LIBER AMICORUM

ESSAYS IN HONOUR OF
PROFESSOR EDWELL KASEKE
AND DR MATHIAS NYENTI

Marius Paul Olivier
Letlhokwa George Mpedi
& Evance Kalula

EDITORS

CHAPTER 14

Social and Mutual Assistance in Zimbabwe

Gift Dafuleya

Abstract

This chapter discusses social and mutual assistance in Zimbabwe. It uses indicators such as the dependency, stunting and disability ratios as well as the unemployment and poverty levels to estimate the demand for social assistance in the country. The social assistance programmes, legal, financial and institutional frameworks are used to show the supply of social assistance. The discussion shows that the demand for social assistance far outweighs its supply. The mutual assistance discussion details the material exchange taking place, as a way of dealing with food shortages, among households. An argument is made that social assistance programming that fails to recognise extant mutual assistance may result in trade-offs between the two types of assistance, which may neutralise benefits to households.

Keywords: Demand and supply of social assistance, material exchange, mutual assistance, social assistance

14.1

Introduction

Social and mutual assistance has a long history in Zimbabwe. The former mirrored the Poor Laws in England, which were exported to the white settler community to retain them in the then Southern Rhodesia.¹ In the 1960s, social assistance provision

1 Kaseke, E. 2011. "The poor laws, colonisation and social welfare: Social assistance" In: J. Midgely & D. Pichaud (eds.) *Colonialism and Welfare: Social Policy and the British Imperial Legacy*. Cheltenham: Edward Elgar, p. 119.

LIBER AMICORUM

was extended to the indigenous African population, although their benefits were differentiated from those of the white settlers.² Patel *et al.*³ assert that, before the arrival of white settlers, indigenous social assistance existed in form of *Zunde raMambo* (chief's granary). The *Zunde raMambo* operated in a way that modern statutory social assistance operates. Social assistance typically redistributes money from the rich to the poor, since the *Zunde raMambo* harvested food from the wealthier farmers in the society and stored it for redistribution to the poor. With time, the *Zunde raMambo* started to erode due to the usurpation of the chief's powers by the colonial administration⁴ – this meant that the only recourse remaining for households was mutual assistance among family, relatives, friends and/or neighbours.

This chapter first discusses social assistance in Zimbabwe by providing detail that is twofold. First, the demand for social assistance is presented. This is done by presenting the dependency ratios, unemployment and poverty levels, as well as stunting and disability ratios. These markers arguably show the social assistance needs in the country. Second, the supply of social assistance is then discussed by providing detail of social assistance programmes and their legal, financial and institutional frameworks. The discussion shows that the supply of social assistance fails to meet its demand. Furthermore, the discussion points out that increasing the supply of social assistance, if not done well, can displace mutual assistance.

The chapter then discusses mutual assistance by detailing the nature of the material exchange between households who are in need and those who can assist. The assistance, which is reciprocal depending on which household has experienced a slump in consumption, is typically in the form of cash and food. The former is generally provided as soft loans while the latter as gifts.

The chapter concludes by pointing to the need for social assistance policies that will not crowd out mutual assistance but will find ways of integrating the two.

14.2

Social Assistance

Social assistance is defined in this chapter in line with the United Nations Development Programme (UNDP) (2019) definition. The definition states that social assistance refers to non-emergency cash and food transfers that are designed to cover the needs of individuals or households living in poverty or vulnerability.

2 Kaseke, E. 2013. "Social assistance and the right to social security: The case of Zimbabwe" *International Journal of Social Security and Workers Compensation*, 4:2012-13.

3 Patel, L., Kaseke, E. & Midgley, J. 2012. "Indigenous Welfare and Community-Based Social Development: Lessons from African Innovations" *Journal of Community Practice*, 20:12-31.

4 Dhemba, J., Gumbo, P. & Nyamusara, J. 2002. "Social Security Systems in Zimbabwe" *Journal of Social Development in Africa*, 17:111-156.

The term is used in this chapter only to refer to the provision of cash and/or food transfers by the state.

14.2.1 Social assistance data sources and context

The data on this section of the chapter is derived from the Social Assistance in Africa Database (UNDP, 2019). The database is compiled from three major social assistance databases. First is the University of Manchester's Social Assistance in Low and Middle-Income Countries Dataset. This database profiles all social assistance programmes in low and middle-income countries from the year 2000-2015. Second is the International Policy Centre for Inclusive Growth-UNDP's Social Protection in Africa Inventory of Non-contributory Programmes database, which maps social assistance programmes that were in place in Africa by 2015 and were fully or partially financed, designed or implemented by governments. The third is the International Labour Organization's (ILO) Social Security Enquiry database, which collects, stores and disseminates comparable statistical data on social security worldwide, including the receipts and expenditure of social protection programmes. The database also draws, in a minor way, from the World Bank's Atlas of Social Protection Indicators of Resilience and Equity, which analyses the scope and performance of social protection and labour programmes. Some few data were drawn from primary sources such as the countries' constitutions and social protection and/or social assistance policies.

The Social Assistance in Africa database features programmes managed by governments (with or without financial or technical support from development partners) because the dominant understanding in African policy documents is that social protection and social assistance are the responsibility of the state. Furthermore, because the database is concerned with programmes that implement social transfers in a predictable and sustained manner, it omits emergency programmes, such as food aid or short-term cash-for-work projects, due to their short-term and random nature. The database, however, includes pilot programmes that are seemingly earmarked for institutionalised social assistance. Food transfers that are considered exclude school feeding programmes, which though widespread in Africa, are strongly tied to access to education and typically fall under the purview of ministries of education and not the ministries responsible for social protection.

14.2.2 Social assistance needs

As of 2015, Zimbabwe had a population of 15.8 million people, with a high child dependence ratio of 74.4%. The overall dependency ratio was 79.5% in the same year. This means that the working-age face a greater burden in supporting the non-working population. The situation is further complicated by low levels of formal employment, resulting in 60.6% of all Zimbabwean households having a per capita

LIBER AMICORUM

consumption expenditure below the upper poverty line.⁵ The same data shows that 42.6% of the 60.6% of the population are children. Prevalence, depth, and severity of poverty are therefore much higher for children and the needs of social assistance for this group in Zimbabwe cannot be overstated.

The other marker of social assistance needs among children is that of the stunting rate, which reflects a failure to reach linear growth potential as a result of suboptimal nutritional conditions in early life. The stunting rate indicates increased risk of numerous and early exposure to adverse social conditions, such as illness, inappropriate feeding practices and future economic risk of low income among stunted children compared to the reference population. The stunting rate was 27.1% in Zimbabwe as of 2015. Accordingly, about one-third of Zimbabwean children are not developing properly.

The disability ratio is one other indicator that may point to the need for social assistance. The disabled people are more likely to be unemployed, earn less even when they are employed, and households with a disabled member are more likely to experience hardship, such as lack of access to safe water and sanitation, food insecurity and may have extra costs resulting from disability. While the World Health Organization (WHO)⁶ definition of disability provides a fundamental base for which to identify disabled people, the definition of disability varies per country. Consequently, a country with a stringent definition of disability could have a lower disability compared with a country that has a non-stringent definition. Since independence, Zimbabwe has had four national censuses. None of the censuses provides statistics on the prevalence of disability in the country. WHO⁷ reports that the disability prevalence was at 16.9% as at 2002-2004. A more recent estimate of the disability prevalence in Zimbabwe posit that 1.4 million people are disabled.⁸ Most of these people potentially need social assistance.

14.2.3 Social assistance programmes

Basing on the definition of social assistance adopted for this chapter, two programmes in Zimbabwe are classified under social assistance. The first is the Public Assistance Maintenance Allowances (PAMA), which dates to colonial times. PAMA's legal framework was established by the Social Welfare Assistance Act of 1998 (Chapter 17:06). The assistance provided by PAMA is in the form of

⁵ *Poverty, Income, Consumption and Expenditure Survey Report*, 2017.

⁶ World Health Organization's (WHO) definition of poverty: World Health Organization (WHO). 2011. *World report on disability*. Available online: <https://bit.ly/36OkXrU> [accessed on 20 August 2017].

⁷ *Ibid.*

⁸ Choruma, T. 2007. *The Forgotten Tribe: Persons with Disabilities in Zimbabwe Progression Report*.

maintenance allowances to the older persons, people with disabilities, children in difficult circumstances, families in distress and payments of transport through travel warrants. The duration of benefits lasts for a year and thereafter reassessments are done annually to determine eligibility. The programme has no human development conditions attached, meaning testing is the main method used to identify participants.

The number of households who received a transfer amount of USD 20 per month from PAMA was 6 668 as of 2015. This translates to a total number of 27 421 participants in PAMA, at an individual level. If we were to assume that the programme was targeted to the people with disabilities only, its reach⁹ would be 2%. The reach of the programme is accordingly much lower than 2% given that it also targets the older persons, the children and families in distress. The coverage of the programme is therefore thin on the ground. This is not surprising given that the programme has a small budget, which amounted to USD 831 222.00 in 2015.

The second programme that is classified as social assistance is the Harmonised Social Cash Transfer (HSCT), which was introduced in 2011 with objectives of enabling participating households to increase their consumption to a level above the food poverty line, reducing the number of ultra-poor households and helping participants to avoid risky coping strategies, such as child labour and early marriage. The programme is expected to lead to improved nutritional status and improved outcomes for children in health and education. Eventually, the HSCT is anticipated to replace the PAMA, which is being phased out, but still exists in districts where there is no HSCT.¹⁰ The programme does not have human development conditions attached to it, has a two-stage targeting approach that is used to identify participants and provides access to a social worker.

The number of households that receive social assistance from the programme was 52 046 – that translates to 236 013 participants at the individual level. The participants receive a minimum of USD 20 and maximum of USD 50 bi-monthly, depending on the household size. The duration of benefits lasts for two years and thereafter reassessments are done to determine eligibility. The targeted participants are children, older persons and persons living with a disability. Again, if we were to assume that the programme was targeted to the people with disabilities only, the reach of the HSCT will be 17%. Given that it also targets children and older persons, its reach is therefore far lower than 17%. However, the coverage of the HSCT is almost nine times that of the PAMA.

9 The reach of a programme = $\frac{\text{programme participants}}{\text{persons with disabilities}} \div \frac{\text{total population}}{\text{total population}}$

10 Food and Agricultural Organization. 2013. *Impacts of the Harmonised Social Cash Transfer Programme on Community Dynamics in Zimbabwe*. Rome: Food and Agricultural Organization.

LIBER AMICORUM

Basing on the available figures of participants in both the PAMA and HSCT, the reach of social assistance in Zimbabwe is estimated to be 3% (2015), where this reach is calculated as follows:

$$\text{Reach of Social Assistance} = \frac{\text{no of participants}/\text{Total population}}{\text{population below upper poverty line}/\text{total population}}$$

The calculation of the reach of social assistance as done above assumes perfect targeting of the population below the upper poverty line.

It can, therefore, be seen that the reach of social assistance in Zimbabwe is fairly small compared to the existing needs and demand for social assistance. Scaling up to achieve poverty mitigation should be prioritised. This is particularly so because evaluation studies have found that the HSCT has led to significant improvements in food security and the subjective well-being of participants.¹¹ However, Angeles *et al.* go on to posit that the positive effects of the HSCT are neutralised by a decrease in mutual assistance, which happen because friends, relatives and neighbours discontinue assisting households in the programme. In section three of this chapter, mutual assistance is discussed in detail to gain insight into how households engage in it.

14.2.4 Social assistance legal, financing and institutional frameworks

Zimbabwe has a national legal framework that details the available benefits of social assistance. The Constitution of Zimbabwe (2013) pledges to provide social security and social care to those who are in need subject to availability of resources. The constitution clearly states the rights of the citizens to a reasonable standard of living¹² and to assist mothers, fathers and other family members who look after children.¹³ The constitution goes on to specify the rights of children, persons with disability and the older persons to receive reasonable assistance from the state.¹⁴ Although the term ‘social assistance’ is not used in the constitution, it is somehow implied or at times used in the form of ‘social welfare’.¹⁵

While the constitution creates an enabling environment for the provision of social assistance, it also gives a mandate to the legislature to adopt appropriate laws and policies to regulate and guide social assistance programmes. The national law in line with the constitutional provision of social assistance is the Social Welfare Assistance

11 Angeles, G., Chakrabarti, A., Handa, S., Otchere, F. & Spektor, G. 2018. *Zimbabwe's Harmonised Social Cash Transfer Programme: Endline Impact Evaluation Report*. Chapel Hill: Carolina Population Center, University of North Carolina.

12 Article 24.1 of the Constitution of Zimbabwe of 2013.

13 Article 25.a of the Constitution of Zimbabwe of 2013.

14 Articles 81-83 of the Constitution of Zimbabwe of 2013.

15 Article 30 of the Constitution of Zimbabwe of 2013.

Act, which was enacted in 1998. This legislation, however, conveys social welfare (basically social assistance) as a privilege. Kaseke stresses that “the reluctance by the state to provide social assistance as a normal and legitimate function of the state stems from the fear that this would create a dependency syndrome. It is thus seen as discouraging individuals from becoming self-supporting.”¹⁶

The social protection policy framework of Zimbabwe, unlike the Social Welfare Act, mentions that “people have rights and entitlements to social protection and the State should provide minimum essential services that can ensure an adequate standard of living”.¹⁷ This policy framework may be considered as ‘soft law’ because it is not legally binding compared to the regulatory provision of acts, which may be considered as ‘hard law’ as they would be legally binding. Other ‘soft laws’ on social assistance relate to regional and global legal instruments that have been signed and/or ratified by the Zimbabwe government. These include the African Charter on Human and People’s Right of 1981 and the United Nation’s Convention on the Rights of the child of 1989 that were ratified in 1986 and 1990, respectively.

The Zimbabwe government spent 0.11% of GDP in 2015 on social assistance, and this translated to the spending of USD 5.31 per poor person in that same year, assuming that social assistance programmes correctly identify the population in poverty. This is a small amount that is committed to each poor person per year by the state, even with the support of international partners who donated almost USD 9.5 million in 2015. Compared to funding originating from domestic resources, which is severely curtailed by the protracted economic crisis, this aid is huge even though it does not match up to the needs of social assistance in the country. Analysed from an incentives point of view, this aid potentially crowds out public expenditure commitments on social assistance and welfare institution building. Furthermore, the legitimacy of social assistance programmes at domestic levels becomes compromised.

Yet, commitment to setting legal and financial frameworks at the domestic level are key elements of institutionalising social assistance systems, as opposed to discretionary once-off and time-bound programmes. The permanency of social assistance programmes anchored in law, with financial commitments expressed through national budgets would require that there is an established organisation mandate, responsibilities and procedural requirements that determine the way social assistance provision is carried out. The organisation and coordination mandate of running social assistance programmes in Zimbabwe is under the Ministry of Public Service, Labour and Social Welfare. In implementing the flagship HSCT, local government is permitted to modify or complement the design of the programme.

16 Kaseke, E. 2013. “Social assistance and the right to social security: The case of Zimbabwe” *International Journal of Social Security and Workers Compensation*, 4:2012-2013.

17 Government of Zimbabwe. 2016. *National Social Protection Policy Framework for Zimbabwe* (NSPPF). Harare: Ministry of Public Service, Labour and Social Welfare, Government of Zimbabwe, p. 24.

As such, the level of centralisation can be said to medium. Manual cash is used as the delivery method in disbursing the transfer to participants. Institutional structures, though in place, still need to improve in terms of coordination and efficiency.

14.3

Mutual assistance

Mutual assistance as used in this chapter refers to the help that is provided to a household in need by other households. Before discussing the nature of this assistance, this section starts with a discussion of the data source and background context.

14.3.1 Mutual assistance data source and context

Because Zimbabwe lacks household survey data and events often change dramatically due to the economic and political context, this section of the chapter uses original survey data collected in three poor urban townships in Bulawayo, Zimbabwe between March and July 2014. The survey data was collected through collaboration with the Institute of Development Studies (IDS) at the National University of Science and Technology in Zimbabwe. All identified research protocols were observed in the collection of information on, *inter alia*, the household profile, death in the household, household consumption and expenditure, migration and remittances, household income, household assets and household networks. The draft questionnaire was initially pretested, and its improved version was then piloted.

The contemporary records of the City of Bulawayo (BCC) show that the city has a total of 29 wards with 107 suburbs. Using housing structures and characteristics as a proxy for deprivation, 21 suburbs that are predominantly low income and high density were identified out of the 107. These 21 suburbs have a total target population of 32 450 households based on the BCC records. A two-stage cross-sectional sample design was used to select a sample size of 300 households. In the first stage, three out of 21 suburbs were randomly selected, namely Matshobana, Sizinda and Sokusile. In the second stage, the number of municipal stands (a piece of land with an official boundary within which dwellings are built) in each area was divided by the sample size of 100 per suburb, to derive the intervals on which the systematic household selection was based.

The dataset usable contains 298 households who were asked about their worst experiences in terms of food consumption and how they responded in terms of managing the situation. In particular, households were asked if they were able to get money or food from relatives, friends or people in their community; if yes, a follow-up question was asked about the number of people that the household could ask for this kind of help. The summary of this information is provided in table 14.1.

Table 14.1 Descriptive Statistics of Mutual Assistance

	Percentage	Mean	Standard deviation	Min	Max
Type of Mutual assistance					
Mutual assistance among relatives	73.22	2.42	1.4	1	10
Mutual assistance among neighbours/friends	58.31	2.06	1.15	1	8
Mutual assistance among both relatives and neighbours/friends	46.31				

Source: Own survey

Note: (a) The percentage column shows the percentage of households that are in a mutual assistance arrangement. For example, 73.22% of households in the sample are in a mutual assistance arrangement with relatives. (b) The mean refers to the mean number of other households in a mutual arrangement in each case.

14.3.2 Food and cash as mutual assistance

The assistance that is provided among households in times of need is mostly in the form of cash and food. This is similar to the social assistance provision that has both cash and food transfers. When assisting each other, households headed by those above the age of 66 years generally receive food parcels as gifts when they are faced with a slump in consumption. The households with heads below the age of 34 years generally receive cash in the form of soft loans. This may mean that it is easy for those assisting to be altruistic towards the aged household heads since they know they are out of employment and their need might be more genuine than that of younger heads of households.

Where loans are used as mutual assistance, the neighbours and friends are stricter than relatives in terms of repayment of credit. The reason for this may be that assistance from relatives seems to have a higher component of altruism, which reveals itself in the form of gifts towards a kin-household that is failing to cope. Neighbours and friends are also altruistic, but not as much as relatives, hence they assist in the form of credit with easy repayment terms. The data shows that the assistance from neighbours and friends is quantitatively greater than that of relatives, therefore making it an important source of coping.

Most of the credit transactions among households are in the form of cash. If food parcels are used as a form of assistance through credit, it is done on extremely generous terms. Most of the food parcels are only to be repaid in the same form they were extended to the needy household as and when the household is able. This is true despite whether the assistance is from relatives, neighbours and friends, although the repayment terms from relatives are more relaxed.

LIBER AMICORUM

The assessment shows that it is only relatives who are sympathetic to large households, to the extent that household size determines receipt of gifts in the form of food parcels and cash with easy repayment terms from relatives. This is not the case for neighbours and friends, who may not be as sympathetic to a head of a large household. Largely, however, food parcels are used as gifts more so than cash.

The households headed by females are most likely to receive assistance in the form of food parcels both as gifts or to be repaid, while male-headed households receive cash to be repaid. This could be because most men in Africa generally do not associate themselves with cooking or searching for food to feed the family.¹⁸ Consequently, they may feel secure to receive help in the form of cash which they then forward to their spouses who will eventually use it to purchase food. Evidence from the survey also shows that household income is considered ahead of determining if a household in need of assistance may be offered cash as a soft loan. As household income increases, the cash to a household in crisis shifts from easy to strict terms of repayment. Lastly, the evidence from the data shows that a household with a migrant is less likely to receive assistance in the form of a gift but most likely to receive assistance in the form of a credit to be repaid. This could be based on the fact that a household with a migrant is expected to receive remittances to cope with shortages of income better than a household without a migrant.

The credit transactions between households are highly informal. They do not have written records, nor do they have witnesses. None of these credit transactions are made with an established interest rate. The only restriction is the payment date of the loan, which may also be renegotiated between the lending and receiving household. While there is a high level of trust within these households, the question becomes – how is repayment enforced?

The penalty that is generally enacted against a defaulting household is to exclude it from future opportunities to receive assistance from the lending households. Given that many vulnerable households require assistance from time to time from households they are networked with, they would, therefore, do all they can to make sure that they remain trusted and on good terms with those households. Usually, default to one lender does not necessarily result in exclusion by that lender only. The word is usually passed on to other households who may then exclude the defaulting household as well. As a result, households both in the network and beyond will isolate the defaulting household.

18 Ingwani, V. 2013. "An Exploration of Gender-based Violence among the Shangaan People in Southern Zimbabwe: A Case Study of the Gazini Clan." In: E. Chitando & E. Chirongoma (eds.). *Justice Not Silence: Churches Facing Sexual and Gender-based Violence*. Stellenbosch: African Sun Media.

14.4

Conclusion and Implication for Social Assistance Policy

The needs of social assistance in Zimbabwe are huge, particularly on children, yet the supply of social assistance is highly limited. Two programmes of social assistance exist, although the PAMA is earmarked to be taken over by HSCT leading to only one programme. Despite the existing national legal frameworks of social assistance, and ratifying some regional and international social assistance instruments, the protracted economic crisis has severely curtailed the state's ability to deliver social assistance. As a result, international development partners have played a huge role in funding the HSCT, which is the flagship programme of social assistance in Zimbabwe. A lot of deficits remain, leaving the poor households reliant on their initiatives to meet their needs and to respond to socio-economic stressors that they experience.

Because mutual assistance relies on peer support and reciprocity, it promotes solidarity and mutual accountability. However, mutual assistance is on a small scale and is inadequate to facilitate the exit out of poverty. In addition, it is likely that poor households in a neighbourhood are also surrounded by other poor households and make friends with other poor households. Consequently, the initiatives are typically rescue-driven and lack complementary social assistance provision that may lift households out of poverty.

However, there is evidence that if not carefully introduced, social assistance may displace mutual assistance. This may not be a win-win outcome that is best needed for households in poverty. This is because consumption may not be increased due to a fall in gifts that are exchanged as mutual assistance; or solidarity may decrease among households, leading to unforeseen social challenges. As long as social and mutual assistance do not complement and reinforce each other, an unwanted win-lose outcome will result. Social assistance policies are therefore needed that will not crowd out mutual assistance but will find ways of integrating the two systems of assistance. This is predominantly crucial in Zimbabwe at this moment because there is a possibility of scaling up HSCT in the foreseeable future.

14.5 Bibliography

- Angeles, G., Chakrabarti, A., Handa, S., Otchere, F. & Spektor, G. 2018. *Zimbabwe's Harmonised Social Cash Transfer Programme: Endline Impact Evaluation Report*. Chapel Hill: Carolina Population Center, University of North Carolina.
- Choruma, T. 2007. *The Forgotten Tribe: Persons with Disabilities in Zimbabwe Progressio Report*.
- Food and Agriculture Organization (FAO). 2013. *Impacts of the Harmonised Social Cash Transfer Programme on Community Dynamics in Zimbabwe*. Rome: Food and Agriculture Organization.
- Government of Zimbabwe. 2002. *National Social Protection Strategy for Zimbabwe: Social Development Fund*. Harare: Ministry of Public Service, Labour and Social Welfare.
- Government of Zimbabwe. 2016. *National Social Protection Policy Framework of Zimbabwe*. Harare: Ministry of Public Service, Labour and Social Welfare.
- Ingwani, V. 2013. "An Exploration of Gender-based Violence among the Shangaan People in Southern Zimbabwe: A Case Study of the Gazini Clan" In: E. Chitando & E. Chirongoma (eds.). *Justice Not Silence: Churches Facing Sexual and Gender-based Violence*. Stellenbosch: African Sun Media.
- Kaseke, E. 2011. "The poor laws, colonisation and social welfare: Social assistance" In: J. Midgely & D. Pichaud (eds.). *Colonialism and Welfare: Social Policy and the British Imperial Legacy*. Cheltenham: Edward Elgar, p. 119.
- Kaseke, E. 2013. "Social assistance and the right to social security: The case of Zimbabwe" *International Journal of Social Security and Workers Compensation*, 4:2012-2013.
- Patel, L., Kaseke, E. & Midgley, J. 2012. "Indigenous Welfare and Community-Based Social Development: Lessons from African Innovations" *Journal of Community Practice*, 20:12-31. <https://doi.org/10.1080/10705422.2012.644217>
- The Constitution of Zimbabwe of 2013 (enacted by the Constitution of Zimbabwe Amendment (No. 20) Act, which was gazetted as a law on 22 May 2013).
- Social Welfare Assistance Act of 1998. *Chapter 17:06*.
- United Nations Development Programme (UNDP). 2019. *The State of Social Assistance in Africa*. Ethiopia: RSCA.
- World Health Organization (WHO). 2011. *World Disability Report*. Geneva: World Health Organization (WHO).