ADVOCACY BRIEF

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SOCIAL MONITOR

Social protection for child rights and well-being

in Central and Eastern Europe, the Caucasus and Central Asia

MAKING SOCIAL PROTECTION WORK FOR CHILDREN IN CENTRAL AND EASTERN EUROPE, THE CAUCASUS AND CENTRAL ASIA[1]

Social protection can help guarantee adequate living standards for children and contribute to the realization of their rights. Investing in it helps States build more cohesive societies, more resilient communities and stronger economies. To fight child poverty and social and economic vulnerability, countries need to develop well-integrated social protection systems that speak to children's specific needs, paying special attention to the most vulnerable.

By tackling child poverty and social exclusion, social protection can help children in Central and Eastern Europe, the Caucasus and Central Asia enjoy the minimum living conditions they need to be able to realize their rights to survive, thrive, learn and participate fully and equally in society. It is in the interest of the region's States to invest in social protection for children, which – as global evidence shows – can contribute to building social cohesion, economic growth, and resilience in the face of crises.

For children, families and countries to reap the maximum benefits of social protection, social protection systems need to address children's specific needs and vulnerabilities. Countries need to ensure that social protection programmes reach the poorest and most marginalized children, who are most likely to encounter obstacles in claiming their rights and getting benefits and services.

Cash benefits in the region are more often than not going to children and families who need them, but many others who also need such transfers are not getting them – especially if they come from marginalized groups, like children with disabilities or Roma children. Overall, what children and families receive, in most countries of the region, is not enough to make a substantial difference in their lives. Social care and support services and programmes to help children and families access early learning, education and health services are at early stages of development and do not yet reach all those who need them. They will require significant investments in the future.

Children living in poverty experience deprivation in multiple, interlinked dimensions. To address these effectively, cash benefits and services need to be linked together and coordinated with care and early learning, education, health, and other services that benefit children. Social protection systems need to be integrated into a country's broader economic and social policies.

To maximize the impact of social protection on children, the region's social protection systems need to be further developed in terms of the design of policy and legislation, as well as the capacities needed to put them into practice – from budgeting and administrative arrangements at the central level, to service delivery and social work on the ground. Reforms of social protection must be nationally led and tailored to each country's context, aiming to progressively achieve basic income security for all children, at least at a nationally defined minimum level, and ensure equitable, inclusive access to quality psychosocial support services.

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[1] Countries and territories included in the analysis are Albania, Armenia, Azerbaijan, Belarus, Bosnia and Herzegovina, Bulgaria, Croatia, the Czech Republic, Estonia, the former Yugoslav Republic of Macedonia, Georgia, Hungary, Kazakhstan, Kosovo (UNSCR 1244), Kyrgyzstan, Latvia, Lithuania, Montenegro, Poland, the Republic of Moldova, Romania, the Russian Federation, Serbia, Slovakia, Slovenia, Tajikistan, Turkey, Turkmenistan, Ukraine and Uzbekistan.

The key findings of this advocacy brief are taken from the UNICEF report 'Social Monitor: Social protection for child rights and well-being in Central and Eastern Europe, the Caucasus and Central Asia', December 2015.

WHY DO CHILDREN IN THE REGION NEED SOCIAL PROTECTION?

1

a. Child poverty undermines the region's social and economic progress

As the countries of Central and Eastern Europe, the Caucasus and Central Asia have continued their transformations over the past 25 years, they have seen their economies grow and their political situations stabilize. Poverty rates for the general population in this region declined in the 2000s. Between 2002 and 2012, the number of people in the region subsisting on less than $3.10 per day declined by more than half, to around 30 million people. Many children's lives have improved, with progress across virtually every area of children's rights. But these improvements mask major disparities.

Amid progress, groups of vulnerable children across the region are consistently left behind. Children with disabilities, members of ethnic minorities (Roma children in particular), children affected by migration, children living in rural areas, those living and working on the streets, and those in contact with the law or living in institutions all display significant gaps in the realization of their rights. Material poverty, social exclusion and discrimination bar many from fully enjoying their human rights.

Societies suffer particularly from children's poverty. When deprivation prevents substantial numbers of people from fulfilling their potential, countries have a hard time building the skilled, productive and versatile workforces they need to succeed in the rapidly changing and knowledge-driven global economy. Childhood deprivation has real, measurable costs for countries' economies: in the United States, the total aggregate costs of conditions associated with childhood poverty, including costs associated with crime, is estimated to be around $500 billion per year, or 4 per cent of gross domestic product (GDP).

For people living in poverty or teetering on its edge, shocks and upheavals such as those that attended the recent global food, fuel and financial crises – and the slow recovery and ongoing troubles within a number of global economies – can tip them over the edge or deepen their poverty. With high inequality and large numbers of people excluded from progress, marginalized in society, and voiceless in civil and political life, countries cannot achieve the level of social cohesion or citizen participation necessary for good governance, social stability and resilience in the face of crises.

b. Poverty hinders the potential of children in the region

Children everywhere are especially vulnerable to poverty. It deprives them of the material, spiritual and emotional resources they need to survive, develop to their full potential, and fully and equally participate in society. Poverty threatens children's rights, as set down in the Convention on the Rights of the Child.

Children are more vulnerable to poverty than adults, and many in Central and Eastern Europe, the Caucasus and Central Asia still experience serious, prolonged deprivations of their rights. Child poverty rates in the region are higher than overall poverty rates: in Tajikistan, the absolute poverty rate for children 0–15 in 2009 was 50.9 per cent, while the rate for the general population was 46.7 per cent; in Romania, the at risk of poverty rate for children 0–15 in 2013 was 31.5, while the rate for the population aged 16 and above was 20.7.

Children are more likely to experience deeper poverty. In Bulgaria, for instance, in 2013 the at risk of poverty gap for children aged 0–17 was 41.7, while the same gap for the population aged 18 and above was 27.5 per cent.

For children who experience discrimination and exclusion by dint of disability, ethnicity or language, or for other reasons, poverty reinforces and exacerbates the deprivations associated with being a member of a marginalized group – and vice versa. Results from a survey in Europe in 2011 found that between 70 and 90 per cent of the Roma households surveyed experienced severe material deprivation. About half of Roma respondents in the same survey had experienced ethnically based discrimination in some area of their lives within the previous 12 months.

Children with disabilities are also at a higher risk of poverty across countries, as are children living in rural areas. In Romania, for instance, 50 per cent of rural children live in households at risk of poverty, compared with 15 per cent of urban children. In the Republic of Moldova, 33 per cent of rural children live below the absolute national poverty line, compared with 10 per cent of urban children. In countries including Tajikistan, Uzbekistan and Kyrgyzstan, three out of four poor people live in rural areas. At the same time, in cities, highly unequal incomes and access to services mean that many children living in informal settlements and impoverished neighbourhoods face profound poverty, while average statistics suggest a higher standard of living.

Poverty strikes children in many aspects of their lives, compromising a range of rights. It keeps them from growing up in safe, adequately nurturing environments and getting enough nutritious food and the health care they need to grow up healthy and develop fully. Children are most vulnerable in their early years, when their circumstances and experiences shape their physical, psychological and cognitive development, with implications reaching far into their futures. Deprivation during that critical period can do profound and lasting damage.

Poverty still deprives some of the region's children of their most basic right to survive. While child and infant mortality have dropped significantly in the region as a whole, under-five mortality continues to be stratified by wealth quintile, and some countries have rates 50–100 per cent higher among the poorest quintile as compared with the richest. Similar inequalities exist by gender, the mother's education level, urban or rural residence, and ethnic or language group. Roma children have consistently higher under-five mortality.

Children's chances of getting proper nutrition vary depending on their families' wealth, region and ethnic group. Children from the poorest quintile of households are almost three times as likely to be underweight or stunted than those in the richest.

Many children in the region are deprived of their right to grow up in a supportive and caring family environment. Poverty and deprivation can push families to place children in institutional care. Around 1.3 million children region-wide grow up in formal care, with half in residential care institutions that risk harming their health, development and future life chances. Countries have undertaken reforms and developed new services to provide alternatives, but children with disabilities have benefited least from these.

Although it is increasingly recognized that experiences in early childhood lay the foundation for later development, preschool education is patchy in the region. The poorest children, those living in rural areas, those whose parents are migrant workers, and those who have disabilities or belong to ethnic minorities are disproportionately excluded from preschool. In Armenia, only 35 per cent of children with disabilities residing with families attend kindergarten, and only 12 per cent of children with disabilities who live in orphanages.

As children grow up, poverty curtails and impoverishes their education and excludes them from opportunities to improve their quality of life, and take up a place in the workforce and in civil and political life. While the region's countries boast high overall rates of school enrolment, 2.5 million children of primary school age are still out of school, along with 12 million of secondary school age. Adolescents from the poorest income brackets and from ethnic and linguistic minorities are among those most at risk for leaving school early. Both the formal and informal costs of education have continued to rise in the region, limiting access for poor and marginalized children.

From stunted growth to inadequate education, the impacts of child poverty often have repercussions into adulthood. The cumulative effects of deprivation on development and access to opportunities mean that children who grow up poor are likely to remain

poor as adults, and raise their own children in poverty as well – a vicious cycle that robs successive generations of children of their rights.

c. Social protection can address children's poverty and vulnerability

Countries across the world have devised a range of strategies to mitigate the effects of poverty on individuals and societies. Social protection comprises a set of policies and programmes that seek to prevent and reduce people's economic and social vulnerability to deprivation and poverty – helping the poorest children and families meet their basic needs, overcome discrimination and exclusion, and strengthen their abilities to cope with and overcome shocks.

It's not just a matter of responding to crises and intervening when risks become acute: effective social protection tackles the underlying drivers of vulnerability, preventing crises before they happen. Because poverty has many dimensions and multi-layered, interlinking causes and effects, social protection systems must address all of these to reduce vulnerability and deprivation in a lasting way.

Social protection encompasses a variety of programmes and policies, the bulk of which are often divided into social assistance – non-contributory, publicly financed transfers – and social insurance – transfers that rely on individuals' monetary contributions. Based on UNICEF's definitions, the components of social protection most relevant for children are as follows:

- Social transfers (or social benefits) – predictable, direct transfers, in kind or cash – that protect individuals and households from the impacts of shocks and support them in building up assets; these are at the heart of social protection systems, and examples include last resort social assistance targeted to the poorest quintiles of the population, conditional cash transfers, family or child allowances, maternity benefits and non-contributory pensions.

- Programmes that remove economic and social barriers keeping people from getting the services they need; examples include birth registration initiatives, subsidized school transportation, health insurance and waivers of fees associated with health care or education.

- Social support and care – protective, preventive and remedial services that help families experiencing hardship find long-term solutions; examples include social work and case management, parenting education, counselling, day care for children with disabilities, and respite care for families of children with disabilities.

- Legislation and policies that explicitly aim to tackle barriers to equality within programmes and in society generally, to ensure equity and prevent discrimination in access to services, employment and livelihoods; examples include reforms to change inheritance rights for women, or explicit provisions to ensure that marginalized groups are included in programmes.

Programmes that address material poverty directly, with cash or in-kind transfers, reduce poverty by making sure children enjoy their right to a minimum living standard. Cash transfers become more effective in reducing poverty and improving outcomes for children when they are linked to services and combined with provisions that address barriers to access. Social protection interventions can help children realize a range of rights both indirectly – as when relief from poverty enables better access to the goods, services and opportunities children need – and directly, as with cash transfers predicated on school attendance. The impact of social protection has been shown to multiply and increase when the interventions are integrated across sectors – such as child protection, health, early childhood development and education. In this way, social protection can better address the multiple factors that play into the complex problems that poverty creates.

Recognizing that children are more vulnerable to poverty than adults, social protection systems need to address the vulnerabilities that are specific to their age and life conditions. For the greatest impact against the multiple, interlinked dimensions of poverty, social protection not only needs to be coordinated with the other social sectors, but also needs to address both supply and demand sides of interventions, and be in sync with a broader set of social and economic policies and frameworks for financing and governance.

ARE SOCIAL PROTECTION PROGRAMMES MAKING A DIFFERENCE FOR CHILDREN IN THE REGION?

2

To address poverty and deprivation, countries in Central and Eastern Europe, the Caucasus and Central Asia are building on their historical legacies of social protection and working to develop their social protection systems. But these systems, as currently structured and administered, are not always living up to their potential to effectively relieve children's deprivations and vulnerabilities and often are not able to reach the most marginalized and those who most need assistance.

a. Social benefits – coverage, adequacy, benefit incidence and beneficiary incidence

The region's social assistance programmes, in highly generalized terms, tend to reach the poorest segments of the population more than the richer segments. However, not all those in need are being reached by social assistance and substantial numbers of the poorest people, including children, are not receiving any type of income supplementation.

Box 1 Indicators used to assess social benefits in the Social Monitor

Coverage: What proportion of the poorest quintile of the population actually receives the transfers?

Adequacy: What percentage of the recipient household's (in the poorest quintile) post-transfer consumption is provided by the benefit? This gives an indication of the size of the benefit and its effect in alleviating material deprivation.

Benefit incidence: What percentage of total cash benefits is received by the poorest quintile? In a universal programme, the poorest 20 percent would receive 20 per cent of benefits, while in a programme only intended for people living below a certain poverty line, the poorest 20 per cent would receive a larger portion of the benefits.

Beneficiary incidence: What is the percentage of programme beneficiaries in the poorest quintile relative to the total number of beneficiaries in the population? This is used to measure 'inclusion errors' (the number of people or households not entitled to a benefit who do receive it), in programmes only intended for people living below a certain poverty line.

The net value of the child benefit package: How does the total value of all benefits directed towards children compare with the costs associated with having children, such as childcare, housing, education, and costs of health care? The resulting 'net income' gives an idea of the actual impact of benefits on households with different numbers of children.

At risk of child poverty rates and at risk of child poverty gap, pre and post social transfers: What percentage of children are at risk of poverty after receiving the transfers, compared with before? Has receiving the transfers reduced the depth of their poverty?

Poverty headcount reduction: How much does the poverty headcount rate change due to social protection programmes?

Public spending on social benefits for children and families: How much of their GDP do countries spend on social protection, and within that, on social protection directed towards children and families?

Coverage varies widely between 13 per cent in Tajikistan and 96 per cent in the Slovak Republic. In 11 countries and territories, coverage levels of social assistance in the poorest quintile are below 50 per cent, meaning that the majority of people in need are being excluded. Extremely low coverage levels (below 15 per cent) in Tajikistan and Kyrgyzstan are of particular concern, given the high percentage of the population living below the poverty line in these countries. Countries members of the European Union (EU), like Latvia, Lithuania, Hungary, Romania and the Slovak Republic, perform better in terms of coverage, with rates above 60 per cent, together with Azerbaijan and Belarus.

The adequacy of social assistance falls between 10 and 40 per cent in most countries. Armenia, Georgia, Kosovo (UNSCR 1244) and Montenegro have rates between 35 and 55 per cent. In 15 countries, rates are below 15 per cent. Relatively low rates are particularly surprising in cases such as Croatia, Kazakhstan and Turkey, considering the level of economic development of these countries. Overall, families receive benefits in amounts unlikely to make a substantial difference in their lives, and sometimes the high costs of child rearing wipe out the benefits entirely.

Benefit incidence of overall social assistance in the poorest quintile varies between 8 per cent in Tajikistan and 46 per cent in Kosovo (UNSCR 1244), with most countries and territories falling between 20 and 40 per cent, so that the poorest quintile gets a greater share of benefits than the 20 per cent that would accrue to them through neutral targeting (*see Box 1*). Beneficiary incidence displays a smaller variance than benefit incidence, from 20 per cent in Azerbaijan to 56 per cent in Montenegro, but largely follows a similar pattern. Most countries and territories fall between 20 and 40 per cent, so that the number of beneficiaries in the poorest quintile exceeds its share in the total population. Indeed, many countries in the region have worked hard to reduce inclusion errors in their social assistance programmes in recent years, in partnership with various international organizations.

Very few of the region's social assistance programmes are well targeted to the poorest quintile (as measured by benefit and beneficiary incidence), with high coverage and high adequacy at the same time. This reflects the trade-offs that countries must often make, given scarce resources.

The best performers in terms of coverage, such as Azerbaijan, Hungary, Romania and the Slovak Republic, do not perform well in terms of benefit and beneficiary incidence or adequacy. Azerbaijan is an exception, as it displays very high coverage and adequacy at the same time. Similarly, countries and territories with higher adequacy, such as Armenia, Kosovo (UNSCR 1244) and Montenegro, tend to have lower coverage. Some of these discrepancies may result from poor programme implementation or the nature of the programme itself. But focusing too strongly on reducing inclusion errors, for instance in Kyrgyzstan, Kosovo (UNSCR 1244), Montenegro and Serbia, which display higher benefit and beneficiary incidence compared with coverage, may risk unintentionally denying benefits to large proportions of those who need them most.

There is a clear correspondence between the impact of all social assistance in reducing the number of people living below the poverty line in the poorest quintile and the coverage of social assistance. Countries like Azerbaijan, Hungary, Ukraine and Romania, with higher coverage of social assistance in the poorest quintile, perform significantly better at reducing poverty rates for the population in the poorest quintile. Azerbaijan, with combined high coverage and high adequacy, is able to reduce poverty by 59 per cent in the poorest quintile – 30 percentage points more than the next best-performing country, Hungary. For countries included where data are available, the reduction in the rate of children at risk of poverty after social assistance transfers ranges from around 8 per cent in the former Yugoslav Republic of Macedonia to around 25.5 per cent in Hungary. Most countries from the region display rates of reduction between 10 and 20 per cent. These results speak to the importance of prioritizing the expansion of coverage and adequacy as the best combination for countries to achieve significant reduction of poverty through social protection benefits.

A compounding problem is that spending on social assistance as a proportion of social protection is very low in the region, as is the proportion of spending on social assistance that goes to children and families. There is a strong association between overall spending on social benefits for families, and reduction in at risk of child poverty rates and gaps.

Countries that spend the most tend to achieve the greatest reductions in child poverty. Hungary stands out, with an over 25 per cent reduction in the child poverty rate and very high levels of spending on family benefits (13 per cent of total social protection expenditure). Estonia, Croatia and Romania demonstrate similar correlations. In most countries, however, spending on social assistance is drastically lower than other social protection spending.

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Box 2 Benefits for children with disabilities

Social protection systems across the region are beginning to pay more attention to children with disabilities. Benefits include payments for those caring for children with disabilities, supplements for training and rehabilitation, allowances for special care, or special monetary compensation for work lost while caring for a child. Most benefits are universal or categorical based on a formally recognized disability. While many countries have increased their spending on disability benefits, definitions of disability vary, and many children with disabilities may not be eligible. In Bosnia and Herzegovina, for instance, benefits only go to those with permanent, irreversible disabilities that require care by others. In addition, increases in spending may be the result of increases in numbers of applicants, with no improvement in benefit coverage or adequacy.

b. Social support and care services – access, quality, integration

Extra cash, by itself, can only do so much. Social support and care services are essential complements to social transfers, as the latter have limited ability to address many of the underlying causes of families' vulnerabilities. Ideally, a continuum of services would address vulnerabilities, strengthen families' capacities to provide quality care to their children and maximize children's development potential. Social support systems need professional social workers and individuals who are trained to address multiple vulnerabilities, identify families at risk and offer them timely and effective solutions.

Other than in some EU member States, social support services for families and children are generally underdeveloped in the region. The western Balkans have the region's strongest tradition of such social support, with Centres for Social Work – employing social workers, psychologists, sociologists and lawyers – functioning for many years. Other countries, including Belarus, Kazakhstan, Ukraine and Uzbekistan, are actively attempting to scale up their social services.

To address multiple vulnerabilities, social workers can coordinate a comprehensive package that includes outreach, legal and psychosocial counselling, risk assessment and referrals. Such approaches are still being developed. Other than in EU member States, services tend to be mostly restricted to a single sector. Armenia has taken steps to institutionalize case management on a national level, while the Republic of Moldova has established a network of community 'social assistants' to support vulnerable children.

While countries are working to keep families together and children with disabilities out of institutions, some are not investing enough in the support services that should accompany cash benefits. In Armenia, 97 per cent of children with disabilities received disability pensions, but only 20 per cent received social support. For poor rural families, especially, there may not be enough social work providers to ensure adequate access to services. In Croatia, counselling

services for children with disabilities are available in major cities, but not in many municipalities.

Generally, children and families living in rural areas are at a significant disadvantage in accessing support services. In Belarus, urban areas have 100 per cent social service coverage, but in rural areas coverage drops to 55 per cent, although mobile teams exist to reach rural residents. Disparities may be tied to ethnic identity, as in Bosnia and Herzegovina.

A number of factors diminish the quality of services. Social support and care workers are frequently overwhelmed by large workloads and expected to meet the demands of many roles. In Albania, a local social support office may only be staffed by one person, who is simultaneously the social administrator and secretary and fulfils other duties. Social workers trained more on theory than practice may be underprepared for the real-life situations they encounter in their jobs. A final problem with social support and care services in the region is that they often lack sufficient monitoring and evaluation requirements, so it's hard to properly evaluate and compare within countries and across the region.

With greater investment in social support and care services in the region, more diverse and comprehensive services are becoming available. Yet, existing programmes are still limited in scope and effectiveness, especially for the most vulnerable.

c. Programmes ensuring access to social services – stubborn disparities in access

The poorest and most marginalized children and their families face considerable barriers in getting the social services they need. Existing programmes to encourage them to apply and make it easier to gain access are limited and not reaching everyone who needs them.

One major barrier is lack of birth registration, which provides proof of identity and citizenship that is often required to access services, and also protects children from exploitation and neglect. Most countries of the region have fairly high rates of registration. But there are substantial disparities between the poorest and richest quintiles, with children from the lowest four times more likely on average to be unregistered than those in the richest.

To help children gain access to health care, social protection needs to help them overcome financial, physical or cultural barriers. Some state-subsidized health insurance schemes targeting poor and vulnerable groups have begun to emerge, with countries like Croatia, Belarus, Serbia and Romania providing children with free health care. In some countries, like Ukraine, Romania, Hungary and the former Yugoslav Republic of Macedonia, Roma health and community mediator programmes have been set up to help Roma populations access a variety services, with outreach to help bridge the gap between authorities and communities.

Disparities still exist. In the Republic of Moldova, the vast majority of Roma individuals have no health insurance, largely because they lack identity documents. In Georgia, only 48.4 per cent of the lowest quintile were covered by the Medical Assistance Programme (MAP) or similar insurance.

Health insurance schemes limit what health services they cover – medicines or secondary care may not be covered. Some services may require co-payments that the poorest may not be able to afford, and there may also be informal costs that social protection programmes do not address.

Programmes that facilitate access to education are hard to assess for lack of information on private spending on education. Parents often pay formal and informal fees for their children's education – for supplies, textbooks, transportation and other items. Countries such as Turkey have programmes to reduce or eliminate some of the formal fees, but not all expenses are covered. School feeding programmes may help eliminate some of the costs of education, but few countries have them.

Children from ethnic minority groups and children with disabilities may be relegated to segregated schools. In Bulgaria, a project that provides transportation to Roma students from remote settlements to mixed schools has had limited success because parents worry about their daughters' safety during the long commute.

Financial barriers put early childhood education and care services out of reach for many families, and it's particularly difficult for poor children, who are two times less likely to attend preschool, and children who have disabilities or are members of minority groups. Some non-EU countries provide assistance to parents for pre-primary education in the form of subsidies or discounts, but coverage levels are still very low.

WHAT PREVENTS SOCIAL PROTECTION FROM REACHING CHILDREN AND FAMILIES WHO NEED IT, AND WHAT ARE COUNTRIES DOING TO ADDRESS THESE BARRIERS?

3

The region's social protection systems have been unable to bring effective programmes and interventions to all children who need assistance – and the most vulnerable and marginalized children have been least likely to benefit. Many countries are starting to undertake promising initiatives to extend the reach and improve the quality of social protection for children. Countries need to tackle the range of obstacles families encounter when seeking the financial assistance, services and support they need – from negative attitudes and lack of information about available programmes to financial barriers and complicated administrative procedures. They also need to address poorly designed and implemented legislation, lack of coordination across sectors and policies, and lack of oversight and accountability mechanisms.

a. Attitudes and awareness

Prohibitive social norms and discrimination against the most vulnerable children and families, and against recipients of social protection benefits and services in general, prevent many from receiving, or even applying for, the benefits and services they are entitled to. In Albania, state institutions have given incorrect information to Roma families, while in Kazakhstan, some respondents to a survey have reported aggressive attitudes towards parents seeking social assistance for children with disabilities.

Because many people may not be aware of how social protection benefits entire societies, they may perceive it as charity. Receiving social benefits can become a source of stigma and shame, discouraging eligible families from applying. Stigmatizing attitudes persist even among social workers. In Romania, social workers have discouraged young people from applying for benefits, telling them they were young, healthy and could earn a living if they wanted to.

Many potential beneficiaries are not aware that benefits and services exist, or that they have a right to them. In the former Yugoslav Republic of Macedonia, most applicants for child allowances reported learning about them from their extended family, friends or neighbours, not official outreach. Language barriers, especially in the case of ethnic minorities, and illiteracy can get in the way of more widespread awareness.

Comprehensive information campaigns can spread awareness. In Kyrgyzstan, the government of Batken District launched a campaign to inform rural families about available benefits and how to enrol in them. The intervention covered nearly 23,500 people by mobilizing community-level actors and using local radio to disseminate information.

b. Policies and laws

In many countries of the region, social protection legislation is fragmented. In Ukraine, 30 legal acts define state policy on social protection, and 58 laws and over 120 regulatory acts define different types of assistance. Programmes are implemented without consideration of other initiatives, and legislation may not specify which ministry is responsible for what, and how overlapping programmes are to be coordinated.

Social protection legislation may be poorly designed, and decisions about eligibility criteria and benefit levels inadequately informed. Poor households may be forced to deplete their resources before they

meet eligibility criteria, or they may need to forgo other benefits in order to stay below the eligibility threshold. This eliminates the cumulative effects of benefits that address multiple vulnerabilities. Some programmes disqualify applicants if they work, even if they are still poor.

When eligibility for benefits or access to services depends on factors such as having a permanent address, attending school, or not receiving remittances, many needy children and families may be excluded. Roma, internally displaced, refugee or migrant worker families may not have a permanent address. In Tajikistan, the main family benefit is administered through schools, excluding children who do not attend – and who are statistically more likely to be poor.

Means-testing mechanisms designed to ensure that benefits only go to those who truly need them often exclude many of the most vulnerable. Careful design can address this problem. Georgia's MAP has expanded health coverage among the most vulnerable by using different targeting methodologies – some groups, including children in state care, are eligible for free assistance without means-testing. Among children in the poorest quintile, MAP expanded coverage from 21 to 40 per cent.

To improve the adequacy of benefits, countries can take a variety of measures. For instance, they can index benefit amounts to inflation or link them to national poverty lines or minimum income standards. Belarus has changed the way it calculates its child allowance, which is now linked to average salaries in the country, so as to better meet the needs of families and children living in poverty.

c. Putting policies into practice

Countries may not have the capacities to effectively put legislation into practice and deliver services at the local level. Secondary legislation is far less developed in the region than primary legislation. Policies do not come with adequate action plans or guidance on how to implement them.

Underdeveloped guidelines and standards of social service provision mean that the quality of visits by social workers is often low. To remedy this situation, Albania has recently developed a comprehensive Working Protocol for Child Protection Workers, which sets out national standards for the roles and responsibilities of child protection workers, as well as giving detailed guidelines for using the case management model.

Legislation may also not be accompanied by investment in the capacities of regional or local institutions to enact it, and institutions may also lack capacities to establish appropriate accountability mechanisms and clearly delineate the roles of each actor in implementation. Bulgaria has sought to address this problem by requiring regional administrations to adopt strategies to develop social services over five years, while involving municipalities and clearly delineating the division of labour and responsibility.

d. Paying for social protection for children

Bottlenecks in financing also are common across the region's social protection systems. Countries may lack budgeting and financial planning capacities, and also may have a hard time opening up fiscal space for social protection.

The majority of the countries in this region are in the process of reforming their systems of public finance management. Notably, they are developing medium-term budgeting, to allocate spending across several years. The reforms are still in early stages in some countries, and some still do not allocate a specific category for social protection in their planning.

The amounts allocated to social protection tend to be small, even if the fiscal space allocated is a reasonable percentage of GDP – and much of the spending goes to benefits that are not focused on children or families. Some countries of the region

have increased their spending on children and families in recent years. In 2012, Belarus raised the benefit for children with disabilities from 65 per cent of the minimum subsistence budget to 100 per cent, and doubled the lump sum paid at the birth of a child.

Fiscal space tends to shrink when most resources funding social protection come from district or local governments. Local authorities, while closer to the needs and actual circumstances of their constituents, have limited institutional mechanisms to translate policy into functional programmes with adequate budgeting and resources. Revenue may fluctuate from year to year, leaving communities with far fewer resources in times of extended financial instability.

Delegating funding to the local or district level can create disparities between communities and regions. Richer areas have greater potential for revenue generation and thus greater spending power, and the existing mechanisms for redistribution across regions through central budgetary processes are not always able to compensate. In Bosnia and Herzegovina, child allowance benefits are in the range of €6-9 per month in Zenica-Doboj Canton, and €40–61 in Brcko District, while others have no child benefits at all.

Underinvestment in social protection results, in most cases, from lack of political will rather than limited fiscal space. When the influence of children's interests in the political arena does not reflect their value, rights and importance to society, child poverty and social assistance to children and families do not receive the attention and funding they deserve. Social protection reform that can achieve significant impact on children entails sustained changes and investment, and a commitment to reducing poverty and reaching the most vulnerable that spans across the entire political spectrum.

e. Coordinating programmes and ensuring quality

From design to service delivery, programmes are often not well coordinated across sectors, and administrators may not be mandated to share information with each other. For example, poor cooperation between health, education and social care still hamper home visiting and social outreach.

Programmes may also be poorly integrated into existing social and economic policies. In Bulgaria, attempts at inter-ministerial integration to avoid programmatic overlaps were made in the Strategies for Poverty Reduction and Roma Integration, but did not succeed because of ingrained departmental policies and programmes.

Poor coordination increases administrative costs, reduces efficiency and effectiveness, and results in a fragmented social protection system. It also makes it harder to address the multiple, interrelated and deeply rooted drivers of poverty. As a response, integrated social care services are gradually appearing in the region, built around the case management model and other integrated service mechanisms. Armenia has begun a nationwide reform to institutionalize case management, and aims to develop mechanisms to assess and respond to poverty and vulnerabilities in a comprehensive way.

Some programmes deliver benefits along with social work, information and referrals to further services. In some countries, like Kazakhstan, Ukraine and Uzbekistan, integrated interventions such as placing social workers in maternity wards have provided support, care, and access to services to help stop vulnerable mothers from relinquishing their infants to institutions. In the former Yugoslav Republic of Macedonia, Montenegro and Serbia, applicants for last-resort social assistance are offered social services such as family counselling while their applications are reviewed.

Most countries in the region still lack skilled professionals in the area of social care and support services, especially psychology and social work. Extremely low salaries make social work a less than attractive option, and professional education is inadequate. In Ukraine, 1,350 graduate annually from post-secondary institutions in the area of social work, but many do not take up relevant posts because they feel unprepared for the realities of the job.

Some countries are taking steps to improve the quality of education in social work. Tajikistan recently established a State Institution on Training and Practical Unit for Social and Innovative Work to train social workers, and state universities in Georgia have recently introduced graduate and undergraduate social work programmes.

f. Physical obstacles, financial barriers and administrative hurdles

Across the region, services may not be available in certain areas or physically accessible to some children and families who need them. Travel costs can hinder residents of remote areas from getting to social service organizations and centres where they can apply for benefits. Social workers and administrators are not always proactive in finding eligible households or reaching remote areas. With little in the way of accessible infrastructure, children with disabilities and their families face additional physical barriers to getting assistance.

Some governments have made physical access a priority, and overall the situation in the region is improving. Belarus has established special mobile teams that periodically visit remote villages to deliver social services.

Procedures to access cash benefits or social services may have fees or other costs associated with them that are prohibitive, especially for the poorest. Some benefits require applicants to obtain a number of documents, such as proof of citizenship, proof of unemployment or a birth certificate, and procuring each may entail a fee. In the western Balkans, applicants may be required to produce up to 27 official documents. Fees can quickly add up. Services such as preschool health care and childcare are also often associated with formal or informal fees.

The many and complex administrative requirements facing applicants are a major barrier to take-up of benefits and services, especially by the most vulnerable populations. Complicated rules and requirements may confuse not just potential beneficiaries, but also staff administering the benefits. Even where rules are clear, following the procedures and obtaining the required documents may present a substantial burden. To address this problem, Georgia has attempted to set up a 'one-stop shop' to help people obtain the documents needed for its Targeted Social Assistance and other programmes.

g. Monitoring and accountability

A number of monitoring and evaluation issues can constrain the quality and effectiveness of social protection programmes. Sometimes it is not clear who is accountable for programmes or larger policy interventions achieving their intended outcomes – or what exactly they are responsible for. In Kyrgyzstan, the distribution of functions and authority between local governments and the central government in budgetary and administrative reform matters is unclear.

Mechanisms to hold responsible parties to account for the effective delivery of social protection for children are often lacking. In Kazakhstan, the 'Government Online' system provides a complaints mechanism, but uneven computer-based Internet access may make this venue inaccessible for the most deprived populations. When children and families face discrimination or other violations of their rights in the process of applying for or receiving benefits and services, redress procedures may be absent.

Lack of oversight can leave room for misuse. This can particularly be a problem where benefits are administered at the local level, for instance in countries where local community bodies, such as *mahallas*, allocate and administer benefits. In some areas of Central Asia, local financing creates incentives to withhold funds, because funds unspent after a year can be reallocated freely. Some authorities refuse to disburse funds until members of the community have realized other obligations unrelated to eligibility criteria or benefit applications.

Finally, lack of data on initiatives, and on their impact on children specifically, makes it difficult to determine how social protection systems in the region are performing. In the western Balkans, data on rejected applicants are not digitized, so policymakers have no way to monitor and evaluate errors in implementation that lead to the exclusion of eligible children and families. Governments and agencies may not have the data collection and analysis abilities needed to assess programmes. Disaggregated data are scarce in this region, so it can be hard to pinpoint disparities, especially by ethnic identity or disability.

Overall, far too little is known about the impact of social protection on children in the region. Measuring the effectiveness and efficiency of social protection systems will require significantly more investment in disaggregated data collection and analysis. Serbia's 2011 law on social welfare tackled this problem by creating indicators on social protection – disaggregated by gender, age, ethnicity and disability. These will particularly help in understanding such issues as the number of children receiving formal care, municipal services for children, and coverage of children by cash transfers.

WHAT SHOULD COUNTRIES IN THE REGION DO TO MAXIMIZE THE POSITIVE IMPACT OF SOCIAL PROTECTION FOR CHILDREN?

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A number of countries in the region have already taken very positive steps to develop or reform their social protection benefits and services. These can be documented and examined in more detail to determine their actual impacts on child poverty, and other countries in the region, and beyond, can replicate them. The region's countries are diverse, and each will have to adapt such programmes to fit their own particular social, political and economic context.

Experience with social protection worldwide shows that change is feasible. When countries are willing and able to reform their social protection systems, they can achieve results quickly. Effective social protection geared towards children and families need not take massive amounts of resources, as demonstrated in a number of low- and medium-income countries globally, as well as in some preliminary studies in this region.

With political will to improve the lives of poor children and their families, policymakers can almost always find options to fund social assistance measures, taking advantage of unexpected flexibilities in public finances. The investment pays off. Childhood, especially early childhood, presents a unique opportunity to influence a person's potential development, enhance quality of life and form human capital. Investing in children allows them to develop the capacities to build better adult lives for themselves – and better futures for their countries.

An agenda for action for the region's countries

While reforms must be nationally led and tailored to each country's political, social and institutional context, the following priority policy actions are suggested, in the short and medium-term, to guide the reforms of social protection systems for children in Central and Eastern Europe, the Caucasus and Central Asia:

- **Prioritize the expansion of coverage of social assistance benefits for families with children, and of child benefits**, with the ultimate goal of achieving basic income security for all children.

- **Review the value of social transfers** to ensure that they are directly tied to national poverty lines, average household consumption in the poorest quintile, or national minimum income. Adjust accordingly to ensure the **adequacy of transfers**, especially for the most vulnerable children and families.

- **Allocate more fiscal resources to social protection programmes** that directly benefit children and protect fiscal space for such programmes, using the **most country-appropriate fiscal expansion strategies**, such as tax-based funding, reallocation of public resources and efficiency gains.

- **Scale up social support and care service provision** by investing further in the **numbers and capacities of social service providers** (particularly social workers and case managers) in accordance with internationally recognized standards of service provision.

- **Expand state-subsidized health insurance schemes targeting poor and vulnerable groups**, including children, and ensure they cover preventive and secondary care as well as medicines for pregnant women and children up to age 18.

- **Develop financing mechanisms to ensure access to affordable quality early childhood care and early learning services** for poor families with children.

- **Develop and/or refine secondary legislation** (by-laws, protocols, guidelines, etc.) on the implementation of social protection legislation, and **provide comprehensive training and support** to build the capacities of actors at all governance levels to operationalize programmes.

- **Develop overarching standards and protocols to better coordinate and integrate** the administration and provision of cash benefits and social support and care services at local levels, and better link these to the administration and provision of other services that benefit children, such as early childhood care and learning, education, health and nutrition and others.

- **Devise mechanisms to broaden access to information** by the general population, and by children, **about the availability of social protection** benefits and services, eligibility criteria, etc., as well as the outcomes of impact evaluations of social protection programmes.

- **Address discrimination towards families and children recipients of social protection** through legislative changes, comprehensive awareness campaigns, and training of service providers.

- **Ensure** that all social protection programmes establish **clear, regular and timely oversight mechanisms** for public interventions in social protection, **including accountabilities for monitoring and evaluation** of budgeting, service provision, administration and review of impacts on children and families, as well as data collection.

- **Collect data, disaggregated** by age, gender, ethnicity, language and disability status, to **assess the ultimate impact** of social protection programmes **on children,** adopt **child-sensitive indicators for programme monitoring** and include provisions to enable **programmatic evaluations and impact studies over time**.

- **Drive a research agenda on social protection for children in the region** with a focus on: analysis of changes in children's lives that can be plausibly linked to having accessed social protection benefits and social support and care services, documentation of the impact of integrated social protection systems and multi-sectoral interventions, development of cost-benefit analyses of the long-term benefits, and return on investment, of social protection for children, and documentation and sharing of good practices in social protection for children within and beyond the region.

Box 3 What should countries measure in order to monitor progress?

Reforms need to go hand in hand with better monitoring of the impact of social protection on children. The Sustainable Development Goals Indicators will set the framework for globally monitoring progress on poverty reduction and access to social protection. If approved and adopted by all Member States of the United Nations, the set of proposed global indicators would enable countries in the region to measure changes related to several of the priority actions around social protection for children suggested in this advocacy brief.

A list of additional indicators to measure child-sensitive social protection for consideration at regional level is proposed here – most of them are refined versions of the draft global indicators for the Sustainable Development Goals, with stronger focus on social support and care services to complement the support provided in cash. Beyond measuring programmatic success, these indicators put the focus on the impacts of social protection systems on children.

- Percentage of households with children receiving cash or other periodic income support.
- Percentage of households with children living in poverty receiving cash or other periodic income support.
- Percentage of households with a child with a disability receiving a disability benefit.
- Percentage of eligible families and children accessing at least one social support and care service provided according to internationally agreed-upon quality standards.
- Percentage of eligible families and children with disabilities accessing at least one social support and care service provided according to internationally agreed-upon quality standards.
- Child poverty rates and gaps before and after cash transfers.
- Public social protection expenditure on programmes targeting families with children as a percentage of GDP and as a proportion of total government expenditure on social protection.

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