

Helpdesk Research Report

Impacts of social protection programmes on children

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12.07.2016

Question

What is the evidence regarding positive and negative impacts of social protection programmes on children, and more specifically, the conditions and processes that cause these outcomes? What does the literature suggest as key guiding considerations and approaches to maximise positive impacts.

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1. Overview

Despite the wide diversity of social protection objectives, instruments, design, implementation arrangements, and target groups, social protection programmes fundamentally share common overarching aims **to reduce poverty, improve economic conditions and wellbeing, and promote equity and social inclusion**, in turn building household resilience to risks and shocks (Barrientos et al., 2013; UNICEF, 2012, 2015; Sanfilippo et al., 2012; International Labour Organization (ILO), 2013). Social protection is particularly critical in supporting those most vulnerable and marginalised to reach a decent standard of living and wellbeing. Children share many of the same vulnerabilities as other members of their families and communities, but also face additional challenges, resulting in potentially more serious consequences, e.g. malnutrition, disease, abuse and exploitation, and risks of chronic, lifetime poverty and vulnerability (UNICEF, 2012; Roelen and Sabates-Wheeler, 2012). Children, like adults, have rights to minimum social security and protection and a decent standard of living (UNICEF, 2012; ILO, 2013). Children however, are

often among those most poor, deprived, and exposed to multidimensional vulnerabilities, injustices, exploitation, and risks (UNICEF, 2012; Barrientos et al., 2013; Sanfilippo et al., 2013). **Child-sensitive social protection** is premised on the rationale of equity; addressing economic and social barriers to enable more fair distribution of resources and benefits for children. Investing in children promotes their growth, development and wellbeing, providing them the opportunity to realise their full potential (UNICEF, 2012; Sheahan, 2011). This report examines the evidence and provides expert opinions on the impacts of social protection programmes on children. It includes **promising approaches and challenges**, and points to gaps in the **knowledge base** that require further and more differentiated and contextualised analysis and understanding to inform future policy and programmes.

Literature collected for this review draws from a mixture of sources: research and impact evaluations; literature reviews; strategic frameworks and programmes of major international development agencies; case studies; journal publications; agency websites and blogs – the majority based on empirical evidence; and recommendations of good practice provided by experts. As consistently raised in the literature, the body of evidence concerning impacts of social protection on children, notably child protection and particularly violence is **under-researched**. There is little rigorous evidence concerning if and how social protection can reduce childhood violence (Barrientos et al; 2014, 2013; Cook et al, 2016; Peterman et al., forthcoming; Thompson, 2012, 2014; Jones 2009). There is a solid body of evidence concerning impacts on children’s schooling, health and nutrition of children, and impacts are building up on child labour. The body of literature in this report is therefore relatively patchy. There are several **research gaps** which experts stress require much more attention and investment, such as unintended consequences of social protection interventions that may be harmful for children (Know Violence in Childhood (KVC), 26 May 2016 blog, see below websites; Thompson, 2012; Barrientos et al., 2013; ILO, 2013; Roelen, 2014; Chaffin and Ellis, 2015; Cook et al., 2016).

Key findings and insights drawn from the literature include:

Impact pathways:

- Household and community **poverty and economic inequality** are key risk factors affecting children’s wellbeing and child protection (Peterman et al., forthcoming; de Hoop and Rosati, 2014; UNICEF, 2012, 2015; expert comments). For example, evidence indicates that **child labour** is driven largely by household vulnerability, associated with poverty and risks (De Hoop and Rosati, 2014; Sanfilippo et al., 2012; ILO, 2013).
- Social protection systems which **address multi-sectors (multidimensionality)** have shown positive impacts for addressing economic and human development, multiple vulnerabilities, and both social and economic inequities (UNICEF, 2012; Tafere and Woldehanna, 2012; Sanfilippo et al., 2012; ILO, 2013; Adato et al., 2016).
- Child-sensitive social protection programmes implies that programmes are more intentionally **responsive to and address children’s rights and vulnerabilities**, addressing the range of dimensions of children’s wellbeing (UNICEF, 2012). It does not mean however programmes are necessarily child-exclusive (i.e., targeted).
- Impacts of social protection can operate through multiple channels, namely: **direct effects**, attributed directly to the programme, and **indirect effects**, changes associated more broadly with poverty reduction. **Implementation also affects impact**, e.g. agency capacity, synergies and coordination of services, and wider factors (e.g. the political economy (and political will), fiscal space, cultural views and practices) (Barrientos et al., 2013, 2014; Jones and Holmes, 2010).

- **Social protection and child protection (e.g. combatting abuse and violence) should not be viewed as two separate sectors** – social protection has great potential to decrease risks for children (KVC, 26 May 2016 website, see below; Transfer Project website, see below). Evidence on non-contributory social protection programme impacts on violence and abuse against children cautiously indicates **positive protective impacts, notably on sexual violence against female adolescents** (Peterman et al. forthcoming).
- Social transfers can contribute to **reducing negative sexual behaviours and HIV prevention**, particularly in combination with effective enabling factors (e.g. health-care services). This is by **addressing underlying causes of risks** – these are the structural social and economic drivers of adverse behaviours, e.g. early sexual debut, unprotected sex, dependence on men for economic security, migration for economic reasons, transactional sex (UNICEF-ESARO/Transfer Project, 2015).

Approaches to social protection and considerations for design and implementation:

- Key points concerning programme design particularly relevant to child labour include: **transfer amounts** must be at levels to offset income earned through child labour, and adequate **educational services** exist when promoting incentives through conditional cash transfer (CCT) programmes (Gee, 2010).
- Design features to consider which have shown CCT effectiveness and positive impacts on children include: (i) adequate **subsidy levels**: greater amounts likely provide households sufficient income to offset lost wages lost (child's schooling) allowing children to focus on school; (ii) **mandatory after-school session**: doubling the length of the school day essentially prevents the child time to work; and (iii) implementing a '**contracting process**', where families are required to sign a contract that their children will not work (Gee, 2010).
- Research shows **no evidence that cash transfers (CTs) increase child labour**. CTs and CCTs are found to **lower children's participation in child labour**, including hours worked, while also reducing (or cushioning against) detrimental effects of economic shocks, which often lead households to use child labour as a coping strategy (De Hoop and Rosati, 2014; Bastagli et al., forthcoming).
- Promising design features of CT programmes (particularly from Latin America) include **complementary social intermediation services**. These are family services intended to support beneficiaries to overcome information barriers; access other social services and programmes; and receive individual family-based social-psycho support tailored to their own needs and circumstances (Camacho et al., 2014).
- Evidence suggests that **cash combined with care (cash plus)** could maximise transfer impacts and that cash-plus interventions have shown potential, particularly for boys (Cluver et al., 2015).
- A risk in social protection programmes is **unintended consequences** – many which have direct implications on children, such as child labour. **Public work schemes** for example may have unintended consequence on children (increased work demands) – directly or indirectly – resulting in their **substituting for adults** (working on the scheme) in assuming work tasks or even replacing adults to work on the scheme (Porter and Dornan, 2010; Sanfilippo et al., 2012).
- Increased income from transfers may increase households' **productive investments** (e.g. land, livestock, small business). This may generate a **reallocation of household labour** resulting in a shift in children's work from outside to family based to meet demands of new household economic activities (ILO, 2013). **Entrepreneurship programmes may increase child labour** by

generating the need for increased labour in the household or on other tasks (De Hoop and Rosati, 2014).

- It has been reported that beneficiary households may still view child labour not as a bad thing or harmful to children, helpful to the household and a useful training. **Perceptions therefore may not necessarily change** (Sanfilippo et al., 2012; Porter and Dornan, 2012).
- **Non-material factors e.g. psychosocial and symbolic capital, or shame, peer pressure, or social status are powerful drivers of behavioural choices not** fully addressed through cash-based support or material solutions alone. Experts suggest it is vital to address material, symbolic, and social capitals synergistically in transfer programme design to tackle adverse behaviours such as risky sexual practices (Adato et al., 2016).
- Programme design modalities and services should be prepared in advance with **comprehensive assessments** to minimise unintended consequences and risks, perverse incentives and to **promote child safeguarding and protection** in social protection programmes (Thompson, 2012, 2014; Chaffin and Rhoads, 2013; Chaffin and Ellis, 2015; Roelen, 2014; ILO, 2013).
- **Implementation matters** to achieve intended outcomes and avoid perverse impacts. According to experts, ‘the way’ programmes are implemented is even more important than design features (Barrientos et al., 2014; expert comments). It is also important to **monitor progress during implementation**, including **risk indicators** (Thompson, 2014).
- **The evidence base** on social protection and impacts on children’s wellbeing, particularly violence, but also child marriage and early pregnancy, and child labour should be strengthened (Sheahan, 2011; Peterman et al, forthcoming; UNICEF, 2015; Barrientos et al., 2014; ILO, 2013; Chaffin and Ellis, 2015).

2. Concepts and impact pathways

Impact pathways

Household and community poverty and economic inequality are key risk factors affecting children’s wellbeing and child protection (Peterman et al., forthcoming; de Hoop and Rosati, 2014; UNICEF, 2012, 2015; expert comments). There is to date however limited rigorous evidence explaining causal linkages, or the degree to which other wider factors influence outcomes. The interface is not fully understood and opinions differ as to the extent that poverty underlies or worsens child protection violations. Some argue that certain child protection issues, e.g. sexual exploitation, child labour and early marriage have more direct links to poverty than others (e.g. sexual abuse). Overall however, there is consensus among experts that in broad terms, poverty, economic pressures and the resultant stresses leave children at increased risk to a range of child protection violations and ill-being (Peterman et al., forthcoming; KVC website, see below; expert comments). **Initiatives aimed at reducing poverty and economic inequalities can result in reductions in negative and harmful practices against children; support care giving practices; and strengthen children’s resilience and wellbeing** (UNICEF, 2012).

Social protection systems which address multi-sectors (multidimensionality) have shown positive impacts for addressing economic and **human development, multiple vulnerabilities, and both social and economic inequities** (UNICEF, 2012). Social protection is defined by UNICEF as public and private policies and programmes that prevent, reduce and eliminate economic and social vulnerabilities to poverty and deprivation, and strengthen resilience of children, households and communities (UNICEF, 2012, 2015).

Child-sensitive social protection programmes implies that programmes are more **intentionally responsive to and address children's rights and vulnerabilities**, addressing the range of dimensions of children's wellbeing (UNICEF, 2012). It does not mean however programmes are necessarily child-exclusive (i.e., targeted). Principles of child-sensitive social protection have been enshrined in the Joint Statement on Advancing Child-sensitive Social Protection, which was led by UNICEF and signed by 11 international organisations in 2008. This inter-agency statement sets out core tenets towards supporting children's wellbeing in the design and implementation of social protection programmes. Principles include for example: mitigating and reducing social and economic risks; mitigating effects of shocks and poverty on families, recognising those with children need support; and addressing power dynamics within the household and community when considering how children may be best reached and affected by programme interventions (UNICEF, 2012). Social protection systems incorporate a myriad of instruments and modalities, such as social cash transfers, public works, school feeding etc., each with its own objectives and approaches resulting in differentiated impacts depending on design features, implementation effectiveness and context. In this report, social transfers and public works are emphasised, reflecting the body of evidence found in the literature.

Children's wellbeing

In this review, the concept of children's wellbeing and protection is drawn from **UNICEF's strategy of child protection**, which advocates for a 'protective environment, where girls and boys are free from violence, exploitation, and unnecessary separation from family; and where laws, services, behaviours and practices minimise children's vulnerability, address known risk factors, and strengthen children's own resilience' (UNICEF, 2012, p. 48). Other conceptual approaches highlight that child-sensitive social protection programmes involve **direct improvements in children's lives**, through the provision of cash transfers, for example (Roelen et al., 2016). They emphasise it **reduces unintended adverse consequences or perverse incentives** of programmes, for example through child care when caregivers are participating in public works programmes (Roelen et al., 2016). This wide definition is adopted for this report.

Social protection impacts are examined in three main areas of children's wellbeing in this report: **child labour; risky behaviour and early marriage; and child abuse, negligence and violence**. These dimensions of child wellbeing are selected for a number of reasons: (i) they are central concerns for child development which can be significantly affected (either positively or negatively) by the design and implementation of social protection programmes; (ii) there are strong linkages and overlap between social protection and these child protection objectives – addressing vulnerabilities and risks and strengthening resilience – which can be mutually reinforcing and integrated in social protection programme design; and (iii) compared to other key sectors concerning children (such as education, health, and nutrition), there is relatively less evidence, data, and attention given to examining these dimensions, particularly of child abuse, risky behaviour/early marriage and children's wellbeing, despite these being critical areas of child welfare and wellbeing, particularly in regions of high poverty (Peterman, forthcoming; KVC websites, see below; Roelen et al., 2016; Barrientos et al, 2014; Jones and Marquez, 2014).

3. Social protection impacts on children

Child labour

Overview

De Hoop and Rosati (2014) report that ILO estimates approximately 120 million children between 5-14 years were involved in labour in 2012, about 10 per cent of children in this age group. Child labour is a violation of children's basic rights – and can have short and long-term detrimental effects on children's wellbeing (e.g. schooling, mental and physical health) (Sanfilippo et al., 2012). ILO's World Report on Child Labour (2013) focuses on social protection, and argues that **child labour is driven largely by household vulnerability, associated with poverty and risks**. ILO (2013) contends that a social security system, through establishment of national social protection floors is critical to mitigating these vulnerabilities and a central pillar to making progress against child labour. Specific social protection instruments are suggested by ILO (2013) as potentially being most relevant to child labour. These include cash and kind transfers, public works, protection for social health, disabilities, old-age security and unemployment protection. Several are examined in more detail below.

De Hoop and Rosati (2014) argue that social protection impacts on reducing child labour have shown to be high among the poorest households. They suggest that social protection, CTs and CCTs in specific, is therefore relevant in reducing child labour as it is commonly targeted to the poorest populations (De Hoop and Rosati, 2014; Sanfilippo et al., 2012; ILO, 2013). This means effective targeting matters (ILO, 2013). Importantly, CCT programmes can combat child labour through two related mechanisms: first, through the cash subsidy component, reducing schooling's direct costs and through covering the **opportunity costs for children working (wages that children would have earned)**; and second, CCTs require children to attend school, which in theory, should reduce the time children allocate to work (Gee, 2010). This underlines two key points concerning design **that transfer amounts must be at levels to offset income earned through child labour, and also, that adequate educational services exist**.

Despite a relatively sizeable body of evidence around cash transfer and child labour, in fact, **processes and impact pathways of CCT and CT interventions on child labour remain unclear**. There are knowledge gaps: the increase in school participation for example does not always translate into less child labour as these are not mutually exclusive activities; **girls' unpaid labour** – typically in household work – is insufficiently understood; there is limited information on long-term impacts and future impediments to decent work; and social protection interventions with complementary activities is yet inadequately researched (De Hoop and Rosati, 2014). Understanding the impacts of social protection on child labour is further complicated by conceptual definitions and appropriate indicators that evidence child labour impacts. Labour can be defined in multiple ways (e.g. income generating, household chores, formal employment, sectors of work) and effects can be measured through various dimensions (e.g. duration of work hours, level of hazard, health impacts). These details are seldom captured in evaluations – making assessments of social protection impacts on child labour a challenge.

A risk in social protection programmes (as in most development initiatives) is unintended consequences – many which have direct implications on child labour. **Public work schemes** for example may **have unintended consequence on children** – notably concerning increased work demands – directly or indirectly – **substituting** for adults (working on the scheme) by assuming tasks or replacing adults to work on the scheme (Porter and Dornan, 2010; Sanfilippo et al., 2012). **Conditionalities** of CCTs may create

unforeseen impacts resulting in reducing overall child welfare. When workloads are sustained for example, study and leisure time is reduced for children. Increased income benefits from transfers may increase households' **productive investments** (e.g. land, livestock, small business) which may drive a **reallocation of household labour**, resulting in a shift in children's work from outside to family based to meet demands of the new household economic activities (ILO, 2013).

Evidence

Evidence of social protection impacts on child labour are examined in several systematic literature reviews, comparative studies and case studies. De Hoop and Rosati (2014) conduct a robust systematic literature review of social protection impacts specifically on child labour, reviewing empirical evidence of both CTs (including pension schemes) and CCTs. They review a total of 30 studies - mostly peer-reviewed, consisting of a range of quantitative methodologies covering seven CT and 23 CCT programmes. The authors report that the research shows **no evidence that CTs increase child labour** – an underlying concern of social transfer programmes – and that CTs and CCTs in fact lower children's participation in child labour, including hours worked, while also reducing (or cushioning against) detrimental effects of economic shocks that often lead households to use child labour as a coping strategy.

Similar findings are reported in a rigorous literature review of 201 studies of CT and CCT programmes conducted by Bastagli et al. (forthcoming). Evidence in this report drawn from the 80 studies on child labour shows that although over half the CT studies find no statistically significant result on child labour. All the studies concerning intensity of children's work showed statistically significant reductions in child labour time. The authors summarise that, 'perhaps the strongest and most consistent message emerging from the evidence reviewed is that a number of cash transfer programmes have led to **a consistent reduction in the likelihood and intensity of participation in child labour**' (Bastagli et al., forthcoming, p. 226). An important caveat is highlighted however, reduced child labour **could increase adult labour** which may have particular gender dimension impacts. They report that several studies indicate that mothers may be substituting for their daughter's reduced work efforts when the latter start attending school more regularly, as required in many CCTs. In their qualitative study of the public works components of the Rwanda Vision Umurenge Programme (VUP) Roelen and Sheldermine (2014) also report cases of challenges for **women balancing work and care duties**, despite that child labour is reduced. They note that this can lead to children assuming household and **informal work**, and caring for other children.

De Hoop and Rosati (2014) report findings of CT impacts which indicate that boys have strong decreases in economic activities and girls in household chores - and that the results are more pronounced among the poorest beneficiaries. This impact is echoed in results presented in Bastagli et al. (forthcoming), whose literature review found that 12 reports showed significant impacts of reduction in child labour for both boys and girls. Although somewhat mixed, evidence seems to indicate that **longer periods** on a programme leads to greater reduction in child labour, particularly among boys. Miller and Toska's (2012) longitudinal mixed method study of the Malawi Social cash transfer programme show a significant **decrease in income-generating activities outside the household** among children in intervention households (a 12 and 10 per cent difference for girls and boys respectively). However, there were increases in children engaging in **household chores** compared to non-recipient children, probably related to an increase in the households' greater investment in food, clothing etc. requiring more household activities, e.g. shopping, food preparation, tending gardens. This did not appear to interfere with school enrolment (Miller and Tsoka, 2012). Overall, the body of evidence seems to indicate that **economic causes – credit constraints – are key drivers of child labour**. Social transfers can respond to this

constraint, serving as a consumption smoothing, anti-poverty instrument contributing to reducing child labour.

Bastagli et al. (forthcoming) and Sanfilippo et al. (2012) report that CCTs in specific show a reduction in both probability and intensity of child labour. Sanfilippo et al. (2012) document case examples such as the *Bolsa Familia* CCT in Brazil, which shows that **after school sessions** heightened reductions in labour even further. Importantly however, it was reported that in many cases, beneficiary households still view child labour not as a bad thing and helpful to the household. **Perceptions therefore may not always change.** In a comparative study focusing on the Nicaragua *Red de Proteccion Social* (RPS) CCT programme comparing it with four other CCT programmes in Latin America, Gee (2010) finds that RPS lowers child labour probability by 10.7 per cent and reduces hours of work for those children already working by four hours. The decline in probability contrasts significantly with the Honduras CCT (PRAFI), while the decline in hours worked is significantly higher than those found in the Mexican *Progressa* CCT. The Brazilian *Bolsa Familia* CCT (PETI) showed the highest incentives against child labour. Based on this evidence, Gee (2010) identifies three distinguishing design features which explain how incentive structures can create these differences, and specifically, why PETI showed the strongest results: (i) adequate **subsidy levels**: the greatest amounts likely provide households sufficient income to offset lost wages (child's schooling), allowing children to focus on school; (ii) **a mandatory after-school component** doubling the length of the school day, essentially prevents the child time to work; and (iii) **a contracting process**, where families are required to sign a contract their children would not work (Gee, 2010).

De Hoop and Rosati (2014) report mixed findings regarding CCTs but overall, they find CCTs tend to reduce child labour. The authors further report that **complementary interventions with transfers show positive impacts.** For example, it was found that after-school education can further decrease child labour, but income generating interventions may *increase* child labour. **Entrepreneurship programmes can increase child labour** by generating the need for increased labour in the household and/or on other tasks. This is shown in a case reported by De Hoop and Rosati (2014) in Nicaragua where children are employed in the new household business. Bastagli et al. (forthcoming) find similar results, and report findings that CTs combined with **productive grants have shown to increase children's work** in non-agricultural labour. Sanfilippo et al. (2012) report findings that some complementary programmes such as microcredit have shown to cause **unintended negative impacts** on child labour due to the fact that children are taken out of school and start working on small household enterprises. And similarly, Porter and Dornan (2010) cite that under the Productive Safety Net Programme (PSNP) in Ethiopia, the Other Food Security Programme (OFSP), which provides access to improved agricultural technologies and assets (e.g. fertiliser, credit), may increase child labour, such as caring for livestock.

Concerning public works, evidence is somewhat mixed. Sanfilippo et al. (2012) and Porter and Dornan (2010) report that some cases of increased labour are reported due to **substitution effects for adults working on work schemes.** Findings from PSNP show mixed results on this point (Hoddinott et al., 2009; Sanfilippo et al. 2012). Hoddinott et al. (2009) find that participation in the PSNP public works contributes to a reduction in the average number of hours worked in agriculture for 6-16 year-old boys and a reduction in hours of domestic labour for younger boys age 6-10 years. More regular transfer payments had larger increases in school attendance and at younger ages, for boys, significant reductions in total hours worked. For 11-16 year girls there was a reduction in labour hours on average and an increase in school attendance. But **younger girls (ages 6-10 years) experienced worse outcomes**, with lower school attendance on average and increases in child labour (Hoddinott et al., 2009).

Again on PSNP's public works programme, drawing from their quantitative survey data of 569 rural households and 32 qualitative case studies in four rural communities, Tafere and Woldehanna (2012) contend that the substitution effect of the public works dominates (or overrides) the income effect, meaning **children were required to spend more time on paid and unpaid work** to generate additional income for the household. The authors state that the inadequate level of the public works transfers may have likely caused households to send their children to work for wages. The public works did not increase time children spent on schooling/studying and in fact it is reported that respondents in qualitative surveys mentioned children needing to sacrifice time for playing and studying to complete domestic tasks (Porter and Dornan, 2010).

Qualitative survey findings reported by Tafere and Woldehanna (2012) show that among 21 households involved in the public works, half of the children were reported to be involved in public works, and others reported helping or substituting for their parents occasionally (Tafere and Woldenhanna, 2012). These children were all below the 16 year age requirement. Parents and supervisors are reported to be well aware of the regulations, but claimed they 'just needed to get the work done' and that sometimes parents were simply unable to complete their quotas (sometimes conflicting with farming activities). Views were also reported that **work is not seen as bad or harmful**, but useful training (Porter and Dornan, 2012). Another factor raised in PSNP was that **delivery of payments was problematic** – made well after the work completed and often delayed – this caused households to resort to loans with high interest rates and/or to send their children to engage in daily wage labour. Some of these children were therefore involved in both public work and wage labour. Overall, the authors of both these studies conclude that insufficient wages failed to protect children from working in the public works and did not reduce their likelihood of engaging in wage labour.

Experts underline that there are many information gaps concerning transfers and child labour, such as schooling and child labour linkages, impact differences caused by varying transfer amounts, and effects of multi-interventions approaches. They contend these aspects should be examined more closely to better inform future social protection policy and programme design (De Hoop and Rosati, 2014; Bastagli et al., forthcoming).

Violence against children

Overview

Childhood violence (e.g. physical, emotional and sexual violence) is pervasive globally, as many as one billion children under 18 years is estimated by KVC to experience some form of violence annually (Palermo and Neijhoft, 14 June 2016, KVC website, see below). Childhood violence is harmful, leading to anxiety, depression, self-harm, post-traumatic stress disorder, problem behaviours, and risk behaviour. Norms that contribute to the perpetration and tolerance of violence are typically learned in early childhood, and continue (Palermo and Neijhoft, 14 June 2016, KVC website, see below). **A leading factor contributing to childhood violence is poverty** in its various forms (KVC, 26 May 2016 website, see below). This underpins the rationale that social protection could play an important role in addressing violence against children.

There are **several pathways** through which social protection policies and programmes could **reduce the risk of violations against children**. The causes and conditions generating childhood violence however are complex (including power imbalances, gender, cultural norms and beliefs) and poverty is but one determining aspect among others (KVC, 26 May 2016 website, see below; Sheahan, 2011). Also, there are

reports that suggest that social protection, CTs more specifically, can *cause* inter-generational violence and tensions in the household (Berg and Seferis, 2015). Berg and Seferis (2015) found some evidence of this in their broad literature review of cash-based interventions in Lesotho and Zimbabwe.

It is recognised that there are knowledge gaps concerning processes leading to reduced violations of children, and more specifically, how social protection programmes and policies can prevent childhood abuse and violence (Peterman et al., forthcoming, UNICEF, 2015). An expert roundtable on social protection and child protection was organised by UNICEF and Know Violence in Childhood held in Florence in May 2016 (see website links below) to share evaluation findings on social protection and child violence. Conclusions of the workshop suggest that **social protection and child protection should not be viewed as two separate sectors** and that social protection has great potential to decrease risks of abuse of children. One promising approach is the **cash-plus intervention**, involving a **layering of different services and support mechanisms**, including incorporation of intermediary/follow-up mechanisms (KVC, 26 May 2016 website, see below; Transfer Project website, see below; Camacho et al., 2014; Jones and Marquez, 2014; Barrientos et al., 2014; Cook et al., 2016). Despite its importance, child protection/violence issues are rarely included as integral components of social protection programme design, and seldom evaluated (Sheahan, 2011).

Evidence

In their study of social protection programme impacts on child protection and more specifically violence and abuse, Barrientos et al. (2013) and Barrientos et al. (2014) contend that impacts can operate through multiple channels including direct effects, impacts attributed directly to the programme, and indirect effects, changes associated more broadly with poverty reduction. **Implementation also affects impact**, including agency capacity, synergies and coordination of services, and wider factors such as the political economy (and political will), fiscal space, cultural views and practices (Barrientos et al., 2013; Jones and Holmes, 2010). Based on a review of social transfer impacts on child protection outcomes drawing from 79 impact evaluation studies covering 45 programmes in 28 countries, Barrientos et al. (2013) identify key principles that appear to generate positive impacts. These include: (i) implementing a social transfer through a comprehensive systems **multidimensional approach** with linkages between the transfer and other child protection services and support; and (ii) giving attention to **implementation features and quality**, including communication, staff capacity, and intermediation (household support).

A review of the evidence on non-contributory social protection programme impacts on violence and abuse against children incorporating 31 studies globally conducted by Peterman et al. (forthcoming) provides an evidence base cautiously indicating **positive protective impacts, including sexual violence among female adolescents**. On average, the authors report that one in four studies find statistically significant protective programme impacts on childhood violence. Although there is evidence for adolescent violence prevention concerning sexual violence among females (notably in Africa), there is less clarity on impacts on younger children. Regional differences were found to be important, which has implications for further needed research. For example sexual violence and its relationship to HIV was of importance in Africa. In Latin America, research focused on violence in the home, impacts on younger children; with programmes more centred on rights-based approaches and a comprehensive 'systems approach'. The authors contend that not enough is known about the inter-relation of social transfers and child violence due to lack of research focus and data collected on this issue.

Given vast differences in regional and national contexts, conditions and readiness, experts recommend future research is directed particularly on **unintended adverse consequences of transfer programmes**

resulting in childhood violence, and on impacts of ‘**light touch**’ complementary interventions, such as communication strategies, case management and referral systems, family development support services (KVC, 26 May 2016 website, see below; Transfer Project website, see below). Despite positive impacts, CTs and CCTs could generate perverse unintended effects and harm to children and this should be assessed, as Roelen (2014) recommends, with much greater scrutiny. Roelen (2014) recommends critically **analysing pathways of adherence to conditions** and going beyond theory of change assumptions.

There are promising examples that seem to positively impact child violence. One CT programme from the Democratic Republic of Congo implements an effective approach to addressing children as victims of abuse. A **code of conduct agreement** (outlining favourable treatment of children) is signed by beneficiary households volunteering for family-based care as a condition to foster children. This is combined with training and rigorous monitoring. This proved to be an effective measure ensuring positive child care practices. This example merits attention in safeguarding children’s wellbeing (Roelen, 2014; Thompson, 2012).

Promising experiences from Latin America are also reported: in Chile and Columbia, social protection programmes – specifically CTs – include **complementary social intermediation services**. These family support services are intended to support beneficiaries to overcome information barriers, access other social services and programmes, and also importantly, to receive individual family-based social-psycho support tailored to their own needs and circumstances (Camacho et al., 2014). An aim of the service is **promote positive family dynamics** and skills to better address risks, and also navigate social programmes. **Regular home visits** are core features of the programme. In addition to preferential access to several other social programmes, the programme monitors family conditions closely for three years. Evaluations have indicated this support has generated considerable improvements in household wellbeing (e.g. family dynamics). Despite that the service is not focused on children specifically, there are obvious implications for children’s wellbeing through improving the family/household environment.

Risky behaviour and early marriage

Overview

Early marriage particularly for girls can result in a number of long-term negative consequences: it may limit schooling and further education, cause early pregnancy, generate unequal power dynamics within the marriage, often resulting in domestic violence (including rape), and cause higher rates of HIV infection (married adolescent girls have higher rates than unmarried) (Sheahan, 2011). Social protection programmes are showing impacts on decreasing risky behaviours and early marriage, and more specifically reducing HIV infection rates (UNICEF-ESARO/Transfer Project, 2015; Sanfilippo et al., 2012; Handa et al., 2014;).

Social transfers can contribute to reducing negative sexual behaviours and HIV prevention by **addressing underlying causes of risks**, which are the structural, social, and economic drivers of adverse behaviours e.g. early sexual debut, unprotected sex, dependence on men for economic security, migration for economic reasons, and transactional sex (UNICEF-ESARO/Transfer Project, 2015). **Social protection**, particularly in combination with other **enabling factors** (e.g. health-care services), can support reduction in risky behaviour even further (Cluver et al., 2015; Adato et al., 2016). There are several impact pathways where social protection can play an important role in mitigating adverse risky (sexual) behaviours and practices. Two key channels include: (i) **poverty reduction**: CTs can improve the

household socioeconomic conditions and reduce economic stress that drives adverse behaviours; and (ii) **incentives generated through conditionality** where positive social practices and behaviours can be promoted. Experts concede that although the evidence is still limited about whether CTs can incentivise improved behaviour, the body of literature addressing these issues is positive and expanding (Heise et al, 2013; Barrientos et al., 2014; Sheahan; 2011).

CT programmes, more specifically, are beginning to be seen as a key strategy integral to HIV prevention (UNICEF-ESARO/Transfer Project, 2015). Sanfilippo et al. (2012), for example, show there is potential for HIV-prevention impacts particularly in contexts where around 70 per cent at least of targeted households are HIV/AIDS affected (e.g. Zambia, Malawi, South Africa). Despite increased focus in examining these issues (noted by UNICEF-ESARO/Transfer Project, 2015) a number of knowledge gaps remain in understanding the impact pathways through which social protection can impact risky sexual behaviour, HIV prevention, and early marriage. These include understanding: the effects of conditionalities; if cash alone or cash-plus programmes are most effective; impacts of transfer amounts and periodicity; and unintended consequences and how to mitigate these negative risks (Heise et al., 2013; Miller and Samson, 2012).

Evidence

The evidence base regarding impacts on risky behaviours generated by social transfers (CTs and CCTs) is growing. Sanfilippo et al (2012) report evidence from the Malawi Zomba CCT, a programme targeting young women to **incentivise them to remain in or if dropped out, return to school**. A proportion of the transfer is earmarked for their guardian, while 30 per cent is given to girl beneficiary. Impacts have been positive, showing not only large increases in school enrolment, but a decrease in early risky behaviour and marriage. The authors report (based on findings from Baird et al., 2009) that 27.7 per cent of dropouts in the control group married during the preceding year, compared with 16.4 per cent in the treatment group, a reduction in marriage among baseline dropouts of more than 40 per cent. The treatment group dropouts were 5.1 per cent less likely to have become pregnant over the preceding year, a statistically significant reduction of over 30 per cent. Finally, a reduction in the onset of (self-reported) sexual activity is 5.5 per cent points for initial dropouts and 2.5 per cent points for initial schoolgirls, reductions of 46.6 per cent and 31.3 per cent respectively.

A synthesis of evidence provided In UNICEF-ESARO/Transfer Project (2015) presents a number of findings collected from evaluations of four national programmes (Zimbabwe, Malawi, Kenya and Zambia) clearly showing positive impacts on adolescent behaviours and wellbeing - with particular emphasis on HIV risks. Findings include: with four years participation in the Kenya CT, young people (15–25 years) enrolled on the programme were 30 per cent more likely to delay their sexual debut than those who were not enrolled; a reduction in pregnancy under the South Africa Child support grant; reduced school dropout rates by 82 per cent and pregnancy by 63 per cent two years later found in the Zimbabwe adolescent orphan girls in school programme, with additional impacts reported of more equitable gender attitudes and girls being more informed about sexual risks compared to control groups.¹

In a study that examines impacts of the South Africa transfer on HIV-high risk behaviours (e.g. transactional sex, casual partners), Cluver et al. (2015) present quantitative findings surveying over 3,500 adolescents (10-18 years) in urban and rural areas. The research also compares the CT intervention with **“CT-plus” benefits, defined as additional care and support**, for example, CT with school feeding, or

¹ References to the detailed results of each evaluation can be found in UNICEF-ESARO/Transfer Project (2015)

additional parental/teacher support. Girls accessing cash/food support showed reductions in HIV-risk behaviour, and when cash was integrated with care, incidence of girls' HIV-risk behaviour was halved. For boys, findings indicated that cash/food alone had no effect, but integrated **cash-plus care halved the incidence of risky behaviour**. Findings suggest that cash combined with care could maximise effects and that cash plus shows potential particularly for boys.

In another study, de Walque et al. (2012) examine CCT impacts on risky and unsafe sexual behaviour and HIV prevention strategies in Tanzania, surveying 2400 recipients (18-30 years) in a randomised control trial over one year, tested at baseline and in month 12. The study found that with the incentive of a cash transfer, there was a significant reduction in sexually transmitted infection (STI) tests compared to the control group. Payments were at two values; significant findings in differences were found only among recipients receiving higher payments (20 USD monthly). There were no significant results for those receiving half that amount, of 10 USD (de Walque et al, 2012). Plus, these results were found only in the later round. Despite limitations to the study (e.g. duration, variation of treatments, limited scale), the study holds promising implications concerning CCT impacts on reducing risky sexual behaviours and HIV prevention and provide directions needed for further research (e.g. transfer value impacts, duration of transfer programme). In sum, **the CCT has incentivised safer sexual practices**, which would contribute to HIV prevention.

In contrast, findings drawn from qualitative research of the South Africa Child Support Grant conducted by Adato et al. (2016) indicate much more complex pathways of transfer impacts on risk behaviour. Their findings raise questions concerning direct causal relations between cash transfers and positive impacts on risky behaviour, specifically in regards to social dependence. The authors provide evidence suggesting that an economic-based pathway is only partial, and that **non-material factors – namely psychosocial and symbolic capital, shame, peer pressure, social status – are powerful drivers of behavioural choices** which are not fully addressed through cash-based support or material solutions alone. They argue that it is vital to address material, symbolic, and social capitals synergistically in the design of transfer programmes to tackle adverse behaviours such as risky sexual practices. The authors contend greater understanding and more effective approaches are needed to address the non-material causal pathways that drive risky behaviour. There are promising approaches being tested, such as combining cash and social services (e.g. the Chile example mentioned in this report) and combining cash transfers with gender sensitisation and awareness which can inform further policy and programme design.

Evidence on impacts of social protection programmes on early marriage is relatively thin (Hinds, 2015). In a literature review of CT programmes on child marriage and lessons learned, Hinds (2015) reports that few programmes are designed to specifically address early marriage, due in part to the difficulty in capturing this aspect given the **needed time horizon and also due to lack of indicators**. One successful case is presented by Hinds (2015) concerning the Punjabi Female School Stipend Programme (FSSP) in Pakistan; this is a female-targeted CCT aimed to promote girls' education by providing a quarterly subsidy conditional on school attendance (80 per cent). An evaluation conducted five years into the programme cited by Hinds (2015) shows evidence that participating girls delayed marriage and had fewer births (by 19 years). This study also indicated **that treatment length matters**; longer exposure in the programme decreases likelihood of early marriage. Further, participating girls were more likely to progress to complete middle school and worked less. Evidence also suggests that girls from the poorest households are more likely than others to delay marriage.

Another case of early marriage impacts presented by Hinds (2015) is the CCT *Apni Beti Apna Dhan* programme in India, a government initiative to incentivise families to delay daughters' marriages.

Targeting the poorest disadvantaged household, the programme provided a small cash transfer to mothers upon birth to a girl, and a government-purchased savings bond for the daughter, redeemable at 18 years if unmarried. A quasi-experimental analysis based on 1500 beneficiary and 1500 non-beneficiary households found positive impacts: participating girls were less likely to be married early than non-beneficiaries. However, there are questions whether the programme was able to tackle embedded pervasive cultural norms (Hinds, 2015).

In another case study, Sheahan (2011) describes the Bangladeshi Female Secondary School Stipend Project, established to increase girls' enrolment in secondary schools through delaying marriage and childbearing. Married girls are excluded from the programme which creates a **direct incentive for parents to delay marriage**. A review of the project suggested the stipend contributed to the rise in girls' enrolment in secondary school, however questions remain concerning a number of aspects: the extent of the stipend's direct impact in delaying marriage; empowerment of girls and women; and enhancing employment opportunities, all which require a broader impact assessment.

Barrientos et al. (2014) examine child marriage in their review of evaluations of social protection impacts on child protection. Findings indicate that **child-focused social transfers with conditionalities on schooling reduce child marriage**, particularly with financial incentives for student retainment, as in the Mexico *Progres/Oportunidades* CCT programme, or the India case described above. However, the authors state that conditionality is not a requirement to achieve positive impacts on child marriage; despite that poverty-mediating effects of social transfers on child marriage could be large, other factors notably social norms and gender roles are also important.

A number of lessons and guidance points are provided by Hinds (2015) based on reviewed cases of social protection and early marriage. These include: CCTs may be more effective in increasing marriage age than CTs, and that CTs (cash only) may risk even increasing early marriage – for example using the CT for dowry payments – however, results are somewhat mixed on this point; another point raised is that greater understanding and further research is needed of targeting and scaling up promising interventions to ensure cost-effectiveness; also, further research is needed to understand the **multi-dimensional drivers of early marriage** (e.g. social, cultural, economic) in order to inform policy and programme design. Hinds' (2015) literature review suggests that an **integrated package** of approaches and interventions (e.g. mentoring, awareness) in combination with CTs will be required to address the complexity of factors influencing child and forced marriage arrangements.

4. Guiding considerations

Evidence synthesised through research and impact evaluations of existing social protection programmes provide a number of insights useful in informing the design of social protection policy and programmes to **strengthen impacts on the wellbeing and protection of children**. Below is a summary of key considerations raised in the literature focussing on the three main areas of children's wellbeing examined in this report:

1. Social protection interventions that address the **multidimensional vulnerability of household and children in particular are advised** (UNICEF, 2012; Tafere and Woldehanna, 2012; Sanfilippo et al., 2012; ILO, 2013; Adato et al., 2016). **A single instrument alone cannot ensure child well-being and reduce risky (sexual) behaviour or child labour**. An **integrated approach** or package of social protection instruments combined with other supportive interventions, implemented over time, is beneficial. **Complementarity** and synergies between transfers, social welfare services,

legislation and communication for development is recommended (Berg and Seferis, 2015; Thompson, 2012, 2014). In sum, child-sensitive social protection should protect children from risks and vulnerability while responding to their multiple material, developmental and psychosocial needs (Adato et al., 2016).

2. **Prepare programme design modalities and services in advance: comprehensive assessments are recommended to minimise unintended consequences, risks, and perverse incentives, and to promote child safeguarding and protection** in social protection programmes. A range of design considerations merit attention such as: child-focussed versus household interventions; conditionalities or not; gender implications. Programme design measures, for example agreed upon **'codes of conduct,'** prove to be effective in promoting positive childcare practices from the start. Other good practices showing promise include to: conduct pre-assessments; include child-sensitive training for staff; identify appropriate site locations for public works; carry out baseline surveys to enable continuous monitoring of impacts on children and include **specific indicators** that track these aspects (e.g. child labour, early marriage); provide childcare in public work schemes to prevent older children taken from school to care for children (Thompson, 2012; Chaffin and Rhoads, 2013; Chaffin and Ellis, 2015; Roelen, 2014; ILO, 2013).
3. Child-sensitive social protection interventions, particularly public works, should **support caregivers to avoid adverse** choices in balancing work and care duties, and coping strategies that are harmful to children - namely their taking on household and informal labour duties (Sanfilippo et al., 2012; Roelen and Shelmerdine, 2014). During programme design, attention should be given to **understand intra-household labour arrangements** – if replacement of children for household tasks or reallocation of children's labour outside the home may occur – and to minimise incentives to substitute children for adult work (ILO, 2013).
4. Examine the potential impacts when determining the **value of transfers** provided to beneficiary families. This should improve understanding of dynamics and conditions of thresholds of impact – with the objective to reduce opportunity costs of sending children to work (Sanfilippo et al., 2012; De Walque et al., 2013).
5. A number aspects during design should be considered concerning public works and impacts on children: **minimum age levels of workers should be defined, and monitored** – some have advocated for 18 years in adherence to UN Convention on the Rights of the Child and to avoid negative impacts on schooling, while others recommend 15 years (Tafere and Woldehanna, 2012; Thompson, 2012, 2014); assess risks at works sites to **safeguard physical danger risks** for children at and near work sites; consider distances to work sites to reduce travel time for participants – **travel time** can affect caretakers' other responsibilities (e.g. production, household, care), affecting children and labour substitution in the household. Plan before the scheme starts (Thompson, 2012).
6. **Strengthen social welfare support services and programmes** for children and families and promote synergies with other dimensions of social protection to address the wide range and dimensions of children's vulnerabilities (e.g. violence, exploitation, abuse, risky behaviour, labour). Linkages with social services, **family support intermediaries** and home visits are modalities to complement transfers that further support household wellbeing. This requires **coordination**, and scaling up programmes in many cases; suitable and effective institutional and staff capacities; and ensuring adequate budget allocations (Jones and Holmes, 2010; ILO, 2013; UNICEF, 2012; Camacho et al., 2014; Sheahan, 2011).

7. Give attention to implementation. **Implementation matters** to achieve intended outcomes and avoid perverse impacts. According to experts, ‘the way’ programmes are implemented is even more important than design features (Barrientos et al., 2014; expert comments). It is also important to **monitor progress during implementation**, and essential to incorporate children’s wellbeing indicators in process and outcome monitoring (e.g. the number of children receiving cash transfers who drop out of school to carry out income-generating activities). Risk indicators should be monitored throughout the programme (Thompson, 2012, 2014).
8. **Strengthen the evidence base** on social protection and impacts on children’s wellbeing, particularly violence, but also child marriage and early pregnancy, and child labour (Sheahan, 2011; Peterman et al, forthcoming; UNICEF, 2015; Barrientos et al., 2014; ILO, 2013; Chaffin and Ellis, 2015). Evaluations should assess and (if possible) compare effectiveness **of different transfer modalities, including cash-plus**, and the processes and effectiveness of combinations of programmes and complementarities. It is also recommended to assess whether child-focussed instruments or broader poverty-reduction mechanisms are most beneficial (Barrientos et al., 2014). Research is also needed on **delivery and operational issues**, including levels and frequency of transfers, targeting, and institutional arrangements.

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Key websites

- Linking social protection and human rights:
<http://socialprotection-humanrights.org/about/>
- UNICEF - Social protection strategic framework:
http://www.unicef.org/socialprotection/framework/index_61577.html

- Young Lives:
<http://www.younglives.org.uk/content/social-protection>
- The Transfer Project:
<https://transfer.cpc.unc.edu/> <http://www.knowviolenceinchildhood.org/newsevents/detail/11>
- Social protection and childhood violence – expert roundtable organised by Know Violence in Childhood and UNICEF:
<http://www.knowviolenceinchildhood.org/newsevents/detail/11>; and
<https://www.unicef-irc.org/knowledge-pages/Social%20Protection%20and%20Childhood%20Violence:%20Expert%20Roundtable/>
- Childwatch – International research network:
<http://www.childwatch.uio.no/>

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Suggested citation

Pozarny, P. (2016). *Impacts of social protection programmes on children* (GSDRC Helpdesk Research Report 1381). Birmingham, UK: GSDRC, University of Birmingham.

About this report

This report is based on four days of desk-based research. It was prepared for the Australian Government, © Australian Government 2016. The views expressed in this report are those of the author, and do not necessarily reflect the opinions of GSDRC, its partner agencies or the Australian Government.

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