A child sensitive approach to social protection: serving practical and strategic needs

Keetie Roelen
Rachel Sabates-Wheeler

International Conference:
“Social Protection for Social Justice”
Institute of Development Studies, UK
13–15 April 2011
A child sensitive approach to social protection:  

*-serving practical and strategic needs*

Keetie Roelen and Rachel Sabates-Wheeler

IDS, Centre for Social Protection, March 2011

**Introduction**

The last two decades has seen increased acknowledgment of the importance of issues surrounding child poverty, vulnerability and well-being and the need for a special focus within the development and poverty reduction debate to address those (Roelen, 2010; Ben-Arieh, 2001). Child poverty is widely recognized to have far-reaching short-term and long-run adverse impacts in terms of income, education and health and other areas of well-being (see e.g. Haveman and Wolfe, 1995; Brooks-Gunn and Duncan, 1997; Duncan and Brooks-Gunn, 1997). Children growing up in a poor or low-income family are more likely to receive poorer health care, to obtain lower educational outcomes and to reach lower levels of attainment in the labour market (Haveman and Wolfe, 1995; Brooks-Gunn and Duncan 1997; Duncan and Brooks-Gunn, 1997; Esping-Andersen, 2002). Children living in poverty are also more likely to grow up to become poor adults (Esping-Andersen and Sarasa, 2002; Corak, 2006a). Effects are more pronounced for those children that experience persistent poverty and live in poor and vulnerable conditions for a number of consecutive years (Brooks-Gunn and Duncan, 1997; Duncan and Brooks-Gunn, 1997).

Social protection as a development measure has gained substantial attention in recent years (see Blank et al. 2010). Social protection is increasingly being considered as part of the response to child poverty and vulnerability and child sensitive social protection (CSSP) is the catch-phrase term used to summarize a wide range of policies and programmes. But what does CSSP actually encapsulate? And what does its concept mean in practical and strategic terms with respect to instruments and interventions? The interest and concurrent body of research on social protection and its potential benefits has grown exponentially in recent years but lacks a common basis of understanding on the meaning of CSSP. Guiding principles have been formulated by UNICEF and other development partners (UNICEF, 2009) to respond to the great interest in CSSP but these err on the general side and fail to provide a detailed insight into what child sensitive social protection should or could look like.

The purpose of this paper is, first, to take stock of and evaluate the current agenda on CSSP. We recognise the importance of bringing a child focus to the established social protection field of policy and research; however, we suggest that the current definitions do not respond to practical and strategic needs. We build our argument by providing a clear justification for a focus
on children and a discussion of those issues key to improving the lives of children. Second, we identify three types of vulnerability that are pertinent to or exacerbated for children and require a tailored approach to social protection. These are: 1) physical/biological vulnerabilities; 2) dependency-related vulnerabilities; and 3) institutionalised disadvantage. A child sensitive approach to social protection must respond to these vulnerabilities by building in safeguards and instruments that minimise and counteract their impacts on children’s lives. This requires a focus on the multidimensional nature of child poverty, current wellbeing but also future well-becoming and children’s age-specific needs, thereby meeting both practical and strategic needs. Building on these elements of a child sensitive approach to social protection, we consider the degree of “child-sensitivity” of current frameworks of social protection. We then apply our proposed elements to a review of programmes and instruments that claim to be child sensitive. This paper challenges some of the policy interventions and rhetoric that are widely acclaimed to benefit children and, as such, might be labelled child sensitive.

Making the case for being child sensitive

Recent decades have seen increased acknowledgment that children deserve special focus within the debate on poverty reduction and development. There a number of grounds on which one can argue for a special child focus within policies and programming.

Firstly, it is now widely recognized that children have different basic needs from adults and are harder hit, both in the short- and long-term, when their basic needs are not met. Jones and Sumner (2011) point towards the ‘differential experience’ of poverty in childhood, setting their situation apart from adults as well as from other children depending on their life-stage. Sabates-Wheeler et al., (2009) express children’s differential needs in terms of child-specific vulnerabilities and child-intensified vulnerabilities. The first type of vulnerabilities is linked to the acknowledgment that children have different basic needs and face different types of vulnerabilities in comparison to adults. The second type of vulnerabilities resonates with the argument that children are likely to be much harder hit and experience more severe and long-term negative consequences from vulnerabilities suffered by the population as a whole.

There is sound evidence that malnutrition, lack of health care and low levels of education during infancy and childhood have far-reaching and long-lasting detrimental consequences (Haveman and Wolfe, 1995; Brooks-Gunn and Duncan 1997; Duncan and Brooks-Gunn, 1997), which do not only impact the child as an individual but the society as a whole (Esping-Andersen, 2002). For instance, a positive and robust correlation between poor nutritional status in children and low birth-weight (LBW) has been established by a range of studies (Ashworth, Morris and Lira 1997; Hoddinott and Kinsey 2001). The relationship sits at the heart of the ‘foetal origins hypothesis’ and provides support to an increasing body of evidence that many nutritional outcomes are the consequence of cumulative life-cycle processes. Maternal malnutrition leads directly to low birth-weight and subsequent poor child nutrition, which in turn is strongly related to stunted body size, cognitive impairment, poor educational performance, poorer psycho-social
development, lower activity levels, and a failure to acquire skills at normal rates (for evidence of these effects see Behrman, Alderman and Hoddinott, 2004). Another study by Alderman, Hoddinott and Kinsey (2006) showed that lost growth velocity as a pre-schooler is only partially recovered subsequently. In other words, nutritional deprivation as a child has irreversible negative effects in adulthood. Intervention early in the life-course and at particular points, especially with respect to ensuring adequate nutrition in the event of shocks (e.g. drought) and stresses (e.g. resulting from chronic poverty) is crucial for reducing long-term deprivations. The evidence that vulnerabilities can be child-specific and/or child-intensified constitutes a firm justification for placing greater emphasis on children and sensitizing the design and implementation of policies to account for their situation.

In addition, the case for child sensitive policies can also be made on the basis of arguments of rights and efficiency (Blank et al. 2010). Rights-based approaches have been at the heart of policy discourse around child poverty and have informed its response by organizations such as UNICEF and many NGOs (Jones and Sumner, 2011). It resonates with the widely ratified Convention of the Rights of the Child (CRC) and builds on the premise that poverty in itself is a violation of human rights. In addition, Blank et al. (2010) argue that social protection in itself is a basic human right as the 1948 UDHR as well as CRC refer to social protection as an entitlement rather than a charity. Although these rights-based arguments are not particular to children and holds for all humans, the argument is compounded by moral obligations related to children’s ‘innocence’ and dependency on others for the provision of basic needs. Efficiency grounds for social protection emphasize its potential for the stimulation of productivity and economic growth (Blank et al., 2010), considering social protection as an investment rather than a merely provisionary or protective measure. With respect to children, for example, interventions such as health insurance or cash transfers could prevent children being put to work in case of a temporary fall of household income and keep them in school. There is ample research pointing towards the high returns from investing in children with broad social and economic gains (Fajth, 2009), underlining the need to give children special consideration in policy processes to react to their unique position in terms of needs, vulnerabilities as well as opportunities.

**The remit of child sensitive social protection**

With the rise and rise of social protection as a central element in development policy, has come deserved criticism that popular instruments and programmes for promoting social protection have not adequately paid attention to social differentiation and the differential access opportunities that social or age-specific groups have to the variety of forms of social protection. Sabates-Wheeler and Feldman (2011) explore what a consideration of migration and migrants brings to social protection. Molyneux (2009) and Jones and Holmes (2010) bring a gender critique to social protection. Similarly, organisations and researchers with a mandate to children’s wellbeing and development have increasingly advocated for something termed: child sensitive social protection (CSSP). UNICEF can be considered to have pushed the global agenda on CSSP, in terms of both definition and advocacy. It has initiated the Joint Statement on CSSP in
2009, which calls for consensus on a stronger focus on children in the social protection agenda and to which many IOs and NGOs have signed up. So what is CSSP and what does it add to a mainstream social protection agenda? Definitions of the concept of CSSP are thin on the ground but primarily emphasize the particular vulnerabilities children face, human capital investment and make reference to target groups and mechanisms.

“Child sensitive social protection focuses specifically on addressing the patterns of children’s poverty and vulnerability and recognizing the long-term developmental benefits of investing in children. [...] In addition, interventions do not have to target children directly to be child sensitive”. (Yates, 2010, p. 210)

Temin (2008) refers to the term of child sensitive social protection as “the range of economic and noneconomic social protection interventions that need to be strengthened if the most vulnerable children and [their] families are to benefit. These include (but are not limited to) cash transfers, social work, early childhood development centres and alternative care.”

In addition, Jones and Holmes (2010) suggest that CSSP needs to be informed by “[...] an understanding of the multiple and often intersecting vulnerabilities and risks that children and their care-givers face” (p. 1) and that children’s experiences of such vulnerabilities and risks differ depending on their life-stage. Despite the various pointers provided in these definitions and guidelines, such as the complex and interlinked set of risks, long-term adverse consequences of poverty and potential interventions, we feel they fail to provide a tangible idea of CSSP and its practical implications. UNICEF’s guiding principles (2009) go some way in providing guidance for the meaning of child sensitive social protection but fall short in terms of translating those conceptual guidelines into practical and policy implications. Although the document lists a number of steps towards achieving child sensitive social protection, these present universal truths rather than specific pointers. Examples of such steps include the increase in available resources, increase in capacity and coordination and building the evidence base on CSSP. We do not dispute the relevance of these steps but consider them imperative for achieving any kind of policy. Here we try to elaborate a fuller understanding of the constituent elements of ‘child sensitive social protection’, evaluating current social protection frameworks against these elements as well as policy interventions that are widely believed to be child sensitive. The emerging and rapidly growing body of research of child poverty and well-being will serve as a basis for building our understanding of CSSP.

**Elements of a child sensitive approach to social protection provision**

As with poverty affecting all population groups, child poverty is largely considered an inherently multidimensional problem. The previous section already pointed towards the particular situation of children that differentiates their experience of poverty and vulnerability in comparison to other groups. Nevertheless, to what extent does this imply that standard social protection provisions would need to be re-thought or adapted to cater for children? In this
We argue that there are three distinct sets of vulnerability and asymmetry that are particularly pertinent to children and call for a more tailored approach towards social protection. These are: 1) physical/biological vulnerabilities; 2) dependency-related vulnerabilities; and 3) institutionalised disadvantage. The first refers to the fact that child at different ages are more susceptible to the negative impacts of malnutrition or disease by virtue of their immature immune systems and under-development. Clearly this vulnerability changes as children grow but, in general, the physiological immaturity of children make them more vulnerable than adults to negative outcomes of shocks (ceteris paribus). The second type of vulnerability refers to the fact that children are by necessity dependent on adults for their wellbeing. Again, a caveat is in order here, as older children may be more economically and socially independent. Nevertheless, on the whole children are subject asymmetrical relationships of dependency and have limited autonomy in their wellbeing decisions. As the relationship is asymmetrical it is obviously open to mis-use and abuse, thereby reinforcing children’s vulnerable positions. Alternatively, or as well, the carers of the children may be mis-informed or may lack the resources for the adequate care of the child, and the vulnerabilities of the child once again become obvious. Lastly, institutionalised disadvantage, or what some sociologists refer to as ‘cultural devaluation disadvantage’ (Kabeer, 2005) refers to the devaluation of certain groups in society based on perceptions of who they are perceived to be. So for instance, if society at large places little value on women or children, the vulnerabilities associated with this type of disadvantage present themselves in voicelessness of these populations, lack of recognition, lack of representation and often entrenched inequalities that can provide fertile grounds for deliberate abuse and exclusion of these groups. In other words, whilst the second vulnerability referring to children’s limited degree of autonomy is inherent to the very fact of being a child for biological and physical reasons, this third vulnerability can be considered a social and cultural artefact that is put in place and reinforced by institutional structures.

The implications of taking these vulnerabilities suggest that an appropriate policy and programmatic response for children is different from one that responds to the society at large. It should cater for both practical and strategic needs of children, their carers and community. Moser (1989) describes practical [gender] needs as “[...] those needs which are formulated from the concrete conditions women experience”, whilst strategic gender needs are “those needs that are formulated from the analysis of their subordination to men” (p. 1803). We apply these concepts to the needs of children, where children’s practical needs are apparent from the concrete conditions they experience given their stage in life, whilst children’s strategic needs are observed from an understanding of their limited autonomy and their relative invisibility within the population at large. Both needs are to be addressed by policies and programming to ensure that social protection is indeed child sensitive. For example, whilst a conditional cash or food transfer may ensure particular nutritional and health needs of children are met (i.e. practical), it may also require birth registration or proof of identification for children to actually access that transfer (i.e. strategic needs). As such, the first vulnerability referring to children’s particular biological and physical conditions can be largely translated into practical needs that need to be
met whilst the natural and constructed asymmetrical relationships that come into play in the second and third child vulnerability rather translate into strategic needs. Below we discuss each type of vulnerability as well as the implications for social protection policy.

**Vulnerability 1: Physical and biological**

It is now widely recognized that children have different physical and biological needs from adults and are harder hit, both in the short- and long-term, when these needs are not met. There is sound evidence that malnutrition, lack of health care and low levels of education during infancy and childhood have far-reaching and long-lasting detrimental consequences (Haveman and Wolfe, 1995; Brooks-Gunn and Duncan 1997; Duncan and Brooks-Gunn, 1997), which do not only impact the child as an individual but the society as a whole (Esping-Andersen, 2002). Grantham-McGregor et al. (2007) estimate that more than 200 million children in developing countries failed to reach their full potential in terms of cognitive development due to issues of poverty, poor health and nutrition and deficient care. Children experience complex physical and intellectual development as they grow (Sabates-Wheeler et al., 2009), the process of which already starts before birth in the pre-natal phase. Empirical evidence of the “fetal origins” hypothesis by Rasmussen (2001) shows that various factors related to maternal health can lead to intrauterine growth retardation (IUGR) and that maternal malnutrition leads to low-birth weight and stunted growth, leading to life-long adverse effects for children (Devereux and Sabates-Wheeler, 2010). The first few years of life are particularly important for children’s development given the vital development in all its domains, including cognitive, sensory-motor and social-emotional (Grantham-McGregor et al., 2007).

On a positive note, childhood can be considered a unique window of opportunity in life for physical, cognitive and social development with strong returns to investment in terms of nutrition, health care and nutrition. Research in Guatemala shows that higher pre-school cognitive ability is associated with higher secondary school enrolment and achievement scores. These findings are underlined by studies in other contexts, all pointing towards the positive effect of early cognitive development on schooling outcomes in later years (Grantham-McGregor et al., 2007). Investments in micro-nutrients and food fortification are also found to have high returns, especially for children (Horton, 2006, 2008). Finally, early childhood development programmes can also be considered a unique opportunity for investing in children’s cognitive development with immediate as well as long-term cognitive effects (Behrman, Cheng and Todd, 2000).

**Vulnerability 2: A dependent population**

Children are typically very dependent on others for their provision of basic needs. Children are not supposed to be economic agents of their own and are therefore highly dependent on adult members of the household, family or community for the distribution of resources in order to meet their physical, emotional and social requirements. Child sensitive protection should be engrained with this notion of dependence and acknowledge that children do not live in isolation.
and are part of a wider structure. A family focus has also been advocated for by the principles for child sensitive social protection, stating that effects of shocks, exclusion and poverty on families should be mitigated within a family context (UNICEF, 2009). Given children’s high dependency on adults for care and support, the loss of family care poses a significant risk (Sabates-Wheeler et al., 2009). Nevertheless, to ensure that children’s needs are met within that wider structure, policies and programmes should also keep a close eye on issues such as intra-household distribution and allocation of resources (White, Leavy and Masters, 2002). As Sabates-Wheeler et al. (2009) argue, the risk of intra-household discrimination might be particularly pertinent when women have limited access to independent livelihoods or when the distribution of power and resources is highly inequitable. As such, policies and programmes cannot simply fare on the assumption that resources will be equally distributed or prioritized towards those that are most in need (see UNICEF, 2009). Furthermore, it also has to be noted that some of the most vulnerable and marginalized groups of children live completely outside of structures such as families and communities and are self-reliant by force rather than choice. A failure to recognize and acknowledge these groups would lead to their exclusion from policy efforts and exacerbate their disadvantaged position, pushing them into further isolation.

**Vulnerability 3: Institutionalised disadvantage**

The foundation of this vulnerability can be considered to be grounded in children’s ‘cultural devaluation’ in society; a disadvantage that is largely identity-based and a result of the way in which society perceives a particular group (Kabeer, 2005). As Lister (2004) pointed out in reference to the taxonomy of agency of poor people, it is not only about the behaviour of the poor themselves but also about how those in power act in relation to them. Group characteristics that are common to underlie cultural devaluation include gender, ethnicity and religion as they are thought to denote persons of lesser worth following the dominant beliefs, perceptions and attitudes in a given society (Kabeer, 2005). Age can be another such characteristic and lead to devaluation of groups that are less vocal or able to exercise their agency, such as elderly and children. Rather than such an asymmetrical relationship with the rest of society being a natural or inherent result of their physiological condition leading to a lack of agency or limited autonomy, this type of disadvantage is a social and cultural construct that is maintained and reinforced by society. Children can be considered a particular group in society being culturally devaluated, thereby reinforcing and perpetuating their already vulnerable socio-cultural position resulting from the first two vulnerabilities.

Following the widespread acknowledgment that children do indeed have different needs from adults and that a denial of those leads to far-reaching long-term negative consequences, children have become increasingly visible on the development agenda and in debates around poverty reduction. Nevertheless, children remain a highly invisible population with a lack of voice and that are hard to reach. Child-headed households, for example, are unable to voice their political preferences as their age does not allow them to vote. In addition, they are practically and legally constrained to claim their rights and hold duty-bearers to account.
It is important to note here that the degree of invisibility cannot be considered homogenous across all children and that particular characteristics or conditions, including disability, HIV-infection, orphanhood or living on the streets, might add to and aggravate children’s voicelessness. The widespread lack of institutional visibility is further underlined by the fact that children’s issues are by and large represented by the weakest ministries in government. As Jones and Sumner (2011) point out “Many developing countries lack a dedicated children’s ministry [...]” and in case they do exist “[...] they are typically amongst the least influential and under-resources [...]” (p. 67). A response to the strategic need for children to be more visible thus does not only pertain to a stronger involvement of children themselves in policy processes but also to strengthening the institutions that speak on their behalf.

**An appropriate response: current wellbeing and future well-becoming**

The appropriate response to the child-specific and intensified vulnerabilities outlined above is that both practical and strategic needs must be met within any policy instrument. In order to address children’s practical and strategic needs, any response should internalize a number of issues inherent to childhood and child poverty.

Firstly, child poverty and vulnerability is multidimensional with children having a large range and complex set of basic needs. As discussed in previous sections, childhood is a unique window of opportunity in life for physical, cognitive and social development and the denial of meeting their multiple needs required to support such development can have long-term adverse consequences. The multidimensional nature of child poverty translates into practical needs through those requirements in terms of food, education, health care and other developmental support necessary for a child’s development. Strategically, it necessitate a cross-sectoral response in the fulfilment of basic needs for children by ensuring access to a range of basic services and giving children a voice to hold duty-bearers accountable for providing such access. Given the multi-faceted nature of child poverty, it is also not limited to delineated groups in society or specific categories of children. All children can be faced with issues of vulnerability and an exclusive focus on orphans or disabled children, for example, would present a too narrow perspective.

A second important point to consider in this regard pertains to the understanding of child poverty as an issue to be tackled in the present or in the future. Theories of childhood and concurrent debates on the improvement of children’s lives have largely been dominated by two schools of thought, namely those of child well-being and child well-becoming (Roelen, 2010). Both strands of research have developed as separate silos in a parallel and unconnected manner. Well-being focuses primarily on children’s outcomes in the present and considers childhood is a state in and of itself. Child well-becoming, on the other hand, is primarily concerned with the preparation for adult and future life (Ben-Arieh, 2000). This theoretical dichotomy, however, proves difficult to uphold in practice and appear to be two sides of the
same coin. A denial of child well-being in the present implies a denial of child well-becoming in the future given the long-term adverse and negative consequences of poverty (Notten and Roelen, 2010) and would perpetuate the intergenerational transmission of poverty. In other words, practical needs for children in terms of fulfilment of basic needs pertain to the improvement of both current and future living conditions. Strategic needs also need to address issues of both current well-being and future well-becoming; an exclusive focus on child well-becoming and future outcomes would justify any kind of life for children in the present as long as it leads to success in adult life (Qvortrup, 1999). As such, any policy or programme addressing child poverty and vulnerability, including child sensitive social protection, should thus account for issues pertaining to both child well-being and well-becoming, bearing in mind both the instrumental and intrinsic value of improvements in nutritional, health and educational outcomes, amongst others.

Finally, policy responses to child poverty and vulnerability should also acknowledge that age matters and that practical and strategic needs differ depending on age. Children in different age brackets are susceptible to and experience different kinds of vulnerabilities and are also differently affected by the experience of vulnerability (Jones and Sumner, 2011, Blank et al. 2010, Roelen, 2010). An increasing body of research suggests that not only the timing of poverty during childhood matters (Duncan and Brooks-Gunn, 1997) but also the extent and face of poverty before childhood, i.e. in pre-natal stage (Devereux and Sabates-Wheeler, 2010). Low levels of income and the receipt of welfare in the early childhood-period have been found to have a greater impact on school dropout than it does in other periods (Duncan and Brooks-Gunn, 1997; Duncan et al., 1998). Moreover, deep and persistent poverty in early childhood is likely to have more perverse effects in comparison to such episodes in later years of life (Duncan and Brooks-Gunn, 2000). In terms of parental influence, it is postulated that learning activities at home are important in early years, parental supervision of homework is important in later elementary and early secondary school years and parental monitoring of friendships is important in adolescent years (Duncan and Brooks-Gunn, 2000). In sum, practical needs for children thus clearly differ depending on their particular life stage and a response to child poverty should take those differential needs into account. In addition to different practical requirements, children’s own levels of autonomy change with age and thereby the degree of asymmetry and voicelessness in relationships with adults and institutions. Strategic needs thus also take different forms across different phases in childhood with high dependence and very limited to no autonomy in infancy and higher levels of independence and autonomy in early adolescence. A response to such needs should acknowledge the changing face of asymmetric relationships and internalize them appropriately.

Hence, a child sensitive approach to social protection must respond to 3 types of vulnerability 1) physical and biological; 2) dependency-related, and; 3) institutionalised disadvantage by building in safeguards and instruments that minimise and counteract these vulnerabilities. As just discussed, this requires a multidimensional and age-specific focus on issues of well-being and well-becoming to ensure that both practical and strategic needs are met. In the next
section, we discuss which of the dominant social protection frameworks is best able to support the elements of a child sensitive approach to social protection as laid out above.

**Social protection frameworks and their link to child sensitive social protection**

Three main approaches to social protection are frequently identified: a risk approach, an asset-based approach and a transformative approach.

Under a standard ‘risk framing of social protection, poverty, and consequently child poverty, is primarily considered to be an economic problem rooted in low levels of household income (see the SRM framework for a standard approach to this - Holzmann and Jorgenson, 2001; Holzmann et al. 2003). The response is, therefore, also primarily economic, based on a provision of economic protection through income and consumption provision and stabilisation. No attention is given to the multidimensional nature of poverty or the social structures and systems that might perpetuate rather than reduce (child) poverty and vulnerability (see Sabates-Wheeler and Devereux, 2007 for a fuller discussion of this). Given a risk management framework, one can distinguish between a short-term and long-term perspective. Protective social protection primarily pertains to efforts to protect the basic livelihoods of the poor in the short-term, whilst promotive social protection aims to lift the living standards and improve the lives of the poor in the long-run. Short-run child sensitive social protection within a risk approach would be targeted at the families that children live in to improve families’ resilience and risk-dealing strategies. The improvement of children’s lives then comes as a secondary effect or positive externality. Children outside of such a family or household context, however, would be not be covered under this framework, given its focus on the protection and promotion of the poor through household income. Especially in the short-run, their marginalized position and impoverished situation is more likely to intensify rather than improve. A more long-term perspective would directly concentrate its efforts on children’s future well-becoming and investment in children in terms of education, health and other capabilities to support the prevention and mitigation of or coping with future risks in adulthood. Overall, a risk management approach emphasizes human capital investment and focusing on causes rather than manifestations of poverty.

An asset-based approach to social protection focuses on livelihood improvement via asset accumulation and exit strategies out of poverty. This approach emphasizes the promotional aspect of social protection. It takes a long-term perspective by considering asset accumulation as a long-run strategy for exit out of poor and vulnerable living conditions (Moser, 1989, 2006). It assumes the existence of a critical asset threshold below which one is trapped in poverty and does not have any pathway out. Those who find themselves above the critical threshold are thought to be able to smooth assets and have a sufficient buffer in case of shocks (Carter and Barrett, 2006, 2009). The creation of opportunities to allow the accumulation of assets at the individual or household level to lift and keep people above the threshold lies at the heart of asset-based approaches of social protection. A contentious issue inherent to asset-based
approaches is the identification and establishment of the asset threshold that determines whether one is trapped in poverty or able to mitigate or cope with the effects of shocks (Dercon, 2009). Although it is widely recognized that assets should not be conceived as purely economical, practical considerations in the operationalization of asset-based approaches do often lead to a primarily uni-dimensional and economic perspective (Dercon, 2009). Asset thresholds are estimated on the basis of their monetary value, thereby excluding assets that are difficult to express in monetary terms such as social assets, for example. As a result, poverty and vulnerability is primarily conceptualized as an economic affair and focusing on the monetary value that can be attached to assets rather than their wider social meaning. The multidimensional nature of child poverty and vulnerability would thus also be largely ignored in the asset-based approach towards child sensitive social protection.

Time is a crucial aspect in this approach as asset accumulation does not happen overnight. Within the well-being versus well-becoming discussion, asset-based approaches can thus be considered to focus more on the improvement of future lives rather than current outcomes. Given its emphasis on the production and reproduction of poverty, asset-based approaches for child sensitive social protection will have strong implications for the intergenerational transmission of poverty and breaking that vicious cycle. Furthermore, this improvement is assumed to take place through the improvement of the household asset base, which might not directly benefit children. The approach holds an implicit assumption that graduation and exit out of poverty holds for all household members and also benefits children. Evidence on the push out of poverty and its long-term sustainability, however, is scarce. A child sensitive outlook on asset-based social protection would mean a stronger focus on their intergenerational transmission element and the degree to which asset accumulation at household level can be upheld by their child members when they move into adulthood and form their own households. Further research would be needed to assess whether children in families that have been lifted above the asset threshold can also maintain that position into the next generation and whether asset based approaches of social protection can really break the intergenerational transmission of poverty.

The framework of *transformative social protection* acknowledges that poverty is more than just an economic issue and therefore also requires a response that is not narrowly economic focused but takes account of the multiple sides/sources of vulnerability (Devereux and Sabates-Wheeler, 2004; Sabates-Wheeler et al., 2009). As such, the multidimensional nature of child poverty and vulnerability would be reflected in a transformative approach to child sensitive social protection. In addition, Devereux and Sabates-Wheeler (2010) argue that social protection should not only address the multiple manifestations of child poverty and vulnerability but also respond to their underlying structural causes. Such a perspective is argued imperative for children given the intergenerational origins and nature of many of the vulnerabilities that children face. In other words, if social protection is to truly improve children’s future well-being, it needs to move beyond a short-term and immediate response and work towards breaking intergenerational cycles of poverty. Adopting a life-cycle approach that acknowledges distinct social protection
needs for children in different stages of life is considered crucial to address the structural causes of vulnerability and poverty and, as such, make social protection transformative (Devereux and Sabates-Wheeler, 2010). Distinct life stages within the life-course analysis include pre-natal, post-natal, pre-school, school-age and adolescence, each of which with their particular vulnerabilities. Given the varying nature of these vulnerabilities, appropriate interventions might go beyond the conventional realm of social protection such as legal reform (i.e. birth registration, child labour regulations and laws with respect to early marriage). The adoption of a life-cycle approach also means a recognition of children’s’ intra-household positions as well as relationships with their wider environment given the strong dependence on others for the provision of basic needs, starting before birth until after adolescence. As such, transformative social protection for children should not exclusively focus on children but also factor in the situation of and relationships with their direct and indirect caregivers.

The comprehensive outlook of the transformative social protection framework can be considered particularly apt to frame child sensitive social protection. It is strongly recognisant of the multidimensional nature of child poverty and vulnerability and the complex realities that children face. Its economic, rights and social justice focus pertains to issues of both well-being and well-becoming for children. The emphasis on rights and social justice resonate with the intrinsic importance of issues such as nutrition, education and health and allows for the consideration of childhood as an important life stage in and by itself. The aspect of well-being explicitly addressed by the adoption of a life-cycle approach and concern with social constructs and social injustice that perpetuates the vicious cycle of poverty and leads to the intergenerational transmission of poverty. In addition, the life-cycle approach also recognizes that age matters and that different kinds of vulnerabilities need to be addressed during different stages of life. Finally, the transformative social protection framework is recognisant of the wider context in which children live and cautious of a too narrow and exclusive view on children.

Child sensitive social protection in practice

Although it is useful to consider the extent to which theory can guide and support the notion of CSSP, it is also important to review how CSSP has been conceived so far in practice. In this section, we discuss a number of SP interventions and their particular elements that have been claimed to be child sensitive and consider to what extent such claims can be rightfully made by using our elements of child sensitive social protection, developed in the previous section, as a measuring stick.

Conditional cash transfers (CCTs)

The role of cash transfers in development and the recognition of their potential for stabilising income, reducing income poverty and food insecurity and increasing levels of well-being have gained unprecedented momentum in recent years (Adato and Bassett, 2008). Cash transfers have been described as “a paradigmatic shift [in approaches to] poverty reduction” (Hanlon, Barrientos and Hulme, 2010, p.4) and “an effective intervention to enhance the participation of
the poor in economic development and combat inequality, social exclusion and chronic poverty” (Stewart and Handa, 2010). Conditional cash transfers (CCT) have become increasingly popular (de Brauw and Hoddinott, 2009) and can now be found across the world, but especially in Latin America, where almost every country is currently running a CCT programme (Fiszbein and Schady, 2009). Especially in relation to children, CCTs are considered an important social protection for its role in human capital development by linking the receipt of transfers to school enrolment or health check-ups. As such, this type of social protection intervention can be considered to meet the practical needs of children by responding to children’s multiple requirements for development and increasing levels of both current well-being and future well-becoming. The instrument allows for being age-specific with different types of conditions to address needs particular to age (and gender) such as immunization for infants and school enrolment or attendance for children (or particularly girls) in primary-school age. In addition, CCT’s have the potential to address children’s strategic needs with respect to their dependent position, especially in contexts characterised by high levels of inequality and underinvestment in human capital. Where services are available, conditional transfers are considered a more appropriate tool for reaching the most vulnerable children and increasing their level of well-being and access to services (de Janvry and Sadoulet, 2006; Fiszbein and Schady, 2009). An increasing body of evidence from CCTs in such contexts is now available, primarily in Latin America, and confirms those positive impacts (e.g. Das, Do and Özler, 2005; Fiszbein and Schady, 2009).

Evidence of the relative impact of CCTs versus unconditional transfers (UCTs), however, is thin. Both conditional and unconditional cash transfer programmes have been found to be effective in reducing poverty and increasing levels of well-being in terms of education, health and other outcomes (e.g. Barrientos and de Jong, 2004; Adato and Hoddinott, 2007; Adato and Basset, 2008; Hanlon, Barrientos and Hulme, 2010), increasing popularity of cash transfers at large as part of a development response to poverty and vulnerability. Little evidence is available about the extent to which documented positive effects of CCTs can actually be attributed to the conditional element of cash transfers (e.g. Schubert and Slater, 2006; Samson, Kaniki, van Niekerk and MacQuene, 2007; Adato and Hoddinott, 2007; Paxson and Schady, 2007; de Brauw and Hoddinott, 2009). Some scholars argue that the positive CCT outcomes in terms of education or health are the result of the income effect rather than the imposed conditionality. Only one study to date has tested this hypothesis. A randomised cash transfer experiment in Malawi found positive impacts on school attendance among adolescent girls, but no significant difference in these outcomes between transfers that were conditional on school attendance and unconditional transfers that were not, suggesting that the income effect dominated the conditionality (Baird, McIntosh and Özler, 2010).

Despite the overwhelming positive evidence of CCTs, regardless of whether they can be attributed to income or conditionality effect, there is also evidence of less preferential outcomes for children. Evidence suggests that CCTs’ do not unequivocally respond to children’s physical and biological vulnerable situation and meet their practical needs. A study of Brazil’s
Bolsa Alimentação finds that children receiving benefits conditional on regular contacts with the health system have a lower weight than those receiving unconditional benefits and suggests that the programme provides an incentive for keeping children at low weight to ensure receipt of benefits (Morris, Olinta, Floris, Nilson and Figueiró, 2004). In addition, Ospina (2009) finds that CCTs in Colombia can act as insurance for schooling of poor children but are not able to prevent child labour as a risk-coping strategy. Children’s voicelessness and lack of autonomy limit their ability to counteract such a decision, underlining their strategic needs for more equitable power relationships. Rather than meeting children’s strategic needs, CCTs can be considered to perpetuate and reinforce children’s dependent and marginalized position. More generally, the imposition of conditionalities raises concerns with respect to paternalism and people’s freedom to choose appropriate services (Adato and Bassett, 2008) and various scholars have argued that poor people know best how to allocate their resources (Hanlon, Barrientos and Hulme, 2010).

In sum, the claim that CCTs are a particularly child sensitive instrument, either in comparison to UCTs or in and of itself, is far from evident. Although the concept of CCTs has the potential to respond to those vulnerabilities deemed crucial for children and thereby to address their practical and strategic needs, their potential to positively impact children’s lives is highly context-specific. In itself, the intervention is well-equipped to respond to the multidimensional nature and age- (and gender) specificity of child poverty as well as issues of well-being and well-becoming. Nevertheless, the degree of child-sensitivity should be considered on a case-by-case basis and issues related to the transfer of power and creation of perverse incentives should be kept in close check.

**Family centred-approaches**

Another notion that is often linked to child sensitive social protection, primarily in response to children affected by HIV, is the importance of family and community structures. It is widely acknowledged that children do not live in isolation and are part of (extended) family or community units. Children are largely dependent on these structures for the provision of basic needs (Roelen et al. 2009; Devereux and Sabates-Wheeler, 2010), which has also been identified as an issue of particular vulnerability to children. The loss of family care thus poses a significant risk for children (Sabates-Wheeler et al. 2009), justifying the strong family focus within the framework of child sensitive social protection. Family care is by and large considered as the preferred setting for raising and caring for children. The ability and capacity of families to act as the main care and support structure for children, however, might be corroded and in need of reconsideration. The HIV pandemic, for example, has great adverse social impacts and eroded the capacity of many communities and families to cope and provide for their children (Nyambedha, 2010; Yates et al. 2010).

Generally, the response to those orphaned by HIV/AIDS has moved from a focus on provisioning for the individual child in terms of shelter and protection (i.e. food hand-outs or institutionalization) in the early 1990s towards a family based approach in the last decade.
There is a growing recognition that it is often poverty and not simply orphaning that is driving children into institutional care and that institutional settings might not present the best option to respond to HIV as well as poverty related vulnerabilities. Family structures are now widely considered as the most optimal setting to respond to the issues faced by children affected by AIDS (Temin, 2010; JLICA, 2009). Rather than focusing on responding to the needs of the individual child, interventions need to consider “children’s networks, including their family ties” (JLICA, 2009, p. 17). Although such a family centred response might be considered to fit children’s strategic needs in terms of their dependence on adults for care and support, it only does so in a limited and constricting sense. A family centred response might be preferable for the large majority of vulnerable children but for some of the most vulnerable children, the family itself is a place of risk where practical and strategic needs are undermined. Intra-household discrimination and a lack of appropriate care could lead to nutritional deficiency, shortcomings with respect to cognitive and social development, amongst others, and calls for a broader perspective of a child’s optimal living environment.

A documentation of child and HIV sensitive social protection shows that institutional care is considered a policy of last resort for the care of orphans in Malawi and Botswana but that it is also one of the only options for some of the most vulnerable and marginalized children (Roelen, Edström, Davies and Sabates-Wheeler, forthcoming). The consideration of institutional care and shelter as a last resort and the consequent lack of acknowledgment of and attention to its services in the wider policy response might reinforce rather than lessen the vulnerable and marginalized position of these children. Although a family centred response to vulnerable children or children affected by HIV might be widely recognized to be the preferred approach, such a view should not lead to turning a blind eye that might leave some children excluded. Especially in terms of children’s institutional invisibility, this is likely to be aggravated for those in institutional care when there is no active policy debate and when the, often weak, government structures are not heard or supported. In other words, an exclusive family focus when thinking about alternative care for children affected by HIV or orphans might undermine practical and strategic needs rather than strengthen its degree of child-sensitivity. Roelen et al. (forthcoming) find that the Government of Mozambique and international partners’ active engagement in discussions about minimum standards and quality assurance of residential care allows for securing children’s needs across a range of issues. Practically, they can assure that children in this modality of care receive proper nutrition, education, health and psycho-social care, thereby responding to immediate age-specific concerns of well-being but also ensure a minimum investment in children’s capacity for building future opportunities. Strategically, minimum standards of care and support can reduce children’s risk to mis-use and abuse in a highly power-dependent relationship. Finally, the active engagement of governmental and non-governmental partners in discussions about care modalities for children that are deprived of family, increases and strengthens their institutional visibility.
Child-focused interventions

A final example of how social protection designed to particularly child sensitive might miss the mark refers to the interplay of different interventions within an overall social protection scheme, especially child-focused programmes. As opposed to child-friendly or child-sensitive, we consider child-focused to denote interventions that are particularly targeted towards specific groups of children. The rationale for such measures is based on the premise that children in these groups are considered to face differential needs and vulnerabilities that require a more targeted and focused response. For the purpose of practical illustration, we consider the case of orphans and social protection interventions to respond to their short- and long-term needs. Given the HIV pandemic and growing numbers of orphans, particularly in sub-Saharan Africa, many countries are faced with questions pertaining to alternative and foster care. Traditionally, orphaned children have been absorbed by family support structures and received care through networks of direct or extended family. However, it is now widely recognized that the capacity for these traditional care and support structures are being eroded due to the effects of HIV and AIDS (Roelen et al., forthcoming). In addition, the current generation of grandparents, responsible for a large share of orphan care, is slowly evaporating and suggesting a new wave of out-of-care orphans. Many of these orphans will have just reached adulthood, and might no longer be classified as child-headed households, but are young heads of household and primary care takers nonetheless. As a result, discussions about incentivizing foster care and considerations of alternative care are underway in many countries.

The option of putting in place a (cash or in-kind) transfer scheme for orphans to serve as an incentive for foster care is currently being considered in different countries. In light of children’s specific vulnerabilities, the availability of such transfers could potentially meet both practical and strategic needs. The first objective of such transfer schemes is to provide for children’s basic and immediate requirements such as nutrition and shelter, thereby responding to physical and biological needs. In a context of scarce resources and a situation in which one is concerned with addressing the specific needs of orphans by means of a simple programme, narrow targeting might present an appropriate option (Subbarao, Mattimore and Plangemann, 2001; Edstrom et al. 2008). Having said that, however, practical needs are likely to be met only partially. Particularly when delivered as a cash or food transfer, the intervention will present an immediate and short-term response to immediate needs rather than a longer-term investment in future opportunities.

Strategically, the incentivization of foster care also strongly recognizes children’s dependence on adults to fulfil those basic needs. Nevertheless, in consideration of the distinct disadvantaged position of, especially double, orphaned children, the question arises as to whether interventions should be particularly targeted towards these groups or rely on broader targeting of poor and vulnerable children (Subbarao, Mattimore and Plangemann, 2001). In reference to children’s dependent position and asymmetric power relationship to adults, the instalment of a transfer to accompany care for orphans might lead to ‘commodification’ of children and
undermine rather than meet this strategic need. Furthermore, narrow targeting of orphans might give rise to issues of stigmatization and equity in terms of exclusion of other groups of poor and vulnerable children and perpetuate their lack of voice in society by further ‘cultural devaluation’. The Orphan Care Programme (OCP) in Botswana presents an illustration of the way in which a targeted programme fails to meet its objectives, despite good intentions. Botswana’s current orphan care programme is narrowly targeted towards orphans that have lost either both parents (in case they were married) or one parent (in case of single parenthood) and provides a response to orphans’ material needs in terms of food vouchers and provision of clothing (Ellis et al. 2010). Eligibility for the programme is exclusively based on whether or not the child is registered as an orphan, regardless of living conditions or criteria. Other social protection interventions in Botswana include the destitutes and remote area dwellers programmes and are generally a lot more stringent in terms of eligibility, applying means-testing or proxy means-testing. Roelen et al. (forthcoming) find that these two very different approaches towards targeting of benefits has led to a number of perverse incentives, exacerbating orphans’ vulnerable positions rather than alleviating them. The discrepancy in targeting mechanisms between the orphan care and other programmes has led some orphans to be considered ‘assets’ and a gateway for foster families to access food vouchers and other benefits. In other words, rather than the programme giving children more voice and degree of autonomy, it builds on and reinforces asymmetrical power relationships. Although highly recognisable of the dependent position of orphans, the orphan programme seemed to provide perverse incentives and in some cases even ‘commodify’ children.

This review of practical examples of social protection tools and interventions that are commonly labelled as being child sensitive come to show that context is of utmost importance for CSSP’s bid to alleviate child poverty and improve the lives of children. Although the three interventions described above all have the potential to meet children’s practical and strategic needs, their particular context, design features and delivery methods can undermine and perpetuate rather than alleviate those needs. The way in which CCT requirements are perceived by its beneficiaries might lead to perverse incentives, denying children of their practical needs and locking them into poor and vulnerable conditions rather than lifting them out of their situation. The exclusion of particular groups of children from family or community structures through which benefits are targeted and provided, might deny them from a response to their basic developmental needs. A failure to engage in discussions about alternative care structures reinforces their marginalized position, exacerbates their levels of exclusion and perpetuate their voicelessness and institutional invisibility. Finally, child-targeted social protection measures within a disjointed set of interventions might result in unintended and adverse side-effects, turning children into ‘valuable assets’ and perpetuating asymmetrical power relationships. Hence, for CSSP to address children’s physical and biological requirements, their dependent position and institutional voicelessness and invisibility, it should thus be noted that context matters and that the degree of child-sensitivity of social protection interventions cannot be generalized across place and time.
Conclusion

In this paper, we argue for the need of a more concrete and firm understanding of child sensitive social protection for it to meet both practical and strategic needs for children. Such an understanding is currently not provided by existing definitions and guidelines, such as UNICEF’s Joint Statement, given their generalist and all-purpose nature. In this paper, we elaborate on three particular elements of child vulnerability that require a differential social protection approach. These three elements pertain to children’s practical needs, being their biological and physical requirements, as well as strategic needs, referring to children’s limited levels of autonomy and dependence on other adults for receiving care and support as well as to children’s institutional invisibility and lack of voice in the larger policy agenda. In order to meet those practical and strategic needs, we argue that child sensitive social protection measures should address the multidimensional nature of child poverty, increase levels of current well-being and future well-becoming and respond to children’s age-specific requirements.

An analysis of the conceptual frameworks widely used for framing social protection shows that commonly used risk and asset-based approaches to social protection are ill-equipped to form sound theoretical underpinnings for child sensitive social protection. A risk-based approach to social protection allows for protective and promotive measures that address well-being as well as well-becoming through short- and longer-term social protection interventions. Nevertheless, its exclusive focus on the economic consequences of risk management fails to acknowledge the multi-faceted and cross-sectoral problem of child poverty and vulnerability, thereby denying children of an adequate practical and strategic response. Asset-based approaches have a strong element of well-becoming to them through their emphasis on graduation and, as such, breaking the intergenerational transmission of poverty. Social protection from an asset-based perspective, however, lacks recognition of the intrinsic importance of current well-being for children and is less apt to incorporate the multiple facets and age-specific aspects of child poverty and vulnerability. Transformative social protection is most suited to support child sensitive due to its holistic and versatile nature and focus on the structural causes of child poverty and vulnerability and social constructs that perpetuate vicious cycles of poverty. Practically, it advocates for a response to children’s multiple physic-social needs and strategically, it calls for reducing power asymmetries and making children seen and heard.

The practical examples, and their degree of “child-sensitivity” in reference to their response to children’s practical and strategic needs, come to show that there is no set of interventions that can be considered child sensitive across the board. Claims about what makes social protection child sensitive and concurrent claims of child-sensitivity are often made on (widely agreed upon) assumptions rather than sound and firm evidence about what works for children in a particular situation. There are no universal truths about child sensitive social protection and the degree to which a social protection policy, instrument or intervention meets children’s practical and strategic needs is highly context-specific. Despite overwhelming evidence for the positive effects of certain instruments on child well-being, we should not be tempted to generalize and turn a
blind eye to those contexts or groups of children for which those findings do not hold true. Children’s unique risks also make for unique opportunities; adding the adjective child sensitive to the term of social protection deserves careful consideration and should be done with caution in order to avoid it becoming a misnomer and ensure that it denotes policy initiatives that truly aim to improve children’s lives.
References


Temim (2008), Expanding social protection for vulnerable children and families: learning from an institutional perspective. Prepared by the Interagency Task Team (IATT) on Children and HIV/AIDS: Working Group on Social Protection


