



GOVERNMENT OF MAKUENI COUNTY



Social Protection Policy



February 2016

SOCIAL PROTECTION POLICY

Policy inputs on cover page

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- Change and put clear photos in order to include all ages.
- The color –the makueni colors to be a stripes just like we have the GOK colors

February 2016

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ACRONYMS & ABBREVIATIONS

AGPO	-	Access to Government Procurement Opportunities
GMC	-	Government of Makueni County
NGO	-	Non-Governmental Organization
HIV	-	Human Immune-deficiency Virus
PLWHIV	-	People Living with HIV
OVCs	-	Orphans and Vulnerable Children
PWD	-	Persons with Disability
HR	-	Human Resource
CBO	-	Community Based Organisations
FBO	-	Faith Based Organisations
NSAs	-	Non-state actors
CIDP	-	county integrated development plan.
MDAs	-	ministries, departments and Agencies
ESC	-	Economic social cultural
SDGs)	-	Sustainable development goals
NHIF	-	National health insurance fund
CSPC	-	county social protection committees
M&E	-	monitoring and evaluation
DYGSSS	-	Department of youth gender sports and social services

DEFINITION OF TERMS

- 1) **Vulnerable person**– an individual who is, or may be, in need of community care services by reason of disability, age or illness and is or may be unable to take care of him or herself, or unable to protect him or herself against significant harm or exploitation.
- 2) **Social Protection** - a range of protective public actions carried out by the Government and others in response to vulnerability and poverty. It seeks to guarantee relief from destitution for those sections of the population who for reasons beyond their control are not able to provide for themselves effectively.
- 3) **Absentee parent**–a parent who either wanders in and out of the child’s life providing a disruptive, inconsistent presence, one who was an active part of their child’s life before abruptly ceasing contact, or a parent who has never been involved in the life of their child.
- 4) **The Elderly** - persons aged 65 years and above.
- 5) **Widowed** -a person who is single because of death of the spouse.
- 6) **Livelihood** – a means of making a living ,which encompasses peoples capabilities, assets, income and activities required to secure the necessities of life
- 7) **Psychosocial support** – an approach to victims of violence, natural disasters and other traumatic situations to foster resilience of both communities and individuals.
- 8) **Single parents** – uncoupled individual who shoulders most or all of the day to day responsibilities for raising a child or children, either through death of the partner, divorce or unplanned pregnancy.

FOREWARD

Social protection programmes can be a powerful tool in the battle against poverty and inequality as they can tackle multiple dimensions of poverty and exclusion in the County. Social protection can play a fundamental role in creating more inclusive and sustainable development pathways by liberating people from the fear of poverty and privations and by helping to break the inter-generational cycle of poverty.

Only if people have access to educational opportunity, quality and affordable health care, adequate and nutritious food, secure shelter and basic income security, they will be able to become or remain productive members of the workforce, or remain dignified members of a society that are not dependent on accidental charitable support even if no longer active in the labour market, - and only then will societies be able to sustainably reduce poverty, inequality and to ensure social peace and inclusive development.

Social protection is an essential investment that contributes to economic growth and makes growth more pro-poor while directly reducing poverty. It not only tackles income and poverty but also provides an effective, tangible and direct conduit to maximize human development objectives, including better nutrition, gender equality health, reduce inequality and education outcomes as envisioned under the Sustainable Development Goals (SDGs).

The right to social protection is closely connected with other social protection rights including the right to the highest attainable standard of health as enshrined in the Bill of Rights under the Constitution. It also includes the rights to equality and freedom from discrimination, human dignity, right to access basic education, freedom of movement and residence, reasonable working conditions, fair administrative actions, access to justice, and the resolution of disputes in a fair manner and through public hearing before a court or independent and impartial tribunal or body.

This Policy seeks to provide the administrative and institutional framework for the provision of Social Protection and inclusion to all persons in Makueni County. Article 43 of the Constitution guarantees all Kenyans economic, social, and cultural (ESC) rights, including rights to health, education, food, and decent livelihoods. It asserts the right “of every person...to social security” and binds the State to “provide appropriate social security to persons who are unable to support themselves and their dependants.” The County Government will endeavour to offer social protection in its totality i.e. social assistance; social security; Livelihood support and health insurance.

Towards this end the GMC, in support of this national function, seeks to establish a local strategy for realization of the same. This Policy establishes the County Psycho-social support centres, identifies the most vulnerable groups in the County, introduces capacity

development initiatives for women and vulnerable groups at village polytechnics, sets strategies for social protection and inclusion, outlines the principles and objectives of social protection, and lays the institutional framework for implementation.

The Policy recognizes and builds on existing national as well as county social protection initiatives such as various empowerment funds(county empowerment fund, youth enterprise fund and uwezo fund), education bursaries, school feeding programmes, fee waivers in public health facilities, Orphans and Vulnerable Children's (OVC) programme, older person's cash transfer, empowerment programmes for PWDs , scholarships among others.

The achievement of the goals, objectives and strategies outlined in this policy calls for concerted efforts by all public service institutions in the County and other stakeholders. The development of the policy was through participatory and consultative approach with the stakeholders and as such its implementation binds all individuals and offices dealing with all categories of vulnerable groups in the County.

Prof. Kivutha Kibwana, EGH
GOVERNOR

PREFACE

Poverty and vulnerability pose significant challenges to achieving the County's vision for socio-economic transformation. There is need for accelerated interventions towards solving these challenges to ensure the attainment of the set county goals and objectives. To effectively manage interventions to the vulnerable groups, a comprehensive social protection framework to guide in the implementation of the social protection activities is necessary. This policy framework therefore serves part of this broader objective of providing social protection to the vulnerable as a constitutional guarantee under the Bill of Rights. There is also an urgent need to carry out a needs assessment on social protection for the County to reduce the acts of duplication in interventions.

The Policy seeks to define the Vision of the County Government for vulnerable groups in the county and to identify the key areas where action is required to provide an all-inclusive participation in socio-economic development. It is intended to serve as a guiding document and provide a framework for action for all stakeholders. This policy keeps in mind the diversity of the County and the need to address category-specific needs and concerns of the vulnerable persons that may not be adequately reflected in existing national policies.

The County Government has identified various interventions' to address the challenges facing women and vulnerable groups. These interventions include but not limited to; inclusion of innovative training for women and vulnerable groups, creating alternative sources of income and programmes, initiating mentorship programmes in schools, providing psycho-social support to addicts recovering from drug and substance abuse, up scaling and institutionalising a county social protection programme to complement the national safety net programme amongst others. The interventions to these groups should also be distributed geographically to all areas of the county to ensure social equity. Positive change and sustainability can only be achieved if collaboration among the various stakeholders is embraced.

The County Government, through the Department of Youth gender, sports and Social Services is committed to improving the lives of vulnerable persons. The development of this policy will therefore ensure that women and vulnerable groups in the County are protected and supported in order to attain a sense of belonging and achieve their full potential.

The policy provides a framework to guide the design, implementation and oversight of social protection programmes in the County

Rosemary Maundu (Mrs)

CEC-DEPARTMENT OF GENDER, YOUTH & SOCIAL SERVICES

CHAPTER 1 INTRODUCTION

1.1 Background

There has always been a strong link between social protection expenditures and a county's socio-economic development. Social protection expenditures facilitate reduction of inequality and the resources provided empower poor individuals to participate in economic activities within the County. Such a policy lays out a clear vision to address the various challenges faced by vulnerable groups besides setting the climate for self-reliance.

The 2009 national census, the orphaned children under the age of 15 numbered 4800, this number has since increased to over 12000 according to children services report in the County. This is attributed to high HIV related issues and broken family and community ties. The elderly (65 years and above) were 45,300 (this number has since increased) and female-headed households were 77,100. Persons living with HIV are estimated to be 65,000 according to the department of health and over 10,000 PWDs. There were also a number of children-headed households. All these categories of people are considered vulnerable because they are the ones who are susceptible to poverty. As such, they are likely to constitute a higher percentage of the poor in the County because of inadequate support.

The poverty level in Makueni county stands at 60.6 percent which is higher than the national average of 45.2 percent (KNBS, 2015). The county ranks 38 out of 47 counties in terms of poverty levels. The high rate of poverty coupled with youthful population in the county poses a major developmental challenge in the county. The main causes of poverty in the county are prolonged drought, undeveloped infrastructure, over-reliance on rain-fed agriculture, limited employment opportunities, weak market systems, inaccessibility to credit facilities, continued environmental degradation and poor agricultural practices.

In terms of inequality, Makueni population is more unequal compared to the national level of inequality. The county has an equality (Gini coefficient) of 0.38 compared to the national average inequality of 0.45 and ranks 22 in terms of inequality compared to other counties, which is brought by the fact that a higher proportion of the population is living below the poverty line. (according to vision 2025 draft of Makueni county)

The high number of vulnerable groups witnessed in the County is driven by lifestyle changes particularly in the urban centres along the Trans-Africa Highway (Mombasa road), collapse of cultural values, moral decay, globalization, modernization etc. The social environment in the towns has inclined some young parents to anti-social behaviour and lifestyles like excessive alcohol abuse and commercial sex work. Moreover, drugs and substance abuse also contribute to the high number of vulnerable groups. The abuse is prevalent among adolescents, teenagers, young adults and some parents. Drug abuse in the county is aggravated by peer pressure, accessibility and affordability of the drugs.

Child vulnerability in the County is aggravated by absentee parents who are not available to nurture their children, HIV/AIDS, poor health care, exposure to modern technology, negative cultural practice such as early marriages, child labor and stressful educational system. With these challenges there is need for the county government to come up with an intervention strategy to mitigate such problems.

The County has male to female ratio of 100:105 which shows that both the gender is fairly balanced. Although women provide labour and manage development activities, they do not have control of the productive assets such as land and capital. They are, therefore, constrained by lack of authority to control and make decision on the utilization of assets. The Government in 2015 gave directive regarding employment of women, youth and people with disabilities towards meeting the constitutional requirement to have at least 30 per cent of the opportunities to either gender. Additionally the Access to Government Procurement Opportunities (AGPO) provides a platform for empowering these categories of gender to access Government procurement opportunities.

About 3.2 per cent of all persons in the County live with disabilities, those with physical challenges being the majority. The main causes of disability include accidents, health related, and human error, and ignorance, genetic and cultural practices. This severely limits their opportunity to develop skills for effective participation in development activities.

The elderly people (65 years of age and above) who account for 5.2 per cent of the total County population are considered vulnerable. This implies high dependency rates and consequently contributes to increased poverty rate. The vulnerability among the elderly is aggravated by breakdown of cultural values leading to neglect and isolation. At different times, there are numerous un-coordinated actors implementing social protection/inclusion programmes in different parts of the county, resulting in diverse impacts & conflicts. This has been aggravated by the fact that the County lacks an operational framework to guide the activities of the various actors in the county in supporting vulnerable groups. This often results to fragmented and uncoordinated implementation of interventions/ programmes, lack of monitoring mechanisms which often results to corruption, double chipping and hence wastage of resources. It has been difficult to ascertain what and how much is being done by non-state actors, including inadequate information from civil society organisations.

A Social Protection Policy will therefore be a reference point to stakeholders in the design, implementation, monitoring and evaluation of social protection programs. In essence, the Policy is essential for enabling the development of strategies for strengthening households with vulnerable persons; encourage fostering and retention of this groups in their families

and; ensure projects / programmes are designed so that all community sub-groups have a voice in decision-making and management of their affairs thus capturing the object of devolution.

1.2 Rationale

The government of Makueni county does not have a specific regulatory framework for social protection. The existing social assistance programmes are conducted on an *ad hoc* basis guided by three broad categories of national legislation and policy, namely sector specific, vulnerability, and locality-based laws and policies.

The main focus of vulnerability-focused laws and policies is to protect the rights of the disadvantaged and to ensure their enjoyment of these rights. These include the National Children's Policy (2010) and the Children's Act (2001), the National Policy on Older Persons and Aging (2009), the National Policy on Youth (2006), the National Gender and Development Policy (2000), and the Persons with Disabilities Act (2003), Makueni county empowerment fund regulations, among others,

The challenge with most of these laws and policies is that they are fragmented and the critical principles espoused in the various legislation need to be harmonised in one framework for ease of reference and be realigned to the country's Constitution and its rights-based framework. Furthermore, vulnerability-focused programmes in the County have tended to cover only a limited geographic area. The existing frameworks on social protection has various challenges such as insufficient funding, poor targeting, rise in numbers of vulnerable groups, difficult to access various services, fund disbursement challenges and lack of enough work force. There is therefore a need to include important elements for protecting the economic, social, political and cultural (ESC) rights of vulnerable groups in the County through a policy framework and other instruments.

Locality-based laws such as the National Policy for the Sustainable Development of Arid and Semi-Arid Lands (2007) calls for specific interventions to bring the economic development level of the ASALs up to the levels that prevail in other parts of the country after many decades of negligible economic development that has adversely affected vulnerable members of the society.

Social protection and inclusion of all persons in socio-economic transformation process of a county will enable the poor and vulnerable to protect themselves and their assets against shocks; promote human capital formation while raising labour productivity; encourage investment by reducing risks through the predictability of funds transfers; support the participation of the poor in the labour market; stimulate demand for local goods & services by supporting enterprises in rural areas; help to create an effective and secure County by fostering social cohesion and; reinforces conditions to attract local investments.

1.3 Principles of Social Protection

The following principles will underpin this policy:

- a) Integrity;
- b) Good governance;
- c) Transparency and accountability;
- d) Evidence-based programming;
- e) Protection of human rights;
- f) Gender mainstreaming;
- g) Equity and social justice;
- h) Standardization of activities and programmes;
- i) Public participation;
- j) Sustainability; and
- k) Flexibility

1.4 Objectives of the policy

The main objective of this policy is to provide a basis for the county government to supplement and complement the initiatives of the national government in social protection for the citizenry.

Specifically the policy seeks to:

- 1) streamline the activities of various actors that are involved in social protection activities for vulnerable groups in the county;
- 2) ensure effective co-ordination and implementation of intervention programmes for vulnerable groups;
- 3) provide a basis for support for individuals and households that have been socially excluded and strengthening their capacity for self-sufficiency and independence;
- 4) increase access to affordable healthcare, social security and social assistance;
- 5) Provide for a monitoring and evaluation framework for co-ordinated action by all actors involved in social protection and inclusion; and
- 6) Lay strategies for resource mobilization, budgetary allocations and effectively coordinate their use to address poverty, vulnerability and risk management at the county level.

1.5 Scope

This Policy will be used in Makueni County and will apply to the following groups:-Women, Orphans and Vulnerable Children, the Elderly and Widowed, Persons with Disability, Persons Living with HIV/AIDS.

CHAPTER 2

SITUATIONAL ANALYSIS

This section gives an account of the status of the vulnerable groups in the county and the efforts undertaken by both the national and county government in addressing the plight of the various vulnerable persons. The following are some of the efforts in place; County empowerment fund, bursaries and scholarships for OVC, health insurance for the elderly , Access to government procurement opportunities(AGPO), Sanitary towel initiatives, Cash transfer by national government for children and elderly.

The development of this policy entailed holding consultative meetings involving representatives from national and county Government Ministries, Departments and Agencies (MDAs), Non-State Actors (NSAs) such as the private sector, community groups, and voluntary organizations, and development partners as well as exploring international best practices in the provision and financing of social protection.

This process has enabled the county government to identify several key comprehensive actions in the areas of social assistance, social security, livelihood support and health insurance for vulnerable categories of the county population or persons. The consultations also identified several key barriers that were preventing many people from accessing social protection services, including stigma and discrimination on account of gender, disability, age, area of residence, and poor wellbeing (for instance, having a particular disease).

2.1 Legislative and Policy Frameworks

2.1.1 The Constitution

Article 43 of the Constitution guarantees all Kenyans their economic, social, and cultural (ESC) rights, including basic rights to health, education, food, and decent livelihoods. It explicitly asserts the right “of every person... to social security” and binds the State in Article 43(3) to “provide appropriate social security to persons who are unable to support themselves and their dependants.”

The right to social protection is closely connected with other social protection rights including the right to the highest attainable standard of health. Article 21 of the Constitution commits the State to working towards the gradual realization of the social and economic rights and binds the State “to observe, respect, protect, promote, and fulfil the rights and fundamental freedoms in the Bill of Rights.” For this to be achieved, the State is expected to take whatever legislative, policy, and other measures as necessary, including the setting of standards.

2.1.2 International Agreements

Kenya is a signatory to the Universal Declaration of Human Rights (1948), which recognizes social protection as a fundamental human right for all citizens of the world. Other international instruments adopted by the country include the International Covenant on Economic, Social, and Cultural Rights (1967), the UN Convention on the Elimination of All Forms of Discrimination Against Women (1979), the UN Convention on the Rights of the Child (1990), the UN Convention on the Rights of Persons with Disabilities (2006), the African Charter on the Rights and Welfare of the Child (1990), the International Labour Organization (ILO) Convention on the Worst Forms of Child Labour (1999), the ILO Minimum Age Convention (1973) that deals with the minimum age for employment, and the African Charter on Human and People's Rights (1981) among others. Kenya is also a signatory to several ILO Conventions and Regional Protocols.

2.1.3 National Legislation:

2.1.3.1 National Social Protection Council Act, 2014

The Act provides for the establishment of a comprehensive framework of national social protection programmes, the assistance of individuals and households living in poverty; support for individuals and households that have been socially excluded and strengthening their capacity for self-sufficiency and independence; the cushioning of income-earners and their dependents against the impacts of income threatening risks including poor health and workplace injuries; and, the promotion of co-operation among public social protection departments, agencies and institutions and other stakeholders in social protection activities and programmes.

2.1.3.2 Persons with Disabilities Act, 2003

The Act provides for the rights and rehabilitation of persons with disabilities; to achieve equalization of opportunities for persons with disabilities. The Act binds the National Government to take steps to the maximum of its available resources with a view to achieving the full realization of the rights of persons with disabilities set out in the Act. The Act protects persons with disability in relation to employment, reservation of employment, apprenticeship, and discrimination.

2.1.4 Administrative Policy Frameworks:

2.1.4.1 Kenya Vision 2030

The National Development Strategy, Vision 2030, seeks to create just, cohesive and equitable social development in a clean and secure environment. One of the foundations of the pillar involves; Enhancing Equity and Wealth Creation Opportunities for the Poor: this

gives special attention to investments to communities with high incidence of poverty, unemployed youth, women, and all vulnerable groups.

The 2030 vision for gender, youth and vulnerable groups is gender equity in power and resource distribution, improved livelihoods for all vulnerable groups, and responsible, globally competitive and prosperous youth.

2.1.4.2 The National Social Protection Policy, 2011

The Policy recognizes and builds on existing social protection initiatives such as education bursaries, school feeding programmes, fee waivers in public health facilities, Orphans and Vulnerable Children's (OVC) programme, older persons cash transfer and youth enterprise fund, among others. The Policy focuses on renewed and comprehensive focus on poverty, income distribution and social inclusion for vulnerable segments of the citizenry resident in the county. Social protection programmes tackle multiple dimensions of poverty and deprivation (decent work, education, health care, food security, income security) and can therefore be a powerful tool in the battle against poverty and inequality. Social protection can play a fundamental role in creating more inclusive and sustainable development pathways. In the absence of social protection, people, especially the most vulnerable, are subjected to increased risks of sinking below the poverty line or remaining trapped in poverty for generations.

2.1.4.3 County Integrated Development Plan (2013-2017)

The CIDP commits the County to promote the development of the community through mobilization of local resources to enhance community empowerment. This is to be pursued through enhancement of communities' capacity to manage viable and sustainable projects especially in agriculture and small-scale enterprises. Community will be sensitized on the need to set up more enterprises as opposed to looking for white collar jobs. Self-reliance will be undertaken alongside encouraging support and development activities and capacity building for other organizations like NGOs.

2.1.4.4 Annual Development Plan, 2016-2017

Focuses on the Social sector providing and enabling environment to shift from extreme poverty through social protection and skills development. ;creating policy framework to cushion Vulnerable Groups; Include innovative training of vulnerable groups and; creating alternative sources of income and programmes; initiating mentoring programmes in schools; providing psycho-social support to addicts recovering from drug and substance abuse. The Plan commits to up-scaling and institutionalising a county social protection programme to complement the national safety net programme.

2.1.4.5 Procurement act 2015:

This stipulates the access to government procurement opportunities on 30% affirmative action for women, youth and PWDs.

2.1.4.6 County government act

This act operationalised the devolved government stipulating the structure and how the county governments should be governed. It also brought about the issue of devolved service provision to the lowest level, affirmative action and public participation.

2.2 The children's act 2001 Social Protection Initiatives: A Summary

2.2.1 The National Government

The National Government has made various strides in providing social protection that includes legislative and administrative actions in the three domains of social assistance, social security, and health insurance. The establishment of the National Social Security Fund (NSSF) and the National Hospital Insurance Fund (NHIF) in 1965 and 1966 respectively, was part of the Government's efforts to cushion workers against future vulnerabilities. Besides those in gainful employment, the two programmes have since expanded to cover the general citizenry.

2.2.1.1 Social Assistance

The National Government and its development partners are currently implementing several social assistance interventions targeted to specific categories of beneficiaries. These include:

2.2.1.1.1 Cash transfers

Orphans and Vulnerable Children Cash Transfers CT-OVC, Older Persons Cash Transfer (OPCT), Hunger Safety Net Programme (HSNP), Urban Food Subsidy CT-OVC.

2.2.1.1.2 Food distribution

General emergency/food relief; School feeding; expanded school feeding; General food relief. Relief has characterized government interventions during drought and famine, mainly in ASAL areas. School feeding programmes are intended to keep children in school during food shortages.

2.2.1.1.3 Public works

Kazi Kwa Vijana (KKV) KKV. This programme was established in 2008 to absorb young people into the job market but management and logistical shortcomings have been noted.

2.2.1.1.4 Grants

A model adopted under the *Njaa Marufuku*, People with severe disabilities grants, Safe motherhood Health vouchers.

National council for persons with disability –grants for pwds, education support, assistive devices

Presidential bursaries

2.2.1.2 **Social Security**

A joint report by national Government and the International Labour Organisation in 2010 indicated that the multiplicity of old age pension schemes in Kenya has created a variety of institutional approaches that are in need of closer coordination. Except for the current Civil Service Pension scheme, all of the retirement benefit schemes are contributory.

NSSF- challenges in delay in disbursement to beneficiaries, lack of remittance by some employers

2.2.1.3 **Health Insurance**

Although several schemes in Kenya offer healthcare, the primary scheme is the National Hospital Insurance Fund (NHIF). For a long time, the NHIF covered only in-patient hospital cover for both formal and informal sector workers, but in December 2009, it introduced outpatient coverage as well. Several private health insurers cater for higher income earners. Micro-health insurance schemes also cover certain households.

2.2.2 **The County Government**

Since its formation in 2013, the county government has undertaken reviews of social assistance programmes implemented by the national government and have highlighted the inadequacy of the existing interventions. The County Government, in partnership with the national government and other actors has implemented the following programmes:

County empowerment fund- targeting groups of men, women, PWDs, youth and Table banking groups, Mentorship programs- targeting form 4 leavers, teenagers, children and generally the youth.

Livelihood support- targeting charitable children institutions and community groups.

AGPO; 30% procurement access – this is an affirmative action for youth, women and PWDs to access government procurement opportunities

Empowerment of vulnerable groups- through capacity building and other livelihood support programmes.

Support to OVCs- through support to charitable children institutions, bursaries and scholarships.

ADD:.....
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2.2.3 Non-state actors (NSAs),

Non-state actors (NSAs), implement a range of social protection interventions although most of these are limited in scope and coverage. The NSAs face three key challenges: inadequate resources; a lack of coordination and the inability to sustain their programmes if and when donor funding is withdrawn. These challenges are caused by lack of policy to govern the actors thus leading to duplication of services and poor intergovernmental relations.

2.2.4 Community

Informal community support and extended families provide a significant form of social assistance in Kenya. There are two main types of such safety nets: membership of traditional solidarity networks (the family, kinship groups, and neighbourhoods); and membership of cooperative or social welfare associations (including self-help groups, rotating savings and credit associations, and cultural associations). These associations/welfare groups provide a wide range of services, including loans, food, education, health, and funeral assistance. Such safety nets face three main challenges: limited productive resources that are under the control of households and communities; low levels of income; and high levels of dependency, Erosion of cultural values, Modernization and Ignorance which have worsened as a result of HIV/AIDS and the financial, fuel, and food crises.

2.3 Categories of Vulnerable Persons in the County

2.3.1 Women

The 1999 census indicate that the County has a population of 884,527, where the male constitute 49 % and the female 51 %, and women control just a paltry 10% of the resources. Women empowerment is in the forefront of our policies. There is therefore the need for the county to vigorously promote gender equality and empowerment of women for socio-economic transformation.

2.3.2 Orphans and Vulnerable Children

The rising numbers of Orphans and vulnerable children suffering economically, socially and psychologically in the County is alarming. The high poverty rate exerts its most extreme effects on the welfare of orphaned children, limiting their right to access clean water, healthy food, medical care, education, shelter and protection of basic freedoms/entitlements.

Child vulnerability in the County is aggravated by absentee parents (especially fathers) who are not available to nurture their children. Such children may lack parental care, protection and guidance with resultant consequences of becoming socially challenged the need for the county to formulate intervention strategy.

The orphaned and vulnerable child is faced with poor health due to the effects of lack of parental care. Due to lack of enforcement in the education policy and high cost of education related requirements, the orphaned child drops out of school and rarely completes their education. Lack of proper nutritional care and access to healthy diet leave many children malnourished thus affecting their smooth growth.

Moreover, OVC's experience food insecurity, shortage of clothing and shelter and inability to pay for medical care and are exposed to myriad of ill-health problems including malnutrition, malaria, HIV/AIDS and other health care needs, which may render them unable to continue with primary education and leading to child marriage.

Abuse and exploitation against children is a problem that occurs in both the home and at school and could take a variety of forms: physical, mental, sexual and moral. Erosion or cultural values and ignorance on the rights of the child have heightened the problems facing the child. Some orphaned children may lose out on their parent's property after they die. Without any assets OVC become helpless and hopeless, and then become susceptible to exploitation due to lack of basic resources and facilities. Child prostitution is another problem. Though prohibited by law, it remains difficult to deal with due to the steady rise in the number of poor children in the streets especially in towns along the Mombasa highway as well as the number of children orphaned on account of AIDS. These factors have contributed to an increase in the incidence of child prostitution.

2.3.3 The Elderly and the Widowed

The Elderly and the Widowed face some life issues that can be tricky to handle. Discrimination and isolation in the family is becoming a growing problem. The issue of rural urban migration and generation gap as well as the erosion of cultural values has left the elderly members of the society with nobody to take care of them while the widowed are stigmatised abused or ridiculed.

Poverty; HIV/AIDS have left many elderly people as caregivers to the orphaned children draining them their meagre resources. HIV/AIDS has similarly wreaked havoc on the institution of family and left many widows and widowers who not only need health care but material and financial support. Also due to reduced productivity, unemployment and lack of savings has condemned many elderly people into poverty. Pension repayment and cash transfer for the elderly has not been effective and sustainable. The majority of elderly people lack social protection, they have no savings, or tangible investment and may not access credit facilities.

The elderly are also faced with deteriorating health: Due to ageing, the health of the elderly tends to deteriorate. The Poor health is heightened by poor nutrition, poor housing and neglect, mistreated or abused by the other members of the family/ society.

2.3.4 Persons with Disability

The population of disabled people in the county includes physically challenged, blind, deaf, epileptic, cerebral palsy and albino– these are an important minority of the total, but the majority of disabled people have other (often less visible) impairments. Among adults, trends in impairment show increasing numbers reporting mental illness and behavioural disorders, while the number of people reporting physical impairments is increasing.

Disability and poverty reinforce and perpetuate one another. People with a disability are among the poorest of the poor, while people living in poverty are more at risk than others of acquiring a disability. People with a disability have limited access to **health care** and education, have difficulty finding employment, face high levels of stigma and discrimination and are commonly denied their rights. These factors all contribute to economic vulnerability and social exclusion. In turn, poor households rarely have access to adequate food, shelter, hygiene and sanitation facilities, portable water and preventative health care services; characteristics known to exacerbate poverty and increase the risks of disability.

Women and girls with a disability, along with the elderly, are most vulnerable to poverty. They also face multiple layers of stigma and discrimination. Children with a disability are likely to remain illiterate, untrained and end up unemployed because of inadequate access to child-care services, schools and other social services.

2.3.5 People Living with HIV

The number of people living with HIV has continued to rise over the years. People Living with HIV (PLHIV) are faced with compromised immunity which renders them susceptible to a myriad of health, economic and social problems. Key to the problems facing the PLHIVs include but not limited to poverty, inadequate care and support and psycho-social

problems. Most of the PLHIVs are living in Poverty due to inadequate income and over stretched resources due to illness and other competing family needs. Faced with low productivity, PLHIVs are left with low or lack of income and inadequate food. Compounded with poverty, PLHIV suffers from poor and inadequate nutrition and poor health mainly because of high cost of treatment of illnesses associated with HIV and also lack of information on proper nutrition. They also face stigma and discrimination and low self-esteem.

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CHAPTER 3

STRATEGIC INTERVENTIONS

Different policy frameworks on social protection have been closely reviewed to align the efforts by multiple actors and development partners to ensure synergy and simplified operational approach in implementing various intervention measures. The county government is committed to strengthening the ongoing social protection initiatives to achieve desired results for a just and development conscious society. It is keen to complement and reinforce social protection measures currently being undertaken at national and county level with an effective mechanism for a coordinated approach.

There are several vulnerable groups in the county including Women, OVCs, PWDs, the Elderly and the Widowed, and PLWAs. These groups require social protection to cushion them against economic shocks and further exposure to vulnerable conditions. The county government will upscale and institutionalize a county programme through initiatives highlighted in this policy. Further, the County will collaborate with relevant organizations in providing social protection programmes.

3.1.1 Women and men

Policy statement

The GMC shall initiate accelerated women empowerment programmes and for them to tap into existing national and county affirmative action funds and programmes to develop and exploit their full potential.

Empowering women to participate fully in economic life across all sectors is essential to build stronger economies, achieve internationally agreed goals for development and sustainability, and improve the quality of life for women, men, families and communities.

The private sector is a key partner in efforts to advance gender equality and empower women. Current research demonstrating that gender diversity helps businesses perform better signals that self-interest and common interest can come together. Yet, ensuring the inclusion of women's talents, skills and energies—from executive offices to the factory floor and the supply chain—requires intentional actions and deliberate policies.

There is therefore the need to embrace the Women Empowerment Principles as developed through a partnership between UN Women and the United Nations Global Compact, the Principles are designed to support organisations in reviewing existing policies and practices—or establishing new ones—to realize women's empowerment.

The county government will endeavour to establish high-level corporate leadership for gender equality; treat all women and men fairly at work—respect and support human rights and non-discrimination; ensure the health, safety and well-being of all women and men

workers, promote education, training and professional development for women; implement enterprise development, supply chain and marketing practices that empower women; promote equality through community initiatives and advocacy and; measure and publicly report on progress to achieve gender equality

This commitment will be attained through the adoption of the following strategies:

- (i) Organising and sensitizing women to benefit from women empowerment programmes from both county and national government such as Uwezo Fund, AGPO, Women enterprise Fund;
- (ii) Undertaking civic education to empower women to express themselves and have their views respected, and to live free of poverty and discrimination.
- (iii) Ensuring access to credit by women and vulnerable groups by establishing a County Enterprise Capital Fund; County empowerment fund.
- (iv) Providing free basic entrepreneurial skills training to women at County technical training institutes(CTTIs)
- (v) Reserving at least 10% of business opportunities for women in the county.
- (vi) Establishing transparent information centres at every ward within the county eg- notice boards.
- (vii) Developing a master plan for promoting Small and Medium scale Enterprises (SMEs) and;
- (viii) Enhancing cooperative development activities and revitalize dormant cooperative societies.
- (ix) Promote table banking activities among the groups
- (x) Enhance leadership roles among the groups.

3.1.2 Orphaned & Vulnerable Children

High poverty rate exerts its most extreme effects on the welfare of orphaned children, limiting their right to access clean water, healthy food, medical care, education, shelter and protection of basic freedoms/entitlements.

Policy Statement

The GMC shall fast-track the implementation of a comprehensive and integrated care and support for orphans and vulnerable children. In addition GMC will upscale provision of essential services to orphans and vulnerable children including but not limited to support in nutrition, clothing, beddings, medical care, basic education, vocational training, socio-psychological support, and prevention from HIV infection.

To realise this, the county government will:

- (i) Set the criteria for identifying orphans and OVCs in each Sub-County for necessary support;

- (ii) Constitute a committee to carry out identification of orphans and OVCs in each Sub-County;
- (iii) Establish a psycho-social support centre for OVC;
- (iv) Prioritise OVCs in the administration of bursary and county scholarship awards for education and tertiary training;
- (v) Enlist host households/ families in the County Enterprise Capital Fund for care and support of orphans and vulnerable children;
- (vi) Inclusion of innovative skill training in special school curriculum and county technical training institutes for empowerment;
- (vii) Develop strategies for supporting children to remain in school; and
- (viii) Enforce children rights.
- (ix) Strengthen and support existing children institutions

3.1.3 The Elderly and the Widowed

Policy statement

The GMC undertakes to start aging preparedness and support programmes to improve on readiness a for the aged and the widowed by host communities and establish safety nets.

The strategic interventions shall involve:

- (i) Sensitization on widowhood and care for the elderly to improve understanding with the hope of reducing the cases of discrimination, isolation, mistreatment and abuse.
- (i) Mounting of aging preparedness sensitization programsto enable people to deal with the fear associated with growing old. Members of the public will be encouraged to keep savings and invest in order to secure their old age.
- (ii) Establish universal healthcare and livelihood support for the elderly persons to supplement ta similar national government initiatives;
- (iii);
- (iv) Initiate counselling and enlightenment programme to alleviate suffering, change of outlook towards life and adoption of a positive living mind set;
- (v) Develop collaboration relationships with the national government and other stakeholders on the targeted group to avoid duplication of effort; and
- (vi)
- (vii) Strengthening family care and support systems to take care of their elderly.

3.1.4 Persons with Disability

Policy statement

The GMCwill prioritise implementation of a comprehensive and integrated care and support programmes for People Living with Disabilities. Further, the County Government will adopt a disability-inclusive development agenda that envisions a society that values and

enfranchises all people with a disability. Such disability-inclusive practice seeks to contribute to equality of opportunity and equitable outcomes for all people in the County.

Strategies to be adopted will involve:

- i. Respect for the provisions of the Constitution and actualise the implementation of the Persons with Disability Act, 2003;
- ii. Provision of micro-loans and or grants to Persons with disability to end the cycle of disability and poverty;
- iii. Incorporating disability mainstreaming in county HR policies;
- iv. Establishing a social fund for persons who require 24 hours attention/support from caregivers or next-of-kin;
- v. Ensuring representation of disabled persons in social-economic and political development agendas;
- vi. Initiating a skills development programme in select youth polytechnics based on needs survey.
- vii. Supporting PWD's groups and caregivers in income generating activities;
- viii. Establish a training revolving fund for bright but needy PWDs to pursue skills enhancement programmes for economic empowerment;
- ix. Facilitating a barrier-free environment in all county government building structures for ease of movement;
- x. Encourage sports, recreation and growth of a culture for support and social development for PWDs;
- xi. Collaborate with the national government to update register of PWDs;
- xii. Exempt PWDs engaged in informal trade from paying local taxes/levies and;
- xiii. Supporting 30% affirmative action and Access to Government Procurement Opportunities (AGPO) for persons with disability.
- xiv. Support the pwds to acquire assistive devices
- xv. Promote table banking among women
- xvi. Affirmative action on bursaries and scholarships for PWDs
- xvii. County government will establish a rehabilitation and assessment centre for PWDs

Conduct public awareness to programmes on disability to avoid stigma and discrimination;

xviii.

3.1.5 People Living With HIV/AIDS

Policy statement

The GMC shall integrate economic empowerment into the health interventions for PLHIVs. Strategies will involve:

- (i) Encourage access to county empowerment fund for PLHIV support groups to initiate home-grown income generating activities in order to be able to cater for their own needs;
- (ii) Link PLHIVs with relevant national and county government departments for referral cases, medical care, support and psycho-social services;
- (iii) Conduct public awareness programmes on HIV/Aids to avoid stigma and discrimination;
- (iv) Strengthen psychosocial a care centre at the county referral hospital for PLHIVs; and
- (v) Establish collaboration with NGOs and business community for PLHIVs.

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CHAPTER 4

IMPLEMENTATION FRAMEWORK

4.1 Institutional Arrangement

To achieve the desired change and policy the target beneficiaries will be fully involved in the formulation of the plan. This will ensure ownership of the intervention's contained in the policy.

The key stakeholders dealing with the various categories of vulnerable persons will also be involved to ensure the achievement of the set objectives and sustainability of the desired change. The stakeholders referred in this context will include; Institutions/ organizations or persons involved in the care of the vulnerable persons such as:

4.1.1 Office of the Governor

- (i) Political awareness and support for the policy
- (ii) Liaise with the national government for support

4.1.2 County Assembly

- (i) Pass necessary legislation needed for the implementation of the policy
- (ii) Creating public awareness on the policy

4.1.3 Department of Gender, Sports, Youth & Social Services

- (i) Budget for the implementation of the policy;
- (ii) Provide strategic direction on the policy;
- (iii) Co-ordinate activities on social protection in the county
- (iv) Establish sub-county and ward social protection committees,
- (v) Establish a co-ordination panel to manage liaison with the national government on social protection; and
- (vi) Review this policy as need may arise.

4.1.4 Department Responsible for Finance

- (i) Allocate Funds for the initiatives under this policy
- (ii) Negotiate with the relevant national agencies and development partners for increased funding

4.1.5 Department of Basic Education

- (i) Establish linkages with the national government especially on special needs education;
- (ii) Assist in the development and adoption of a suitable curriculum for specialised skills development programme at the village polytechnics for women and vulnerable groups.

Department responsible for Health

Department responsible for trade and cooperatives

Department responsible for civic and public participation

4.1.6 Sub-county and Ward /villageAdministrators

I. Coordinate policy execution (role of the administrator as per the constitution)

- (i) Disseminate the policy and create awareness to the public on the county government initiatives on social protection
- (ii) Liaise with national government local administration in identifying vulnerable groups covered by the policy

4.1.7 Non-State Actors

- (i) Mobilise resources for support and care of the identified categories of vulnerable persons,
- (ii) Participate in the development of intervention strategies and implementation of this policy.

4.1.8 Sub-county/Ward / Village Social Protection Committees

To carry out governance responsibilities around the county, committees will be established at the Sub-county and Ward level. Membership to these Committees will be determined by the CEC responsible for social services. The Sub-county and Ward / village committees will be answerable to the CEC for the time being responsible for social services who will in turn establish appropriate liaison arrangement with the national government. Their main roles of the committees will be to:

- (i) Oversee and monitor social protection interventions in their jurisdiction.
- (ii) Coordinate and harmonize programmes within the sub-county/ward to minimize overlaps.
- (iii) Ensure that sector policies and guidelines are implemented in the sub-county/ward
- (iv) Maintain a registry of programmes and beneficiaries.
- (v) Be responsible for the targeting and exit procedures of the programmes in their jurisdictions.
- (vi) Disputes will be resolved or referred to the County Social Protection Committee (CSPC) by the sub-county committees.

CHAPTER 5

FUNDING

5.1 Sources of Funds for Social Protection

The County Government regards social protection as an investment and one of the most important aspects of its county social development agenda.

Policy Statement

The government of Makueni County will mobilise resources and set aside funds for the implementation of the social protection programmes. It will ensure access to credit by women, and vulnerable groups by establishing a County Enterprise Fund (CECF) for them to borrow from at concessional terms at either individual or group level. The county government will ensure transparency and accountability of funds allocated under the programme.

5.1.1 National government (public finance management act, national social protection policy)

5.1.2

5.1.3 5.1.2 County Government Funding

In allocating resources, the County Government will give priority to ensuring the widest possible enjoyment of the right given the prevailing circumstances, including the vulnerability of particular groups or individuals. Given that social protection is recognized as a critical part of human development, the GMC shall make deliberate and concerted efforts to identify new and additional resources to support this sub-sector.

The county government endeavours to:

- (i) Shall ensure that adequate resources are allocated to social protection in a predictable, gradual, and long-term manner.
- (ii) Shall allocate at least 2.5% of its annual budget to the County Enterprise Capital Fund.
- (iii) Adopt macro-economic policies that ensure sustainable growth and fiscal stability
- (iv) Shall ensure that each Department allocates at least 2.5% of its budget to empowerment programmes.
- (v) Adopt a taxation policy that ensures that there are adequate resources available to fund social protection.
- (vi) Sponsor motions/bills for tax rebates and tax remission for individuals, firms, and organizations that make social assistance contributions within an established framework.
- (vii) Establish public private partnerships in mobilizing resources

5.1.4 **5.1.3 Non-State Actors' Funding**

5.1.4.1 **Private Sector Funding:**

The private sector, as the principal beneficiary of a healthy and socially stable workforce, has an interest in preventing risks and minimizing vulnerability. Therefore, the Policy expects the private sector to establish and operate retirement and medical benefit schemes and to develop affordable and sustainable credit schemes for the poor and contribute to social protection as part of corporate social responsibility (CSR).

5.1.4.2 **Development Partners:**

The county government and its development partners will work closely to ensure that social protection is funded in a regular, predictable, and sustainable way. In consultation with the national government, the county government shall put mechanisms in place to consolidate the funding for social protection from development partners.

5.1.4.3 **Community Funding:**

The agencies implementing this policy will, in consultation with communities, develop a mechanism for strengthening the existing CBOs. The GMC shall help communities to forge and sustain strategic links and to identify opportunities for social support.

5.1.4.4 : public benefit organizations

Voluntary organizations including NGOs, CBOs, FBOs, foundations, and trusts will be coordinated and assisted by the GMC to review, strengthen, and align their interventions with those of other actors to take advantage of any synergies in social protection programming.

5.2 The Management of Funds

While the autonomy of various actors will be respected, it is vital for the efficiency and impact of expenditures on social protection that the disbursement of resources, is non-discriminatory, transparent, properly coordinated and accounted for.

This Policy therefore entails:

- (i) Developing strategies and prioritising funding for identified social protection interventions and review the relative shares of the county government and other stakeholders;
- (ii) Improving targeting of social protection beneficiaries;
- (iii) Reducing administrative costs associated with paying benefits and collecting contributions;
- (iv) Improving the management of funds allocated to social protection;
- (v) Identifying and addressing funding gaps and duplication of interventions;
- (vi) Strengthening the financing and sustainability of funding;

(vii) Helping stakeholders to review the levels and distribution of their funding.

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CHAPTER6

MONITORING AND EVALUATION

6.1 Monitoring and Evaluation Process

Monitoring and Evaluation (M&E) of the extent to which activities and programmes developed for social protection are implemented will be critical to the GMC in implementing this policy. Some of the reasons for poor implementation of government policies, strategies and programmes relate to lack of effective M&E systems. M&E is a management tool that facilitates timely feedback mechanisms for appropriate interventions. It is important in providing answers to questions of relevance, efficiency and effectiveness.

In order to effectively monitor the implementation of various activities and programmes that have been outlined, participatory monitoring and evaluation approaches will be applied. These will include provision of a feedback system on progress being made; awareness of impacts; transparency and accountability. The feedback mechanisms will provide information on whether existing or new approaches developed are working effectively or not. It is expected that these approaches will allow strengths to be built upon and deficiencies rectified. In all cases, best practices and lessons that can be applied to improve performance will be documented and acted upon.

The monitoring and evaluation process will involve stakeholders at all levels in collecting, processing and communicating information that will assist in decision-making as noted under the Implementation Framework. It will be used as a continuous feedback system involving the overseeing or periodic review of each activity at every level of implementation. A framework for M&E will be established by the department responsible for social services to reflect a structure that facilitates the necessary support for vulnerable categories of the society; prompt decision-making; accountability to stakeholders; and objectivity in evaluation.

The framework will be designed to ensure that a suitable results-oriented approach in M&E is adopted and institutionalized within the operational systems in the respective county departments.

6.2 Framework for Monitoring and Evaluation

The activities and programmes outlined in this policy document will be monitored and performance evaluated periodically at all levels. This will involve:

- (i) Definition of the main objectives and targets to provide a common understanding among the various actors;

- (ii) Selection of indicators for measuring the efficiency and effectiveness of activities; the quality and effectiveness of outputs; results and impact;
- (iii) Emphasis on self-monitoring at all levels and stages; and
- (iv) Identification of ways and means for feedback on lessons learnt and replication of best practices.

The county department responsible for social protection shall prepare comprehensive annual work plans as the basis for managing the implementation process of this policy. The process will be monitored through regular forums involving key stakeholders at all levels. Department responsible for M&E shall play vital role to ensure implementation of this policy

6.3 REVIEW AND FEEDBACK MECHANISM

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