDS epidemic, has instigated the development of the Isibindi model and establishment of the Child and Youth Care Worker (CYCW) workforce (Jamieson 2013). This model presents a hybrid form of service provision with a workforce that operates at the community level but has a degree and receives remuneration. This alternative form of responding to children's needs can provide a solution where demand for services is high but resources are limited whilst ensuring an adequate and appropriate response. It has to be noted that the establishment of such an alternative workforce is not without problems; there are large discrepancies in the levels of pay that CYWCs working in the public sector receive versus those working for NGOS, and the new model has also led to tensions with the statutory social workers (Jamieson 2013). Nonetheless, an exploration of how communities can be involved in the provision of services is vital for a sustainable and adequate response to children's vulnerabilities and needs. In many countries this will not require the wheel to be reinvented, but rather the re-integration of indigenous knowledge and community practice that has been largely lost in the formalisation of social work (Davis 2009).

## 5. Discussion and conclusion

This paper aimed to explore entry points for social protection into the field of child protection and critically discussing programmatic effects and implementation synergies. It provides a framework for considering such entry points, conceptualising the role of social protection in reference to its preventive, protective, promotive and transformative functions. The framework illustrates how social protection can perform such functions through its programmes directly as well through the mechanisms of implementation, delivery and administration. A review of experiences on the ground (albeit limited) leads to a critical reflection of commonly held assumptions about the role of social protection in child protection outcomes.

Social protection has the potential to positively impact on children in terms of preventing and mitigating the effects of child protection violations. Programme design can reinforce or counteract such positive effects. The imposition of conditions on the receipt of transfers can result in the desired behaviour (such as sending children to school or providing with adequate nutritional intake) to prevent child protection violations. However, it can also create perverse incentives and perpetuate or compound children's vulnerable situations. Examples from CCT and public works programmes indicate how conditions resulted in children being under- or overfed and substituting adult work with their own leisure time. Similarly, whilst a direct delivery of transfers to the targeted vulnerable groups – such as women and children, can help towards counteracting patterns of vulnerability and inequality, they can also reinforce those. Whilst many women indicate that being the direct beneficiary of a cash transfers makes them feel empowered and allows them to spend the money to the benefit of the children and family as a whole, findings show that it may increase domestic violence and intra-household tensions. The latter also holds when making children direct beneficiaries of a transfer, potentially undermining the benefit of such a transfer. These examples highlight that choices about design of social protection programmes should be subject to due scrutiny and not be guided by assumptions. Context is crucial with particular programmatic elements leading to the desired effect in one area or for one group, but resulting in adverse consequences elsewhere.

A consideration of implementation synergies, and particularly the role of community volunteers therein, emphasises that community-based mechanisms have great potential in being part of a comprehensive response to children's risks and vulnerabilities. They operate at the forefront and have the potential to identify, assess and respond to problems in an efficient and effective manner, thereby encompassing the policy areas of social protection and child protection. That said, the involvement on community organisations, and particularly on volunteers, should not be guided by misplaced idealism but by constructive realism that addresses concerns of responsibility, feasibility and sustainability. Despite the widespread willingness at community level to care for and support the most vulnerable in their midst, there are limits to volunteerism. Many volunteers live in poor circumstances themselves and the time spent on community volunteering may go at the expense of their own income generating activities. Capacity constraints are widespread and volunteers often lack the appropriate training and thereby knowledge and skills base, particularly in relation to more complex child protection matters. Weak availability of and links to government services concurrently undermines their ability to respond to problems. Finally, there are issues of sustainability. As pointed out by Wessels (2009) and Germann et al. (2009), many community-based mechanisms struggle without the continued support of NGOs or donors. As such, there is a need for critical reflection on the appropriate role of communities vis-a-vis the role of government and other stakeholders. The role of volunteers needs to be revisited in terms of their appropriate

levels of responsibility and activities, calling for more creative solutions in terms of linkages to the social workforce and statutory services. As indicated above, above all an integrated response to children requires a focal point that is able to link across services and sectors and can be held accountable for making such linkages. Government is not only the most appropriate actor for facilitating or taking on the role of such a focal point, it is also ultimately responsible for the protection and wellbeing of its population and children (Wessels 2009).

Despite the entry points and synergies identified in the framework and discussion above, this paper does not imply that the policy areas of child protection and social protection can be fully integrated or absorbed by one another. Although there are areas of considerable overlap and a strong rationale for joining efforts, both policy areas have components that are outside the remit of the other. Definitions of these two different fields illustrate the overlap and discrepancies.

*Child protection* can be considered as:

*“the set of laws, policies, regulations and services needed across all social sectors – especially social welfare, education, health, security and justice – to support prevention and responses to protection-related risks” for children”*

(UNICEF, 2008a and 2008b in (Shibuya and Taylor 2013))

*Social protection* can be defined as:

*“all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks, and enhance the social status and rights of the marginalised; with the overall objective of reducing the economic and social vulnerability of poor, vulnerable and marginalised groups”*

(Devereux and Sabates-Wheeler 2004).

Despite these definitions of child protection and social protection being broad and pointing to a wide remit of both policy areas, it is also evident that they do not fully overlap or that one does not entirely encompass the other. Whilst both point towards the realm of rights, policies and services to promote welfare and reduce risk and vulnerability, child protection incorporates the very particular issues of justice for and security of children. In more narrow terms, Barrientos et al. (2013) refer to child protection outcomes as *“a) the negative outcomes or damaging exposure of children to violence, exploitation, abuse and neglect, and b) improved outcomes or reduction in exposure to these phenomena.”* Social protection has a wider remit in terms of the population it aims to cover – poor, vulnerable and marginal groups, but a narrower focus in that it does not focus directly on reducing risks to violence, exploitation, abuse and neglect. Increased levels of funding for social protection in recent years illustrate both the opportunities and the tensions that the linkages between social protection and child protection offer; whilst such new resources can provide a new source of funding to tap into for child protection related services (Roelen, Long, and Edstrom 2012), it can also crowd out child protection interventions (Davis 2009). Stronger linkages between social protection and child protection policies have often been called for under the heading of ‘child-sensitive social protection’. Although child-sensitive social protection

seeks to maximise the potential benefits and minimise the potential negative effects for and on children (Roelen and Sabates-Wheeler 2012), it does not advocate for integration of both policy areas.

In sum, the identification of synergies and linkages between the areas of child protection and social protection should thus seek to maximize potential areas of overlap and congruence of policy impact, but not intend to conflate both policy areas into one. In doing so, it should build on the opportunities available but not lose sight of practice and experience on the ground and be informed by realism rather than romanticism.

## References

- Adato, Michelle. 2008. "Combining survey and ethnographic methods to improve evaluation of conditional cash transfer programs." *International Journal of Multiple Research Approaches* no. 2 (2):222-236.
- Adato, Michelle, and Lucy Bassett. 2012. *Social Protection and Cash Transfers to Strengthen Families Affected by HIV and AIDS*. Washington DC: IFPRI.
- Arif, Sirojuddin, Muhammed Syukir, Widjajanti Isdijoso, Meuthia Rosfadhila, and Bambang Soelaksono. 2013. *Is Conditionality Pro-Women? A Case Study of Conditional Cash Transfer in Indonesia*. Jakarta: The SMERU Research Institute.
- Barrientos, Armando, Jasmina Byrne, Juan Miguel Villa, and Paola Pena. 2013. *Social Transfers and Child Protection Florence: UNICEF Office of Research Innocenti, Brooks World Poverty Institute*.
- Berhane, Guush, Stephen Devereux, John Hoddinott, Fredu Nega Tegebu, Keetie Roelen, and Benjamin Schwab. 2012. *Evaluation of the Social Cash Transfers Pilot Programme, Tigray Region, Ethiopia. Baseline Report*. IFPRI, IDS, Mekelle University.
- Browne, Evie. 2013. *Theories of Change for Cash Transfers*. In *GSDRC Helpdesk Research Report*. Birmingham: GSDRC, University of Birmingham.
- Campbell, Catherine, Kerry Scott, Mercy Nhamo, Constance Nyamukapa, Claudius Madanhire, Morten Skovdal, Lorraine Sherr, and Simon Gregson. 2013. "Social capital and HIV Competent Communities: The role of community groups in managing HIV/AIDS in rural Zimbabwe." *AIDS Care* no. 25 (sup1):S114-S122. doi: 10.1080/09540121.2012.748170.
- Chandang'oma, Kaimfa P. , and Josephat Kakoma. 2008. *Sustainability of Voluntarism for a National Scaled-up Social Cash Transfer Scheme*. Lusaka: Ministry of Community Development Social Services Zambia, Department for International Development (DfID) and Care International.
- Chopra, Deepta, Alexandra Wanjiku Kelbert, and Padmini Iyer. 2013. *A Feminist Political Economy Analysis of Public Policies Related to Care: A Thematic Review*. Brighton: IDS.
- Cook, Andrea E., and Anna Seymour. 2013. "DFID commentary on the evaluation of the community response to HIV and AIDS." *AIDS Care* no. 25 (sup1):S4-S6. doi: 10.1080/09540121.2012.714458.
- Davis, Rebecca. 2009. *Human Capacity within Child Welfare Systems. The Social Workforce in Africa*. Washington DC: USAID.
- Devereux, Stephen, Keetie Roelen, Chris Bene, Deepta Chopra, Jen Leavy, and Allister McGregor. forthcoming. *Recursive causality and social dynamics: An alternative framework for evaluating social transfer programmes*. IDS.
- Devereux, Stephen, and Rachel Sabates-Wheeler. 2004. *Transformative social protection*. In *IDS Working Paper*. Brighton.
- Dunn, Sophia. 2009. *External Evaluation: Fresh Food Voucher Project by Action against Hunger. Dabaab Refugee Camps, Kenya*.

- Forbes, Bill, Dung Luu, Elisabeth Oswald, and Tamara Tutnjevic. 2011. A Systems Approach to Child Protection. A World Vision Discussion Paper. World Vision.
- Germann, S., F. Ngoma, R. Wamimbi, A. Claxton, M. Gaudrault, and The Community Care Coalition Study Country Teams. 2009. "Mobilizing and strengthening community-led childcare through community care groups and coalitions: A study from Ethiopia, Mozambique, Uganda and Zambia." *International NGO Journal* no. 4 (1):001-006.
- Hoddinott, John, Daniel Gilligan, and Alemayehu Seyoum Taffesse. 2010. "The Impact of Ethiopia's Productive Safety Net Program on Schooling and Child Labor." In *Social Protection for Africa's Children* edited by Sudhanshu Handa, Stephen Devereux and Doug Webb. London: Routledge.
- Holmes, Rebecca, and Nicola Jones. 2013. *Gender and Social Protection in the Developing World. Beyond Mothers and Safety Nets*. London: Zed Books.
- Jamieson, Lucy. 2013. Child and Youth Care Workers in South Africa: A Technical Brief. edited by AIDSTAR-Two Project.
- Jones, Nicola. 2011. "Strengthening linkages between child protection and social protection systems in Nigeria." *ODI Project Briefing* no. 62.
- Jones, Nicola, and Rebecca Holmes. 2011. "Why is Social Protection Gender-blind? The Politics of Gender and Social Protection." *IDS Bulletin* no. 42 (6):45-52. doi: 10.1111/j.1759-5436.2011.00272.x.
- Krivelyova, Anya, Jakub Kakiemek, Helen Connolly, Rene Bonnel, Brigitte Manteuffel, Rosalía Rodríguez-García, N'Della N'Jie, Andres Berruti, Simon Gregson, and Ruchika Agrawal. 2013. "Funding and expenditure of a sample of community-based organizations in Kenya, Nigeria, and Zimbabwe." *AIDS Care* no. 25 (sup1):S20-S29. doi: 10.1080/09540121.2013.764390.
- Long, Sian, and Kelley Bunkers. 2013. Building Protection and Resilience: Synergies for child protection systems and children affected by HIV and AIDS. In *Inter-Agency Task Team (IATT) on Children and HIV and AIDS: UNICEF, World Vision*.
- Molyneux, Maxine. 2006. "Mothers at the Service of the New Poverty Agenda Progres/Oportunidades, Mexico's Conditional Cash Transfer." *Social Policy and Administration* no. 40 (4):425-449.
- Morris, S. S., R. Flores, P. Olinto, and J. M. Medina. 2004. "Monetary incentives in primary health care and effects on use and coverage of preventive health care interventions in rural Honduras: cluster randomised trial." *Lancet* no. 364 (9450):2030-7. doi: 10.1016/s0140-6736(04)17515-6.
- Orazio Attanasio, Emla Fitzsimons, Ana Gomez, Martha Isabel Gutiérrez, Costas Meghir, and Alice Mesnard. 2010. "Children's Schooling and Work in the Presence of a Conditional Cash Transfer Program in Rural Colombia." *Economic Development and Cultural Change* no. 58 (2):181-210. doi: 10.1086/648188.
- Patel, Leila, Tessa Hochfeld, and Jacqueline Moodley. 2013. "Gender and child sensitive social protection in South Africa." *Development Southern Africa* no. 30 (1):69-83. doi: 10.1080/0376835X.2012.755872.
- Pradhan, PM., G. Bhatta, and K. Bam. 2012. "Cost-effectiveness of models of care quality for children affected by HIV and AIDS in Nepal." *Health Prospect* no. 11:19-25.
- Richter, Linda, and Sara Naicker. 2013. A Review of Published Literature on Supporting and Strengthening Child-Caregiver Relationships (Parenting). edited by AIDSTAR-One USAID's AIDS Support and Technical Assistance Resources, Task Order 1. Arlington, VA.
- Rodríguez-García, Rosalía, David Wilson, Nick York, Corinne Low, N'Della N'Jie, and Rene Bonnel. 2013. "Evaluation of the community response to HIV and AIDS: Learning from a portfolio approach." *AIDS Care* no. 25 (sup1):S7-S19. doi: 10.1080/09540121.2013.764395.
- Roelen, Keetie. 2011. Referral Mechanisms and Case Management for Vulnerable Children in Eastern and Southern Africa - Mozambique Country Case Study. Brighton: IDS.
- Roelen, Keetie, and Emily Delap. 2012. Researching the links between social protection and children's care in Sub-Saharan Africa – a concept note. edited by IDS and Family for Every Child. Brighton IDS and Family for Every Child.

- Roelen, Keetie, Jerker Edstrom, Rachel Sabates-Wheeler, and Mark Davies. 2011. Lessons from the Children and AIDS Regional Initiative (CARI): Child- and HIV-sensitive social protection in Eastern and Southern Africa. Brighton: Centre for Social Protection, IDS.
- Roelen, Keetie, and Sian Long. 2012. "Responding to the needs of vulnerable children in Eastern and Southern Africa." *IDS In Focus Policy Briefing* (29).
- Roelen, Keetie, Sian Long, and Jerker Edstrom. 2012. Pathways to protection – referral mechanisms and case management for vulnerable children in Eastern and Southern Africa. Lessons learned and ways forward. Brighton: IDS/UNICEF ESARO.
- Roelen, Keetie, and Rachel Sabates-Wheeler. 2012. "A child-sensitive approach to social protection: serving practical and strategic needs." *Journal of Poverty and Social Justice* no. 20 (3):291-306. doi: 10.1332/175982712X657118.
- Sabates-Wheeler, Rachel, Stephen Devereux, and Anthony Hodges. 2009. "Taking the Long View: What Does a Child Focus Add to Social Protection?" *IDS Bulletin* no. 40 (1):109-119. doi: 10.1111/j.1759-5436.2009.00015.x.
- Sabates-Wheeler, Rachel, and Keetie Roelen. 2011. "Transformative social protection programming for children and their carers: a gender perspective." *Gender & Development* no. 19 (2):179-194. doi: 10.1080/13552074.2011.592629.
- Sanfilippo, Marco, Chris De Neubourg, and Bruno Martorano. 2012. The Impact of Social Protection on Children. In *Office of Research Working Paper*. Florence: UNICEF
- Shibuya, Tomoko, and Vivienne Taylor. 2013. "Alternative care options and policy choices to support orphans: The case of Mozambique in the context of the SADC." *International Social Security Review* no. 66 (1):71-95. doi: 10.1111/issr.12003.
- Soares Veras, Fabio, and Elydia Silva. 2010. Empowering or Reinforcing Traditional Roles: Can CCTs Address Gender Vulnerabilities? In *One Pager No 115*: International Policy Centre for Inclusive Growth.
- Wessels, M. 2009. What Are We Learning About Protecting Children in the Community? An inter-agency review of the evidence on community-based child protection mechanisms in humanitarian and development settings. Save the Children Fund.
- White, Howard, Jennifer Leavy, and Andrew Masters. 2003. "Comparative Perspectives on Child Poverty: A review of poverty measures " *Journal of Human Development* no. 4 (3):379-396.