



Mainstreaming gender into social protection strategies and programmes

Evidence from 74 low- and middle-income countries

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Abbreviations

AUH	Asignación Universal por Hijo (Argentina)
BID	Banco Interamericano de Desarrollo/Inter-American Development Bank
BISP	Benazir Income Support Programme (Pakistan)
BJA	Bono Juana Azurduy (Bolivia (Plurinational State of))
EGPP	Employment Generation Program for the Poorest (Bangladesh)
FCDO	Foreign, Commonwealth and Development Office
GRASSP	Gender-Responsive Age-Sensitive Social Protection research programme
ILO	International Labour Organization
LMICs	low- and middle-income countries
MGNREGS	Mahatma Gandhi National Rural Employment Guarantee Scheme (India)
PSNP	Productive Safety Net Programme (Ethiopia)
SDGs	Sustainable Development Goals
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women and Girls
UNICEF	United Nations Children's Fund
UNICEF Innocenti	UNICEF Office of Research – Innocenti
VAWG	violence against women and girls

Executive summary

Background and objectives

The importance of mainstreaming gender into social protection policies and programmes is increasingly recognized. However, evidence on the extent to which this is actually happening remains limited. This report contributes to filling this evidence gap by drawing on the findings of two complementary research projects undertaken by UNICEF Office of Research – Innocenti and UN Women in 2019. Using a specifically developed analytical framework, these two projects reviewed 50 national social protection strategies and 40 social protection programmes across a total of 74 low- and middle-income countries (LMICs) to assess the extent to which they incorporate gender equality concerns.

Methodology

The gender analysis was undertaken across four dimensions, each with a specific set of associated indicators, to answer the following questions:

- Is the overall legal and policy framework conducive to gender mainstreaming?
- Are gendered risks and vulnerabilities acknowledged?
- Are specific measures or programme design features in place to address these risks and vulnerabilities?
- Are monitoring, evaluation and accountability mechanisms in place to assess gender impacts and reorient policies and programmes where needed?

Findings

Our review shows that, while most strategies and programmes acknowledge gendered risks and vulnerabilities linked to women's reproductive years, there are still important gaps in vulnerability assessments with regard to other life course stages, such as adolescence and old age. Furthermore, structural inequalities, like women's and girls' disproportionate responsibility for unpaid care work, women's over-representation among informal workers with little or no access to social protection, and women's and girls' heightened exposure to gender-based violence, are rarely acknowledged. Even where formal recognition of these inequalities exists, it is often not followed through with specific actions to redress them. Combined with the lack of a gender perspective in most monitoring and evaluation frameworks, which could be used to identify gender gaps and biases in implementation, the risk of a vicious cycle that leaves the rights and needs of women and girls largely unaddressed looms large.

Implications for programming and policymaking

As countries emerge from the COVID-19 pandemic, the renewed emphasis on building robust and resilient social protection systems provides policymakers and practitioners in the field of social protection with an unprecedented opportunity to address some of these gaps. Four overarching priorities emerge from our analysis: (1) the need for social protection strategies and programmes to be built on a comprehensive identification of gendered risks and vulnerabilities across the life course; (2) greater attention to capacity building for translating the identification of these risks into the most appropriate policies, and programme design features to address them; (3) the need to employ such design and delivery features; and (4) greater coordination with and involvement of gender equality advocates and experts in social protection policy, and programme decisions to improve their performance for women and girls.

I. Introduction

Over recent decades, there has been increasing attention paid to social protection by policymakers around the world. There is now consensus regarding the role of social protection systems in contributing to poverty eradication and reduced inequalities, in stimulating productive activity and economic growth, and in creating resilience in the face of multiple and recurrent crises (see, for example, UNRISD 2010; ILO 2012, 2017; Bastagli et al. 2016; UNDESA 2018; Rodriguez 2013; UNDP 2014). The 2030 Agenda is the most recent expression of this global trend, underlining as it does the importance of social protection in ending poverty (SDG 1), enabling decent work (SDG 8) and achieving gender equality (SDG 5), among other Sustainable Development Goals (SDGs).

Despite this global momentum, there are still significant challenges to achieving gender equality in social protection. Comprehensive social protection coverage across the life course remains the exception rather than the rule, with the latest International Labour Organization (ILO) estimates suggesting that “only 30.6 per cent of the global population is covered by comprehensive social protection systems including the full range of benefits, from child and family benefits to old-age pensions, with women’s coverage lagging behind men’s by a whopping 8 percentage points” (Razavi, 2021). Too often, gender-specific access barriers, risks and vulnerabilities remain insufficiently recognized, integrated and addressed in social protection systems and programme design.

COVID-19 has made these shortcomings painfully clear. Emerging evidence suggests that women and girls have borne the brunt of the economic and social fall-out of the pandemic. In many countries, women have been disproportionately affected by the loss of jobs and livelihoods (UN Women 2020a). Women in informal employment have seen their work hours and earnings recover more slowly than men (Ogando et al. 2021), and mothers, in particular, have been dropping out of the labour force in the face of prolonged school and daycare closures (UN Women 2020a and 2020b). The economic penalties associated with unpaid care responsibilities are particularly devastating for women at the lower end of the income distribution.

Even before the pandemic, there were significant gender gaps in poverty during the key reproductive years (25–34). Global estimates suggest that the pandemic will push an additional 47 million women and girls into poverty in 2021 and that the gender poverty gap will worsen, from 118 women in poverty for every 100 men in poverty in 2021 to 121 women in poverty for every 100 men in poverty by 2030 (UN Women 2020a). The current context is grim for girls, too, whose time is being redirected away from schooling and learning – for example, towards unpaid care and domestic work – with potential impacts on their longer-term well-being, including likely increases in child and early marriage (Bakrania et al. 2020; ILO and UNICEF 2020).

Despite this evidence, the global social protection response to COVID-19 has remained blind to the specific challenges faced by women and girls. By January 2021, a total of 214 countries and territories had taken over 1,700 social protection and labour market measures to protect jobs and incomes and provide emergency support to those considered most vulnerable. Yet, only 13 per cent of these measures were aimed at supporting women’s economic security – mostly by targeting them with cash or in-kind transfers; and only 11 per cent addressed rising unpaid care demands through special family leaves, transfers that compensate for school and daycare closures, or emergency childcare services for essential workers, among others (UNDP and UN Women 2021).

Without better gender mainstreaming, the effectiveness of social protection systems in reducing poverty would be limited because they would fail to address these gendered risks and vulnerabilities. ‘Engendering’ the global social protection response to COVID-19 is an urgent priority to mitigate the impact on women and girls and to ensure that they are not left out of the economic recovery. The experience of the pandemic also provides an opportunity to think more systematically about how social protection systems can better promote gender equality in the medium and long term. It is to this objective that this report seeks to contribute by taking stock of and drawing lessons from the state of gender mainstreaming at the strategic planning and programme design level in low- and middle-income countries (LMICs). It brings together the findings of two parallel but complementary research projects: UN Women’s gender analysis of 50 national social protection strategies and UNICEF Office of Research – Innocenti’s gender analysis of 40 social protection programmes.

Both projects used a similar analytical framework, which was developed by UN Women for the analysis of national social protection strategies, and adapted by UNICEF Innocenti for the analysis of social protection programmes. The analytical framework and methodology are outlined in section II of this report, followed by a presentation of findings in section III along four dimensions: the overarching (legal and policy) framework, the recognition of gendered risks and vulnerabilities, the inclusion of gender-specific measures and programme design features, and the existence of gender-sensitive monitoring, evaluation and accountability systems. Each of these sections points to persistent gaps and biases, but also identifies a range of good practices and examples of gender mainstreaming across the policy and programme cycle. The final section (IV) concludes and provides concrete recommendations for improving gender mainstreaming in social protection going forward.

II. Analytical framework and approach

Concepts and definitions

We define the key concepts in the following ways.

Social protection refers to a set of policies and programmes designed to reduce and prevent poverty, vulnerability and social exclusion throughout the life course, with particular emphasis on marginalized groups (UNICEF 2019b: 72; ILO 2017: 194). A social protection system in a country refers to the totality of social security and protection schemes and programmes in a country (ILO 2017: 196).

A **national social protection strategy** is a strategic document developed by the state to set out a medium- to long-term vision for the provision of social protection. These documents do not generally include in-depth evaluations of specific programmes. Instead, they focus on establishing a set of priorities that will guide policy implementation and assessment.

A **social protection programme** is a concrete set of government actions with a “distinct framework of rules to provide social protection benefits to entitled beneficiaries. Such rules would specify the geographical and personal scope of the programme (target group), entitlement conditions, the type of benefits, benefit amounts (in the case of cash transfers), periodicity and other benefit characteristics, as well as the financing (contributions, general taxation, other sources), governance and administration of the programme” (ILO 2017: 195).

Gender mainstreaming refers to the process of assessing the implications for women and men, girls and boys, of any planned action, including legislation, policies or programmes. It is a strategy for making the concerns and experiences of women and girls, as well as of men and boys, an integral part of the design, implementation, monitoring and evaluation of policies and programmes in all political, economic and societal spheres, so that women and men benefit equally, and inequality is not perpetuated. The ultimate goal of gender mainstreaming is to achieve gender equality (ECOSOC 1997).

Gendered risks and vulnerabilities refer to social and economic risks and vulnerabilities faced by women that arise from gender-based discrimination and which derive from and manifest themselves in their unequal access to resources, power and status in a given context.

Analytical framework

To assess the extent to which gender is being mainstreamed into social protection, UN Women developed an analytical framework that combines key insights from the gender and social protection literature and relevant international human rights standards.ⁱ The analytical framework spans the following four key dimensions.

Overarching framework

Under this dimension, we assessed the overall orientation of the strategy or programme, looking for elements that we expected to provide an enabling framework for mainstreaming gender into social protection planning, design and implementation. This included reference to international human rights standards, the existence of national legal frameworks, the endorsement of a rights-based approach to social protection, the adoption of a life course approach, the explicit definition of gender equality and women's or girls' empowerment as an objective to be achieved in or through social protection (see, for example, Sepulveda and Nyst 2012). Procedural aspects, such as the participation of national women's machineries and consultation with civil society and/or beneficiaries in the development/design of the strategy/programme, were also included.

Recognition of gendered risks and vulnerabilities

Under this dimension, we assessed whether national social protection strategies and programmes recognize gendered risks and vulnerabilities, as well as structural gender inequalities (Holmes and Jones 2013; UN Women 2015a). For this purpose, we included a range of gendered risks present or heightened at various stages of the life course, such as child/early marriage, adolescent pregnancy, gender-specific barriers to education, maternity-related risks or widowhood, as well as three crosscutting structural barriers that affect the whole lifespan: women's lesser access to economic resources and opportunities; women's and girls' heightened exposure to gender-based violence; and women's and girls' disproportionate responsibility for unpaid care and domestic work.

Gender-specific measures and programme design features

Under this dimension, we assessed whether strategies and programmes proposed specific measures or design features to address the gender-specific risks and inequalities identified above. For example, do they include programmes that target women or girls, or specific measures to promote women's access to social protection and public services, such as gender quotas in public works programmes or the provision of childcare services? Do they include specific measures to address violence against women and girls, to strengthen women's economic security or to recognize and reduce women's and girls' unpaid care and domestic work?

Monitoring, evaluation and accountability

Under this dimension, we assessed whether the strategy or programme includes gender-specific monitoring and evaluation (M&E) indicators,ⁱⁱ participatory M&E methods and/or a robust grievance, feedback and complaint mechanism for beneficiaries.

i See, for example, Behrendt et al. 2016; FAO 2018b, 2018c; Holmes and Jones 2010, 2013; Kabeer 2010; Molyneux 2007; Molyneux et al. 2016; Sepulveda and Nyst 2012.

ii The term 'gender-specific indicators' is used to refer to indicators that explicitly call for disaggregation by sex (e.g. proportion of older women and men who receive an old-age pension); refer to gender equality as the underlying objective (e.g. proportion of budget allocated to gender equality measures); and where women and girls are specified within the indicator as the targeted population (e.g. maternal mortality) (see UN Women 2018: 50).

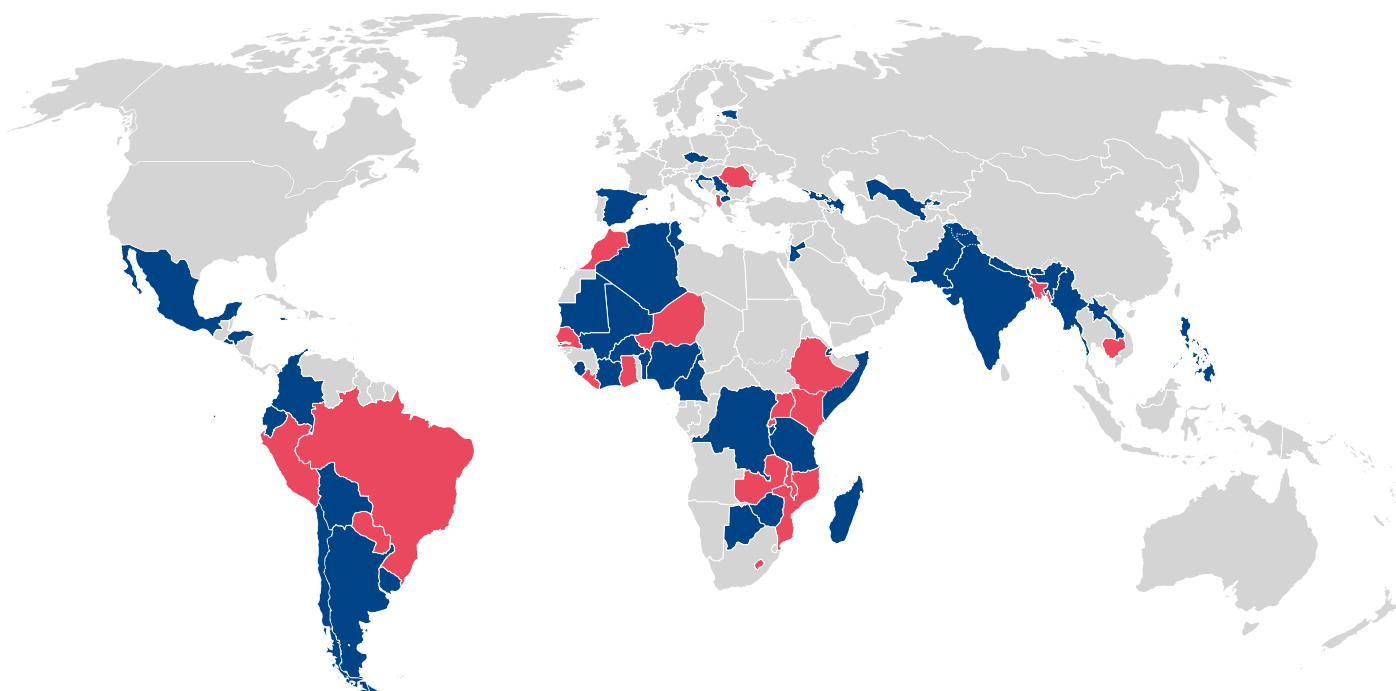
Methodology and approach

Using the analytical framework described above, both research teams carried out a qualitative content analysis of strategies and programme documents to understand if and how they incorporated key gender issues and concerns. To operationalize the analytical framework, UN Women developed a set of over 40 indicators, which was consistently applied to all national social protection strategies in our sample. The set was then further refined by UNICEF Innocenti for the analysis of specific programmes. The analytical framework with the full list of indicators by dimension can be found in Annex 1.

Sample and case selection

This research drew on two distinct, but overlapping samples: (i) a set of 50 national social protection strategies, compiled and analysed by UN Women; and (ii) a set of 40 social protection programmes, selected and analysed by UNICEF Innocenti – for a total of 74 countries. Both samples were restricted to LMICs. There was an overlap between the two samples: specifically, for 21 countries both strategies and programmes were assessed, whereas for the remaining 53 countries only a strategy or only a programme was analysed (*see Figure 1*). While the lack of complete overlap is a limitation, this research provides important insights on the extent of gender mainstreaming in social protection.

Figure 1: Country coverage of national social protection strategies and programmes analysed



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Legend: The dark blue refers to countries where either the social protection strategy or a social protection programme was assessed, whereas the pink refers to countries where both the social protection strategy and a social protection programme were assessed.

Source: authors' elaboration.

Note: The designations employed in this publication and the presentation of the material do not imply on the part of UNICEF the expression of any opinion whatsoever concerning the legal status of any country or territory, or of its authorities or the delimitations of its frontiers.

The sample of 50 national social protection strategies was compiled through extensive online searches in four languages (English, French, Portuguese and Spanish), including a review of websites of relevant national ministries and departments, complemented by inquiries with regional and national social protection experts and entities. The sample includes strategies that were published from 2010 onwards. Overall, national social protection strategies were more commonly available in sub-Saharan Africa, parts of Latin America and the Caribbean, and Asia and the Pacific. Other subregions and regions, such as Northern Africa, and Europe and Central Asia, have few or no available strategies (see Annex 2 for an overview of strategies by region).

The sample of 40 social protection programmes consists of 32 non-contributory programmes, four labour market programmes, and four integrated social protection programmes (e.g. social assistance and social insurance or social care services) (see Annex 3). Countries were selected if they were LMICs, where UNICEF has an office, and to ensure geographic diversity. Countries where UN Women conducted their gender analysis of social protection strategies were prioritized to the maximum extent possible. In addition, only one programme per country was selected, prioritizing flagshipⁱⁱⁱ programmes or those that intend to promote the well-being of children or adolescents, and their households, in order to inform UNICEF programming and advocacy. Out of the total sample of 40 programmes, 16 programmes are drawn from countries in sub-Saharan Africa, nine from Latin America and the Caribbean, five from Europe and Central Asia, six from Asia and the Pacific, and four from the Middle East and North Africa.

Data sources and data analysis

The data sources for the gender analysis of social protection strategies relied exclusively on information contained in the strategy documents themselves, whereas in the case of social protection programmes multiple sources were used, including programme documents, implementation manuals and, when necessary, peer-reviewed and grey literature up to 2019. The time frame for both gender analyses excludes the period from March 2020 onwards. Hence, the research constitutes a 'baseline' of the status of gender mainstreaming in social protection strategies and programmes before the onset of COVID-19 and related mitigation measures that have been implemented by governments around the world in response to the pandemic.

All strategies and programmes were coded against the indicator framework. The coding of the social protection strategies used binary variables. For example, if the strategy included the recognition of old-age poverty as a gendered vulnerability – in that women are disproportionately or differently affected compared with men – it was coded as Yes on that indicator, and No otherwise. The coding of social protection programmes used categorical variables, with programmes coded against each indicator as Yes, No, Not Applicable, Not Available, or Unclear. Each strategy and programme was coded by two coders (primary coding and validation), and any discrepancies were discussed and resolved by the two reviewers jointly.

It is important to note that our gender analysis is focused on the legal coverage of strategies and programmes, and not on their *effective* coverage. This implies that our gender analysis only covers how strategies and programmes are designed, and does not assess whether this design is carried out in practice during their implementation. While an in-depth analysis of implementation processes is critical, a gender analysis of the extent to which gender considerations are mainstreamed in strategies' and programmes' design is the first step towards building our understanding of how to strengthen social protection systems to enable gender equality.

ⁱⁱⁱ A programme was determined as flagship based on, for example, its beneficiaries' coverage, or financial resources, or if determined by the government as such.

III. Key findings

1. Overarching framework

A significant proportion of **national social protection strategies** we analysed contain elements that can provide an enabling context for gender mainstreaming. A first notable feature is that 46 out of 50 strategies acknowledge human rights and their applicability in the national context, and 37 out of 50 explicitly reference binding international human rights standards and commitments, which provide important guidance for the design and implementation of gender-responsive social protection (Sepulveda and Nyst 2012; UN Women 2015a).

A second positive feature is that most strategies define social protection broadly to include social assistance (50), public services (47), social insurance (45) and, to a lesser extent, infrastructure (35 out of 50). Linking these components, particularly social assistance such as cash transfers and public services, can make a significant difference for women and girls during implementation (UN Women 2015b; UN Women 2018). For instance, increasing the availability of on-site childcare and safe sanitation for women in public works programmes can ensure both the full participation of mothers and the wellbeing of their children. As the examples presented in sub-section 3 illustrate (*see Box 2*), linkages between components are relevant because they usually play complementary functions in a social protection system. For example, women's ability to meet the requirements attached to conditional cash transfers is often hampered by limited access to public services, such as functioning educational or health facilities, or infrastructure, such as transportation, potable water, sanitation and electricity (Cookson 2018).

However, these enabling factors do not systematically translate into greater emphasis on gender equality as a goal to be achieved in or through social protection, with only about a quarter of strategies (12 out of 50) defining this as an explicit goal.

Programmes display a similar pattern. For example, 32 out of the 40 **social protection programmes** we reviewed are enshrined in national-level frameworks. This is a key enabling feature – critical to ensuring long-term sustainability and giving beneficiaries the legal ability to claim their rights (European Commission 2015, cited in Kaltenborn et al. 2017; Sepulveda and Nyst 2012). However, only 3^{iv} out of 40 programmes include explicit cross-references to national gender equality strategies or action plans. For example, India's public works programme Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) forms part of the government's series of Five-Year Plans that identify gender constraints and barriers faced by rural women (Holmes and Jones 2013).

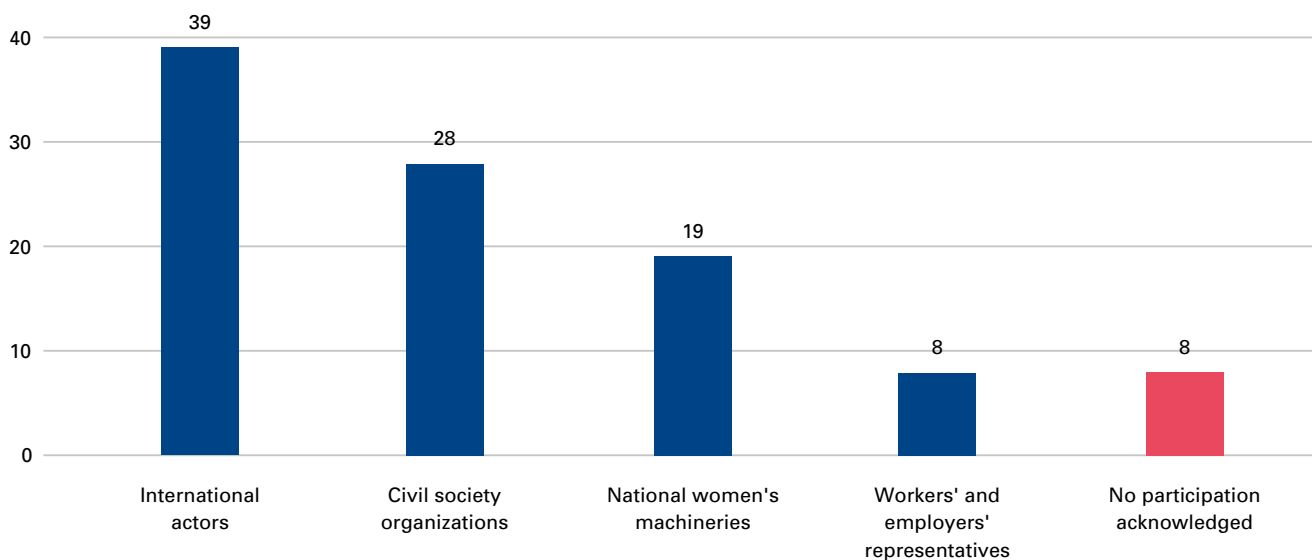
More importantly, only 5^v of the 40 programmes explicitly state the achievement of gender equality among their objectives. In four additional cases, the programmes are targeted at women, but the underlying intention is unclear, namely whether the targeting is done for intrinsic reasons – as in, to empower women – or for instrumental ones, where women are perceived to be more likely to spend the social protection benefit for the well-being of children and their household. Interestingly, over half of the programmes (25 out of 40 programmes) are either explicitly aimed at achieving children's rights and/or at addressing children's vulnerabilities – for example, those of orphan children.

iv Cambodia's second chance or informal technical vocational education and training programme (OECD 2017); Ethiopia's Productive Safety Net Programme (PSNP) (Holmes and Jones 2010); and India's Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) (Holmes and Jones 2013).

v Argentina's Asignación Universal por Hijo (AUH) (UNICEF et al. 2018; ANSES Observatorio de la Seguridad Social 2012); Bangladesh's Employment Generation Program for the Poorest (EGPP) (Tebaldi and Bilo 2019; Cho and Ruthbah 2018); the Plurinational State of Bolivia's Bono Juana Azurduy (BJA) (Estado Plurinacional de Bolivia 2009); India's Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS) (Chopra et al. 2020; Goodrich et al. 2015; Holmes and Jones 2013); and Pakistan's Benazir Income Support Programme (BISP) (Ambler and De Brauw 2017; Cheema et al. 2016).

Another potentially enabling factor for gender mainstreaming that we considered for both strategies and programmes was consultation with different stakeholders in the design process. On the positive side, most social protection strategies in our sample (42 out of 50) have been developed with some degree of consultations and/or participation – most frequently of civil society organizations (28 out of 50) (see Figure 2). While these organizations may, in some cases, bring women’s viewpoints into the drafting process, the available information did not allow us to ascertain the extent to which this had been the case. What did emerge clearly, however, was that relatively few strategies have involved national women’s machineries – despite their mandate, in many cases, for mainstreaming gender into sectoral policies (18 out of 50 strategies). All of those strategies that have involved national women’s machineries were either from Latin America and the Caribbean (6 out of 12 strategies in that region) or sub-Saharan Africa (12 out of 28 strategies in that region). External actors – such as bilateral donors, UN agencies or international financial institutions – have provided financial and/or technical support for three quarters of all strategies in our sample (39 out of 50).

Figure 2: Number of national social protection strategies developed with the participation of different stakeholders



Source: UN Women, authors’ elaboration.

From a programmatic perspective, we found limited publicly available information on stakeholder participation in the design, implementation or governance of social protection programmes. From the available evidence, we found that national ministries with gender equality or women’s empowerment in their mandate had participated in the implementation or governance of eight social protection programmes in the countries of Algeria, Cameroon, the Comoros, Ghana, Malawi, Morocco, Mozambique and Rwanda (Cirillo and Tebaldi 2016; République Algérienne Démocratique et Populaire n.d.; World Bank 2013b; Gazeaud et al. 2018; Abebrese 2011; Dake et al. 2018; Selvester et al. 2012; Machado et al. 2018; Ruberangoyo et al. 2011). Programmes in Ecuador and Brazil report the participation of social actors in design and M&E (Montenegro 2015; Government of Brazil, Ministério do Desenvolvimento Social e Combate à Fome 2014), but the involvement of specific groups, including gender equality advocates or women’s rights groups is not specified. For the remaining programmes, we were unable to find information on stakeholder participation.

2. Recognition of gendered risks and vulnerabilities

For gender equality to be achieved in and through social protection, risk and vulnerability assessments must clearly identify gendered risks and vulnerabilities. These include life course risks, such as early marriage, maternity-related risks or old-age poverty, which tend to affect women more than men, as well as structural inequalities, such as women's lesser access to economic resources, their disproportionate responsibility for unpaid care and domestic work, and their heightened exposure to gender-based violence.

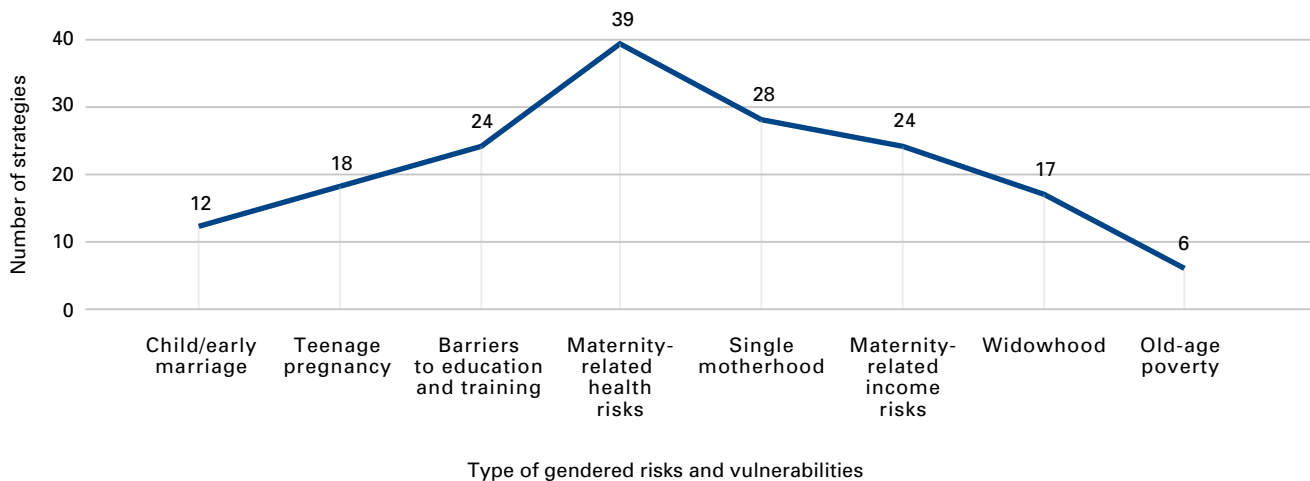
Almost all **social protection strategies** in our sample (49 out of 50) explicitly recognize at least one life course risk and/or structural inequality faced by women and girls. In fact, on average, the strategies acknowledge five of the 11 gendered risks and vulnerabilities analysed (comprising eight life course risks and three structural gender inequalities). A notable example of this trend is El Salvador's social protection strategy, which combines an enabling overarching framework with a high level of recognition of gendered risks and vulnerabilities (see *Box 1*).

Box 1: El Salvador's National Development, Social protection and Inclusion Plan, 2014-2019

El Salvador is a lower-middle-income country with high levels of poverty and a relatively weak social protection system. Against this backdrop, the 2014 National Development Plan sets out a rights-based, gender-responsive approach to social protection enshrined in national legal frameworks and encompassing four key components: social assistance, social insurance, public services and infrastructure. The strategy was developed by the Secretariat for Planning (*Secretaría Técnica y de Planificación de la Presidencia*) in consultation with key stakeholders, including civil society and the national women's machinery. The latter's involvement may help to explain why this strategy is one of only eight in our sample that explicitly aims to close gender gaps in access and/or coverage of social protection. The strategy makes use of sex-disaggregated data to highlight gendered risks and vulnerabilities. It acknowledges half of the life course risks included in our framework (barriers to education and training, teenage pregnancy, maternity-related health risks, and old-age poverty). More importantly, it recognizes and pledges to address all three of the structural gender inequalities assessed, including by: improving specialized services for survivors of gender-based violence; developing national care policies that reduce women's care burdens and guarantee the rights of care providers and care recipients; and improving women's access to pensions – particularly among those working informally. Finally, to monitor and evaluate policies and programmes, the strategy includes sex-disaggregated data and participatory methods.

Despite this promising finding, and even though around two thirds of strategies nominally adopt a life course approach to social protection, the recognition of specific vulnerabilities faced by women is heavily centred on one life course stage: their reproductive years and, in particular, motherhood (see *Figure 3*). From the eight life course risks outlined in *Figure 3*, the most widely recognized are maternity-related health risks (39) and single-motherhood (28), followed by maternity-related income risks (24). This includes references to: limited or lack of access to skilled birth attendants and postnatal care and the risk of maternal mortality; higher rates of poverty experienced by single-mother/parent households and/or the recognition that single mothers/parents face challenges in reconciling work and family obligations; women's limited ability to work during pregnancy and after childbirth; and the lack of income support during this period.

Figure 3: Number of national social protection strategies that recognize different gendered risks across the life course



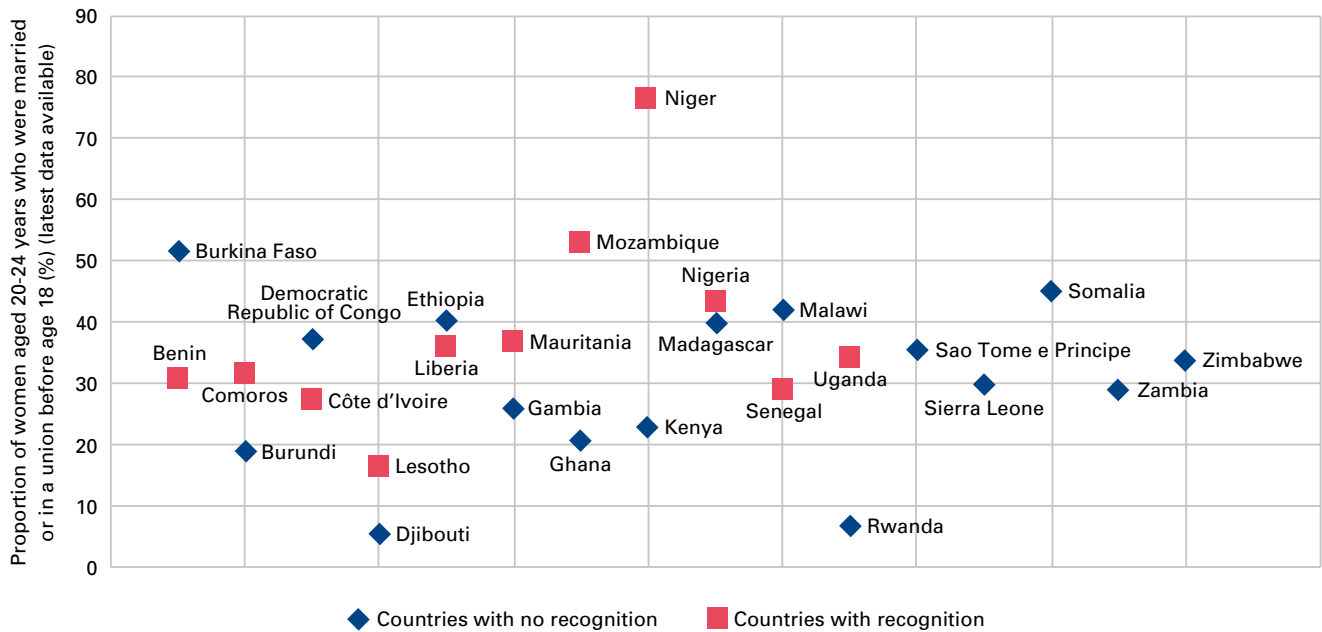
Source: UN Women, authors' elaboration.

This maternalistic approach partly reflects the persistent vulnerability of women at this life course stage. Data show that, across regions, women aged 25–34 are significantly more likely to live in poor households than men of the same age group (UN Women 2019a), and, despite important progress over recent decades, maternal mortality rates remain high, particularly in sub-Saharan African countries, which represent more than half of our sample. Yet, this approach may also indicate a narrow understanding of gendered risks and vulnerabilities as primarily related to women's reproductive role, when the root causes of inequality and exclusion are clearly more varied and not necessarily restricted to a particular life course stage.

On the one hand, women's and girls' lesser access to resources and opportunities often starts early – with poor access to nutritious food, barriers to education, and/or early care responsibilities. While half of national social protection strategies recognize barriers to education and training as an important risk factor, comparatively few connect them to their gendered drivers, such as child and early marriage, and adolescent pregnancy (see Figure 3). In fact, out of 50 strategies, only 12 and 18 respectively recognize these risks. While this is partly a reflection of the sample, which includes some regions/countries where prevalence of child/early marriage and adolescent fertility is relatively low, there is no clear relationship between prevalence and problem recognition (see Figure 4 and Figure 5).

Just 11 out of 28 strategies from sub-Saharan Africa recognize child and early marriage as a gendered risk to be addressed in and through social protection. There are significant variations in prevalence among the countries whose strategies do recognize child and early marriage as a gendered risk: from 16.4 per cent of women aged 20–24 who were married or in a union before the age of 18 in Lesotho to 76.3 per cent in Niger (see Figure 4).

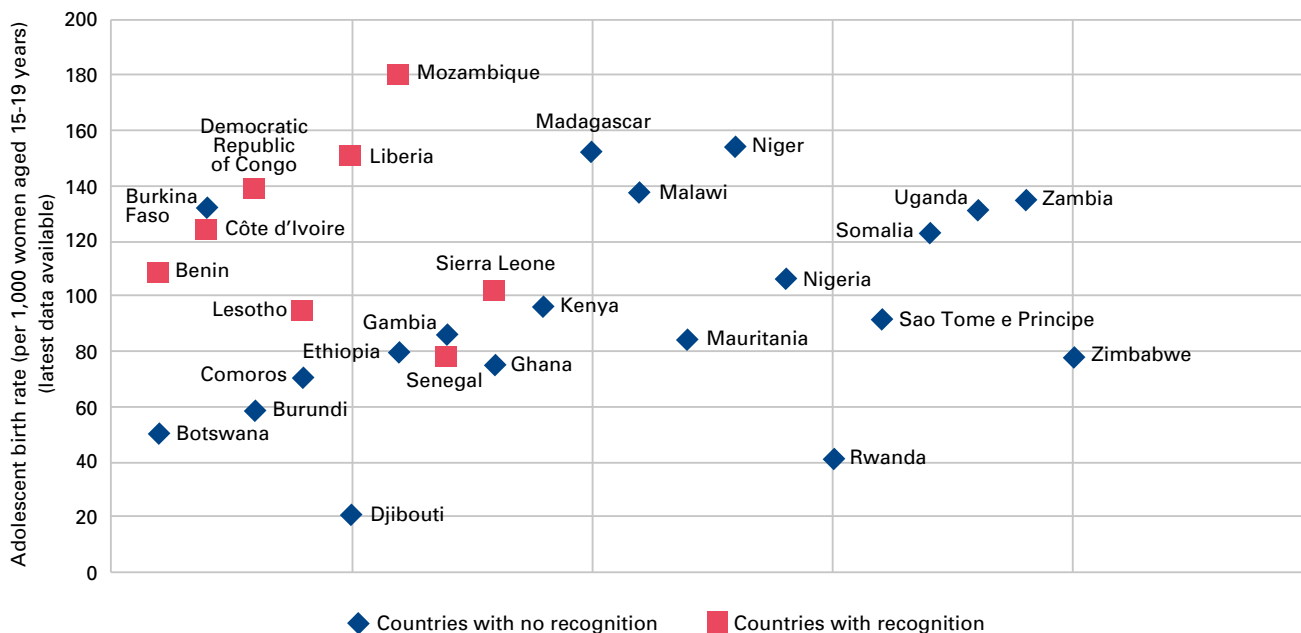
Figure 4: Prevalence of child and early marriage in selected sub-Saharan African countries, with and without recognition of it as a gendered risk



Source: UN Women, authors' elaboration based on data for SDG Indicator 5.3.1, Proportion of women aged 20–24 years who were married or in a union before age 18 (%), latest data available. Global SDG Indicators Database, accessible at <https://unstats.un.org/sdgs/indicators/database/>.

Similarly, despite the elevated rates of teenage pregnancy in sub-Saharan Africa, only around a third of the strategies from this region (8 out of 28) recognize it as a gendered vulnerability. Once again, recognition appears unrelated to the extent of the problem. Those countries that do *not* recognize teenage pregnancy as a gender-specific risk vary widely in terms of prevalence, ranging from 21 adolescent births per 1,000 women (aged 15–19) in Djibouti to 137.6 in Malawi (see Figure 5).

Figure 5: Rates of adolescent motherhood in selected sub-Saharan countries, with and without recognition of it as a gendered risk



Source: UN Women, authors' elaboration based on data for SDG Indicator 3.7.2, Adolescent birth rate (per 1,000 women aged 15–19 years), latest data available. Global SDG Indicators Database, accessible at <https://unstats.un.org/sdgs/indicators/database/>.

The situation is somewhat different in Latin America where none of the strategies identify early union formation as a social protection concern, but adolescent pregnancy – often the by-product of early unions^{vi} – is identified as a gendered risk by 7 out of 11 strategies. Peru, for example, explicitly includes adolescent pregnancy prevention programmes in its social protection strategy.

On the other hand, women's socio-economic disadvantage tends to accumulate and deepen over the life course. Across the globe, women of working age still face persistent inequalities and discrimination in the labour market – lower employment rates, lower earnings, and, particularly in low-income countries, higher rates of informality. Over three quarters of the strategies in our sample acknowledge at least one of these factors regarding women's lesser access to resources compared with men (see Figure 7). What is less recognized, however, is that this also exacerbates their vulnerability in old age, including significant gender pension gaps and, in some cases, heightened poverty risk among older women. Only Bangladesh, Cambodia, El Salvador, Papua New Guinea, Romania and Uganda (6 out of 50 strategies) refer to greater economic risk and/or social exclusion among women in old age, with particular focus on widows or older women living alone.^{vii}

vi While premarital sexual activity has become more prevalent in Latin America, increasing the likelihood of adolescent pregnancies without prior union, data from a range of countries show that a large proportion of "single" adolescent mothers have been or are in a relationship (marriage or consensual union), most likely with the child's father (Rodriguez 2013).

vii Bangladesh, Cambodia, El Salvador, Papua New Guinea, Romania and St. Kitts and Nevis.

To analyse whether **social protection programmes** had integrated a gender perspective in their assessment of these risks, we engaged in a two-step process. First, we identified which risks and vulnerabilities each programme aims to reduce (e.g. poor nutrition); second, we assessed whether the programme acknowledges the gendered nature of this risk (e.g. women's and girls' greater likelihood of skipping meals or eating less in some contexts,^{viii} as well as their disproportionate responsibility for household food security).

The main objectives of most of the 40 programmes we reviewed are poverty reduction (29 out of 40) and/or child/family well-being (28 out of 40). This is perhaps unsurprising given our research's focus on non-contributory programmes, which are typically targeted at poor households or households with children, and our prioritization of programmes aimed at children and their households. Almost half (19) of the 40 programmes acknowledge and seek to address nutritional needs, mostly focusing on children. Only two include the nutritional needs of mothers: the Plurinational State of Bolivia's Bono Juana Azurduy (Nagels 2015; Vidal Fuertes et al. 2015); and the Comoros' Social Safety Net project (World Bank 2014). A third programme, Ethiopia's Productive Safety Net Programme (PSNP), stands out as the only one with an explicit acknowledgement of the linkages between gender inequality and nutrition, recognizing female-headed households as an underserved group (Gavrilovic et al. 2020; Government of Ethiopia Ministry of Agriculture 2014; Holmes and Jones 2010). It also focuses on empowering women in order to positively influence the nutritional status of women and children in the family.

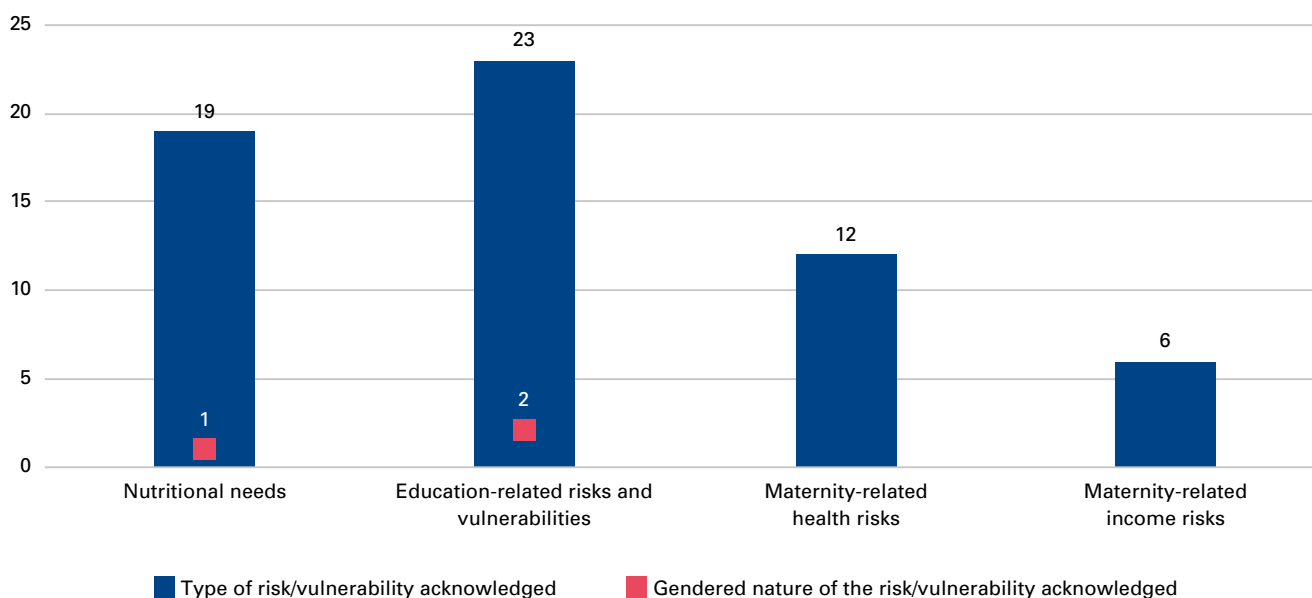
In countries where gender inequalities in education exist, especially in lower- and upper-secondary schooling – for example, due to prevailing social and gender norms around girls' education (and boys' education in some contexts), as well as early and child marriage (UNICEF Data 2020) – it is critical that these inequalities are acknowledged in social protection programmes and addressed through specific design features. However, while over half (23) of programmes acknowledge barriers to children's education or aim at improving children's education, only two explicitly acknowledge the gender barriers in education or include specific design features to redress them. These are Chile's Chile Crece Contigo programme, which encourages continuing education for pregnant adolescents under the age of 15 (Chile Crece Contigo 2019a, 2019b), and Ghana's LEAP programme, which aims to improve secondary school enrolment, attendance and retention among children aged 5–15, including among girls (de Groot 2015; Dako-Gyeke and Oduro 2013; Amuzu et al. 2010; Handa et al. 2014). This is despite the fact that, in 8 out of these 23 countries, there are persistent gender inequalities in lower secondary completion rates for girls, for example.^{ix}

Moving on to later life course stages, maternal healthcare and income security for women before and after childbirth are enshrined in the SDGs and in the Social Protection Floors Recommendation No. 2020 (2012) – and programmes to address these risks are important components of social protection systems (see, for instance, Addati et al. 2014). Yet, even though at the strategic level the recognition of maternity health risks is widespread, only a quarter of programmes acknowledge maternity-related risks, with a greater emphasis on health (12 out of 40 programmes) compared with income risks (only 6 out of 40 programmes) – for example, by targeting pregnant and lactating mothers specifically.

viii For example, research found that in times of economic shocks, women and girls are typically the first to reduce their food intake, and shift to less diverse and nutritious food (de la O Campos and Garner 2012, cited in FAO 2018a). See also FAO 1998: 36.

ix Source: World Development Indicators, <https://databank.worldbank.org/>. Latest year available. Last accessed 1 March 2021.

Figure 6: Number of social protection programmes (out of 40) by type of risks and vulnerabilities in their objectives, and recognition of gendered nature of such risks and vulnerabilities



Source: UNICEF Innocenti, author's elaboration. Note: the chart includes only those social protection programmes for which information was found.

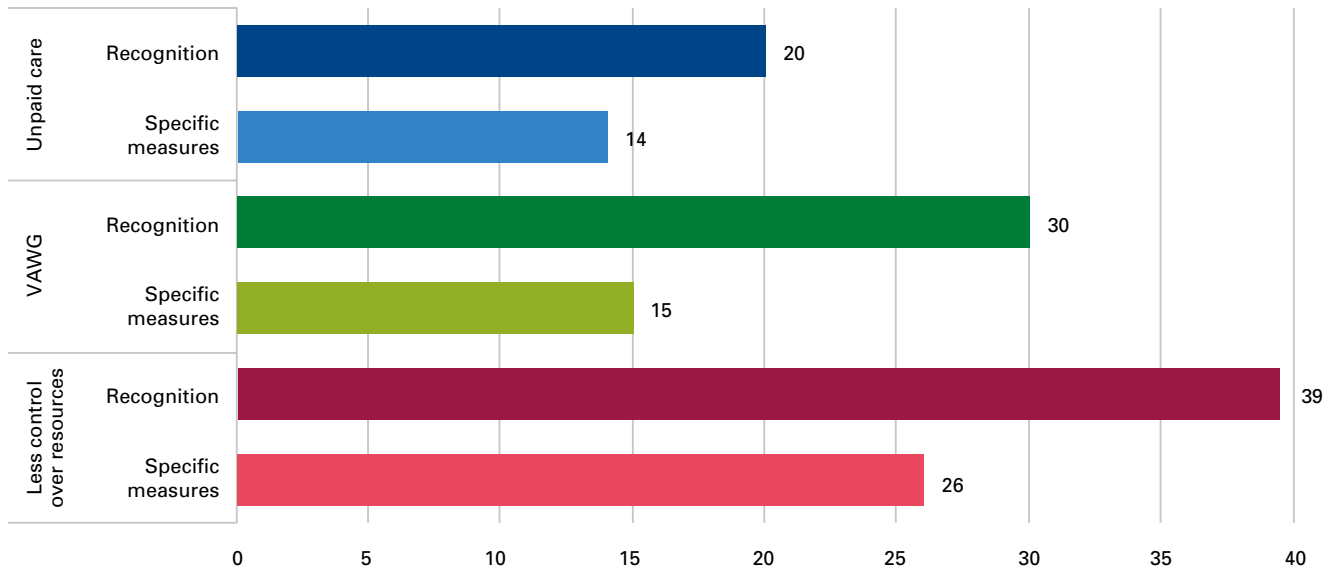
3. Gender-specific measures and programme design features

While the recognition of gendered risks and vulnerabilities is a necessary step for the development of gender-responsive social protection systems and programmes, it is unlikely to make a significant difference without specific measures to address them. Our analysis suggests that there is significant room for improvement on this front, both at the strategic and at the programmatic level. Specifically, even when gendered risks and vulnerabilities are recognized, social protection strategies and programmes often fall short of including specific measures to address them. This is particularly clear in the case of structural inequalities, which we discuss first in this section, before looking at the extent to which specific programme features (e.g. targeting, conditionalities, registration processes, complementary programmes or "cash-plus" components) are designed and/or implemented with women's and girls' rights and needs in mind.

Responding to structural inequalities

Although almost all **social protection strategies** in our sample acknowledge the existence of gendered risks and vulnerabilities, only half put forward at least one specific action to redress gendered risks and vulnerabilities in the social assistance and public services components of their social protection system (26 and 28 out of 50 respectively), and very few commit to gender-specific actions within social insurance or infrastructure (11 and 1 out of 50 respectively). This process of attrition from recognition of risks to actual response is particularly evident with regards to the structural gender inequalities identified in our framework (see Figure 7).

Figure 7: Number of national social protection strategies with formal recognition and measures to redress structural gender inequalities, by type of structural gender inequality



Source: UN Women; author's elaboration. VAWG = violence against women and girls.

More than half of the strategies in our sample (30 out of 50) recognize different forms of violence against women and/or gender-based violence as a gendered vulnerability. This suggests that many strategies are indeed considering gendered social risks, in addition to economic ones. However, when it comes to specific actions to address violence against women, the share of strategies is halved again (15 out of 50). Measures include but are not limited to those addressing intimate partner violence, domestic violence, femicide, trafficking, sexual harassment, and child, early and forced marriage. For instance, Romania's strategy commits to design and finance a social housing programme for vulnerable groups, including victims of domestic violence, who cannot afford to pay rent or utilities. El Salvador's strategy pledges to further strengthen the Ciudad Mujer programme, a one-stop shop for specialized quality services to prevent and assist victims of gender-based violence, including through access to education, employment, and sexual and reproductive health.

The differences between recognition and response are narrower in relation to unpaid care, but this is mostly because both the levels of recognition and the commitment to specific actions are low. Twenty strategies in our sample acknowledge women's disproportionate responsibility for unpaid care and domestic work as a barrier to achieving gender equality. They include references to the time squeeze resulting from such work and its implications for women's participation in paid work and public life. Only 14, however, commit to specific programmes, policies or actions that reduce, recognize or redistribute unpaid care. These include policies/programmes in the area of work-family reconciliation (e.g. childcare services, elderly care services etc.), income support for unpaid caregivers (e.g. maternity benefits) and the redistribution of responsibilities from women to men. In its National Social Protection Strategy, Rwanda pledges to establish a national childcare system with strong linkages to the national social protection system. The country also aims to increase the availability of Early Childhood Development centres/crèches for women in public works programmes, to enable the full participation of mothers without compromising the well-being of young children. Djibouti foresees extending maternity protection

to women in informal employment, and financing almost 30 community-based crèches to support women's education or income generation activities. As a key pillar of its national social protection policy framework, Paraguay aims to draft a national care policy, under the leadership of the Ministry of Women, involving 12 other government institutions. This national care policy will include a series of measures to guarantee access to quality services, time and resources for those in need of care (children, older people, people with disabilities), as well as for those providing care.

While around 8 out of every 10 strategies (39 out of 50) acknowledge women's unequal access to and control over assets and economic resources – including, for example, discriminatory laws restricting women's access to economic activity and resources, gender gaps in labour force participation or women's over-representation in more precarious and less remunerative jobs – a much lower share (26 out of 50) detail any specific actions, policies or programmes aimed at redressing those disadvantages. Where they do, the strategies highlight measures to support women's livelihoods and advance gender equality in the labour market, including training and skills programmes, access to credit and technologies, quotas in public works programmes or male-dominated sectors, and equal pay and anti-discrimination legislation, among others. For example, Bangladesh aims to harness its two largest public work schemes – the Food for Work Programme and the Employment Generation Programme for the Poorest – to create jobs, especially for women, in rural areas during the agricultural slow season. Macedonia plans to increase women's employment by combining active labour market policies, including gender quotas in education and training programmes to enhance women's employment in male-dominated sectors, with legal actions, such as adjusting national legislation in line with European Union equal gender opportunities regulations. Niger's strategy, in turn, foresees a 25 per cent quota for women in public sector employment, as well as greater access to micro-finance to strengthen women's productive capacities.

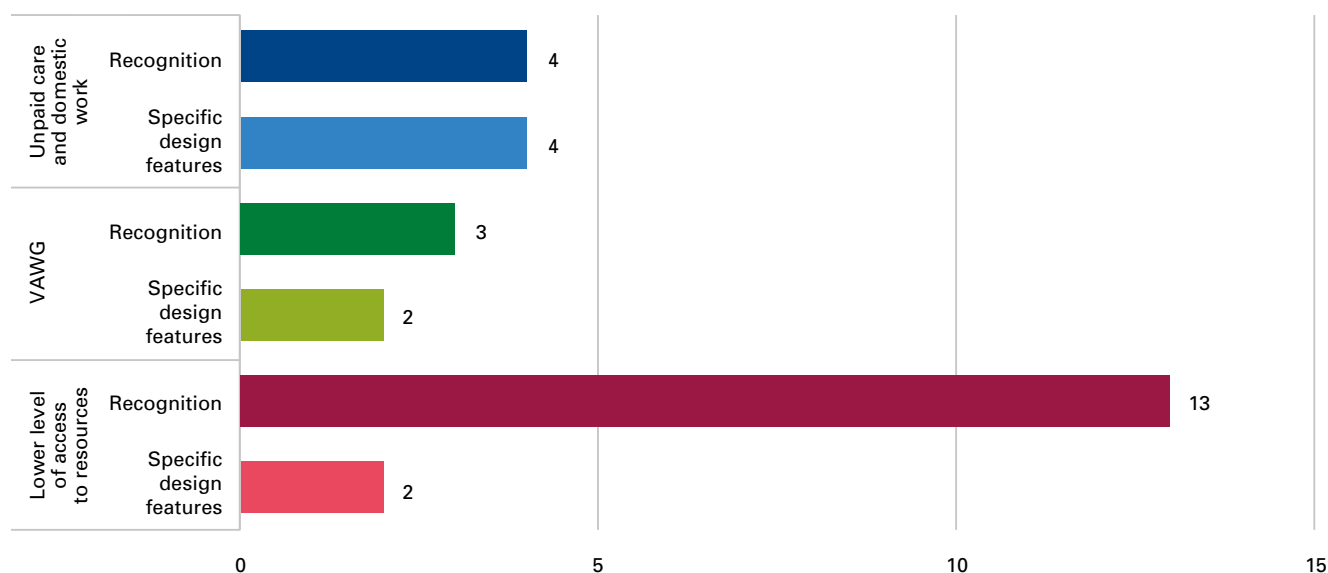
We find similar gaps in the recognition of and response to structural inequalities at the **social protection programme** level (see Figure 8). Only 3 out of the 40 programmes we analysed explicitly acknowledge violence against women and girls and only two include provisions to address it. A third programme was unclear in whether its design would effectively respond to the risk of violence for women and children.^x Albania's social assistance programme, Ndihma Ekonomike, incorporates victims of domestic violence and victims of trafficking among the eligible beneficiaries (UNICEF 2019a). Chile's multisectoral child protection and development programme Chile Crece Contigo includes home visits to assess the risk of domestic violence, including against women, as well as cases of poly-victimization and to define a plan of action to address such instances, including through referral to municipal support services and the identification of protective factors and resources (Chile Crece Contigo 2019a, 2019b).

Similarly, only 4 out of 40 programmes acknowledge the unequal distribution of unpaid care and domestic work, and include specific design features to reduce or redistribute it. Ethiopia's PSNP programme and India's MGNREGS establish childcare provisions for programme beneficiaries (Government of Ethiopia, Ministry of Agriculture 2014; Chopra et al. 2020; Holmes and Jones 2013). Argentina's Asignación Universal por Hijo specifically states that, via incentivizing school attendance, the cash transfer programme acts as a mechanism to increase women's ability to look for work and reduce childcare burdens on mothers and older girls (ANSES Observatorio de la Seguridad Social 2012). Chile's Chile Crece Contigo refers beneficiary households to information that seeks to promote fathers' participation and "shared responsibility" within the household on childcare (Chile Crece Contigo 2019a and 2019b).

x Colombia's cash transfer programme Más Familias en Acción stipulates beneficiary households with children under the age of 18 can lose benefits if instances of physical or sexual violence are identified (República De Colombia – Gobierno Nacional 2012). However, the implementation is regulated to ensure that children who are found to be subject to physical or sexual violence, labour exploitation, malnutrition or neglect are not excluded, but that benefits are instead given to adults in the household that are not responsible for such violation of the child's rights (República De Colombia – Gobierno Nacional 2012). However, when cases of intra-household violence are identified, if the programme does not provide support (e.g. via referrals) to survivors within the beneficiary household, this becomes deeply problematic if the beneficiary is a woman who may be a victim of violence.

Recognition of women's and girls' lower level of access to resources is slightly higher (13 out of 40 programmes). For example, programmes in Argentina, Ethiopia and Paraguay (ANSES Observatorio de la Seguridad Social 2012; Jones et al. 2010; BID 2016; Torrents 2014) all acknowledge female-headed households as likely to be economically insecure, although recent literature suggests this may not always be the case.^{xi} However, programmes only implicitly address the issue of women's and girls' lower level of access to resources either via targeting women as recipients (21 out of 40 programmes) or by promoting their participation in public works and labour market programmes (namely, Bangladesh, India, Niger) (Tebaldi and Bilo 2019; Cho and Ruthbah 2018; Holmes and Jones 2013; Chopra et al. 2020; Goodrich et al. 2015; World Bank 2017, 2016a; Barry et al. 2017). Two programmes include initiatives to encourage women's employment and increases in income-generating capacity – Peru, by leveraging women's leaders, and Uganda, by including young women in its programme (Government of Peru MIDIS 2015; Martinez et al. 2014).^{xii}

Figure 8: Number of social protection programmes that recognize, and provide specific design features to address the three structural inequalities



Source: UNICEF Innocenti; author's elaboration. Note: the chart includes only those social protection programmes for which information was found.

xi See, for example, Milazzo and van de Walle (2017) and Munoz Boudet et al. (2018).

xii Two additional programmes also seek to encourage employment and increases in income-generating activity, via, for example, microcredit components, for beneficiaries but not explicitly for women (Ecuador and Mali) (Araújo et al. 2017; Government of Mali 2018).

Targeting women with cash or in-kind support

Targeting women or girls with cash or in-kind support, or using gender quotas for women's participation in public works, is the primary means through which social protection programmes seek to respond to gendered risks and vulnerabilities that women and girls face – for example, women's and girls' lower access to, control over and ownership of household resources.

Of the 40 programmes in our sample: 18 target women and girls in poverty; 11 target or include special provisions, such as higher benefits or less strict eligibility criteria, for women and girls with disabilities; 7 target women and girls from minority communities based on ethnicity, religion or caste; 7 target single women or female heads of households, or widows; and other programmes focus on other specific contextual vulnerabilities.^{xiii} Further, we found some evidence of public works and labour market programmes that specifically seek to close the social protection coverage gaps between women/girls and men/boys – for example, through quotas for women (Bangladesh, India and Liberia) (Tebaldi and Bilo 2019; Cho and Ruthbah 2018; Holmes and Jones 2013; Chopra et al. 2020; Goodrich et al. 2015; Inter-Agency SPA Initiative 2014; World Bank 2016b).

While targeting women to receive benefits such as cash transfers can reduce some inequalities (e.g. income inequality), it does not necessarily translate into transformative change for women and girls. For example, women may not have control over how the cash transfer is spent, or they may control its usage only in relation to children's health and education expenditures, areas typically considered women's responsibilities (Camilletti et al. 2021; Camilletti 2020; FAO 2018a). Research suggests that other design features and complementary components may be needed to bring about significant, transformative and sustained gender equality outcomes (see sub-section below on linkages to other programmes and services, and Camilletti et al. 2021; UNICEF Innocenti 2020b).

Registration, enrolment and transfer modalities

Registration and enrolment processes, transfer modalities and delivery mechanisms play a key role in enabling (or impeding) de facto access to benefits and services. As part of our analysis, we assessed the extent to which such processes and mechanisms take gender-specific constraints into account.

For example, women and girls have less access than men and boys to resources such as mobile phones and bank accounts, and often face greater discrimination in accessing services and infrastructure. For example, it is estimated that in LMICs women are 8 per cent less likely than men to own a mobile phone, and 20 per cent less likely to use mobile internet (GSMA 2020). In 2017, the global gender gap in bank account ownership was seven percentage points (Demirgüç-Kunt et al. 2018). This can create significant barriers, especially where programmes rely exclusively on mobile or online registration, and/or direct deposits/receipt of benefits. However, only a few (four) programmes in our sample explicitly mention provisions to increase the accessibility of the registration and enrolment processes for women and girls. The Plurinational State of Bolivia's Bono Juana Azurduy provides for facilitated registration processes for beneficiaries living in rural areas, and promotes awareness campaigns for eligible mothers to register, in addition to guaranteeing free birth certificates for eligible households who do not have them (Estado Plurinacional de Bolivia, Ministerio de Salud y Deportes n.d.). In Nepal, within the World Bank's Strengthening Systems for Social Protection and Civil Registration Project, outreach campaigns have been carried out to promote awareness and enrol Child Grant potential beneficiaries who are eligible but uncovered, focusing on excluded women (as well as promoting access to civil registration) (Pereira Guimaraes and Phillippe 2020; Tebaldi and Bilo 2019). Brazil's Bolsa Família programme allows families to register for the benefits in different centres and offices, and conducts active searches to identify families and register them for the benefit (Gazola Helman 2015). Colombia's Más Familias en Acción establishes that municipalities shall ensure the registration processes are carried out in centres that are easily accessible by eligible beneficiaries (Medellín and Sánchez Prada 2015).

^{xiii} Specifically, disasters in Chile and Philippines; pregnant women deprived of liberty in Bolivia (Plurinational State of), and displacement in Colombia. Note that programmes may simultaneously target more than one group, hence the numbers do not add up to 40.

Information on whether transfer modalities and mechanisms consider gender constraints was found for 5 of 40 programmes, all in Latin America. For example, both Argentina's Asignación Universal por Hijo and Brazil's Bolsa Família programmes establish that debit cards used to transfer the cash benefits shall be delivered directly to recipients' homes (ANSES Observatorio de la Seguridad Social 2012; Government of Brazil, Ministerio da Cidadania 2019). This can be important for women who are unable to travel, because of time poverty or concerns around their own safety, to pick up their cards to receive the benefits. Colombia's Más Familias en Acción programme also delivers the cash benefits via a bank account, which beneficiaries can open through simplified or electronic wallet modalities (Medellín, Nadin and Sánchez Prada 2015; República de Colombia, Gobierno Nacional 2012; Banco Agrario 2016; Government of Colombia Departamento Para la Prosperidad Social 2017). The Bono de Desarrollo Humano in Ecuador – one of the few programmes in Latin America that does not use a debit card or require beneficiaries to open a bank account – has partnered with more than 20 financial institutions, including rural cooperatives, giving beneficiaries different ways to access their benefits (Martínez et al. 2017). Chile's Chile Crece Contigo programme organizes the provision of psychosocial support around beneficiaries' schedules (Chile Crece Contigo 2019a, 2019b). Regarding the other programmes reviewed – for nine, it was unclear the extent to which gender considerations were mainstreamed into design of transfer modalities and mechanisms; for the rest of the programmes, there was insufficient information to be able to make any assessment.

Conditionality

Extensive research has found that, while conditional programmes can help to incentivize certain behaviours, imposing conditionalities, especially when supply-side services are unavailable, inaccessible or of low quality, may increase women's time poverty due to the additional unpaid care and domestic responsibilities (UN Women 2019b; Cookson 2018; Tabbush 2010; Molyneux 2007). Conditionalities may be particularly punitive if beneficiaries risk losing access to benefits due to non-compliance. Further, unconditional cash transfer programmes have also been found effective in improving a range of well-being outcomes (see, for example, Davis et al. 2016). Out of 40 programmes in our sample, 18 include conditionalities that make receipt of the (usually cash) benefit contingent upon certain behavioural requirements, such as accessing health services – for example, by pregnant and lactating mothers – or education, by children. Of these 18 programmes, we found that 8 include conditionalities that run the risk of being punitive, either because they provide that beneficiaries lose access to benefits due to non-compliance and/or do not provide for supply-side services to accompany the cash transfer, whereas for another five, it was unclear.

Linkages to other programmes and services

Because gender inequalities intersect with other forms of discrimination, one single instrument of social protection, such as cash transfer, may not be sufficient to tackle several gender inequalities, risks and vulnerabilities. Therefore, embedding social protection programmes within a system or network of other relevant programmes and services (e.g. cash plus programmes or one-stop shops) can be an important mechanism to address multiple and intersecting inequalities, risks and vulnerabilities, including gendered ones. In our gender analysis of social protection programmes, we assessed whether these programmes were 'linked' to other programmes and services, thus seeking to address multiple forms of risks and vulnerabilities.

Out of the 40 programmes in our sample, 12 provide beneficiaries with links to information, other benefits or services, but these links are infrequently made in reference to specific gender considerations. This indicates a missed opportunity to harness the potential for gender-transformative programme design and implementation on outcomes on health, education and childcare.

Specifically, our analysis indicates that programmes adopt two types of linkages. The first links non-contributory programmes to child protection, health insurance, childcare or other services to ensure children’s development, health and well-being, or that of all household members. For example, both Ghana and the Philippines link beneficiaries of their respective programmes to health insurance, and in Albania^{xiv} beneficiaries have access to free medical treatment for children under the age of one (Palermo et al. 2019; De 2015; UNICEF 2019a).^{xv} Beneficiaries of Brazil’s Bolsa Família are offered places in crèches under the linkage with Brasil Carinhoso (Gazola Hellman 2015), which can help to address care needs and reduce women’s and girls’ time spent on unpaid care and domestic work. Beneficiaries of Argentina’s Asignación Universal por Hijo programme are linked to other programmes by the Ministry of Social Development or the Ministry of Employment, Labour and Social Security. One example is the Plan Nacer, which aims to reduce infant mortality by increasing access to healthcare for uninsured pregnant women and children under the age of six (Díaz Langou et al. 2018; World Bank 2013a). This can address maternity-related health risks, as well as children’s needs.

The second type of linkage connects social protection programmes with other programmes providing income or in-kind support, or which seek to strengthen the capacity of beneficiary households to generate income. For instance, Colombia (see Box 2), Ecuador, Paraguay, the Philippines and Peru all link the beneficiaries of their social protection programmes to other programmes that seek to promote social mobility, income-generating capacity and financial education, and reduce teenage pregnancy (De 2015; Martínez et al. 2017; Medellín and Sánchez Prada 2015; Torrents 2014; Silva Huerta, and Stampini 2018).^{xvi}

Box 2: Examples of programmes with linkages to other programmes and services

Chile’s Chile Crece Contigo, itself an integrated social protection programme constituted by multiple components, is also complemented by other programmes, such as the Programa de Apoyo al Recién Nacido(a) (PARN), to provide educational support required by the PARN, the Programa de Fortalecimiento Municipal, to strengthen municipal coordination among those delivering the psychosocial development component of the Chile Crece Contigo; and the Programa Fondo de Intervenciones para el Apoyo al Desarrollo Infantil, to refer children who are affected by psychomotor development difficulties (Government of Chile 2019).

Similarly, Colombia’s programme Más Familias en Acción is linked to cash transfer programme Jóvenes en Acción, which aims to promote human capital development and strengthen the employability of poor and vulnerable youth aged 16 to 24 (Medellín and Sánchez Prada 2015).

xiv Beneficiaries of Albania’s Ndihma Ekonomike programme are also eligible for energy bill subsidies and free textbooks for children attending primary school (UNICEF 2019a).

xv Another example is Nepal. The Child Grant programme is complemented by awareness-raising campaigns to inform potential eligible households about the programme and by birth registration campaigns to facilitate access to the service (Tebaldi and Bilo 2019).

xvi Other examples are Brazil, and Chile (see Box 2). Brazil’s Bolsa Família programme, for example, is integrated with other cash transfer programmes and social assistance services, such as Bolsa Verde – a cash transfer directed to families that undertake activities for the sustainable use of natural resources in extractive reserves, national forests, federal sustainable development reserves, and settlements that are environmentally differentiated from agrarian reform – and the Pro-Adolescent Project, a socio-educational, basic social protection service offered to adolescents (Gazola Hellman 2015).

4. Monitoring, evaluation and accountability

Integrating gender into the monitoring and evaluation (M&E) of social protection systems is critical for ensuring that they are responsive and accountable to women and girls. This includes the integration of gender-specific indicators and sex-disaggregated data into M&E frameworks and the participation of beneficiaries and/or civil society organizations in M&E, as well as accessible and effective grievance, feedback and complaints mechanisms, which guarantee anonymity, allow for individual and collective complaints and are sufficiently resourced and culturally appropriate (Sepulveda and Nyst 2012).

Gender data and analysis should inform not only the design and implementation of social protection strategies and programmes, but also be used to monitor and evaluate their performance and outcomes, to evaluate their effectiveness and to make necessary adjustments in light of adverse or unintended gender effects (UN Women 2015b). The extent to which this is actually happening seems to be extremely limited. For example, only around one third (17 out of 50) of the reviewed social protection strategies contain gender-specific indicators in their M&E frameworks (e.g. Albania, Gambia and Honduras) or pledge to establish M&E systems informed by gender data (e.g. Bangladesh, the Lao People's Democratic Republic and Mauritania).

Similarly, only 14 of the 40 social protection programmes for which sufficient information was available report collecting sex- or age-disaggregated data (or using sex-disaggregated data in programme evaluations), or using qualitative or quantitative methodologies. Further, only 3 of the 14 programmes mentioned above report collecting data on gender-specific or empowerment-related issues (Bolivia (Plurinational State of), the Comoros and India; see, for example, Vidal Fuertes et al. 2015; Estado Plurinacional de Bolivia, Ministerio de Salud y Deportes n.d.; World Bank 2014; Holmes and Jones 2013; Chopra et al. 2020). For example, MGNREGS in India is monitored and evaluated against whether: (i) registration is refused to female-headed households or single women; (ii) the average proportion of women working on MGNREGS in a village; and (iii) whether there are different task rates for men and women (Holmes and Jones 2013). However, the M&E system does not monitor the number of crèches that have been opened up at MGNREGS worksites (Chopra 2015), which would shed light on the extent to which gender-related MGNREGS design features are actually implemented as intended. For the other six programmes, it was unclear whether their M&E systems include indicators that specifically consider gender equality or women's and girls' empowerment issues beyond simple sex disaggregation.

Close to half of all reviewed social protection strategies (24 out of 50) incorporate plans for participatory M&E mechanisms, such as those in Bangladesh, Botswana and Brazil. Yet only two of these (Rwanda and Malawi) include specific mechanisms to ensure women's effective participation in consultations (see *Box 3*). Less than a third of strategies (13 out of 50), including those in Sierra Leone, Malawi and Romania, foresaw any mechanisms for accountability, such as the creation of grievance, feedback and complaint mechanisms that could inform policy assessment and reform.

On the social protection programme side, sufficient information about governance and accountability (grievance, complaint and feedback) mechanisms was only found for a quarter of programmes in our sample (9 out of 40). Five of these specifically foresee the participation of women or women's organizations (Bangladesh, the Comoros, India, Paraguay and Peru; see, for example, Tebaldi and Bilo 2019; World Bank 2014, 2013b; Holmes and Jones 2013; Chopra et al. 2020; BID 2016; Torrents 2014; Gobierno de Paraguay 2016; Silva Huerta and Stampini 2018), whereas in the other four cases, the participation of local communities is foreseen but women or women's groups are not explicitly mentioned.

Box 3: Strategies and programmes where gender is mainstreamed into monitoring, evaluation and accountability mechanisms

At the strategy level, Albania, El Salvador and Gambia included a comprehensive set of both sex-disaggregated and gender-specific indicators as part of their strategies' monitoring and evaluation framework.

El Salvador pledges to monitor specific gender indicators, such as maternal health, teenage pregnancy, gender wage gaps and unpaid care work. Gambia aims to expand its existing information base and include regular updates on the sex, marital status, educational background and employment status, among other indicators, of beneficiaries at the household and individual level. In addition to sex-disaggregated data, Albania sets specific targets for coverage of female beneficiaries, such as the percentage of female-headed households enrolled in specific programmatic actions. In turn, it also foresees annual assessments by civil society actors using a gender indicator framework. Similarly, national strategies in Honduras, Rwanda and Malawi commit to beneficiary participation in M&E; in Rwanda and Malawi, these include specific mechanisms to ensure women are effectively consulted. Rwanda pledges to undertake gender audits in order to understand the extent to which social protection programmes consider the different roles and needs of women and men. Such evidence is meant to inform future policy and programming, as well as the development of gender training modules for staff. In turn, Malawi explicitly calls for increasing the voice and participation of women across social protection policies and programmes, and ensuring that the eligibility criteria for participation in decision-making bodies do not hinder women's participation in social protection governance structures.

From a programmatic perspective, M&E and governance systems in programmes from India, Bangladesh, Bolivia (Plurinational State of) and the Comoros are designed in a way that suggests gender was mainstreamed. For example, in Bangladesh, by design, women participate directly in decision-making processes related to community assets to be built in public works programmes, while in India it is intended that women are represented in local-level committees, the social audit process, and state and central-level councils (Chopra et al. 2020; Holmes and Jones 2013). In Bolivia (Plurinational State of), the M&E system is designed to collect a variety of information specifically on women's outcomes, including maternal health, antenatal and postnatal care (Vidal Fuertes et al. 2015), and in the Comoros women's organizations are involved in the implementation and monitoring and evaluation of the Argent Contre Travail programme (World Bank 2014).

IV. Conclusions and policy implications

The social and economic fall-out of the COVID-19 pandemic has cast a sharp light on the urgent need to build robust, gender-responsive social protection systems, able to translate nominal commitments on achieving gender equality and women's empowerment through social protection into specific actions, policies and programmes. At this critical time, the findings of this paper provide important insights into how social protection strategies, policies and programmes can integrate gender concerns from the planning stage, through programme design and delivery, to governance, monitoring and evaluation systems, with a view to addressing gendered risks and vulnerabilities more effectively and, ideally, contributing to the transformation of structural gender inequalities.

Our review of social protection strategies and programmes in low- and middle-income countries paints a sobering picture of the state of gender mainstreaming in social protection. While most strategies and programmes acknowledge gendered risks and vulnerabilities linked to women's reproductive years, there are still important gaps in vulnerability assessments with regards to other life course stages, including adolescence and old age. Structural inequalities, such as women's disproportionate responsibility for unpaid care work, their over-representation among informal workers with little or no access to social protection, and their heightened exposure to gender-based violence, are often ignored. Even where formal recognition of these inequalities exists, as in the case of maternity-related risks, it is often not followed through with specific actions to redress these. This translation from recognition to response is an important bottleneck for gender mainstreaming efforts: only a minority of social protection strategies and programmes have design and delivery features that account for and respond to gendered needs, risks and vulnerabilities. Combined with the lack of a gender perspective in most monitoring and evaluation frameworks, which could identify gender gaps and biases in implementation, this risks creating a vicious cycle that leaves the rights and needs of women and girls largely unaddressed.

As countries emerge from the pandemic, the renewed emphasis on building robust and resilient social protection systems provides policymakers and practitioners in the field of social protection with an unprecedented opportunity to address some of these gaps. Four broad lessons emerge from our analysis:

1. Social protection strategies and programmes must work towards a comprehensive identification of gendered risks and vulnerabilities across the life course

Greater attention is required to gendered risks and vulnerabilities in adolescence and old age in particular. Even in countries with a high prevalence of child and early marriage and adolescent pregnancy, these are often not recognized as gendered risks to be addressed through social protection. Indeed, there is the potential for development actors and advocates working in the sphere of adolescent girls to further position social protection as a key mechanism to ensure successful transitions to adulthood. Similarly, the cumulative disadvantage experienced by women in old age remains largely invisible in the social protection planning and programming of low- and middle-income countries. The profound effect that unpaid care and domestic work have on women's and girls' opportunities, and their long-term economic security, requires urgent attention. The challenges of poverty that older women face will increase as population ageing deepens, and should be a critical area in gender-responsive social protection systems. It is only by addressing this conundrum that social protection systems can make a serious dent in reducing poverty and preventing its inter-generational transmission. The spotlight COVID-19 has cast on the need to invest in public care provision may provide an opportunity to put these concerns firmly on the agenda of policymakers and practitioners in the field.

2. The capacity to move from problem recognition to gender-responsive policies and programme design features needs to be strengthened

Our analysis identified a clear bottleneck in translating insights into action. For example, while 20 out of 50 social protection strategies acknowledge unpaid care as a structural barrier to women's economic security, only 4 out of 40 programmes include specific design features to recognize, reduce or redistribute unpaid care. And while the potential of social protection to contribute to the prevention of gender-based violence is increasingly recognized, there is still little in the way of linkages between programming in these two areas. Better guidance is clearly needed for policymakers and practitioners on how to translate their commitment to addressing gendered risks and vulnerabilities into concrete policies and programmes. Strategic engagement at the meso level – including through the integration of gender specialists into social protection teams, targeted training and capacity-building for gender equality advocates and practitioners on social protection issues, and vice versa for social protection policymakers on gender equality issues – could provide them with the technical tools necessary to mainstream gender more systematically into policy and programme design, implementation, monitoring and evaluation. Such tools should include a wide range of options, and discuss their potential benefits and drawbacks. For instance, practitioners may rely on certain design features, like targeting or conditionalities, to engender specific programmes, because of lack of information on their shortcomings or other more suitable options. Sharing of concrete positive experiences in programming across contexts also remains critical.

3. Policymakers need to employ the most appropriate design and delivery features based on the identification of gendered risks and vulnerabilities

Our analysis shows that even when gendered risks and vulnerabilities are recognized, social protection strategies and programmes often fall short of including specific measures to address them. This is particularly clear in the case of structural inequalities, where in spite of being recognized in many strategies, albeit less so in programmes, they are rarely addressed through specific measures and programme design features. Policymakers need to be mindful of designing programmes that specifically respond to these gendered risks and vulnerabilities. For example, targeting women as beneficiaries is the most common means through which programmes seek to enhance their access to resources. Significant and sustained progress on gender equality, however, requires additional interventions and linkages, including to complementary programmes and services (such as care services to address unpaid care and domestic work, and case management and referral services to prevent and respond to violence against women and children) as well as investments in their service accessibility and quality. Similarly, registration, enrolment and transfer modalities need to be designed accounting for gender dynamics, including access to safety considerations in women's and girls' mobility, access to bank accounts, and lack of access to information on social protection programmes and benefits.

4. Gender equality advocates and experts need to be involved in social protection policy and programme decisions to improve their performance for women and girls

For gender mainstreaming to be effective, it matters who participates in the planning, design and assessment of social protection instruments. Involving gender equality advocates and experts, such as national women's machineries and civil society actors, in the development, implementation, monitoring and evaluation of social protection strategies and programmes is hence critical. Greater collaboration and coordination between policymakers from the field of social protection and practitioners on gender equality is needed, to integrate unpaid care and violence against women more firmly into social protection strategies, policies and programmes – with each community bringing a distinct expertise to the conversation. For example, in many countries, experts and organizations working on violence against women have spent decades thinking through the provision of coordinated, multisectoral services for survivors; however, systematic links and referrals between social protection systems and violence services remain rare. While there may be some resource and capacity constraints to be addressed through additional training on social protection and funding, national women's machineries (especially those with a gender mainstreaming mandate) can potentially act as brokers between two knowledge communities and build bridges between technical circles and women's groups and organizations on the ground to ensure that social systems are responsive and accountable to their rights and needs.

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Annex 1: analytical framework and list of indicators

	National social protection strategies	Social protection programmes
1. Overarching framework	<ol style="list-style-type: none"> 1. The strategy uses human rights and other international frameworks as an overarching framework: <ul style="list-style-type: none"> ■ Human rights are acknowledged. ■ General human rights instruments are referenced. ■ Gender-specific human rights instruments are referenced. 2. The strategy expresses a commitment to universalism. 3. The strategy commits to progressively providing higher levels of protection. 4. The strategy adopts a life course approach. 5. Gender equality and/or women’s empowerment are objectives of social protection. 6. Gender gaps in access to social protection are recognized. 7. Family diversity is considered in social protection. 8. The strategy was put together in a consultative process: <ul style="list-style-type: none"> ■ The national gender equality mechanism was involved in this process. ■ Civil society organizations were consulted as part of this process. ■ Social partners were involved (ILO). 	<ol style="list-style-type: none"> 1. The programme uses human rights and other international frameworks as an overarching framework: <ul style="list-style-type: none"> ■ General international commitments are referenced. ■ Gender-specific international commitments are referenced. 2. The programme is enshrined in national legal frameworks: <ul style="list-style-type: none"> ■ Constitutional and statutory mandate on human rights are referenced. ■ The programme is enshrined in national legal frameworks. ■ The programme is supported by national strategies with gender equality and women’s empowerment at their core. 3. If the programme is not universal, the programme commits to the progressive realization of the extension of social protection coverage to reach universalism. 4. Child rights and empowerment of girls is stated as an objective: <ul style="list-style-type: none"> ■ Gender equality and/or women’s empowerment is stated as an objective. ■ Child rights and empowerment of girls is stated as an objective. 5. Family/household diversity is acknowledged. 6. The programme was put together in a consultative process: <ul style="list-style-type: none"> ■ The national gender equality mechanism was involved in this process. ■ Civil society organizations including women’s groups were consulted as part of this process. ■ Relevant ministries and autonomous institutions were involved in this process. 7. The budget provides specifically for gender mainstreaming in design, implementation and M&E. 8. Risks covered: <ul style="list-style-type: none"> ■ Death of the breadwinner/survivors’ benefits; health care; old age; disability; maternity; sickness; childhood/family; employment injury; unemployment; housing; poverty and social exclusion; food insecurity/malnutrition; disaster or extreme weather events; other risks

	National social protection strategies	Social protection programmes
2. Risks and vulnerabilities	<p>9. Gendered risks and structural inequalities are recognized:</p> <ul style="list-style-type: none"> ■ Child/early marriage ■ Barriers to education ■ Maternity related health risks ■ Maternity related income risks ■ Teenage pregnancy ■ Single motherhood ■ Widowhood ■ Old age <p>10. Structural inequalities are recognized:</p> <ul style="list-style-type: none"> ■ Violence against women ■ Unpaid care and domestic work ■ Less access and control over resources 	<p>9. Gendered risks and vulnerabilities are addressed in objectives:</p> <ul style="list-style-type: none"> ■ Child/early marriage or union; girls' and women's nutritional needs; adolescent pregnancy; barriers to education/gender gaps in enrolment or attendance; maternity-related health risks; maternity-related income risks; single motherhood; widowhood; orphans; old age; others <p>10. Structural inequalities are recognized:</p> <ul style="list-style-type: none"> ■ Violence against women and girls ■ Unpaid care and domestic work ■ Less access to resources
3. Specific measures and programme design features	<p>11. The strategy considers policies/programmes in:</p> <ul style="list-style-type: none"> ■ Social insurance ■ Social assistance ■ Public services ■ Infrastructure <p>12. The strategy puts forth specific actions to address gender equality in:</p> <ul style="list-style-type: none"> ■ Social insurance ■ Social assistance ■ Public services ■ Infrastructure <p>13. The strategy puts forth specific actions to close coverage gaps between women and men.</p> <p>14. The strategy puts forth specific actions to extend social protection to informal workers.</p> <p>15. The strategy puts forth specific actions to address violence against women.</p> <p>16. The strategy puts forth specific actions to increase women's income earning capacity.</p> <p>17. The strategy puts forth specific actions to recognize, reduce and/or redistribute unpaid care.</p>	<p>11. The programme specifically targets all women and girls:</p> <ul style="list-style-type: none"> ■ Women and girls in poverty; women and girls with disabilities; women and girls from minority communities/religion/race/caste groups; single women or female heads of households or widows; other contextual vulnerabilities (conflict settings, refugee status, natural disasters etc.) <p>12. The programme puts forth specific actions:</p> <ul style="list-style-type: none"> ■ To close the social protection coverage gaps between women/girls and men/boys; to address violence against women and girls; to address unpaid care work done by women and girls; to increase women's income earning capacity; to extend social protection to informal workers; to address poor educational and skill development outcomes for adolescent girls. <p>13. Where conditionalities exist, they are gender-sensitive and/or non-compliance does not lead to punitive measures.</p> <p>14. Registration and enrolment processes are accessible to women and girls.</p> <p>15. Benefits' or services' transfer modalities and mechanisms consider gender constraints.</p> <p>16. A capacity-building toolkit or operation manuals or rules or regulations on the gendered dimensions of the social protection programme have been developed.</p> <p>17. Capacity-building of implementers on gender dimensions of the social protection programme is conducted.</p> <p>18. The programme is embedded in a system of referral to other benefits or services.</p>

	National social protection strategies	Social protection programmes
4. Accountability, monitoring and evaluation	<ul style="list-style-type: none"> 18. The M&E framework includes gender-specific indicators. 19. The M&E framework includes participatory methods. 20. The strategy is embedded in national legislation. 21. The strategy includes grievance, feedback and complaint mechanisms that inform policy assessment and reform. 	<ul style="list-style-type: none"> 19. The programme includes grievance, feedback and complaint mechanisms that inform policy assessment and reform. 20. The programme M&E framework embeds sex- and age-disaggregated data collection, using appropriate quantitative and qualitative research strategies. 21. The M&E framework includes gender-specific indicators. 22. The M&E framework foresees participation of women in monitoring and governance.

Annex 2: list of strategies analysed

Region	Country	National Social Protection Strategies	Year
Asia and the Pacific	Cambodia	National Social Protection Policy Framework 2016–2025	2011
	The Lao People's Democratic Republic	National Social Report	2018
	Myanmar	Myanmar National Social Protection Strategic Plan	2014
	Papua New Guinea	National Strategy On Social Protection	2015
	Bangladesh	National Social Security Strategy (NSSS) of Bangladesh	2015
	Bhutan	Draft National Social Protection Policy for Workers in Bhutan	2013
Europe and Central Asia	Albania	National Strategy for Social Protection 2015–2020	2015
	Romania	National Strategy on Social Inclusion and Poverty Reduction 2015–2020	2015
	Uzbekistan	Welfare Improvement Strategy of the Republic of Uzbekistan 2013–2015	2013
Latin America and the Caribbean	Anguilla	Anguilla National Social Protection Policy	2018
	Brazil	II Plano Decenal Da Assistência Social (2016/2026) 'Proteção Social Para Todos/As Os/As Brasileiros/As'	2016
	Dominica	Growth and Social Protection Strategy 2014–2018	2014
	El Salvador	Plan Nacional De Desarrollo: Protección E Inclusión Social	2014
	Grenada	Grenada's Growth and Poverty Reduction Strategy (2014–2018)	2014
	Honduras	Política de Protección Social	2015
	Jamaica	Jamaica Social Protection Strategy	2014
	Mexico	Estrategia Nacional Para La Inclusión Social	2016
	Paraguay	Nota Sectoral De Política Social	2017
	Peru	Estrategia Nacional Del Desarrollo E Inclusión Social	2013
	Saint Kitts and Nevis	National Social Protection Strategy	2012
	Saint Lucia	National Social Protection Policy: A National Roadmap to Transformative Social Protection	2015
Northern Africa and Western Asia	Morocco	Rapport du Royaume du Maroc concernant les premières mesures en matière de mise en œuvre de L'Agenda 2030 pour le Développement Durab	2016

Region	Country	National Social Protection Strategies	Year
Sub-Saharan Africa	Benin	Politique Holistique de Protection Sociale	2013
	Botswana	A Social Development Policy Framework for Botswana. Phase II: Framework and Strategy	2010
	Burkina Faso	Politique Nationale de Protection Sociale	2016
	Burundi	Document de Politique Nationale de Protection Sociale	2011
	Comoros	Politique Nationale de Protection Sociale de l'Union des Comores	2013
	Côte d'Ivoire	Stratégie Nationale de Protection Sociale	2013
	Democratic Republic of the Congo	Stratégie Nationale de Protection Sociale	2015
	Djibouti	Stratégie Nationale de Protection Sociale	2018
	Ethiopia	National Social Protection Policy	2012
	Gambia	The Gambia National Social Protection Policy 2015–2025	2015
	Ghana	Ghana National Social Protection Policy	2015
	Kenya	Kenya National Social Protection Policy	2011
	Lesotho	National Social Protection Strategy	2014
	Liberia	National Social Protection Policy and Strategy	2013
	Madagascar (Fr)	Politique Nationale de Protection Sociale	2015
	Malawi	Malawi National Support Programme	2018
	Mauritania (Fr)	Stratégie Nationale de Protection Sociale	2012
	Mozambique	National Social Security Strategy	2016
	Niger (Fr)	Politique Nationale de Protection Sociale au Niger	2011
	Nigeria	National Social Protection Policy	2016
	Rwanda	Social Protection Strategy	2013
	Sao Tome e Principe	Política e Estratégia Nacional de Proteção Social	2014
	Senegal (Fr)	Stratégie Nationale de Protection Social	2016
	Sierra Leone	National Social Protection Policy	2018
	Somalia	National Development Plan	2017
	Uganda	National Social Protection Strategy	2015
	Zambia	National Social Protection Policy	2014
	Zimbabwe	National Social Protection Platform for Zimbabwe	2016

Annex 3: list of social protection programmes analysed

Region	Country	Social Protection Programme name
Asia and the Pacific	Bangladesh	Employment Generation Program for the Poorest (EGPP)
	Cambodia	Second chance or informal technical vocational education and training (TVET)
	India	Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS)
	Nepal	Child Grant
	Pakistan	Benazir Income Support Programme (BISP)
	Philippines	DOLE Integrated Livelihood and Emergency Employment Programme (DILEEP)
Europe and Central Asia	Albania	Ndihma Ekonomike
	Azerbaijan	Universal Pension System
	Georgia	Targeted Social Assistance
	Romania	Child State Allowance
	Serbia	Social and Child Protection – Social services and cash benefits
Latin America and the Caribbean	Argentina	Asignación Universal por Hijo (AUH)
	Bolivia (Plurinational State of)	Bono Juana Azurduy (BJA)
	Brazil	Bolsa Familia
	Chile	Apoyo al Desarrollo Biopsicosocial – Componente de salud de Chile Crece Contigo (ChCC)
	Colombia	Más Familias en Acción
	Ecuador	Bono de Desarrollo Humano
	Paraguay	Tekoporã
	Peru	Programa Nacional de Apoyo Directo a los más Pobres – Juntos
	Uruguay	Asignaciones Familiares Plan de Equidad (AFAM-PE)
Middle East and North Africa	Algeria	Allocation Forfaitaire de Solidarite – Solidarity Allowance
	Jordan	National Zakat Fund (NZF)
	Morocco	L'Appui Direct aux Femmes Veuves (Direct Assistance to Widows)
	Tunisia	Programme National d'Aide aux Familles Nécessiteuses (PNAFN)

Region	Country	Social Protection Programme name
Sub-Saharan Africa	Cameroon	Cameroon Social Safety Nets Project
	Comoros	Argent Contre Travail (ACT)
	Ethiopia	Productive Safety Net Programme (PSNP)
	Ghana	Livelihood Empowerment Against Poverty (LEAP)
	Kenya	Hunger Safety Net Programme (HSNP)
	Lesotho	Child Grants Programme (CGP)
	Liberia	Youth, Employment and Skills (YES) Programme
	Malawi	Social Cash Transfer Programme (SCTP)
	Mali	Jigisemejiri
	Mozambique	Programa Subsídio Social Básico
	Niger	Social safety net programme – Projet Filets Sociaux
	Rwanda	Genocide Survivors Support and Assistance Fund (FARG)
	Senegal	Conditional Cash Transfers for Orphans and Vulnerable Children
	Tanzania	Productive Social Safety Net (PSSN) Programme
	Uganda	NUSAF Youth Opportunities Programme
Zambia	Social Cash Transfer (SCT) Programme	

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