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# Strengthening or Weakening the State Citizen Social Construct: Governance and Accountability Dynamics of Non-State Actors Providing Social Protection for Vulnerable Children in Western Kenya

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**Acronyms**

| | |
|---|---|
| CBO | community-based organisation |
| FBO | faith-based organisation |
| GoK | Government of Kenya |
| NGO | non-governmental organisation |
| NSA | non-state actor |

**Abstract**
An abundance of non-state actors (NSAs) are providing social protection to vulnerable children in the Western and Nyanza regions of Kenya. While their support ranges from education and health to livelihood needs, their number and range of activities are not well known. This study investigated the role of NSAs in enhancing the wellbeing and citizenship rights of vulnerable children by examining their governance and accountability mechanisms and how these affect performance.

The study was conducted in Kisumu East sub-county in Kisumu County, Kakamega Central sub-county in Kakamega County, and Ugenya, Ugunja, Gem and Alego Usonga sub-counties of Siaya County. The first phase was a quantitative mapping of 501 social protection NSAs in the area, the second phase was an in-depth survey of 49 child-focused NSAs and their beneficiaries. Data collection techniques included structured questionnaires, focus group discussions, key informant interviews and creative child-participatory methods. Quantitative data were analysed using the SPSS software while qualitative data were sorted, organised according to themes and analysed using the constant comparative method.

NSAs ranged from local, national and international non-governmental organisations to community-based organisations, rescue centres, and youth, women's and self-help groups. Most NSAs had governance and accountability structures for reporting to donors and the State, but accountability to beneficiaries was weak. Children were largely subordinate in the interventions. Cooperation among NSAs did not involve activity implementation so duplication of services was high. NSAs relied mostly on donor funds, raising doubts about their sustainability.

NSAs make significant contributions to the well-being of targeted children, but their project approach, inability to tackle the multi-dimensionality of child vulnerability, and lack of accountability to the community make their interventions largely palliative. The government could help NSAs improve their service delivery by defining the social protection priorities for vulnerable children; fostering an integrated approach to social protection to address the multiple dimensions of child vulnerability; regulating NSAs to improve their responsiveness and ensure even distribution of social protection services for children; addressing the governance and accountability issues of NSAs through legislation; and enhancing NSA capacity through education and training.

**Keywords:** vulnerability, childhood, non-state actors, social protection, governance, accountability

# 1 Introduction

## 1.1 Background

Demographically, Africa is the youngest continent with almost 20 per cent of the world's children and youth under the age of 15. Forty-four per cent of the population is below 15 years of age and 70 per cent under 30 years of age (Ensor, 2012). Despite this, a discrepancy exists between the rhetoric on young people's importance and the stark reality of the lives of many of them, who are disproportionately represented among the poor. The effects of poverty are accentuated for young people because poverty can persist through their life course and can be transferred to the next generation. Additionally, because of their subordinate positioning in social relations, children and the youth are constrained from above by adults and from outside, based on euro-centric models. The dependency of their well-being on the care provided in their micro and macro contexts means that they are unable to access socioeconomic and political rights on their own. Consequently, they have an accompanied citizenship, or what Jones and Wallace (1992) call social citizenship 'by proxy', through membership in units headed by adults. Social protection services must address young people's material, social and subjective vulnerabilities.

Social protection for children in Kenya must be seen against the backdrop of generalized insecurity intertwined with skewed macroeconomic and microeconomic policies, the devastating effects of conflict, rapid urbanisation, and HIV and AIDS as a shock in the care context. These interact to intensify children's vulnerability and have historical roots in the constraints of the state to ensure universal social service provision. Kenya is sixth in Africa for child friendliness, owing to its robust legal and policy regime for protecting children (UNICEF, 2009). The African Child Policy Forum (ACPF) ranked Kenya first in Africa for its efforts to establish appropriate legal and policy frameworks for children (ACPF, 2008). Social protection is at an important stage in the country with the creation of a unified policy framework, the adoption of critical reforms, and the growth in investments (GoK, 2012). The state has a range of social protection programmes in agriculture, health and nutrition, and education for social assistance, social security and health insurance. Child-specific programmes include the pilot targeted cash transfer programmes for orphaned and vulnerable children, school feeding programmes, and expanded access to education through the free primary education policy of 2003 and the free secondary education policy of 2008. Others include targeted health programmes and fee waiver in public hospitals for children under five years. The bill of rights in the 2010 constitution enshrines the right to social security, and the national social protection policy articulates a vision for progressively attaining that right.

Major gaps and inherent weaknesses exist in policy implementation, and social protection to address child poverty is inadequate. The lack of a universal social protection policy and programme means that current social protection interventions are targeted and are incapable of dealing with the scale of challenges for vulnerable children. The limited state outreach has resulted in a proliferation of non-state actors (NSAs) supporting and implementing social protection programmes to complement government efforts or fill the gap they leave. In Kenya, as in many African countries, social protection is largely absent, rudimentary and often left to households and/or individual coping strategies (Wuyts, 2006).

The range of NSAs in Kenya includes non-governmental organisations (NGOs), foundations, trusts, faith-based organisations (FBOs), community-based organisations (CBOs) and a plethora of small-scale community-based associations. NSAs owe their existence to the rich tradition of philanthropy and volunteerism with roots in the communal relationships in African society. One main type of NSA is NGOs, whose emergence was without critical reflection on their roles or ideologies, especially due to their anti-government pressure (Wadongo and Abdel-Kader, 2011). Most NGOs started in the 1970s owing to the failure of bilateral government aid agreements and as a response to the failure of the public sector. As confidence eroded in the corrupt, inefficient and repressive Moi regime, donor funding was increasingly channelled through NGOs, bypassing the state. The belief was that this would strengthen the relationship between the state and civil society and support programming that is locally driven and culturally relevant, contributing to democratisation

and development and influencing policy (Ndegwa, 1996). The phenomenal growth in NGOs in Kenya exceeded 150 per cent in a period of 10 years (Fowler and Rich, 2000). The opening up of the democratic space facilitated the continued growth of NGOs from 2001 to 2009 with estimates indicating that 400 are registered annually. There are currently about 7,500 registered NGOs, which contribute Kenya shillings 130 billion to the economy annually.

There is a range of formal and informal social protection providers in Kenya. Informal social protection providers are not guided by formal regulations but do not necessarily contravene them. CBOs are an important informal social protection provider in Kenya. They are registered under social development departments at the local district or county level. They encompass a wide range of organisations such as self-help, women and youth groups and savings and loan organisations, some of which may not be registered.

The Kenyan context has a tremendous self-help movement that has enabled civil society actors to operate openly and widely. The government's Sessional Paper of 2006 acknowledges NSAs as a potent force for social and economic development (Jillo and Kisinga, 2009). Most are informal membership groups, and some 29.3 per cent of adults in Kenya belong to such groups. While the assumption is that such groups enhance inclusion, contribution requirements might lock out those who cannot afford the set contributions (Jillo and Kisinga, 2009).

There is often multiple memberships in informal groups, and especially those that provide financial services, with people belonging to several groups. A survey in 2009 by FDS (2009) found that 38.7 per cent of Kenyan adults (7.2 million) belonged to at least one informal financial services group. These groups act as a safety net in which people pool resources to help them cope with social and economic shocks and risks.

### 1.2 Problem statement

Many NSAs are addressing child vulnerability in Kenya, among them a plethora of informal social protection schemes such as funeral societies, and self-help, capital pooling and savings groups. Their services range from burial support to collective farming and include microcredit for small business and support for livelihood, health care and education. The exact number of NSAs that serve as a safety net of first or only resort for vulnerable groups and their range of activities in social protection for vulnerable children are not well known and neither is the scope of their work well documented.

A study in selected communities in Uganda and Nyanza and Western regions of Kenya (Okwany et al., 2011) found a vibrant informal and local social protection system for children. The schemes were resilient despite the external shocks in the childcare environment, but their variability was not well understood, as many of them were unregistered. It was important therefore to map the whole range of NSA social protection mechanisms in the region. Archer (1994), Hulme and Edwards (1997), Ndegwa (1996) and Okwany (2004) note that many of the interventions are fragmented charitable alternatives of care that rely on donor funding, have limited outreach and suffer overlap, duplication and lack of coordination. Two key concerns, their lack of accountability to the community and their failure to meaningfully engage with the community, are linked to their reliance on foreign funding. This affects their autonomy and increases the likelihood of their becoming mere implementers of donor policies (Hulme and Edwards, 1997). Okwany et al. (2011) found a few NSAs circumventing these paternalistic relationships by engaging donors in addressing the needs of communities rather than passively obeying donor demands.

It was important to understand the accountability and governance arrangements of NSAs, because: 1) social protection with participatory governance systems is more responsive to the context of the beneficiaries, 2) the design of programmes ought to respond to and prioritise the demand and supply situation and articulated needs of the beneficiaries, including children and the youth, and 3) accountability mechanisms enhance the capacity of participants to negotiate their entitlements to social protection, as opposed to interventions whose underlying ethos is charity, and to hold service providers accountable for their actions.

The objective of this study was to investigate formal and informal non-state social protection providers in Western and Nyanza regions of Kenya and their role in enhancing the well-being and citizenship rights of vulnerable children.[1] The study examined the governance and accountability arrangements of these NSAs and how they influence their performance and responsiveness to beneficiary needs in providing child-sensitive social protection to address poverty and to enhance the citizenship rights of vulnerable children.

### 1.3 Research questions

The research sought to answer three questions:

- What NSAs are providing social protection services for vulnerable children in Western and Nyanza regions of Kenya and what range of services do they provide?
- In what ways are these NSAs' governance systems responsive to the socioeconomic context in which child vulnerability is situated?
- What effects do accountability arrangements (upward, downwards and vertical) have on access and performance of these NSAs?

[1] Private for-profit organisations involved in social protection provision were outside the scope of this study.

## 2 Literature review and analytical framework

### 2.1 Child-sensitive social protection

Social protection is a poverty reduction strategy and a public strategy to mitigate vulnerabilities, deprivation and risks. It comprises mechanisms that may be delivered by the state or NSAs. In Kenya social protection is defined as "policies and actions aimed at enhancing the capacity of and opportunities for the poor and vulnerable to improve their livelihoods and welfare" (GoK, 2011). This involves a range of measures and activities to secure education, health care, social welfare, livelihood, access to stable income, and employment. According to Kabeer (2008), social protection aims to integrate concerns about social security and poverty reduction into a unified framework.

Devereux and Sabates-Wheeler's (2004) conceptualisation of social protection is particularly useful because it defines the delivery mechanisms (formal, non-formal and informal) and the measures (protective, preventive, promotive and transformative). Protective measures are safety nets for income and/or consumption; preventive measures aim to stop households from resorting to negative coping strategies such as child labour; promotive measures enhance income and capabilities through investments in education, healthcare and protection; and transformative measures promote social justice by ensuring equity and empowerment.

Social protection strengthens the social contract between the state and citizens. Such a relationship means focusing on new forms of participation, responsiveness and accountability and requires the active involvement of all beneficiaries. Transformative social protection as a right is thus important for this study since it is the basis for enhancing downward accountability. This means that beneficiaries, including children, have ownership in the interventions, can hold providers, including the state, accountable and can negotiate their inclusion in social protection programmes if they feel under-served or have been unjustly excluded. This is important because beyond material vulnerability, for children vulnerability has social and subjective dimensions.

Jones and Sumner's (2011) three-dimensional approach to conceptualising well-being goes beyond the conventional material dimension to include a relational dimension that focuses on engagement within social networks and with institutions, and a subjective dimension that relates to young people's perceptions of lived experiences. For children, social vulnerabilities are seen in the lack of voice or recognition and can provide a fertile ground for their deliberate abuse and exclusion. Poorly designed programmes can exacerbate or contribute to inequalities (Luttrell and Moser, 2004). Adequate transformative social protection is a right and a fundamental prerequisite for addressing material and social vulnerability, and a means for enhancing citizenship.

To be transformative, most social protection interventions for children have complementary programmes and services that in principle may not be considered social protection but that are necessary to ensure an effective enabling environment (UNICEF, 2011). These include health, education and social welfare services. Social protection for children is therefore conceptually different from but directly linked with child protection. Child protection is defined as "measures aimed at preventing and responding to violence, exploitation, abuse and unnecessary separation from family, while social protection helps to build a protective environment for children by reducing the socioeconomic barriers to child protection". (UNICEF, 2011:6).

### 2.2 Responsiveness in social protection

We view responsiveness as the degree to which an intervention is relevant in light of the vulnerabilities being experienced by the intended beneficiaries. NSAs

> "… deliver quality work when their work is based on a sensitive and dynamic understanding of beneficiaries' realities; responds to local priorities in a way beneficiaries feel is appropriate; and is judged to be useful by beneficiaries" (Bond, 2006:v).

Conway's (2001) framework on the principles of responsive social protection delineates the characteristics of good social protection programmes. Those important for our research

included responsiveness to the needs of those targeted; affordability; sustainability built on the principle of utilising the capability of the individuals and households; avoiding creation of dependency and stigma; and flexibility to cater to emerging needs and scenarios.

Other critical factors in our assessment of the responsiveness of social protection programmes included the extent to which the community's capacity is utilised; whether or not the processes create stigma or have impact on social relations; whether the selection and inclusion criteria and other governance characteristics make programmes affordable and sustainable; and programme responsiveness to the gendered context, particularly in improving decision-making for women, using their resources, increasing the assets they control, paying attention to household decision-making, and fostering respectful relationships. The important principles for child sensitive social protection are outlined by DFID (2009) and consider the age and gender-specific risks and vulnerabilities of children throughout the lifecycle; mitigate the effects of shocks, exclusion and poverty; and provide support for households with children. Child-sensitive social protection also makes special provisions to reach vulnerable children, includes their voices and subjective experiences, and supports the intersecting and interdependent needs of vulnerable children and their caregivers.

*Childhood and citizenship*

Childhood is a social construct that varies by gender, class, spatial location, and over time and must be "defined internally and in its own context" (Montgomery, 2008:3). Childhood is also constructed by local, national and international politics, which is important because it influences how children are provided for and engaged at those levels. Children's subordinate positioning socially means that adults' ideas about childhood constrain their agency and voice, denying them status as citizens. According to Manning and Ryan (2004), citizenship can be viewed in the legal formal sense of rights and responsibilities, including social protection rights, and in the broader and more substantive sense of participation, access and involvement in the political and socioeconomic life. We follow Tilly's (1995) conceptualisation of citizenship as a continuum ranging from 'thin' citizenship with limited rights, entitlements and interactions to 'thick' citizenship where rights and interactions between states and their subjects are strong and well established. While social protection is a right and the state is the final arbiter for this right, children's social and relational vulnerability means that their voice and participation are often muted or missing in policy action, pointing to their constrained agency and thin citizenship. This is exacerbated for vulnerable children whose carers also have thin citizenship.

### 2.3 Social relations in social protection

In measuring responsiveness and performance of social protection interventions, we used as indicators the effects of social protection on social networks and social capital. According to Crowley (2005), little analysis has been conducted on the *indirect benefits* to communities, in particular the social networks created as a by-product of how non-profits conduct their mission. He argues for the need to investigate the effectiveness of NSAs in creating social networks and the benefits that accrue from the networks for the community as a whole.

Social protection may have positive or negative inter-household and community impacts. The negative factors may be associated with access to or exclusion from a programme through its targeting. An intervention could enhance solidarity, sharing, cooperation or social cohesion, or affect the wellbeing of beneficiaries through erosion of shared cultural values due to suspicion, resentment and jealousy arising from targeting and other processes (Ellis, 2008; Kirera, 2012; MacAuslan and Riemenschneider, 2011).

### 2.4 Governance and accountability and NSA performance

Basset et al. (2012) define governance in social protection as the set of incentives and accountability relationships that influence the way in which providers are held accountable for their ability to deliver services with quality and efficiency. NSA governance arrangements

can heighten their performance because institutional aspects such as voice and accountability influence performance of interventions. Performance is multidimensional and encompasses efficient use of resources and effective service provision, where governance is seen as a complex set of arrangements for accountability (a principal–agent relationship) and cooperation (a principal–principal relationship) (PASGR, 2012).

Accountability is an attribute of a relationship between at least two actors and the means by which individuals and organisations report to a recognised authority or authorities and are held responsible for their actions (Edwards and Hulme, 1995). Accountability in the human rights sense is the character of the relationship between rights holders (beneficiaries) and duty bearers (service providers). Foresti et al. (2007) note that in accountable relationships the beneficiaries have voice to demand that service providers be answerable for their actions. It must also be possible to sanction or reward decision-makers for their performance (enforcement). And according to Jacobs and Wilford (2010:799), since accountability is closely related to distribution and enactment of power, it can deepen oppression or further emancipation. More accountable systems of governance and service provision tend to be more efficient and effective; thus demand-driven services are more likely to be responsive and to have enhanced performance.

'Upward accountability' is associated with relationships up the social protection and support chain, between an NGO and its donor, for example. 'Downward accountability' deals with relationships down the social protection chain, between the implementing NGO and its constituents. This also means how an organisation engages with its beneficiaries, builds relationships and is accountable for results in ways that enable learning and improvement towards the achievement of its mission (Keystone, 2006). Accountability to children is an important aspect since most interventions tend to frame and view children as lacking in agency. We argue that within the theoretical framework of new sociology of childhood (see for example James and Sprout, 1997; James et al., 1998; Mayall, 2002; McDonald, 2007; Prout, 2005) children are actors who exercise agency on the range of issues affecting them. To be accountable, policies and programmes must address the relational and subjective dimensions of children's vulnerability.

For NSAs, research shows that there is tension between upward and downward accountability. These two concepts are useful in this research since high-quality downward accountability is a measure of the effectiveness of social protection organisations, and upward accountability could affect NSA performance, since actors high in the chain can control the NSA through allocation of funds, network relationships or symbolic power (Jacobs and Wilford, 2010). Upward accountability is a good management tool in meeting the needs of donors, but donors sometimes set parameters as to what is to be measured and how, often at the expense of beneficiaries' perspectives. This undermines downward accountability and affects the performance and responsiveness of interventions to the needs of the beneficiaries (Jacobs and Wilford, 2010).

We sought to see if a relationship existed between upward and downward accountability and how these influenced NSA performance, and if organisations existed where funds flowed down the aid chain in a way that allowed beneficiaries to control the support they received. A relationship is likely between an NSA's downward accountability and its responsiveness and performance, since organisations that are responsive to beneficiaries' needs involve them in decision-making, thereby enhancing (the perception of) performance.

### 2.5 Conceptual and analytical matrix

Table 1 provides a summary of the definitions and key concepts central to the research data collection and analysis.

**Table 1: Summary conceptual and analytical framework**

| Variables | Indicators |
|---|---|
| Governance and accountability features | *Rules and norms*<br>What are the internal regulations and operating guidelines that structure access, including:<br>- What is the membership?<br>- What are the criteria for eligibility, targeting, benefit levels and exit or graduation? |
| | *Roles and responsibilities*<br>- Is an organisational/management structure in place and are staff substantively involved in operations?<br>- Is the organisation interacting with the state and other actors through peer reviews and monitoring design?<br>- What is the nature of relationships with and reporting to donors?<br>- Are there oversight mechanisms, both internal and external, including involving the State?<br>- Are there different methods of managing information (monitoring mechanisms)?<br>- What mechanisms exist to structure and guide the participation of children, caregivers and stakeholders in activities and the provision of feedback?<br>- Are there procedures for handling grievance (and attention to child beneficiaries)? |
| Performance | *Responsiveness*<br>- How are the services responsive to need/demand and to child vulnerability and rights (include children's voice)?<br>- How are the services responsive in the gender and generational contexts?<br>- How adequate are the benefit levels?<br>- Are the interventions enhancing social relations within the community?<br>- What is the longevity and responsiveness of an intervention to the changing context of the beneficiaries? |
| | *Coverage*<br>- What is the proportion of eligible children and families reached by the service? |
| | *Accessibility*<br>- Which groups of children are getting services and which are not reached?<br>- How equitable is the process of accessing support and how responsive is it to the diversity of childhoods, including gender, ethnicity, ability and location?<br>- Are potential beneficiaries receiving information on eligibility and other relevant communication?<br>- Are the interventions facilitating access to complementary/supplementary services from other NSAs and the state?<br>- What norms govern the services being provided? Are they provided as a charity that perceives beneficiaries as deserving or non-deserving? |
| | *Sustainability*<br>A perspective on the longevity of interventions and/or received support and adaptability to the changing contexts of beneficiaries.<br>- Do beneficiaries have continuous access to the resource base to cover their needs after exit from the organisations? |

| Variables | Indicators |
| --- | --- |
| | *Efficiency*<br>-To what extent are services delivered on time and when needed?<br>- Is there collaboration with other NSAs to enhance efficiency? |
| | *Quality of support*<br>- Is support reliable and based on beneficiaries' needs?<br>- Does the support reduce stigma and crowding-in of local and cultural resources?<br>- Is the support provided promotive, and does it enhance asset-building and livelihood enhancement as a pathway to transformation?<br>- Does the support promote the capacity of households/community structures to strengthen care giving/receiving? |

## 3 Methodology and study approach

### Study sites

The research was conducted in Kisumu East sub-county of Kisumu County, Kakamega Central sub-county in Kakamega County and Ugenya, Ugunja, Gem and Alego Usonga sub-counties of Siaya County. Where data for the sub-counties were not available we used data for the entire county. These counties were selected based on the host of vulnerabilities facing residents.

Children age 0–14 years constitute 45 per cent of the population in Siaya, 47 per cent of the population in Kakamega (KNBS and SID, 2013) and 44 per cent of the population in Kisumu (Moulidi, 2011). These counties have low-ranking socioeconomic indices. Some 38 per cent of the people live below the poverty line in Siaya, 40 per cent in Kisumu and 49 per cent in Kakamega, compared with the national average of 45.2 per cent. The high level of vulnerability is linked to both poverty and high HIV and AIDS prevalence, which are some of the highest in the country, particularly for Siaya and Kisumu counties. Kisumu has the second highest HIV and AIDS prevalence for the 15–49 year old cohort at 18.7 per cent, and Siaya 17.8 per cent, compared with the national average of 6.7 per cent (KNACC, 2014). These counties have some of the highest numbers of children affected by HIV and AIDS.

Unemployment levels are high, standing at 5.2 per cent in Siaya, 8.2 per cent in Kisumu and 6.3 in Kakamega (KNBS and SID, 2013). According to Oucho et al. (2014) rampant unemployment in western Kenya is a key driver of youth out-migration to urban areas, where the pull factor is better opportunities. However, most migrants move into poverty in urban poor locales. An estimated 48 per cent of the urban population lives within the absolute poverty bracket, compared with the national average of 29 per cent (UN-Habitat, 2007). This has exerted pressure on social services including housing, public health, water and sewerage systems. Insecurity is a concern with increased marginalisation and unemployment. The development space left by the State's limited outreach in these contexts underlies the proliferation of formal and informal NSA interventions.

### 3.2 Study design

*Mapping of NSAs*

Working with research assistants and enumerators based in the study communities, we inventoried all organisations providing social protection in the study areas. This was verified and completed with information on registered organisations from the district social development offices and the Ministry of Gender, Children and Social Development and supplemented with Web searches. Using the snowball technique, we utilised a participant-driven sampling approach in which organisations visited referred researchers to similar organisations in its network. This provided additional advantage by enabling estimation of the social networks connecting NSAs.

Data were collected using a structured questionnaire. In addition to pre-testing the questionnaire, we carried out on-site training of research assistants and enumerators in the three districts through modelling the data collection techniques and observing them collect data. This process enabled refining of the data collection processes and techniques. Data were entered into the SPPSS programme for analysis.

*In-depth study*

The in-depth study aimed for deep understanding of the organisations providing social protection for vulnerable children. Out of the 489 NSAs identified in the mapping exercise, 195 that focused on vulnerable children age 0–14 years were selected through purposive sampling based on attributes important for the research (Table 2).

**Table 2: NSA's main target groups**

| | Main target age group (years) | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| | Children | | Youth | Adults | Elderly, | Not specified | |
| District | 0–8 | 9–14 | 15–24 | 25–59 | 60 and over | – | Total |
| Kisumu | 40 | 44 | 36 | 43 | 18 | 24 | 205 |
| Kakamega | 18 | 27 | 14 | 3 | 0 | 11 | 73 |
| Siaya | 23 | 43 | 52 | 65 | 11 | 17 | 211 |
| Total | 81 | 114 | 102 | 111 | 29 | 52 | 489 |

In the in-depth study, children were regarded as the primary beneficiaries and their parents or caregivers as secondary beneficiaries. The mapping survey revealed that NSAs had on average 40 primary beneficiaries, so the in-depth study anticipated that secondary beneficiaries would be about that or slightly fewer. Fifteen primary and secondary beneficiaries were selected from each of the 49 NSAs for a total of 735 beneficiaries as a preferred sample, disproportionately allocated across the NSA types. During data collection it became clear that it was not possible to reach all the beneficiaries, as some of the children were in school, while some childcare institutions drew caregivers from different districts. A total of 301 primary and 359 secondary beneficiaries were reached for the survey.

Data from the questionnaire were triangulated with focus group discussions, key informant interviews with stakeholders and other qualitative research techniques. These included in-depth interviews and child participatory data collection techniques, specifically the use of verbal and visual prompts to 1) capture children's voices, subjective experiences and perspectives, and beneficiary involvement; 2) build on the strengths of the multiple stakeholders in the research process; and 3) give attention to power and children's voice. Data analysis was interpretive and based on research questions and themes that emerged. Secondary data collection involved a review of the literature on social protection generally and child-sensitive social protection specifically.

*Ethical considerations*

Ethical concerns guided the research process, and child protection was a key consideration in the selection of and engagement with children. The study methods were child friendly and risks to children were minimised. Before fieldwork started, the research team underwent sensitivity training to ensure adherence to child friendly techniques and ethical considerations. Additionally, the settings for interactions with children struck a balance between the need for privacy for confidential data collection and the need for enhanced trust and transparency. Data collection followed the principles of informed and on-going consent of caregivers and assent of the children, based on clear and respectful communication, including in taking photographs or recording video or interviews.

## 4 NSAs and social protection for children

### NSAs in the study sites

The mapping exercise identified 501 organisations, 204 from Kisumu, 212 from Siaya and 85 from Kakamega (Table 3).

**Table 3: NSAs in the study areas**

| | Frequency | | |
|---|---|---|---|
| Type of NSA | Kisumu | Siaya | Kakamega |
| Local NGO | 15 | 7 | 16 |
| National NGO | 21 | 7 | 9 |
| International NGO | 11 | 4 | 3 |
| Local CBO | 28 | 66 | 25 |
| Trust | 2 | – | 1 |
| Foundation | – | 7 | – |
| Care institution | 1 | 6 | – |
| FBO | 12 | 11 | 4 |
| Youth group | 22 | 25 | 3 |
| Self-help group | 42 | 23 | 14 |
| Rescue centre | 27 | 33 | – |
| Women group | 18 | – | 1 |
| Other | 4 | 1 | – |
| Total | 203 | 190 | 76 |

We categorised the NSAs in the way stakeholders or beneficiaries defined them or how they had been registered.

*Nongovernmental organizations (NGOs)*

NGOs are regulated under the Non-Governmental Organisations Coordination Act of 1990, where they are defined as

> "a private voluntary grouping of individuals or associations not operated for profit or for other commercial purposes but which have organised themselves nationally or internationally for the benefit of the public at large and for the promotion of social welfare development, charity or research in the areas inclusive but not restricted to health relief, agricultural, education, industry and supply of amenities and services" (Kameri-Mbote, 2000:8).

In 2013, the Public Benefits Organisation (PBO) Act replaced the 1990 act, but it has not yet been effected (GoK, 2013).

The PBO Act defines an international NGO as an organisation registered outside Kenya that operates within Kenya under Section 10 of the Act. It is located nationally or internationally and engages in charitable activities. This act excludes organisations that benefit members directly. We distinguished between local NGOs that operate in a county and national NGOs with operations in several counties.

*Care institutions and rescue centres*

Care institutions comprised children's homes and care homes for both children and vulnerable adults. Rescue centres were institutions in which vulnerable children could access support such as food, clothes or health services. Some rescue centres were run by NGOs or FBOs, but we separated them since the governance structures for some of them differed from those of NGOs.

The in-depth study found that rescue centres were created for short-term support for vulnerable children, who were presumably to be integrated back into their communities. The proliferation of institutional-based support was fuelled by the moral panic around the AIDS

orphans 'crisis' premised on the social rupture thesis that holds that in the wake of the HIV and AIDS pandemic, the kin-based system had ruptured and could not provide support for vulnerable children. Our data contradict that notion and support empirical evidence that household and community support in many African contexts is stretched and overextended but remains resilient (see Ainsworth and Filmer, 2002; JLICA, 2009; UNICEF, 2004).

*Trusts and foundations*
Only a few charitable trusts or foundations exist in the study area. In Kenya, a trust is an entity created to hold and manage assets for the benefit of others. Charitable trusts may be formed by way of a trust deed, but they must be of benefit and exclusively charitable (National Council of Law Reporting, 2012). A charitable foundation may be established as a limited company or a charitable trust under the Trustee Act. Trusts or foundations in the study sites were undertaking activities that are traditionally performed by NGOs.

*Informal organisations*
The mapping exercise found various non-formal organisations including community-based organisations (CBOs), women, youth and self-help groups**.** Among the NSAs, CBOs were dominant in the three counties. There were overlaps in what constituted a self-help group, a CBO or a women's group, but we categorised them based on their registered status.

### 4.2 Registration of NSAs
Registration of NSAs was deemed an important factor because it was an accountability means for NSAs to the registering body. Most NSAs were registered (Figure 1). Data from the district social development office indicate that many informal groups often register in anticipation of support. For instance, a rush of registration renewals occurred before the 2012 general elections. A few unregistered informal groups operated under the name of registered groups, especially when applying for funding.

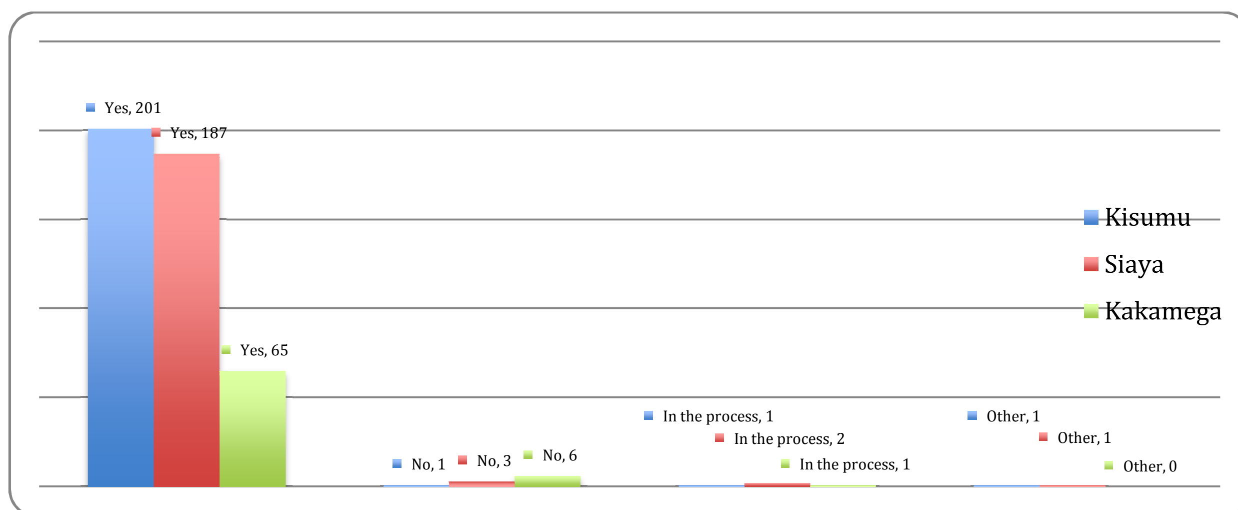


**Figure 1: NSA registration**

### 4.3 Historical emergence of NSAs
More than half of the NSAs were founded 2001–2010 (Table 4), and 64.9 per cent of local NGOs and 51.4 per cent of national NGOs were registered in that decade. A quarter of the CBOs and informal groups were only registered over the 2011–2013 period, probably as a response to increasing vulnerability from poverty and HIV and AIDS. Clan and kinship-based organisations did not have emergence periods, and were reported to always have been present. The in-depth study found that some NGOs had recognised the critical role of these

traditional social protection mechanisms and were crowding-in their work of supporting vulnerable children.

**Table 4: Emergence of NSAs**

| Period founded | Frequency | Percentage |
|---|---|---|
| 1913–1980 | 21 | 4.2 |
| 1981–1990 | 11 | 2.2 |
| 1991–2000 | 71 | 14.2 |
| 2001–2010 | 252 | 50.3 |
| 2011–2013 | 124 | 24.8 |
| Not indicated | 22 | 4.4 |
| Total | 501 | 100 |

### 4.4 NSAs' resource base

An organisation's resource base and source of resources are important for its survival, performance and accountability and governance mechanisms. Ebrahim (2005) argues that accountability mechanisms can reflect how stakeholders relate to each other and can lead to asymmetrical power, since dominant actors seem to be favoured.

Most NGOs received funding from national and international donors (Figure 2). The over-reliance on donor funds could result in high upward accountability to donors that is not matched with substantive downward accountability. Questions on sustainability also arise, which affects performance, since most social protection interventions phase out when funding ends. Donor funding depends on the ability to write convincing proposals, which relies on qualified staff. CBOs, which cannot hire such staff, receive disproportionately lower funding from international donors, except the few implementing projects directly with international NGOs. The politics of donor funding and the vested interests of international funders play a disproportionate and too-often inappropriate role in determining how vulnerable children are supported. This is consistent with the argument by Riddel (2007:398), that the fact that "official aid for development and the dominant narrative of development are political projects in a repertoire of international relations should be contested."

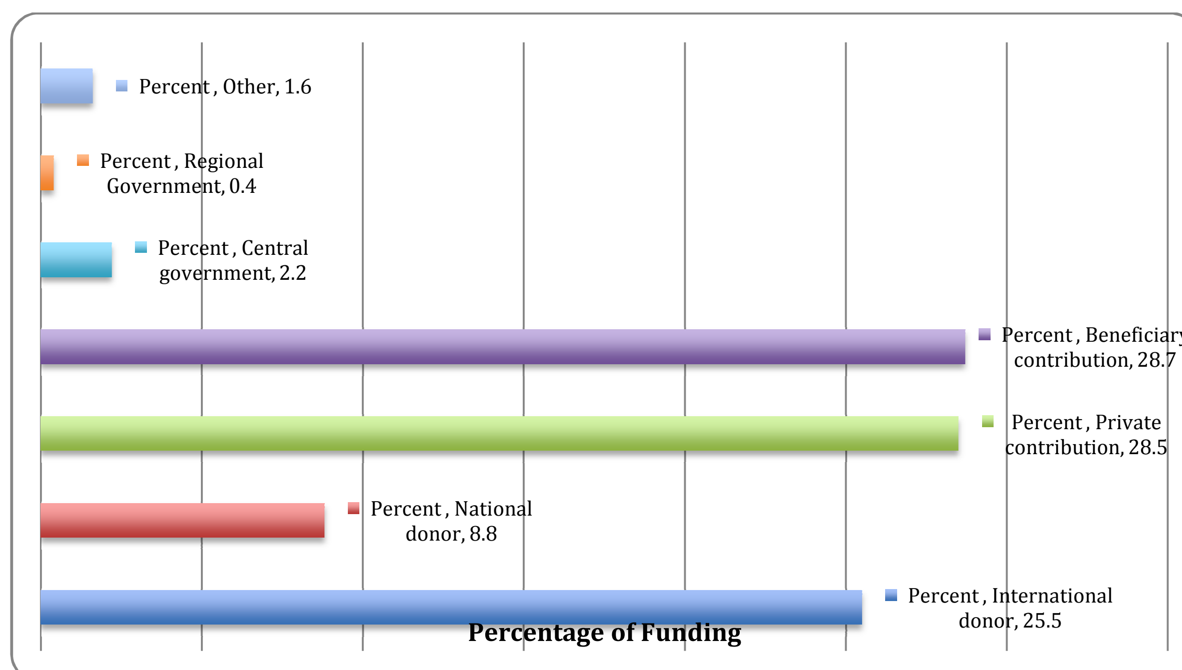


**Figure 2: NSA funding sources**

The NSAs indicated that stringent donor requirements, for example relating to annual budgets and audited accounts, which some of the small organisations do not have the capacity to provide, were a hindrance to securing funding. The sources of funds for 71.1 per cent of local and 77.8 per cent of national NGOs were international donors, with their beneficiaries contributing a negligible amount. Only 27 per cent of CBOs had international donors, 46 per cent received private contributions and 23 per cent relied on beneficiary contributions.

The data showed that NGOs received the lowest beneficiary contributions, but this was probably because in-kind contributions such as labour were not costed. Most beneficiaries, especially women, provided services for free. CBOs and other informal organisations relied on membership funds and private contributions. Inadequacy of financial resources was the biggest challenge for NSAs (94.2 per cent).

When project funding ended, most NSAs coped by reducing staff. In responding to the local context, some informal organisations and CBOs drew on local knowledge and resources such as using locally grown, nutritionally rich food for children, donated land for activities and pooling in-kind contributions including labour. Very few NGOs utilised local resources, but many of them relied on volunteer labour to reduce costs. Most volunteers were female beneficiaries and were rarely compensated for services.

The participants were not willing to divulge information on NSAs' financial resources except for a few, mostly the larger NGOs. In several cases the questionnaire was completed by programme officers who did not have this information. However, programme expenditure data were obtained from about 94 per cent of the organisations. Most of the organisations had spent less than Kenya shillings 5 million on programmes between 2010 and 2013 (Table 5). Since most of the organisations were informal groups that spent limited amounts of money on their programmes, we can conclude that the resource base for NGOs in the study site was quite lean.

**Table 5: Total NSA expenditure on programmes (2010–2013)**

| Kenya shillings | Frequency | Percentage | Valid % | Cumulative % |
|---|---|---|---|---|
| < 5 million | 365 | 72.9 | 77.8 | 77.8 |
| 5 –10 million | 42 | 8.4 | 9.0 | 86.8 |
| 10–15 million | 22 | 4.4 | 4.7 | 91.5 |
| 15–20 million | 10 | 2.0 | 2.1 | 93.6 |
| 20–25 million | 3 | 0.6 | 0.6 | 94.2 |
| 25–30 million | 3 | 0.6 | 0.6 | 94.9 |
| 30–35 million | 2 | 0.4 | 0.4 | 95.3 |
| 35–40 million | 4 | 0.8 | 0.9 | 96.2 |
| 40–45 million | 1 | 0.2 | 0.2 | 96.4 |
| 45–50 million | 2 | 0.4 | 0.4 | 96.8 |
| >50 million | 15 | 3.0 | 3.2 | 100.0 |
| Total | 469 | 93.6 | 100.0 | |

## 4.5 NSA target population and intervention areas

To gauge the interventions' response to beneficiary needs, we examined NSAs' target population by age and category and intervention areas. Mapping data included all the types of NSA activities, but the in-depth study was specific to children's services. About 42 per cent of NSAs targeted children up to 14 years old (Figure 3).

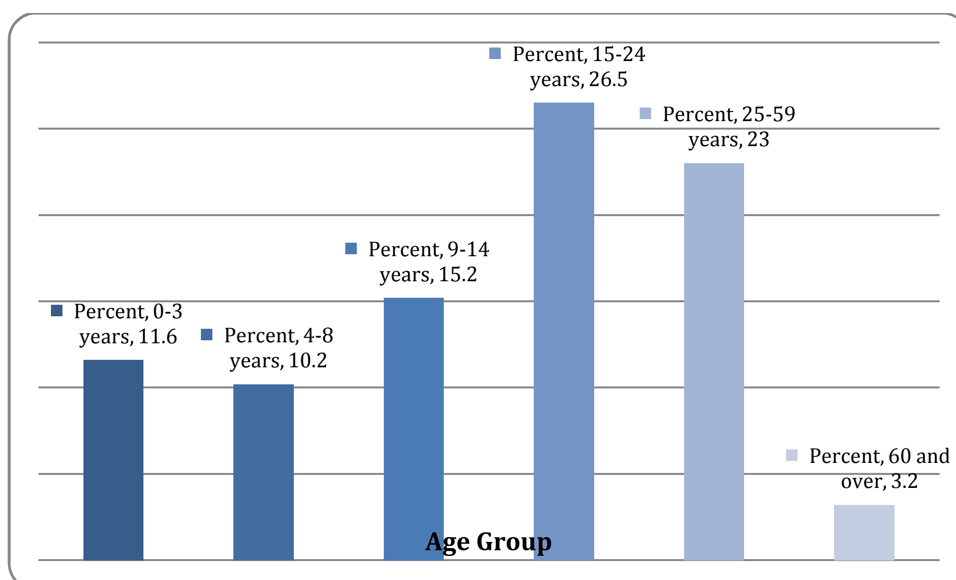


**Figure 3: NSA target groups**

The data for targeting by age were consistent with those for beneficiary categorisation by vulnerability status, which show vulnerable children as the bulk of the intervention population (Table 6).

**Table 6: Main NSA target groups**

| Categories | Frequency | Percentage |
|---|---|---|
| Vulnerable children | 239 | 20.4 |
| People living with AIDS | 197 | 16.8 |
| Orphans | 173 | 14.7 |
| Poor women | 110 | 9.4 |
| Rural poor | 87 | 7.4 |
| Girl child | 74 | 6.3 |
| Informal sector | 63 | 5.4 |
| Urban poor | 57 | 4.9 |
| People with disabilities | 56 | 4.8 |
| Elderly | 46 | 3.9 |
| Street children | 32 | 2.7 |
| Child labourers | 29 | 2.5 |
| Boy children | 11 | 0.9 |
| Total | 1,174 | 100 |

Orphanhood was a defining context for targeting as were poverty, abusive homes, early marriage due to poverty, ill health, neglect from parents or caregivers and other forms of abuse, and landlessness, especially in Kakamega. Caregivers who were targeted were often poor or living with HIV and AIDS.

### 4.6 NSA services

NSA services demonstrate the multifaceted nature of poverty and the multi-dimensionality of childhood poverty. Many organisations were offering a range of services in addition to social protection (Figure 4). The larger NSAs provided services through sponsorship programmes

while other services benefitted children indirectly through their caregivers. Informal NSAs like women's groups gave constant support and care to vulnerable children under their care and in the community, especially children living without adult caregivers (Okwany and Ngutuku, 2009).

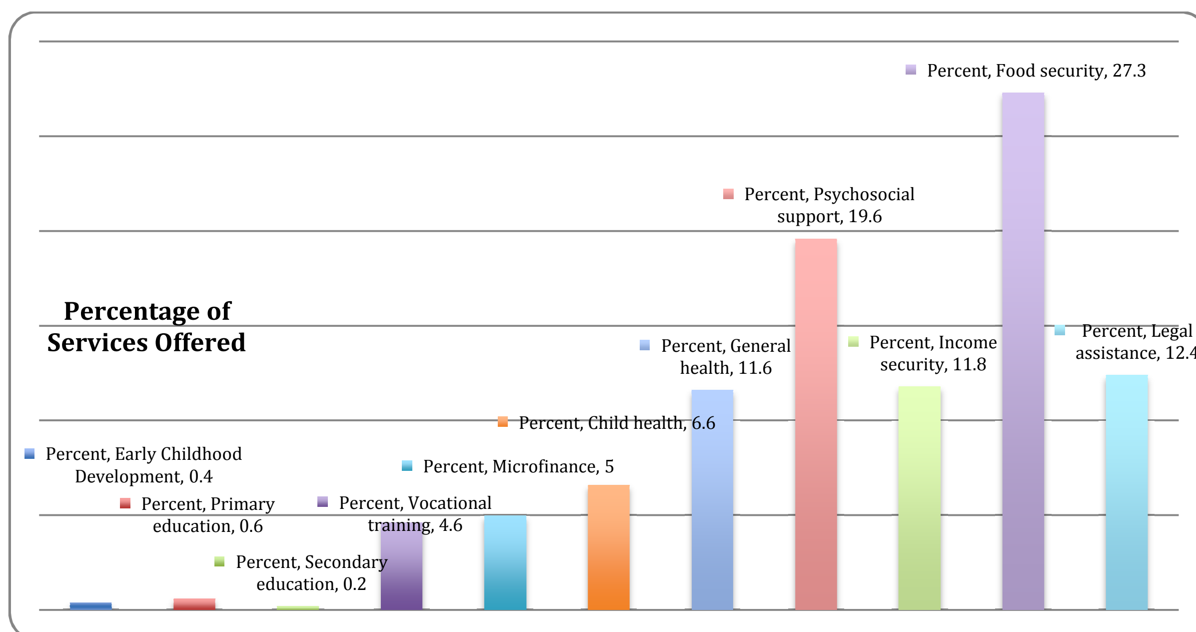


**Figure 4: NSA services**

*Education and related services*

Despite State re-introduction of free primary education in 2003 and subsidized secondary education (2008), education-related support was the key NSA service. In early childhood development centres, education support was provided to all the children. School feeding programmes provided the children one hot meal a day at school and in some cases activities such as camps where nutritious meals were served. Several rescue centres, CBOs and women's groups in the study sites had such programmes. School materials and fee programmes helped with the direct costs of schooling including school uniform, school supplies and secondary school fees. Some NSAs ran full-fledged primary schools following the State-approved curriculum, while others supported vocational schools. Many self-help groups supported early childhood development centres often taking care of teachers' salaries, feeding programmes and psychosocial services.

Health and psychosocial support interventions for vulnerable children included provisioning of insecticide treated mosquito nets, vitamin A supplements, UNIMIX nutritional supplements for underweight children, growth monitoring and promotion, water disinfection tablets, soap, medical care, vaccination, and deworming, and help with medical bills. Most informal groups provided children with material, health and psychosocial support. Some organisations ran clubs where children with HIV shared experiences to encourage one another and to deal with the stigma associated with the disease. Many NSAs provided counselling and psychosocial support to children dealing with the trauma associated with such shocks as HIV and AIDS, and to caregivers to strengthen their mentoring and childcare skills. NSAs also supported caregivers and older youth to run kitchen gardens and other small-scale income generating activities.

*Microfinance and livelihood enhancement*

To boost beneficiaries' incomes and strengthen caregiving, many NSAs provided microfinance services and had livelihood support initiatives. Some NSAs conducted entrepreneurship training and provided small business management skills and seed capital

to caregivers and even to young people. Peer pressure helped ensure repayment of loans and that loans were spent on growth and income generation activities. The NSAs aimed to empower vulnerable households to improve food production for better nutrition, especially those heavily affected by HIV and AIDS. However, increased food production does not always translate into improved access to food, especially for certain groups. The food security objective therefore was often pursued in tandem with income security. Improved food production can be a means to boost household incomes through sale of agricultural produce in local markets.

*Legal support*
Vulnerable children are at risk of physical, social and psychological abuse and injustice, including disinheritance of orphans and widows by avaricious relatives. The study found that a handful of NSAs offered legal support, including community paralegals to help protect children and widows against such abuse and exploitation and to link them with State services. NSAs seek formal litigation only as a last resort, because it exposes vulnerable people to stigmatisation by the family and community, who may not take kindly to prosecution of their kin by a family member.

*Institutional care*
Some 15.2 per cent of NSAs ran children's homes or rescue centres. Children admitted into these care centres were deemed to lack proper care at home, with street children as the predominant beneficiaries. Children needed a court order and approval from the Department of Children's Services for placement in care centres. However, care centres lacked rigorous oversight from state institutions and some took in children without proper documentation. Many care centres were wary of the research team and made it difficult for the team to gain access into their premises, which points to a lack of transparency and accountability.

## 5 NSA governance and accountability

### Governance structures

Governance was assessed in terms of whether there existed a body overseeing an NSA's operations such as an active board of governors, for formal organisations, or an oversight committee, for informal organisations. Governance and accountability profoundly affect the performance of organisations. Of the 473 organisations responding on this question, 72.5 per cent had an active board or oversight committee. Oversight committees were common in informal groups, CBOs, FBOs, and self-help and women's groups. The number of meetings a committee or board held was used as a proxy for its active status.

Of the organisations without a board or management committee, 38 per cent were CBOs, 18.5 per cent were self-help groups and 16.9 per cent were rescue centres. The equating of other types of oversight arrangements to boards could have generated errors. Data from 342 organisations show that 98 per cent of the boards had regular meetings.

### 5.2 Control, monitoring and evaluation systems

Monitoring and evaluation (M&E) systems ensure that an intervention is progressing as planned and is on track to realise the desired outcomes and goals (Jacobs and Wilford, 2010). Some 79.6 to 84.5 per cent of organisations had a monitoring system, though many rescue centres had no management of information system.

The in-depth study revealed that M&E by the organisations was meant to ensure efficient service delivery and that the M&E reports were mostly for donors. The monitoring approaches used included spot visits, photos of children receiving support, and working with head teachers to ensure children's regular school attendance. Letters from children to their "sponsors" was a common method but one that many children found exhausting. Control measures included rules for bank accounts, asset control and fraud prevention. For some NSAs, the donors required monthly bank statements and account reconciliation records; monthly, quarterly and annual reports, and a host of other "burdensome paper work". While such reporting enhances trust and legitimacy, undue focus on upward accountability can obscure qualitative aspects of progress. Some CBOs and informal groups reported having a committee for monitoring programme success, while for others the minutes of group meetings sufficed as a monitoring tool.

### 5.3 Accountability mechanisms

Downward accountability is the way an organisation engages with beneficiaries, builds relationships and is accountable for results in ways that enable learning and improvement towards the achievement of its mission (Keystone, 2006). Upward accountability refers to reporting mostly to the state and donors while horizontal accountability deals with reciprocity and responsibility to other providers.

*Bottom–up accountability*

Almost all the NSAs (92.9 per cent) reported a robust bottom–up accountability procedure such as beneficiary satisfaction surveys (28.3 per cent), annual general meeting (22.7 per cent), social audits (19.6 per cent), third party monitoring (11 per cent), score cards (10.5 per cent) and appeal processes (8 per cent). Care institutions and rescue centres, at 16.7 per cent and 14.3 per cent, respectively, had the most organisations without a bottom–up accountability measure. The in-depth study revealed that this was because these institutions drew their clientele from dispersed populations and so the beneficiaries may not have been available to participate in the day-to-day activities of the programmes. Additionally, they were perceived as "serving outsiders" using the community's resources, so few community members wanted to participate in their activities. Two significant reasons linked to the subordinate positioning of young people in social relations and institutions were the assumption that care institutions had the best interests of the vulnerable children at heart, so accountability was not needed, and that most programmes had an underlying ethos of humanitarianism.

The existence of formal bottom–up accountability processes was corroborated by 98.6 per cent of secondary beneficiaries who reported that they frequently participated in meetings called by the organisations and that established methods existed for holding the organisations to account. While children reported participating in project activities, it was not in substantive areas of making or influencing decisions but in essentialist, adult-designed or mediated project areas like child rights clubs or income generating activities. This is consistent with the assertion by Tisdall et al. (2008) that adults constantly underestimate children's capacities when, as noted by (Neale, 2004:15), they should accommodate children's varied modes of doing, saying and being.

NSAs selected for the in-depth study were child focused so were expected to be accountable to children as primary beneficiaries. The study revealed that the formal bottom–up accountability processes reported during the mapping stage were not substantive and many retained top–down characteristics. For example, only 26 per cent of secondary beneficiaries said they could question service quality. The caregivers' reasons for not questioning service provisioning included fear of losing the support and that they viewed interventions as acts of charity. This is consistent with the assertion by Assal (2008) that most NGOs do not allow beneficiaries to reflect on their failures because this might reflect negatively on the NGOs. Indeed, during focus group discussions in our study, beneficiaries who were critical of interventions were vilified by the others.

The situation is accentuated for children because of their subordinate relational positioning. While data showed that 91.5 per cent of them felt and expected that adults in the programme would listen if they expressed issues about the intervention, the in-depth study revealed that often they did not do so because they feared the staff (31.5 per cent), did not know the complaint channels (30.8 per cent), knew that action would not be taken (9.6 per cent), and had made a report but nothing had been done about it (7.5 per cent). It is important for interventions to involve young people more actively, for adults to be aware of their attitudes and assumptions, and to ensure that there is space for young people to air their views and to be involved as key actors in programmes.

*Horizontal accountability*

Interactions among providers are important in avoiding duplication of service, self-regulation, and ensuring synergies in service provision and, hence, improved performance associated with complementation of services (Forresti et al., 2008). About 83 per cent of the organisations collaborated with others in service delivery (Figure 5).

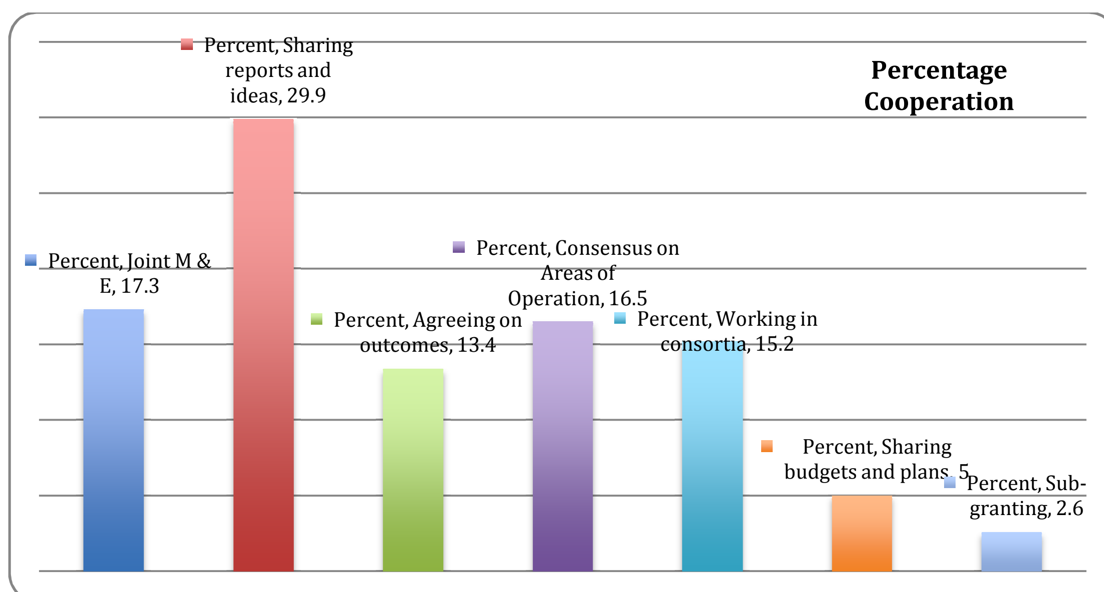


**Figure 5: Areas of cooperation of NSAs**

Only 16 per cent of the NSAs cooperated on areas of operation to avoid overlap. NGOs are expected to collaborate because of their mode of operation but only 27 per cent did so. This indicates a lack of synergy among these groups as well as the likelihood of work overlap, duplication and lack of coordination, which affect performance. Focus group discussions showed that lack of cooperation was attributable to over-dependency on donors and competition for funding. The in-depth survey revealed that 24 per cent of secondary beneficiaries were referred to their current organisation by other providers. While receiving services from more than one provider would enhance efficiency, in some cases this was discouraged and could lead to discontinuation of beneficiaries from a programme especially if the service were not complementary but a duplication of what one was receiving from another organisation.

**5.4 Programming procedures and rules for service dispensation**

Some 95 per cent of the NSAs had criteria for service targeting and exit and benefit levels (Table 7). For some informal NSAs such as self-help groups the rules and procedures were not documented but staff knew them. The in-depth study found that personal interaction among NSA staff provided knowledge about other NSAs' activities and 'peer' pressure for enforcement of norms about mutuality and contributing to the communal good.

Only 75 per cent of the NSAs had exit criteria, which was unusual for local and national NGOs. The primary and secondary beneficiaries were aware of their NSAs' rules and procedures. Data from the mapping stage indicated that except for only 1.5 per cent of the NSAs, the social protection providers created their own their operating rules. However, the in-depth study found that donors had the upper hand in setting the rules and that communities had a minimal role in this (9.5 percent).

*Targeting criteria and access to programmes*

The in-depth study comprised only NSAs targeting vulnerable children. These vulnerable children were defined by research participants to include children who were orphaned, from poor backgrounds, living with elderly grandparents, affected by HIV and AIDS, displaced or living on the street, living with parents or caregivers with constrained care capacity such as alcoholics or drug users. Table 7 indicates the reasons given by the caregivers for inclusion of both the children and caregivers in the programmes.

**Table 7: Criteria for selection (responses from secondary beneficiaries)**

| Criteria for selection | Responses | |
|---|---|---|
| | Frequency | Percent |
| Orphanhood | 119 | 21.4 |
| Disability | 24 | 4.3 |
| Living with HIV and AIDS | 70 | 12.6 |
| Incapable Caregiver | 76 | 13.6 |
| Elderly caregiver | 25 | 4.5 |
| Widow | 84 | 15.1 |
| Household is vulnerable | 133 | 23.9 |
| Because I am a woman | 3 | 0.5 |
| Because s\he is a child | 22 | 3.9 |
| Parent chronically ill | 1 | 0.2 |
| Total | 557 | 100.0 |

The primary beneficiaries gave similar reasons for their participation in the programmes, although about 18 per cent did not know why they were in the programme.

This could be because some were young when recruited or that it was decided that informing them about their vulnerability status would be stigmatising.

Caregivers and NSA staff indicated that the NSAs recorded case histories of the children and their families, as well as relying on records from referrals from other organisations. School head teachers played a key role in identifying vulnerable children and they worked with the organisations in the recruitment. The provincial administration was also important in qualifying vulnerable children, and was expected to give a letter of recommendation on the potential beneficiaries.

An exclusion mechanism was embedded in the targeting criteria for vulnerable children. Focus group discussions revealed that flawed processes led to negative social capital, causing resentment and affecting social relations and cohesion. For example, the strict donor targeting criteria in one project made some women without children regard their exclusion from the project as discrimination. In some instances, men felt that the interventions left out significant male groups including marginalised men like widowers and single fathers.

In some cases, children were referred to by the name of their sponsoring organisation, because receiving support was perceived as a privilege. This worked against the children since this labelling meant that all the responsibility for their care was left to the NSA, often pushing out the community and household. The label was also seen as stigmatising. Some of the disability centres recruited children only after receiving a letter from assessment centres on the level of the disability. Some children in rescue and care centres, expressed concern that some of their friends who were more vulnerable than they were, had been left out.

*Conditions for continued support*

Some 68.6 percent of beneficiaries of social protection had to comply with several conditions to stay in the programmes. For example, for 55 per cent of the children, regular school attendance was necessary, while for another 26 percent good grades were required. Other conditions necessary for maintaining membership in the organisation were, regular hospital attendance for those receiving health support. For 48 per cent of the secondary beneficiaries, paying membership fees was the main conditionality, which was an unexpected finding (Figure 6) given that most of the organisations in the sample were membership organisations. In 20 per cent of the cases the beneficiaries had to contribute to the savings and loan programme, which was the main activity for informal social protection groups. For some secondary beneficiaries, especially those supported by NGOs, it was mandatory that they support vulnerable children.

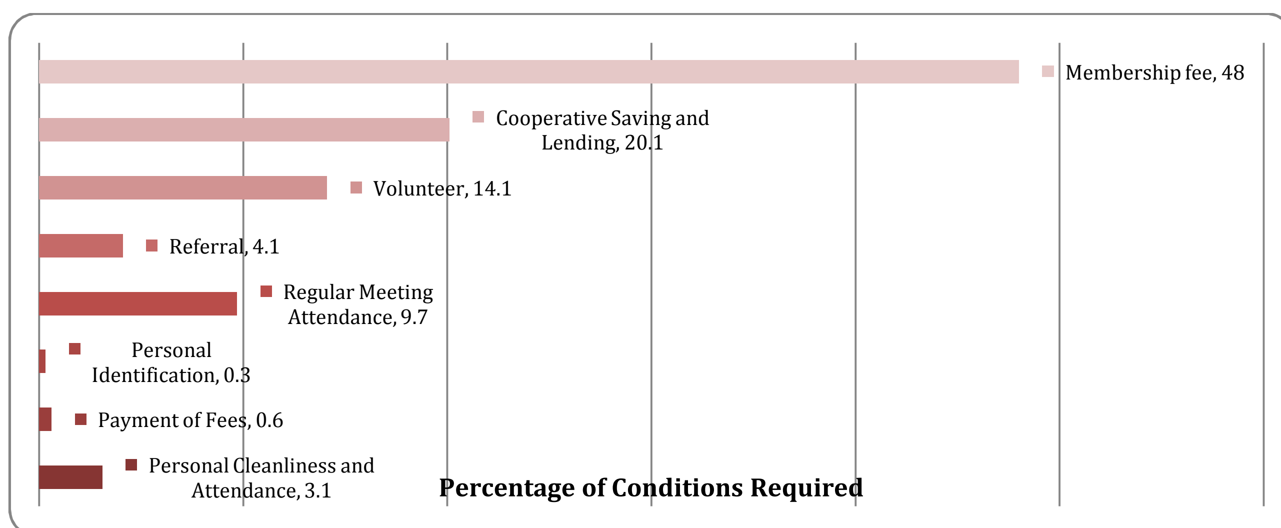


**Figure 6: Conditions for continued support for caregivers**

Most beneficiaries did not have a problem complying with the conditions, which they viewed as requirements for the support and as donor imposed. NSA programme staff confirmed this compliance. This suggests that power and patronage had a role in the beneficiaries' fear to question the NSA criteria, since they perceived social protection as charity not a right. Those in membership groups recognised that conditions were important for group viability.

Study participants noted that the requirement that caregivers produce their national identity cards and death certificates of the children's biological parents was difficult to meet especially for women, some of whom did not have ID cards. In such cases men sometimes represented women. Key informant interviews with programme staff revealed that for many of the donors children had to be resident in a particular area for continued support, which was difficult in peri-urban and urban areas where children's mobility between relatives was high, making it problematic for the programmes to track them.

*Exit rules and programme graduation*

The rules for the beneficiaries' exit from a programme and the graduation of a particular programme after achieving its purpose were of interest to us. Mapping data showed that 17 per cent of the NSAs had clear exit criteria. Most of the child-focused NSAs expected the children to exit their programmes at age 18 or at completion of basic education. For some NSAs, exit was expected when the conditions of the beneficiaries improved, like when street children were integrated back into the community, a family member could continue supporting the child, when the child relocated to another area, or when the child started receiving support from another organisation. For some NSAs there was no guarantee that the beneficiaries would stay in the programme since that was subject to donor funding, and support would stop when funding did. In terms of programme graduation, NSA staff indicated that the programmes continued in the same community over many years because the needs kept rising.

Informal groups' exit rules were conceived based on the notion that the groups were formed out of the need for reciprocity and solidarity, so they would exist in perpetuity without the beneficiaries graduating. However, flouting group rules could cause expulsion. A downside to informal groups is that, depending on their membership criteria, the most vulnerable could be excluded altogether, are the first to exit, or they could be included in ways that are unfavourable to them, depending on the difficulties of adhering to the criteria for sustaining membership.

**5.5 Collaboration with the State**

NSAs are regulated by the government in the public interest, to prevent misuse of public resources and to check against encroachment on the prerogatives or responsibilities of State agencies. Collaboration between state and non-state actors is premised on the notion that non-state actors are small, relatively non-bureaucratic and understand local conditions and local needs. Fowler (2000) cautions that the popular perception of NGOs as performing what the government has failed to do in social provisioning runs the danger of reinforcing patronage politics and can encourage state shedding of responsibility. Government agencies are viewed as bureaucratic and inflexible but are believed to have significant resources and expertise, and they can serve as a coordinating authority for meaningful local participation. The State recognises that NSAs have a comparative advantage because of their ability to innovate. Recently, the state involved NGOs in activities like commissions (Banks and Hulme, 2012). This study found that NSAs and the State were collaborating in areas such as sharing of reports and budgets and soliciting of funds. The most interaction was in registration (42.6 per cent), which is part of State oversight, followed by reporting (27.5 per cent), sharing of budgets (11.4 per cent), programmatic auditing (10.3 per cent), and financial auditing (8.2 per cent).

The level of collaboration, however, is not strong enough to ensure that development frameworks integrate social protection efforts in ways that optimise effective income support

schemes for all families with children; increase access to key services, especially childcare, education, health, water, sanitation and housing; and better ensure protection services for children to secure the rights of all of them. Enhancing NSA–State links would strengthen the mainstreaming and coordination of child-sensitive interventions and replace wasteful duplication with productive synergy.

Most NSA programmes targeted marginalised communities on a project and pilot basis with particular emphasis on the most vulnerable and deprived children. However, NSAs have limited outreach, often rely on donor funding and have shifting agendas that may not in the long term meet the holistic needs of children in a fair or sustainable manner necessary for addressing the multidimensional nature of child poverty. This affects their performance and sustainability. There is increasing recognition that meaningful local participation in the form of increased collaboration between government agencies and NSAs is essential for truly substantive involvement of community members, including children, as active citizens.

## 6 Performance and sustainability of NSAs

To analyse the performance of NSAs, we used as proxies the relevance of their interventions to the needs of the beneficiaries and the benefits from participation in NSA programmes. Other important dimensions were beneficiaries' access to services and support, adequacy, coverage and sustainability.

### 6.1 Responsiveness to beneficiary needs

Relevant interventions are more likely to show improvements for beneficiaries in both the short and the long term. Koppel (2005) argues that an organisation is responsive if it accomplishes a substantive objective or obviates a particular need. Bond (2006:v) notes, "… organizations deliver quality work when their work is based on a sensitive and dynamic understanding of beneficiaries' realities; responds to local priorities in a way beneficiaries feel is appropriate; and is judged to be useful by beneficiaries." Table 8 shows the needs highlighted by the children.

**Table 8: Children's articulated needs**

| Needs | Frequency | Valid percent |
|---|---|---|
| School tuition and related costs | 170 | 48.4 |
| Poverty/lack of income | 71 | 20.2 |
| Inadequate/poor nutrition | 48 | 13.7 |
| Poor health/difficulties accessing medical care | 35 | 10.0 |
| Disability related needs | 14 | 4.0 |
| Inadequate/ Lack of shelter | 7 | 2.0 |
| Water | 5 | 1.4 |
| Land | 1 | 0.3 |
| Total | 351 | 100.0 |

The secondary beneficiaries' perspective on the major challenges faced by children (Table 9) echoed the children's views, with school-related needs as the most urgent.

**Table 9: Challenges facing children from caregivers' perspective**

| Challenge | Incidence % |
|---|---|
| Lack of school fees/education | 45.7 |
| Lack of food/shelter/basic needs | 25.7 |
| Poor health/sanitation | 11.6 |
| Drug abuse/alcoholism | 4.4 |
| Child labour/trafficking | 8.2 |
| Sexual abuse/rape | 1.2 |
| Early marriage | 1.0 |
| Scrap metal business/bullfighting/isukuti dance | 2.2 |
| Total | 100.0 |

The mapping data show consistency between beneficiaries' needs and NSA programme areas. Support for educational needs was the main intervention (38 per cent), followed by health-related support (21 per cent). This could indicate that NSAs were responding to articulated needs, but also points to the fallacy behind universal free primary education, where opportunity is entailed but direct costs make education inaccessible to most poor households.

By their wide range of services, NSAs were addressing the multidimensional nature of childhood poverty. School-related support can be seen as strengthening the pathway to breaking the intergenerational cycle of poverty for participating beneficiaries. For the children, poverty and economic insecurity were the greatest needs and were cited by 33.3 per cent of the children. NSA interventions were also building the personal capabilities of caregivers. Secondary beneficiaries reported improvement in social relations within the community due to enhanced social esteem and respect, and other positive outcomes (Table 10).

**Table 10: Benefits to caregivers**

| | Responses | |
|---|---|---|
| **Benefits** | **Frequency** | **Percent** |
| Improved child well-being | 199 | 19.6 |
| Supported children education | 181 | 17.8 |
| Increased self-esteem | 158 | 15.5 |
| Able to meet urgent needs | 149 | 14.7 |
| Strengthened care giving | 144 | 14.2 |
| Increased my income | 107 | 10.5 |
| Elevated social status/gained respect | 76 | 7.5 |
| Funeral expenses | 2 | 0.2 |
| None | 1 | 0.1 |
| Total | 1,017 | 100.0 |

Figure 7 depicts a body mapping exercise in which a group of 11 young children age 6–10 in one programme in Kisumu compared the tangible and intangible benefits and subjective well-being differences from participation in the programme. This body mapping exercise was used to prompt an interactive focus group discussion with the children. Table 11 provides an explanation of the body mapping from discussions with the children study participants.

While the children were aware of the benefits of NSA programmes, many were also clear about the constraints of their subjective position in social relations and how these often denied them the space to have a say in their programme or to hold the adult providers to account. They revealed that even in a single household some vulnerable children were left out of programmes, which was a source of tension. Most programmes had a policy of supporting only one child per household or per caregiver. Some caregivers reported that some supplies like mattresses benefitted only one child in the family, so intervention coverage as an aspect of performance was inadequate.

The support to beneficiaries was small scale and could only have minimal impact on poverty, especially in the research sites, where vulnerability was high. For example, almost 72 per cent of caregivers' households had 4–8 members. Also, 73 per cent of the caregivers were women, while 70.8 per cent were household heads. It is doubtful that the support to caregivers had a major impact in lifting households out of poverty. For instance, 56 per cent of caregivers said that the programme had supported them for more than four years.

Given the mix of support from the NSAs, the beneficiaries should have attained some level of livelihood threshold that was adequate to get them out of vulnerability. Our data indicate that persistent vulnerability (37.8 per cent) was the main reason caregivers continued to receive support. Indeed, some of them might have developed what Assal (2008:8) calls 'negative adaptive vulnerability', meaning that NGO services did not help them reach a livelihood threshold. Many beneficiaries continued to receive support because they were in self-help groups whose primary reason for existence was solidarity and reciprocity. Many children needed more food than the one meal a day they got from school and most caregivers relied on more than one NSA because one was not adequate for their needs.

During the study some caregivers wondered whether the research team could secure more funding for them or support some of their children.

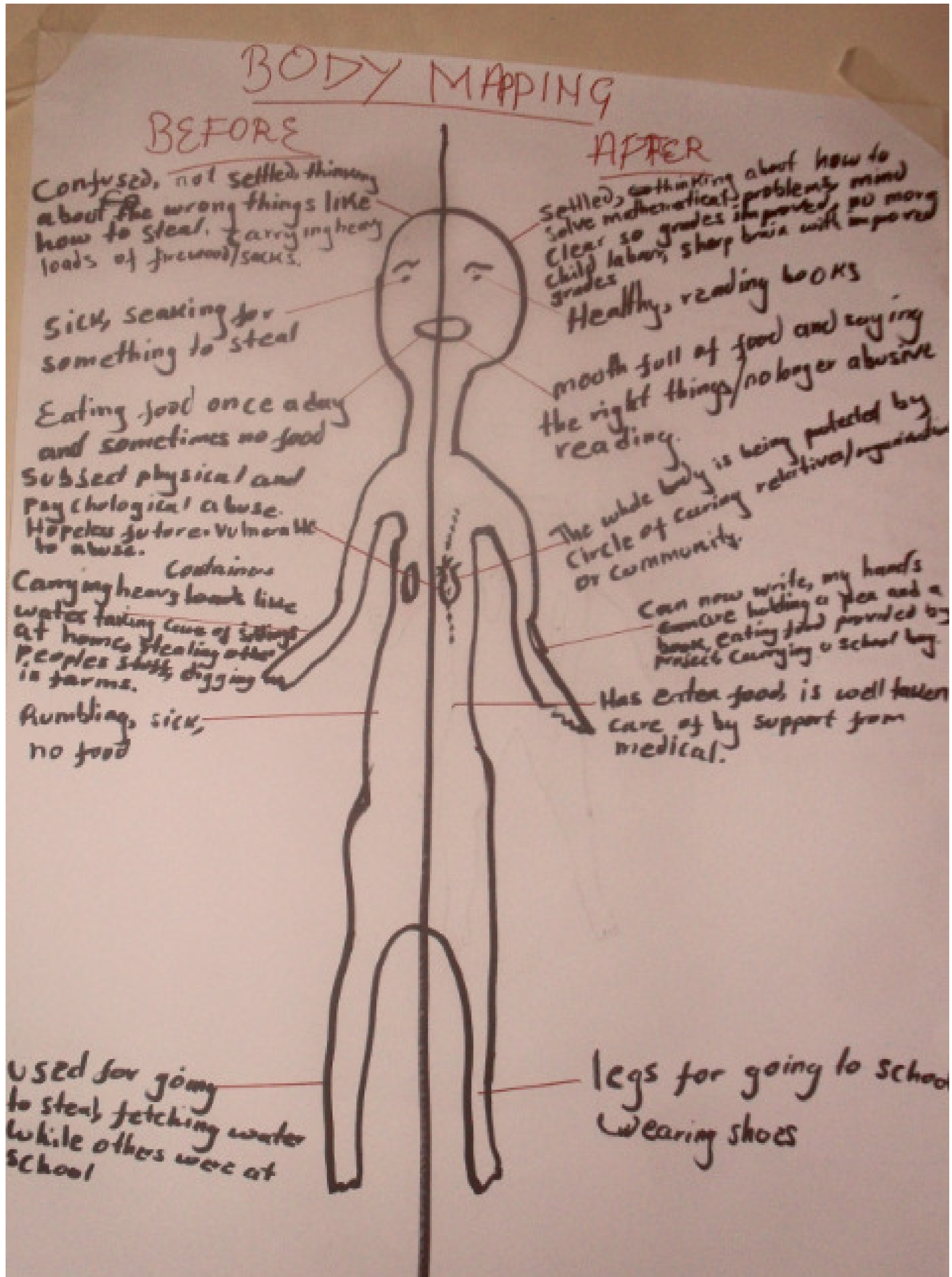


**Figure 7: Body mapping showing the status before and after the NSA programme**

**Table 11: Children's perception of transformation**

| Before | After |
|---|---|
| Head<br>Confused, not settled, thinking about the wrong things, worried, carrying heavy loads (water, firewood, sacks, etc.) | Head<br>Settled, thinking about homework, mind is clear so grades improved. Relieved, no more child labour |
| Eyes<br>Sick, sad | Eyes<br>Healthy, reading books |
| Mouth<br>Eating food once a day and sometimes none, not talking | Mouth<br>Eating well<br>Saying the right things/no longer abusive. Talking in class |
| Stomach<br>Rumbling, sick, no food | Stomach<br>Has eaten food, no more tummy ache |
| Legs<br>Walking a lot fetching water, working - herding (while others were at school), going to steal, idle, barefoot | Legs<br>Walking to and from school, playing sports, wearing shoes |
| Hands<br>Carrying heavy containers—water; heavy chores (taking care of siblings, cooking, farm work) | Hands<br>Writing, hands are holding a pen and a book, eating well, carrying a school bag |
| Heart<br>Sad, feeling heavy, hopeless future | Heart<br>Happy, the whole body and being is protected by a circle of caring relatives/organisations/community; bigger bodies/more weight from good nutrition, hopeful will achieve our dreams. |

Many people belonged to more than one organisation, especially for the membership organisations. While it would be expected that the services they received were complementary, this was not always so. Some 45.6 per cent of the beneficiaries indicated that they welcomed whoever helped them. Indeed, besides support from self-help groups, which 28.1 per cent of the beneficiaries received, 14.1 per cent benefited from local NGOs, 11.3 per cent from national NGOs and 31 per cent from international NGOs. Some smaller NSAs relied on several donors, which could cause what Koppell (2005) calls "multiple accountabilities disorder", i.e. trying to please the donors and beneficiaries at the same time, with the likelihood that the latter's needs would sometimes be subjugated to those of the former.

*Adaptability to needs*

Adaptability to client needs is an important aspect of performance and was a key factor in gauging how well NSAs were responding to their beneficiaries. Organisations are expected to change their objectives in response to changing context, but this was not the case for most NSAs, which were giving the services they had provided since being founded. Only 12

per cent of the NSAs had changed their objectives to respond to the changing vulnerability context. While that could be attributed to the fact that many of the NSAs were founded fairly recently and so had not reached the threshold for adapting, the in-depth study found out that this was due to the lack of adaptive capacity and the survivalist tendencies associated with limited resources. Many of the NSAs that revised their objectives focused more on community outreach (17 per cent), community empowerment (9 per cent) and child welfare (8 per cent) as the emerging contexts.

### 6.2 Sustainability and longevity

Sustainability and longevity were assessed as measures of NSA performance. Sustainability was gauged based on whether the interventions continued after cessation of external funding and by the extent to which the beneficiaries continued to receive support even after leaving the programme. Process level (specific interventions) sustainability of NSA programmes is grossly affected by funding. In the mapping survey, inadequate finances were cited as the main NSA challenge (Figure 8). Many funders were bypassing NGOs and working directly with CBOs because of their perceived proximity to beneficiaries and lack of bureaucracy. However, a considerable number of CBOs reported donor conditionalities as a challenge.

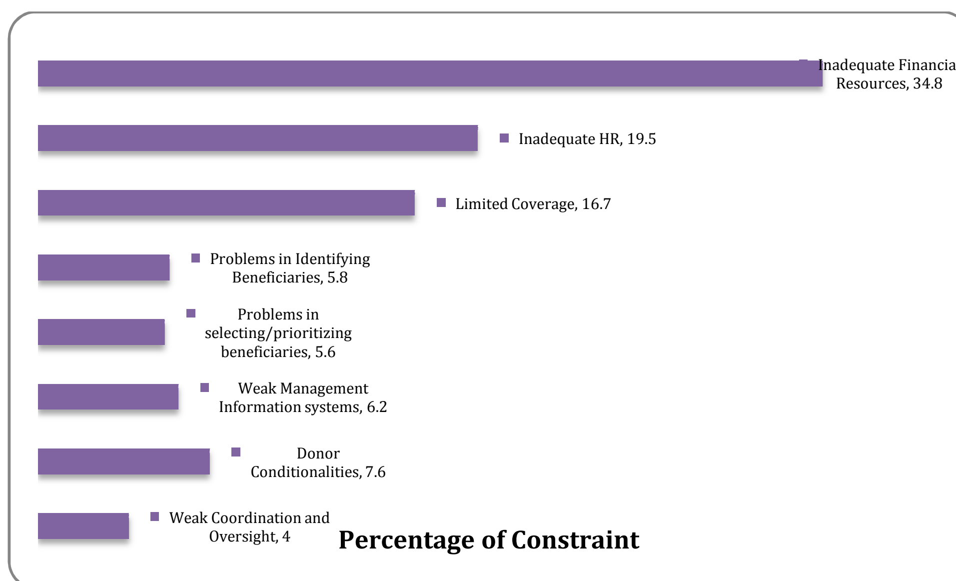


**Figure 8: NSAs' main challenges and constraints**

Responsive social protection should be sustainable, should enable beneficiaries to overcome risk and vulnerability and should be transformative. Our study indicates that owing to reliance on donor funding, most donor-funded interventions are not sustainable. For example, when one intervention stopped, caregivers went scouting for others. In this way, instead of transformative graduation, many interventions inculcate a sense of learned helplessness, where beneficiaries resort to self-defeating options of relying on externally funded projects and interventions.

## 7 Policy implications

### Social protection for children as a citizenship right

Numerous challenges exist for NSAs, key of which are their overabundance, their lack of linkage or synergy with state programmes and the fragmented and ad hoc nature of their interventions. NSAs are largely uncoordinated and take a project rather than a systems approach. Active involvement of the state is required especially in strengthening service delivery through its regulating, capacity building and oversight functions. Policy alternatives are needed in providing social protection that is transformative and responsive to the needs of children and enables them to participate actively as citizens who can lay claims to their rights.

Social protection is a right for all citizens including children, and the state is the final arbiter of these rights. However, this study shows that the state cannot adequately assume this role and it has relinquished it to NSAs, although informally and by default the state can be said to have entered into a 'trusteeship' relationship with NSAs. The social protection services NSAs offer children are couched in terms of charity, inhibiting the position of children and their caregivers to lay claims to this right and to expect accountability. Indeed as noted by Newell and Wheeler (2006) the effectiveness of active participation within policy-making processes requires 'cultures of accountability' that challenge the power relations shielding the state and other actors from 'answerability' and making citizenship real.

There is a critical need to move beyond the charity mode to implementing interventions for children based on the ethos of entitlement and their rights as citizens. Our study found that support for children was targeted based on particular labels and characteristics. While this might be a strategic factor in allocating scarce resources by donors, funders and implementers it can lead to stigmatisation, especially where children's vulnerability is related to shocks like HIV and AIDS. We propose a rethinking of the terms used in targeting vulnerable children to avoid further marginalisation.

### 7.2 Coordination of NSA activities

Overlap and duplication of NSA services have led to targeting errors and encouraged dependency on NSA support. Lack of coordination hampers the capacity of interventions to effectively address children's problems. A strategic framework is needed to define and help coordinate children's social protection priorities. All NSAs providing social protection for children should respond to those priorities, which should be determined at the local level. Currently, registration of CBOs and self-help groups occurs at the local level, but NGOs and care centres like children's homes are registered by the central government. Decentralising registration of NSAs will help avoid duplication at the community level, improve contextual responsiveness and ensure a more even distribution of social protection services for children across counties.

### 7.3 NSA governance and accountability

A strategic state framework should oversee NSA governance and accountability mechanisms, ensuring that national standards are enforced at the local level through registration. Such mechanisms will help ensure that beneficiaries are effectively consulted, funds are not misdirected and NSA core objectives are not distorted by donor requirements. Measures may include regulating NSAs through registration, regular organisation audits, and enhancing the technical and management capacity of informal NSAs, especially where inexperienced volunteers are involved.

Active involvement of the state will ensure standardisation of services and operational arrangements, making scaling up of interventions easier and creating a centralised feedback loop to guide programme and policy improvement and sustainability.

### 7.4 Integrated services for children

While support to the targeted children met some of their immediate social protection needs, often it was piecemeal, provided at a micro level and did not adequately address the

multiplicity of their vulnerability. There is need to rethink social protection for children, promote an integrated approach and develop and strengthen the social protection system. This will shift the focus from fragmented programmes with limited capacity that according to Tendler (2004) take a 'projectised' and 'microised' approach. An integrated approach would address both the general dimensions and specific needs. While the funding arrangements and sources were reported to greatly influence these arrangements, NSAs would need to link up and work together, and this would create a critical mass of resources to address the multiplicity of needs and provide complementary services. It would also reduce targeting errors and expand coverage. An integrated approach to social protection would address the multiple dimensions of child vulnerability through cushioning the impacts of shocks and stresses on households and reducing poverty (Nyamu-Musembi and Cornwall, 2004), and also ensure that specific risks in an area where NSAs are operating are addressed.

### 7.5 Supporting informal social protection interventions

The study affirmed the value of local and community-based support involving collective pooling of resources to take care and support children. At the community level, membership in these structures, in addition to providing resources for social protection, also enhances the sense of belonging and confers 'local citizenship' rights to vulnerable children and their caregivers.

NSA governance and accountability mechanisms need strengthening because their reliance on the social capital of members can be exclusionary. They are based on mutual forms of reciprocity and so extremely vulnerable people such as the chronically poor or elderly caregivers who cannot reciprocate might be excluded, as would children who benefit by proxy through such caregivers.

While a few informal NSAs work with formal NSAs to provide social support, most informal NSAs are not in such arrangements and have been crowded out. Although capturing informal NSAs by their formal counterparts is not proposed, we argue that their embedment in the ecology of childcare would give them special cultural competence in defining the needs of the children they support as well as the capacity to monitor service performance and impact. Formal NSAs would do well to recognise and harness these competencies. Indeed, they could consider channelling their support through informal NSAs as on-site implementers of their interventions.

Delegating the responsibility of enhancing the capacity of informal NSAs to NGOs could damage the very identity and distinctiveness that makes the informal NSAs so effective. To avoid informal NSAs' capture by NGOs, State-led technical support is crucial. Highly localised social protection schemes have worked best where strong external support was given without compromising the local identity of projects.

### 7.6 Valuing volunteers' and women's time

Most of the formal NSAs relied on volunteers in their activities, majority of whom were women. While it is true that most caregiving is done by women, often for altruistic motives, overreliance on women's labour and time cannot go unquestioned because it is predicated upon the normative assumption that women's reproductive labour is elastic and that women are natural caregivers. While this in itself may not disrupt gender relations in caregiving, it has the capacity to make these caregivers vulnerable, especially if their participation is not matched with adequate compensation or support in livelihood enhancement by the NSAs.

### 7.7 Diversification of the NSA resource base

Resource inadequacy was an important challenge for NSAs in meeting the needs of vulnerable children and was responsible for reduction of service coverage. NSAs need to diversify their resource base to enhance both organisational and impact sustainability. Working with consortia could enhance resources, and using a pooled funds source would help in providing for the integrated needs of children. Overreliance on donor funding sometimes accentuates the power differentials within the political economy of the 'follow the money' syndrome. In some cases NSAs changed their focus owing to changing donor

priorities. This can create dependency and serve the growth needs of specific NSAs without necessarily translating into tangible benefits for the children and their households. NSAs should not be overly concerned with growth or organisational sustainability at the expense of sustainability of impact.

There is need for diversification of the resource base so that resource sustainability can be achieved by supporting the sustainability needs of the organisation but also the livelihood options of participating households. This would ensure transformative graduation from programmes.

The livelihood options offered to the caregivers are sometimes too basic to generate adequate income, so issues of scale should be considered. The possibility of some form of affirmative funding arrangements, where money is channelled to smaller organisations to enable them to grow and improve their capacity to respond to the needs of children, should also be explored. For example, some international NGOs are bypassing NGOs and channelling their support directly to CBOs. However, this option requires consideration of the transference of the reporting burden from formal NSAs to smaller organisations with limited administrative capacity.

### 7.8 Enhancing downward accountability

Enhancing citizenship rights of children through social protection is a right that the beneficiaries should lay a claim to. Downward accountability is an important catalyst in improving citizenship rights of children, starting from the conceptualisation of needs, where the voices of caregivers and children themselves, not of funders, should be given priority. Accountability can be accomplished also by ensuring that from the bottom up, the support provided is demand driven and is of the required quality. Signing codes of conduct and accountability charters with beneficiary communities would give them some sovereignty in exchange for their collective compliance with the negotiated standards (Biekart and Fowler, 2013). Questioning of the negative consequences of an intervention by beneficiaries could help NSAs learn, improve performance or carve a niche. Support systems should encourage, not deter or ignore, continuous reflection and social audit by the beneficiaries.

Children's needs often are subsumed under those of caregivers, and children's voice is often muted or missing in defining their needs and priorities. A citizenship-based approach for ensuring respect of rights is an essential policy and strategic tool for transformative social protection of children. Children must be able to actively claim their right to social protection and equitable treatment in service dispensation, and such services must be age and gender sensitive. Any transformative social protection should have the substantive voice of children as a starting point.

In enhancing the responsiveness of social protection and change that are civic driven, there is need to rethink how upward accountability to donors is delivered and the burden it imposes on NSAs and their beneficiaries. The interests of the communities should take precedence over politics of funding. The way donor funds are obtained is a serious issue to consider especially when small organisations cannot adhere to the stringent funding criteria because of the competitive bidding process. According to Biekert and Fowler (2013:5), "the introduction of market-inspired competitive bidding accentuates commodification of an NGO development approach and such allocation practices work against treating sustainable development as co-produced socio-political processes between donors, NSAs and beneficiaries". This burden creates an uneven playing field between donors and beneficiary organisations and has the potential of being replicated in the relationships between NSAs and their beneficiaries.

### 7.9 Broadening the agenda beyond service provision

There is need for a broader focus by NSAs on vulnerability beyond material provisions to include social aspects and, for young people, relational and subjective dimensions. This requires a focus on the structural forces underlying vulnerability. NSAs must continually innovate and be driven by contextual needs not donor priorities. As Banks et al. (2014:712) noted, "Donor expectations and their demands for measurable outcomes within short and

pre-specified time frames are ultimately incompatible with innovation, which requires a fundamentally different approach to development that is flexible”. The strong reliance on external funds, coupled with the short-term motivations of these donor-funded interventions, leaves little space for innovation. There is also need for a critical focus on the international aid system and how its activities may constrain NSAs at the local level.

### 7.10 Conclusion

There is a policy imperative to rethink NSA social protection in terms of its capacity to enhance the citizenship rights of vulnerable children and how factors within NSAs, the state and funders interplay to influence outcomes. We concur with Nyamu-Musembi and Cornwall (2004), who assert that a vision of transformative social protection must be interrogated for the extent to which it enables those whose lives are affected to articulate their priorities and to claim genuine accountability from implementing and “provisioning” stakeholders.

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