

Tanzania Community-Based Conditional Cash Transfer (CB-CCT) Pilot



**David Evans
HD Week**

TESTING COMMUNITY-BASED CONDITIONAL CASH TRANSFERS

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Introduction

This is the first time that:

- i) a household-level conditional cash transfer program is being delivered using a community-based approach
- ii) a social fund agency (TASAF) is being used to implement a conditional cash transfer program in Africa

Project

- Design informed by community focus groups and stakeholder workshop
- Funded by the Japanese Social Development Fund

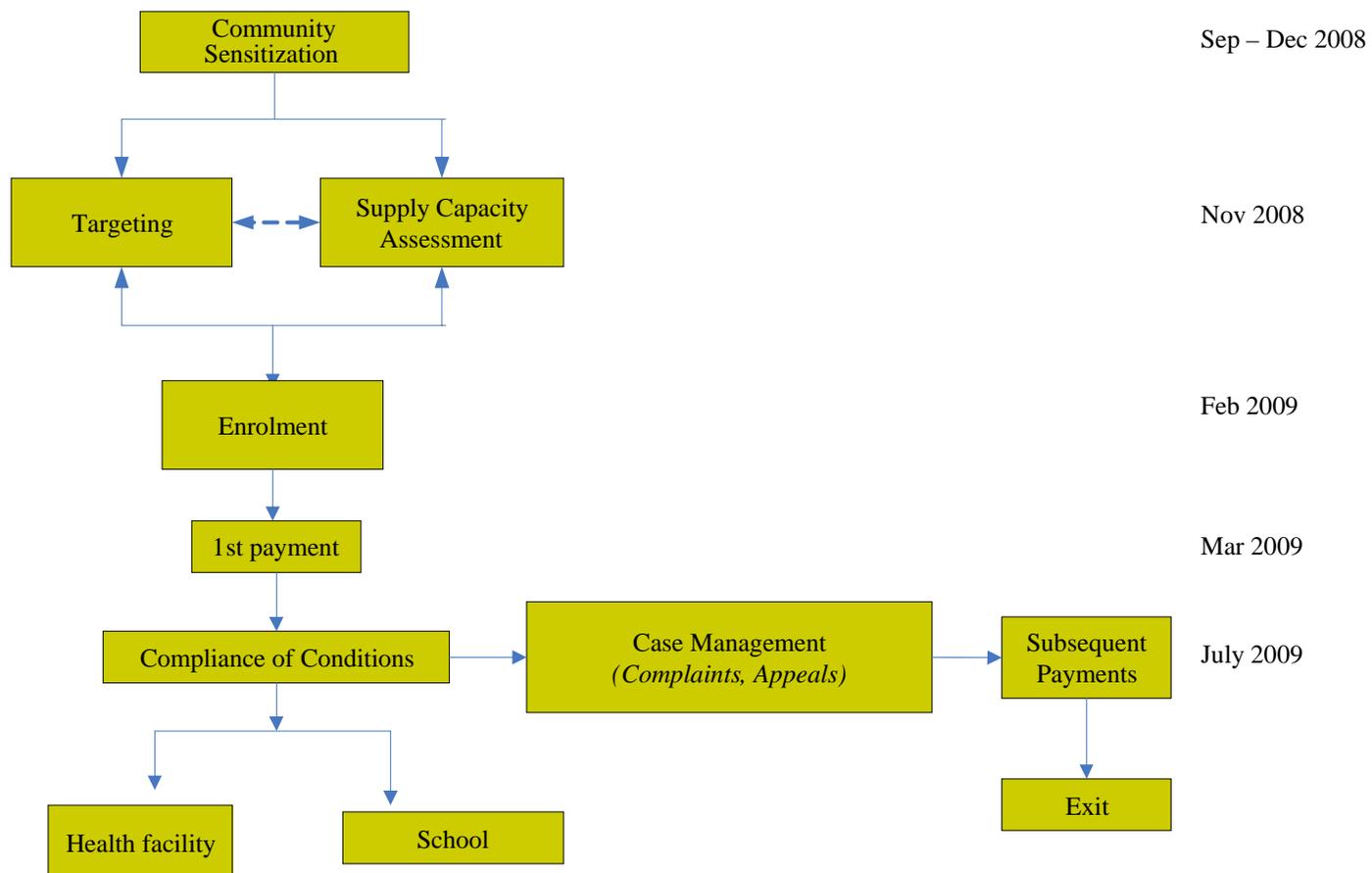
Objectives of the pilot

- (a) Develop operational modalities for the community-driven delivery of a CCT program through a social fund operation;
- (b) Test the effectiveness of the community-based CCT model and ensure that lessons from the pilot inform government policy on support to vulnerable families.

Pilot LGAs and Coverage

- The CB-CCT pilot program will be implemented in three rural districts that participated in TASAFA-I.
- Communities will be targeted where:
 - i) TASAFA-I subproject was successfully implemented
 - ii) Functioning Community Management Committee is in place.
- The pilot districts are:
 - i) Kibaha District Council (35km from Dar)
 - ii) Bagamoyo District Council (70km from Dar)
 - iii) Chamwino District Council (500km from Dar)
- The pilot will cover approximately 2,000 beneficiary households in 40 villages for a total of about 6,000 individual beneficiaries.

CB-CCT Project Cycle



Eligibility criteria

Households should meet the following three eligibility criteria in order to qualify for support:

- Having an Orphan and Vulnerable Child (OVC) or elderly person (60+) – *required*

Given that...

- **Very Poor**

“Very poor” is defined as a household meeting at least three of the following characteristics:

- Lack of a basic dwelling/shamba
 - Difficulty having at least two meals per day
 - No adult member has worked in the last month
 - Children with clothes, shoes in poor condition
 - Does not own livestock
 - Does not own land
- Not receiving benefits from a program providing similar benefits in kind or cash

Targeting

- Targeting process aims to identify, select and prioritize the poorest and most vulnerable households.
- Community management committees under the oversight of Village Council collect data from households using special screening forms.
 - Basic data on every household in the village
 - More detailed for households satisfying basic conditions
- Data entered into the Management Information System:
 - List of eligible and rejected households to be generated
 - Cross checking done by MIS
- Validation by Village Assembly
- Ranking when resources will not cover all eligible households.

Enrolment

- Enrolment of beneficiaries from eligible households will take place in each community
- Data collected during enrolment is entered into MIS, which calculates the payment

Payments and flow of funds

- Beneficiary households receive their cash benefits every two months, ranging from a minimum of US\$12 to a maximum of US\$36, based on the following calculation
 - Children = US\$ 6 / bimonthly (50% of food poverty line)
 - Elderly = US\$ 12 / bimonthly (100% of food poverty line)
- Payments will be disbursed by TASAF to bank account managed by the local government authority, then LGA will disburse directly to CMC-managed accounts.
- The CMC will make individual payments.

Alternative payment scheme

□ M-Pesa

- Vodacom allows transfer by phone: Massive growth in the last 5 months
- Potential transfers from TASAF to
 - Recipients
 - Community-management committees
- Reduce
 - Labor
 - Leakage

Conditionalities

- Conditionalities
 - Youth: schooling and health
 - Elderly: health
- Evidence on conditional vs unconditional?
 - Not definitive
 - They seem to help, although good things happen anyway.
- Notwithstanding, beneficiary children and elderly will be exempted of complying with conditionalities when:
 - Beneficiary members are chronically ill
 - Schools or health facilities are located far away from homes of the beneficiary households

Conditionalities

SECTOR	BENEFICIARY	CONDITIONALITIES	FREQUENCY OF REQUIRED COMPLIANCE	FREQUENCY OF COMPLIANCE MONITORING
EDUCATION	All beneficiary children 7-15	* Admitted in primary school	Once a year	Once a year right after enrolment period ends by filling out compliance form
	All beneficiary children, 7 up to 15	* Individual attendance	80% attendance of effective days	At the end of each trimester (3 times/year) by filling out compliance form
HEALTH	Children 0-5 years	* Visit to health facility to monitor growth	Three times per year	At the end of each visit (3 times per year) by filling out compliance form
	Children 0-2 years	* Vaccination and monitory growth		
	Elderly (60+ years)	* Visit to health facility for basic check and orientation	Once a year	At the end of the annual visit by filling out compliance form

****Children can be enrolled in standard on in primary school up to the age of 12 yrs old.**

Monitoring of Compliance

- After first payment is disbursed to beneficiaries in selected household, monitoring will be done for a period of four months
- If beneficiaries fail to comply, a warning will be issued to them, nevertheless second payment will be paid in full
- Monitoring will be continued, but if again failure to comply is observed in the next monitoring period (8 months), payments will be reduced by 25%. A second warning will be sent
- After two warnings are issued, beneficiaries that do not comply will be suspended indefinitely but allowed to return to the program

That's not all...

- Community scorecards
 - How effectively is the program being run?

- Community banking
 - Households buy shares which are then lent out to other households
 - Part of planned scale-up of a very successful FINCA program

Impact Evaluation of TASAF CB-CCT

- Goal of program: Reduce poverty!
- IE will test two things
 - CCT program in Tanzania
 - Community-based model of CCT
- Very novel program: requires a very careful evaluation

Specific questions to answer

- ❑ What is the impact of CCTs on
 - health for vulnerable children and the elderly?
 - education for vulnerable children?
 - consumption for vulnerable children and the elderly?
 - support systems for vulnerable households?

- ❑ What is the impact of a community-managed CCT program on community dynamics?

How do we answer that?

- ❑ Experimental design!
- ❑ 80 villages with experience and active CMCs from TASAF I in 3 districts
- ❑ Available resources to give CCTs to 50 households in each of 40 villages
- ❑ Use a public lottery to randomly select 40 villages to receive CCTs, 40 to serve as comparison

- ❑ Everyone receives a community banking program

Steps of the impact evaluation

1. Baseline survey (Dec 08 through Feb 09)

- Households
- Supply facilities

Randomly assign treatment and control villages for CCT (not microcredit)

2. Qualitative follow-up

- Community scorecards (July 09)
- Focus groups (Oct 09)

3. Follow-up survey I (Dec 09) *first results soon after*

4. Follow-up survey II (Dec 10)

5. Qualitative follow-up

- Focus groups (Mar 11)

Household baseline survey

Household outcomes

- Education outcomes
- Health outcomes
- Nutrition measures
- Consumption
- Savings / transfers
- Employment
- Trust in local organizations

Other elements

- Household survey
 - Community participation
 - Perceptions of service delivery
- Supply facilities surveys
 - Current enrolment, usage
 - Time spent in administration
- Focus groups
 - Empowerment effects
 - Community tensions
 - Perceptions of fairness

Other outcomes

- Targeting
 - Inclusion Errors: Give benefits to less vulnerable
 - Exclusion Errors: Leave out highly vulnerable
- Program costs
 - Set-up costs: high for a pilot
 - Variable costs: suggestive

Challenges

- ❑ Social Action Fund:
Faster than other government, but still delays
- ❑ Coordination of timing between operation and evaluation
- ❑ Leveraging local capacity for innovations

Questions?



Thank you for your attention