

**Gendered risks, poverty and vulnerability in Ghana:
To what extent is the LEAP cash transfer programme
making a difference?**

October 2010

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* Disclaimer: The views presented in this paper are those of the author and do not necessarily represent the views of DFID.

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¹ The authors gratefully acknowledge the valuable fieldwork inputs of Eva Akanchalabey, John-Kwose Emmanuel, Baako Alhassan and Muniru Mohammed Awal, data processing by Marshall Kala as well the research assistance of Shea McClenahan, Shreya Mitra and Elizabeth Presler-Marshall.

Background and Acknowledgements

This report is part of a research project funded by the UK Department for International Development (DFID) (2008-2010) and the Australian Government, AusAID (under the Australian Development Research Awards 2008) (2008-2011), looking at gender and social protection effectiveness in Latin America, Sub Saharan Africa, South Asia and Southeast Asia. DFID funded the primary research in Bangladesh, Ethiopia, Ghana, India, Mexico and Peru, as well as secondary research in Brazil, Chile, Columbia and Pakistan (with a focus on cash and asset transfer and public works programmes). AusAID funded research in Indonesia and Viet Nam (with a focus on subsidies). The research was carried out by ODI in partnership with the Department of Economics, Addis Ababa University, Ethiopia; the Indian Institute of Dalit Studies; SMERU Research Institute in Indonesia; the Vietnamese Academy of Social Sciences, Institute of Family and Gender Studies; the Department of Women and Gender Studies, University of Dhaka; the International Policy Centre for Inclusive Growth (IPCIG) in Brazil; and independent consultants in Ghana, Mexico, and Peru. For more information see:

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List of acronyms

AIDS	Acquired Immunodeficiency Syndrome
Camfed	Campaign for Female Education
CEDAW	Committee on the Elimination of Discrimination Against Women
CIFS	Community-Driven Initiative for Food Security
CLIC	Community LEAP Implementation Committee
CPRC	Chronic Poverty Research Centre
CRS	Catholic Relief Services
CSO	Civil Society Organisation
CWIQ	Core Welfare Indicators Questionnaire
DFID	UK Department for International Development
DHS	Demographic and Health Survey
DLIC	District LEAP Implementation Committee
DOVVSU	Domestic Violence and Victims Support Unit
DoC	Department of Children
DoW	Department of Women
DSW	Department of Social Welfare
FAO	Food and Agriculture Organization
FGD	Focus Group Discussion
FGM	Female Genital Mutilation
GAWW	Ghanaian Association for Women's Welfare
GDI	Gender-Related Development Index
GEM	Gender Empowerment Measure
GLSS	Ghana Living Standards Survey
GNU	Ghana News Agency
GoG	Government of Ghana
GPRSI	Ghana Poverty Reduction Strategy 2003-2005
GPRSII	Growth and Poverty Reduction Strategy 2006-2009
GSS	Ghana Statistical Service
HDI	Human Development Index
HIPC	Heavily Indebted Poor Country
HIV	Human Immunodeficiency Virus
IFC	International Finance Corporation
IFPRI	International Food Policy Research Institute
ILO	International Labour Organization
INGO	International NGO
IPC	International Poverty Centre
IPEC	International Programme on the Elimination of Child Labour (ILO)
IPPF	International Planned Parenthood Federation
ISODEC	Integrated Social Development Centre
ISSER	Institute for Statistical, Social and Economic Research
LEAP	Livelihood Empowerment Against Poverty
LSMS	Living Standards Measurement Survey
MDG	Millennium Development Goal
MESW	Ministry of Employment and Social Welfare
MMR	Maternal Mortality Rate
MMYE	Ministry of Manpower, Youth and Employment
MOWAC	Ministry of Women and Children's Affairs
MP	Member of Parliament
NCWD	National Council on Women in Development
NECIDA	Northern Eastern Corridor Integrated Development Programme
NGO	Non-Governmental Organisation

NHIS	National Health Insurance Scheme
NSPS	National Social Protection Strategy
ODI	Overseas Development Institute
OECD	Organisation for Economic Co-operation and Development
OVC	Orphans and Vulnerable Children
PRSP	Poverty Reduction Strategy Paper
PSIA	Poverty and Social Inclusion Assessment
PWD	People Living with Disabilities
SIGI	Social Institutions and Gender Index (OECD)
UN	United Nations
UNAIDS	Joint UN Programme on AIDS
UNDP	UN Development Program
UNICEF	UN Children's Fund
WFP	World Food Programme
WHO	World Health Organization

Executive summary

The importance of social protection has become increasingly recognised in recent years, especially in the wake of the recent food price and global economic crises, but there has been little attention to the role that gender plays in the implementation and effectiveness of social protection programmes. It is often assumed that gender is already being addressed in social protection initiatives because many cash or asset transfer programmes and public works schemes target women, drawing on evidence that women are more likely to invest additional income in family well-being. The role that gender relations play in social protection effectiveness is, however, likely to be more complex. Gender norms and dynamics may affect the type of risk that is tackled, the choice of social protection modality implemented, awareness-raising approaches, public buy-in to social safety net programmes and, most importantly, programme outcomes.

In Ghana, there has been growing policy momentum around social protection issues over the past five years, motivated by a concern to reduce poverty and vulnerability. In 2007, the draft National Social Protection Strategy (NSPS) was completed, and policy dialogue and programmatic action have intensified in the wake of the 2008-2009 global crisis. Key social protection programmes in place now include: the School Feeding Programme, the Education Capitation Grant, the National Health Insurance Scheme (NHIS) and the government's new flagship Livelihood Empowerment Against Poverty (LEAP) cash transfer programme, launched in March 2008.

The focus of this report is on the latter, a pioneering initiative for the West African region, which by May 2009 had reached approximately 131,000 beneficiaries in 26,200 extremely poor households across more than one-third of districts nationwide. Targeting caregivers of orphans and vulnerable children (OVC), people living with disabilities and the elderly, LEAP programme design has a strong focus on addressing the care burden of women and also highlights the particular vulnerabilities faced by elderly women. However, as recent government surveys and donor reports have highlighted, much still needs to be done to tackle pervasive gender inequality in the country. The purpose of this report is therefore to analyse the extent to which gender-specific economic and social risks inform LEAP programme design and implementation, with the aim of informing ongoing initiatives to strengthen the programme's effectiveness.

Methodology: This report is part of a broader programme of work funded by the UK Department for International Development (DFID) on Gender and Social Protection Effectiveness, being undertaken in Africa, Asia and Latin America. The research methodology involved a mixed qualitative and quantitative methods approach, with primary research undertaken in six sites in two districts in Ghana's Northern Region, one of the poorest areas in the country. Sites were selected drawing on a purposive matched sampling technique, which involved selecting two districts with a similar poverty ranking, of neither transient nor extreme poverty (approximately 'middling poor'), using the Ghana Statistical Service (GSS) 2000/01 district poverty map.

Gendered risks and vulnerabilities: To date, social protection policies and programming have had a greater focus on economic risks and vulnerability – such as income and consumption shocks and stresses – and only limited attention to social risks. However, social risks – such as gender inequality, social discrimination, unequal distributions of resources and power at the intra-household level and limited citizenship – are often just as important, if not more important, in pushing and keeping households in poverty. The report therefore begins by mapping the key gendered economic and social risks and vulnerabilities facing poor people in Ghana. It emphasises the marked geographical variation and rural–urban divide in terms of the nature and intensity of economic risks and vulnerabilities, including an increasing trend of the feminisation of migration, women's higher illiteracy rates, greater time poverty, overrepresentation in the informal sector and limited land rights. Elderly women appear to be especially vulnerable, on account of their lower lifetime earnings, weaker social ties and networks as they age and high burden of care, particularly

in the context of HIV/AIDS. Many of these economic risks and vulnerabilities are reinforced or exacerbated by gendered social institutions and practices. On the one hand, there has been considerable progress in terms of legislation to advance gender equality in recent years in Ghana, including the 2005 Human Trafficking Act and the 2007 Domestic Violence Act. On the other hand, a range of discriminatory gendered practices persist that undermine girls' and women's human capital development. Intra-household gender power relations appear to be highly unequal in many households, including women's limited say over their time use, and in some cases are manifest in gender-based violence. Child labour and trafficking remain significant problems and are highly gendered; child and early marriage, although decreasing, is still practised in some areas, with negative implications not only for girls' education but also for future intra-household power relations; and polygamy, a social institution widely practised in parts of Ghana, remains outside many aspects of family law, disadvantaging many women.

Social protection responses to gender vulnerabilities: Over time, the Ghanaian government's commitment to social protection has reflected growing attention to gender issues. Building on the recognition in the first poverty reduction strategy paper (GPRSI) of gender discrimination as part of a multidimensional understanding of poverty, GPRSI II seeks to mainstream gender, including the development of gender-specific targets and gender-disaggregated data collection and use. More recently, the NSPS includes an explicit 'gender-sensitive approach', highlighting that women suffer disproportionately from extreme poverty in their role as caregivers, and this in turn is reflected in the LEAP programme design. Not only are caregivers of OVC (predominantly women) a key target group, but also transfers are allocated to 'a reasonable balance of men and women aged 65 years and above' and people living with disabilities. There is also specific attention paid to girls' vulnerability to child labour, especially exploitative forms of domestic work.

There is, however, still considerable scope for strengthening programme design features so as to enhance gender equality. Improvements could include: specifying how complementary services that could enhance women's empowerment (such as microcredit for women, agricultural extension services and skills training) will be linked to LEAP beneficiaries in practice; introducing affirmative action provisions to ensure women are adequately represented in the community and district LEAP implementation committees; and taking advantage of the beneficiary forums held on LEAP paydays to sensitise communities to issues of gender discrimination, such as child marriage, trafficking and gender-based violence prevention.

Effects on individuals, households and communities: The translation of a programme design document into practice is always an imperfect science. In the same vein, this report's findings highlight that the programme is making a positive contribution in the research area but there are some important challenges to be addressed. Survey data, focus group discussions and oral histories all suggested that LEAP is helping households to meet a range of practical gender needs, including covering the costs of essential food items, school supplies and the national health insurance card. The cash transfers are also facilitating households to receive and repay loans from family and friends, to better withstand environmental shocks such as droughts and floods and related price increases and to more easily participate in community social networks.

Importantly, however, the cash transfer does not seem to have notably reshaped household dynamics. This is in part because the transfer amount is low and does not provide women with any significant financial independence or start-up capital for petty income generation projects. It is also perhaps because of a dearth of public awareness and educational efforts linking the transfer to women's care-giving responsibilities (such as those in Latin American cash transfer programmes) and a relatively thin civil society engaged in gender equality issues which could help reinforce messages and initiatives at the community level. Moreover, in the absence of complementary empowerment measures, there has been little change in women's community participation, with attendance at meetings failing to translate into an effective voice.

Drivers of programme impacts: A number of politico-institutional and socio-cultural drivers have contributed to the mixed implementation record of LEAP's gender dimensions. Partisan politics (LEAP's rollout in the north coincided with the run-up to the presidential election), underinvestment in capacity building for programme implementers and weak coordination mechanisms, including a general absence of government officers responsible for gender equality (such as gender desk officers) from LEAP implementation committees, have all emerged as key constraints.

Conclusions and policy implications: Overall, LEAP is making a useful contribution to costs faced by poor households for basic consumption and basic services, many of which are viewed as women's responsibilities. There is, however, considerable scope to improve some key programme design features and implementation practices so as to improve overall programme effectiveness and realise the programme's transformatory potential.

1. Although caregivers are explicitly recognised as LEAP beneficiaries, the definition of caregiver appears to be unevenly applied, and equated with 'breadwinner' in some cases, thereby doing little to recognise the value of care work. Unless there is a clear message that the cash grant is designed to support caregivers (predominantly women) and empower them within the household, the transfer risks being added to the household resource pot without contributing to any positive spill-over effects on intra-household dynamics experienced in other cash transfer programmes.
2. The LEAP design document makes general provision for gender balance among other beneficiaries (people living with disabilities and the aged), as well as in community implementation committees (CLICs), which is welcome. It will be critical, however, to monitor the implementation of men and women's inclusion in order to assess the impact of the programme on intra-household and community gender dynamics.
3. In terms of programme conditionality, the LEAP design document also recognises that its prescription of 'non-involvement of children in trafficking or the worst forms of child labour' is likely to have a more significant impact on girls who are more vulnerable to such forms of exploitation. Here, it will be critical that training for the community LEAP implementation committees is provided in order to sensitise them to this issue, and that mechanisms to monitor compliance with programme conditionalities are strengthened.
4. The beneficiary fora are also a potentially useful mechanism for raising awareness and generating a community dialogue about other gender-specific economic and social vulnerabilities. Capacity building could be provided for social welfare officers (possibly in conjunction with district gender equality officers) so that they could use these spaces for community-local government interaction as an opportunity to raise awareness about the value of, for instance, girls' school retention, the risks associated with early marriage, women's reproductive health rights and how to address family violence, which remains underreported in the country.
5. More frequent and comprehensive training opportunities for implementation staff – Department of Social Welfare officers, CLIC members and government officers involved in providing complementary services (such as health care or agricultural extension) – could be undertaken to help sensitise them to key gender vulnerabilities and ways that LEAP and related social protection mechanisms can help address these.
6. Strengthening inter-sectoral coordination, especially with the Gender Desks at district level, would go a long way in improving capacity building for programme implementers. It would also help to ensure that the promise of linkages to complementary services becomes a reality of the LEAP initiative, without which tackling the multidimensional nature of gendered poverty and vulnerability will not be possible.
7. Finally, opportunities for the synchronisation of data collection, monitoring and evaluation and reporting mechanisms need to be identified and capitalised on, especially given the investment of the Department of Social Welfare in a Single Registry system for all programme beneficiaries. Gender-disaggregated data could be collected on programme beneficiaries (both individuals and by household head), the content of beneficiary fora and participation in complementary services.

1. Introduction

Despite the heightened visibility of social protection in recent years, especially in the wake of the recent food price crisis and global economic crisis, there has been little attention to the role that gender plays in the implementation and effectiveness of social protection programmes. It is often assumed that gender is already being addressed in social protection initiatives because many transfer programmes and public works programmes target women. This focus stems largely from evidence that women are more likely to invest additional income in family well-being as well as from a concern to promote greater representation of women in employment programmes. However, the role that gender relations play in social protection effectiveness is likely to be much more complex, affecting not only the type of risk that is tackled but also the programme impacts, as a result of pre-existing intra-household and community gender dynamics. Moreover, gender norms and roles may shape choice of social protection modality, awareness-raising approaches and public buy-in to social safety net programmes. As Goetz (1995) argues: ‘understanding the gendered features of institutional norms, structures and practices is an important key to ensuring that women and men benefit equally from macro level policy changes’.

In Ghana over the past five years, there has also been growing policy momentum around social protection issues, motivated by a concern to reduce poverty and vulnerability emphasised in the country’s first and second phase poverty reduction strategy papers (PRPSs) (GPRSI and GPRSII). In 2007, the draft National Social Protection Strategy (NSPS) was completed, and policy dialogue and programmatic action have intensified in the wake of the fallout of the global food price, fuel and financial crises of 2008-2009.² Key social protection programmes in place now include:

- *Social assistance* programmes, notably the School Feeding Programme, the Education Capitation Grant and the Livelihood Empowerment Against Poverty (LEAP) cash transfer programme, launched in March 2008;
- *Social insurance* schemes, in particular the National Health Insurance Scheme (NHIS), involving payment exemptions for vulnerable groups;
- *Social welfare services*, including programmes to prevent and respond to gender-based violence and child protection deprivations; and
- *Social equity measures*, including a series of new laws to tackle issues of discrimination and violence (relating to disability, human trafficking, domestic violence, etc).

The focus of this report is on the government’s new flagship cash transfer programme, LEAP, a pioneering initiative for the West African region, which by May 2009 had reached approximately 131,000 beneficiaries in 26,200 extremely poor households across 74 (out of 178) districts. Targeting caregivers of orphans and vulnerable children (OVC), people living with disabilities (PWD) and the elderly, LEAP programme design has a strong focus on addressing the care burden of women and also highlights the particular vulnerabilities faced by elderly women. However, as recent government surveys and donor reports have highlighted, much still needs to be done to tackle pervasive gender inequality in the country (CEDAW, 2005; Dudome, 2009). Moreover, as a growing body of international evidence suggests, tackling the gendered manifestations of risk and vulnerability has positive spill-over effects on general programme effectiveness. A recent review of 271 World Bank projects by the International Food Policy

² Economic growth rose to a two-decade high of 7.3% in 2008. This resulted largely from expansionary fiscal policies combined with an increase in private sector activity based on strong credit expansion, buoyant remittances and strong agricultural yields. However, as a result of the global recession and policy tightening in the country, growth slowed down to a projected 4.5% in 2009, although it is expected to pick up slightly in 2010, to 5%. Inflation has risen on account of external shocks and strong domestic demand. With easing demand pressures, inflation is projected to decline to 14.5% by end-2009. Ghana appears likely to have fared better than many countries during the 2009 global recession, reflecting improved terms of trade and limited banking, manufacturing and other exposure. Nevertheless, despite a tighter fiscal stance, inflation expectations continue to be high, reinforced by continuing currency depreciation (IMF, 2009).

Research Institute (IFPRI), for instance, found that, when projects address the needs of both men and women, the sustainability of outcomes increases by 16% (Quisumbing and Pandolfelli, 2009). The purpose of this report is therefore to analyse the extent to which gender-specific economic and social risks inform LEAP programme design and implementation, with the aim of informing ongoing initiatives to strengthen the programme’s effectiveness.

1.1 Methodology

The research methodology involved a mixed methods approach of qualitative and quantitative work. It is structured around the following four areas (see Table 1):

1. Understanding the diversity of gendered economic and social risks;
2. Gender analysis of social protection policy and design;
3. Effects of the social protection programme on gender equality, food security and poverty/vulnerability reduction at community, household and intra-household levels;
4. Implications for future policy and programme design to improve social protection effectiveness.

Research was conducted in six sites in two districts in Ghana’s Northern Region, one of the poorest areas in the country. Sites were selected drawing on a purposive matched sampling technique, which involved selecting two districts with a similar poverty ranking, of neither transient nor extreme poverty (approximately ‘middling poor’), using the Ghana Statistical Service (GSS) 2000/01 district poverty map.

Table 1: Overview of research methodology

	Details
Desk review	Secondary data and programme document analysis
Key informant interviews	National (policymakers, donors, international agencies, civil society, researchers) and sub-national (government and non-government implementers)
Household questionnaire	Total of 100 households
Focus group discussions	8 FGDs, 4 with beneficiaries (2 male and 2 female groups), 4 with non-beneficiaries (2 male and 2 female groups)
Life histories	16 life histories (8 men and 8 women) at different life/social stages: adolescence; married; single household heads (divorced, abandoned or widowed); elderly

The main objectives of the desk review were to map key gender-specific vulnerabilities in the country; to identify how gender is (or is not) already discussed and integrated within the context of social protection policies and programmes at a country level; to carry out a gender audit/mapping of the main social protection programmes and the extent to which they integrate gender considerations; and to contextualise LEAP within the country’s broader national social protection framework and related policy debates.

Using semi-structured questionnaires, key informant interviews were carried out in October 2009 to provide a broader understanding of social protection design decision-making processes and to explore the political economy dimensions of the integration of gender into social protection policies and programmes. At the sub-national level, key informant interviews with implementing agencies aimed to provide a better understanding of the key challenges of implementing social protection at the local level and the implications/impacts of implementation challenges on households and individuals.

The household survey asked LEAP programme beneficiaries to identify two main quantifiable trends: i) the dominant vulnerabilities and risks among households below the poverty line and the extent to which these risks are gendered and generational; and ii) to provide an understanding of both household and individual coping strategies in the face of the above risks, including both

informal and formal social protection mechanisms. FGDs were then used to tease out the details of the social protection impacts, both direct and indirect, at individual, household and community levels.

Finally, the use of life histories (with beneficiaries representing different life/social stages from adolescence to old age) allowed for a more in-depth exploration of individuals' gendered experiences of risk and vulnerability, and the individual-, household-, community- and policy-level factors that shape available coping/resilience strategies. They also provide insights into the relative importance of LEAP in diverse individuals' lives.

1.2 Report overview

The report is structured as follows. Section 2 discusses the conceptual framework that underpins the analysis, highlighting the importance of understanding gendered economic and social risks at individual, household and community levels, and reviews the extent to which gender considerations have been integrated into cash transfer programmes in developing country contexts. Section 3 maps out the patterning of gender-specific risks and vulnerabilities in the Ghanaian context, while Section 4 discusses the extent to which these are reflected in social protection policy and programming. Section 5 then turns to an analysis of our fieldwork findings on the effects of LEAP on gender dynamics at individual, household and community levels. Section 6 explores political economy opportunities and constraints for strengthening attention to gender-sensitive programme implementation. Section 7 concludes and highlights key policy implications of our findings.

2. Conceptual framework: Gendered economic and social risks and social protection responses³

Social protection, commonly defined as encompassing a subset of interventions for the poor – carried out formally by the state (often with donor or international non-governmental organisation (INGO) financing and support) or the private sector, or informally through community or inter- and intra- household support networks – is an increasingly important approach to reduce vulnerability and chronic poverty, especially in contexts of crisis (see Box 1). To date, however, there has been a greater focus on economic risks and vulnerability – such as income and consumption shocks and stresses – and only limited attention to social risks. Social risks – such as gender inequality, social discrimination, unequal distributions of resources and power at the intra-household level and limited citizenship – are often just as important, if not more important, in pushing and keeping households in poverty. Indeed, of the five poverty traps identified by the 2008-9 Chronic Poverty Report, four were non-income measures: insecurity (ranging from insecure environments to conflict and violence), limited citizenship (lack of a meaningful political voice), spatial disadvantage (exclusion from politics, markets, resources, etc, as a consequence of geographical remoteness) and social discrimination (which traps people in exploitative relationships of power and patronage) (CPRC, 2008).

Box 1: Conceptualising social protection

Drawing on Devereux and Sabates-Wheeler's (2004) framework of social protection, the objectives of the full range of social protection interventions are fourfold:

- *Protective*: Providing relief from deprivation (e.g. disability benefits or non-contributory pensions);
- *Preventive*: Averting deprivation (e.g. through savings clubs, insurance or risk diversification);
- *Promotive*: Enhancing real incomes and capabilities (e.g. through inputs transfers); and
- *Transformative*: Addressing concerns of social equity and exclusion by expanding social protection to arenas such as equity, empowerment and economic, social and cultural rights, rather than confining the scope of social protection to respond to economic risks alone through targeted income and consumption transfers.

Social protection refers to a set of instruments (formal and informal) that provide:

- Social assistance (e.g. regular and predictable cash or in-kind transfers, including fee waivers, public works schemes, food aid);
- Social services targeted to marginalised groups (e.g. family counselling, juvenile justice services, family violence prevention and protection);
- Social insurance to protect people against risks of shocks (typically health, employment and environmental);
- Social equity measures (e.g. rights awareness campaigns, skills training) to protect against social risks such as discrimination and abuse.

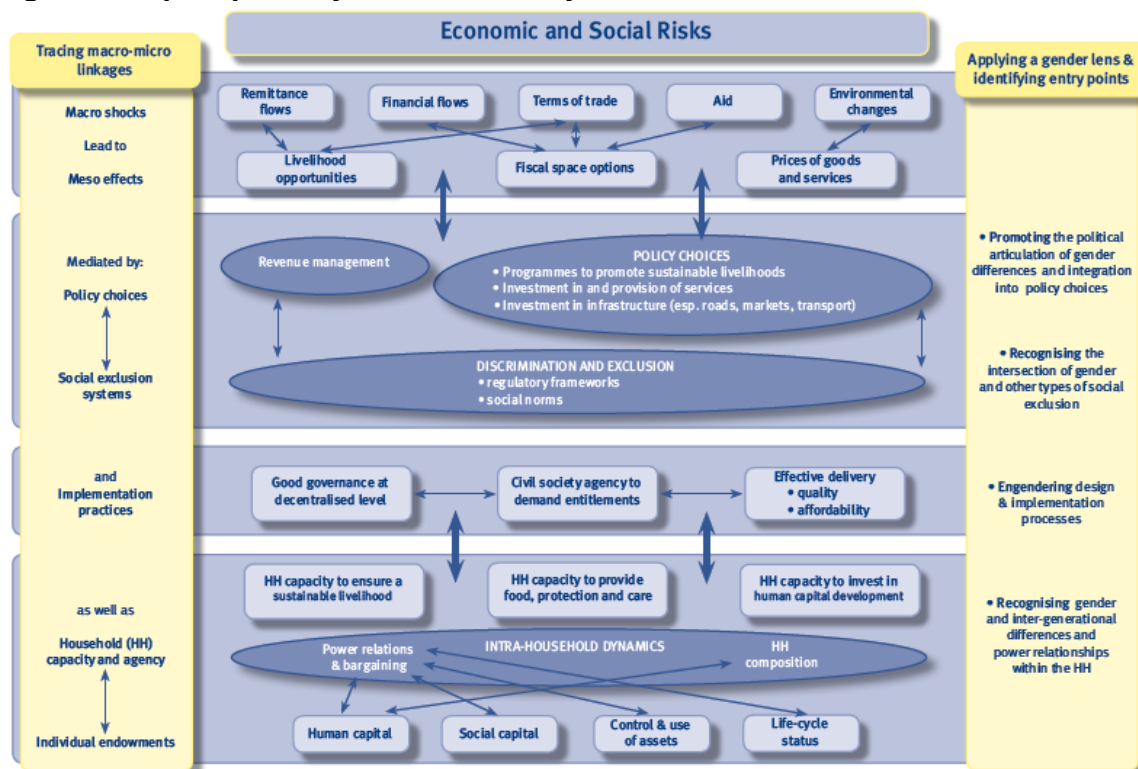
2.1 The gender dimensions of economic and social risks

Poor households typically face a range of risks, ranging from the economic to the social. Vulnerability to risk, and its opposite, resilience, are both strongly linked to the capacity of individuals or households to prevent, mitigate or cope with such risks. Both economic risks (including the economic impact of environmental and natural risks) and social risks are influenced by gender dynamics and may have important differential impacts on men and women. Because they are socially constructed, gender roles and responsibilities are highly varied, and infused with power relations (WHO, 2007). Figure 1 below maps the ways in which economic and social risks

³ This section is based on Holmes and Jones (2009a).

can be reinforced or mediated from the macro to the micro level through, for example, policy interventions, discriminatory practices embedded in institutions (e.g. social exclusion and discrimination in the labour market) and community, household and individual capacities and agency. Opportunities to enhance the integration of gender at each of these levels are highly context specific and depend on the balance between formal and informal social protection mechanisms within a country as well as the profile of the government agencies responsible for the design and implementation of formal mechanisms.

Figure 1: Impact pathways of vulnerability to economic and social risks



Source: Holmes and Jones (2009a).

2.1.1 Gendered economic risks

Economic risks can include declines in national financial resources and/or aid flows, terms of trade shocks or environmental disasters. Stresses might include long-term national budget deficits and debt, lack of a regulatory framework and/or enforcement of health and safety standards at work and lack of an economically enabling environment. Given men's and women's differential engagement in the economy, such as the labour market, the impacts of macroeconomic shocks are highly gendered. For example, in times of economic crisis, women are often the first to lose jobs in the formal sector, such as in Korea during the financial crisis of 1997/98 (World Bank, 2009). In other parts of East Asia, including Indonesia and the Philippines, however, women gained in overall employment as a result of their lower wages and lower levels of union organisation (ibid). Cuts in public expenditure are also likely to affect women more in many contexts because they typically have greater responsibility for household health and education access (Quisumbing et al., 2008). The effects on men and male identities of economic malaise are also increasingly recognised. Silberschmidt (2001), for instance, highlights the way in which rising unemployment and low incomes are undermining male breadwinner roles and resulting in negative coping strategies, such as sexually aggressive behaviour and gender-based violence, in a bid to reassert traditional masculine identities.

At the meso or community level, the impacts of economic shocks are mediated by, for example, gender-segmented labour markets and institutional rules and norms (e.g. absence of affirmative

action to address historical discrimination of women and marginalised social groups), which lead to poor access and utilisation of productive services by women. Women in general have less access to credit, inputs (such as fertiliser), extension services and, therefore, improved technologies (World Bank, 2009), which undermines their resilience to cope with stress and shocks.

How poor households are able to cope with and mitigate the impacts of shocks and ongoing stresses also depends on a number of factors at the micro or intra-household level. Household members' vulnerability is shaped by household composition (e.g. dependency ratios, sex of the household head, number of boys and girls in the household), individual and household ownership and control of assets (land, labour, financial capital, livestock, time and so on), access to labour markets, social networks and social capital and levels of education. Women typically have lower levels of education, less access, ownership and control of productive assets and different social networks to men, leading to lower economic productivity and income generation and weaker bargaining positions in the household. In times of crisis, moreover, underlying gender biases may mean that women's or female-headed households' assets are more vulnerable to stripping than those of men, the impact of which may be lengthy if what has been sold cannot be replaced. Women's bargaining position and entitlements may also be reduced more rapidly than those of male members of households (Byrne and Baden, 1995).

2.1.2 Gendered social risks

Social sources of vulnerability are often as or more important barriers to sustainable livelihoods and general well-being than economic shocks and stresses (CPRC, 2008). At a macro level, social exclusion and discrimination often inform and/or are perpetuated by formal policies, legislation and institutions (e.g. low representation of women or minority groups in senior positions). In many countries, however, efforts to ensure that national laws and policies are consistent in terms of providing equal treatment and/or opportunities to citizens irrespective of gender, caste, race, ethnicity, religion, class, sexuality and disability are often weak or uneven, and hampered by a lack of resources to enforce such legislation, especially at the sub-national level.

At the meso or community level, absence of voice in community dialogues is a key source of vulnerability. For instance, women are often excluded from decision-making roles in community-level committees, and this gender-based exclusion may be further exacerbated by caste, class or religion. Some excluded groups are reluctant to access programmes or claim rights and entitlements, fearing violence or abuse from dominant community members. Another critical and related variable is social capital. Poverty may be compounded by a lack of access to social networks that provide access to employment opportunities but also support in times of crisis. It can also reinforce marginalisation from policy decision-making processes.

At the micro or intra-household level, social risk is related to limited intra-household decision-making and bargaining power based on age and/or gender, and time poverty as a result of unpaid productive work responsibilities and/or familial care work. All of these can reduce time and resources available for wider livelihood or coping strategies, and may contribute to women tolerating discriminatory and insecure employment conditions and/or abusive domestic relationships. Life-course status may also exacerbate intra-household social vulnerabilities. Girls are often relatively voiceless within the family, and a source of unpaid domestic/care-work labour. The elderly (especially widows) also tend to face particular marginalisation as they come to be seen as non-productive and in some contexts even a threat to scarce resources.

2.2 Applying a gender lens to cash transfer programmes

Cash transfers – a subset of social protection programmes involving cash payments to beneficiaries that may or may not be conditional upon compliance with a set of activities aimed at promoting human capital development – have a number of benefits, both technical and political.

Key advantages include their pro-poor orientation, their focus on preventing the intergenerational transmission of poverty by incentivising households to invest in the health and education of their children and flexibility to households as to how they use the cash assistance (rather than providing food or asset transfers, which are more directional) (Kakwani et al., 2005). On the political front, conditional cash transfers have proved politically palatable in contexts where there is limited support for social welfare provisions. Making the assistance dependent on compliance with the utilisation of basic services for children (education, health, nutrition) and in some cases attendance at parenting education classes has helped ensure that the beneficiaries are not seen as 'getting something for nothing' (Behrman, 2007). In other contexts (especially among INGOs and some donors), unconditional transfers have been more readily accepted as access to a minimum standard of living for all irrespective of wealth is seen as a basic entitlement (Save the Children et al., 2005).

From a gender perspective, cash transfers have also been heralded as gender friendly by many (e.g. Gitter and Barham, 2008). The key reason cited is that, in many cases, especially in Latin America, the transfers have been targeted at female caregivers, on the strength of evidence that they are more likely to invest increased household resources in their offspring's well-being. In theory at least, this in turn provides women with greater financial independence within the household and potentially greater decision-making authority. Some also argue that providing poor caregivers with financial assistance for their children ensures some social recognition of the key role women play in social reproduction (Adato et al., 2000). Other, less widespread, cash transfer initiatives aimed at addressing gender inequalities include: higher cash payments to encourage girls' secondary education (as in the case of Mexico's *Progres/Oportunidades* programme);⁴ supplementary women's empowerment programmes, including addressing gender-based violence within the family (as in the case of Peru's *Juntos* programme); including anti-trafficking (which typically affects girls most) as a programme condition (as in the case of Ghana's LEAP programme) (Jones et al., 2009); generating employment for local women through the creation of female community facilitator positions as part of programme implementation (as in the case of *Progres* and *Juntos*); providing new spaces for women to communicate with other women (Adato et al., 2000); and strengthened citizenship rights as a result of acquiring official papers, including birth certificates and identity cards, necessary to register for the programme (as in the case of Brazil's *Bolsa Familia*) (Hall, 2008).

These gender-related provisions notwithstanding, some analysts maintain that cash transfers are not promoting gender equality but rather reinforcing women's sole responsibility for care work (Molyneux, 2006) or what Bradshaw and Viquez (2008) term the 'feminisation of obligation'. One of the biggest detracting factors commonly identified is the high time burden of programme participation owing not only to compliance with programme conditions but also to involvement in programme-related meetings and classes, both of which make women's involvement in income-generating activities difficult (Adato et al., 2000). Moreover, typically only mothers rather than both parents are expected to attend parenting classes, thereby reinforcing traditional family values (as in the case of Nicaragua's *Red de Protección Social* and Colombia's *Familias en Acción*) (ibid; Quijano, 2009). As Bradshaw and Viquez (2008) argue:

'Targeting resources at women means that men's behaviour is implicitly recognized as problematic but not addressed, while the personal deprivation suffered by women through their altruism is not problematized but explicitly reinforced as the social norm.'

In addition, in some cases (for instance Peru's *Juntos* programme), women residing in remote rural areas must travel considerable distances in order to collect their monthly payments, which is not only time consuming but also incurs substantial travel costs.

4 Mexico's *Oportunidades* programme has an affirmative action element – it provides 10% higher stipends for girls than for boys at the onset of secondary school, which is when the risk of female dropouts is highest (Molyneux, 2006).

There have also been strong critiques of programme designers' paternalistic attitudes towards women. Bradshaw and Viquez (2008), for instance, argue that Nicaragua's *Red de Protección Social* programme tends to 'praise women if they behave "well" and punish them if they behave "badly"' and Molyneux (2007a) maintains that *Oportunidades* makes transfers conditional on 'good motherhood'. In this case and others (e.g. Peru's *Juntos* programme), community facilitators have imposed their own invented conditions – such as requesting receipts of purchases made with programme transfers or insisting on particular standards of household cleanliness on programme beneficiaries. Other analysts argue that demand-side conditionalities limit women beneficiaries' autonomy, by excluding women for non-compliance with resultant economic and social costs of lost health and education opportunities for their children, but do not adequately factor in women's time poverty stemming from pressures to balance productive and reproductive work roles (ibid).

In the same vein, there has been limited attention to gender-related impacts of cash transfer programmes. Impact evaluations have tended to focus on children's human capital gains (e.g. World Bank, 2009), but have been less attentive to the direct impacts of these programmes on girls' and women's empowerment and gendered intra-household dynamics. Molyneux's analysis of Mexico's *Progresá* programme, for instance, concluded that, while women reported enhanced self-esteem as a result of the transfers and higher status within their neighbourhoods, they did not experience any significant improvements in their position within their families (Molyneux, 2006). Indeed, there appears to be a trade-off in programme design between women's and children's long-term human capital development, with little consideration for the perpetuation of women's economic vulnerability that programme participation – in the absence of meaningful income generation opportunities – entails (Molyneux, 2007a). Evaluations suggest that even measures such as the provision of higher grants for girls' school attendance have not been adequately communicated as a gender equality measure. For instance, women beneficiaries of Mexico's *Oportunidades* programme were reportedly unaware of the reasoning behind the higher transfer amounts for girls, i.e. the importance of investing in girls' education, interpreting it instead as linked to higher expenses involved in sending girls to school (Bradshaw and Viquez, 2008).

In the next section, we draw on this conceptual framework in order to assess the extent to which LEAP, a pioneering initiative in the West and Central African context, is contributing to greater opportunities for women and simultaneously addressing unequal intra-household and community gender dynamics.

3. Gendered risks, poverty and vulnerability in Ghana

We now turn to a brief overview of the key gendered economic and social risks facing men and women in Ghana. We first present an overview at the national level and then highlight the specificities of our research sites.

3.1 Economic risks and vulnerabilities

Relatively speaking, Ghana is hailed as a success story in African development. In recent years, economic growth has hovered around 5-6% and, by most accounts, Ghana is on track to halve income poverty by 2015 in line with the Millennium Development Goals (MDGs) (UNICEF Ghana, 2009), having reduced poverty from 52% in 1991/92 to 28.5% in 2005/06 (GSS, 2008). As a result, many people in the country have seen their living standards improve substantially. Despite these gains at an aggregate level, Ghana has made less progress with certain health indicators (Aryeetey and McKay, 2004), and its Gini coefficient actually worsened over the same period (ISSER, 2007).

The nature and intensity of economic risks and vulnerabilities in Ghana reflect distinct sources and patterns of inequality in the country. Notable among them is the marked geographical variation between north and south, coupled with a growing rural–urban divide. Risks and vulnerabilities resulting from natural disasters or unreliable rainfall vary significantly by geographical region, whereby the north is generally more severely affected (GoG, 1996). Not surprisingly, poverty is heavily (and increasingly, given southerly internal migration flows) concentrated in the north (GSS, 2007; ISSER, 2007).⁵ Indeed, in spite of an overall reduction in national poverty levels from 1991-2006, levels remain stubbornly high and have even increased in the north. These regional patterns are further reflected in levels of food insecurity, whereby peasants in the poorer regions, concentrated in the north, are more food insecure (Hesselberg and Yaro, 2006; FAO, 2009; Future Agricultures, 2009; WFP, 2009). Regional differences in income levels are equally pronounced, where per capita income in the Greater Accra region (in the south) is reportedly four times that of the Upper West and Upper East regions (GH¢544 vs. GH¢130) (GSS, 2008; ISSER, 2007).

This geographical inequality is associated with increasing internal migration, particularly from the poorer rural regions of the north to the relatively more prosperous (and urban) regions in the south. In general, much of this migration can be attributed to push factors like poverty, economic and environmental shocks, structural adjustment,⁶ historical/colonial legacies,⁷ agricultural adversity and cultural sources in rural areas (Amuzu, 2009; Asiedu and Agyei-Mensah, 2008; Awumbila and Ardayfio-Schandorf, 2008). Rural–urban/north–south migration is associated with an increasing number of working and street children in urban centres, including females migrating alone.

Indeed, migration in Ghana reflects a trend throughout Africa of increasing feminisation (Adepoju, 2004). One study of female migrants who work as *kayayei* (porters) in urban centres like Accra finds that migration is a strategy for overcoming poverty but also meets other needs, such as preparation for marriage (Awumbila and Ardayfio-Schandorf, 2008). These girls face extremely poor working conditions, often living on the streets with little access to health care or sanitation facilities, facing harassment from male colleagues and security guards. They are particularly

5 An estimated 80% of the population in the three northern regions are poor and 70% extremely poor (GSS, 2007).

6 Structural adjustment was associated with the removal of fertiliser subsidies and social services, affecting development – agriculture in particular – in the north (Awumbila and Ardayfio-Schandorf, 2008).

7 British colonial policy in Ghana promoted the north as a labour reserve for the south; hence, while substantial investments in infrastructure and services furthered the development of minerals, cash crops and timber industries in the south, the north was all but ignored, leaving a long-standing legacy of north–south migration (Awumbila and Ardayfio-Schandorf, 2008).

vulnerable to health risks like rape and HIV/AIDS, and older porters are often seen carrying children on their backs (Awumbila and Ardayfio-Schandorf, 2008; Kwankye et al., 2007; Quaicoe, 2005).

The experience of economic deprivation in Ghana is not only spatially determined (urban/rural or north/south) but also highly gendered. In other words, poverty in Ghana is also increasingly feminised (CEDAW, 2005). Women in Ghana are generally poorer than their male counterparts (Wrigley-Asante, 2008). In particular, they are less literate, face heavier time burdens and are less likely to utilise productive resources (Brown, 1994; GoG, 2003). According to the GPRSI and II, food crop farmers, of whom 55-60% are women, are the worst affected by poverty (GoG, 2003; 2005). Meanwhile, a majority of female-headed households (61% of urban and 53% of rural) fall into the poorest quintile of the population, and the number of these – also an indication of the feminisation of poverty – is on the rise (CEDAW, 2005), having increased from around 25.7% in 1960 to over 33% in 2003 (Ardayfio-Schandorf, 2006; GSS, 2005a; 2005b). Many of these households are entirely independent of male providers, accounting at least in part for their lower household incomes (Awumbila, 2006).

Because of their lower lifetime earnings and weakened social ties and networks as they age, elderly women are particularly vulnerable to economic risks. Indeed, they are specifically named among Ghana's most vulnerable groups in the NSPS document (GoG, 2007a). Not only do they tend to be disconnected from formal sector social protection systems, but also they (along with young women) are disproportionately affected by the burdens of care giving in the context of HIV/AIDS (UN Ghana, 2009; UNAIDS et al., 2004).

Labour markets tend also to be strongly segmented by gender. Because of their limited economic opportunities, which are driven largely by a gender bias in education, women are heavily involved in the informal sector (Asiedu and Agyei-Mensah, 2008). Estimates of women's involvement in the informal sector vary but are consistently high, and higher than comparable estimates for men. According to Ghana Living Standards Survey (GLSS) 5 data, a greater proportion of women than men are employed in the private informal sector (49.2% compared with 47.3%), and 60.2% of women in rural areas, versus 49.8% of men, were in the private informal sector. However, an analysis of women's participation in Ghana's informal sector, citing GLSS 4 data, puts women's total informal sector participation at 93.8%, compared with just 77.3% (Heinz, 2005). As a result of their high participation in the informal sector, women disproportionately lack the protection and benefits afforded to formal sector workers.⁸ It is well known that level of education is an important driver of differential labour market participation rates. Ackah et al. (2009) find that two-thirds of women who do not work in Ghana lack education, compared with only one-third of women in the labour force. Increasing literacy rates among women have also been linked with significant economic growth potential – a suggested real output growth by up to one-half (e.g. IFC and World Bank, 2007; ISSER, 2007).

Trading represents a significant source of income for many Ghanaian women. In fact, a significantly higher proportion of women (21.6%) than men (8.4%) are engaged in trading. That trading activities are a common source of income, supplemental or otherwise, for many Ghanaian women finds support in numerous studies. For instance, Newman and Canagarajah (2000) found that rural women were more likely than their male counterparts to participate in non-farm activities, notable among them trading, and that engagement in these activities was associated with lower poverty rates. The authors also cite the 'culturally accepted role' of women as market traders in Ghana as a potential explanation for the relatively greater non-farm opportunities for women than in rural Uganda. Likewise, a study of gendered experiences of poverty in Dangme West District of Ghana points to women's multiple occupations, including fish processing or petty trading, as survival strategies among poor women in the area (Wrigley-Asante, 2008). Still, trading brings little

⁸ In urban centres, Accra in particular, women and men alike are increasingly involved in informal economic activities like street vending (Asiedu and Agyei-Mensah, 2008).

economic return. Some scholars have referred to a 'little opportunities circle' – 'little capital outlay, little farmland, little marketable surplus, and little income' – in which women are trapped as a result of low levels of education and their being confined to the informal market (ibid).

Women's access to and control of assets and productive inputs is a major challenge for women in Ghana. Women still play an important role in agriculture but their productivity is constrained by limited access to and ownership of land and credit or inputs (Manuh et al., 1993; ISSER, 2007), and also time constraints from additional household care burdens (Amuzu, 2009; ISSER, 2007). Small-scale farmers, of whom many are women, are disadvantaged in credit markets since acreage is a common basis for collateral in Ghanaian financial institutions (Amuzu, 2009). Ghana's Poverty and Social Inclusion Assessment (PSIA), which informs the NSPS, reaffirms the links between gender and rural poverty, identifying small-scale women farmers as 'among the poorest in society' (cited in GoG, 2007a). Women generally have less access to extension services/officers, which translates into lower incorporation of technological innovations (Awumbila, 2006; ISSER, 2007). Even with access to extension services, women's access to credit for agricultural implements is still limited. An analysis of GLSS data shows that, in 2005/06, fewer women than men (8% versus 20%) accessed agricultural credit (ISSER, 2007), although access is still low among both groups.⁹

Business assets also reflect gendered patterns: whereas women in Ghana are more likely than men to own business assets, the mean value of men's business assets is much higher (Doss, 2006). In other words, women tend to own lower value business assets than men. The same trends hold for financial assets: based on the Living Standards Measurement Survey (LSMS) 1998-1999, more Ghanaian men than women had formal savings accounts (ibid).

Insecurity of land tenure, which is tied directly to women's low access to agricultural credit,¹⁰ is another manifestation of women's particular economic risks and vulnerabilities. In spite of *de jure* protections of women's and men's equal rights to own land and property and against certain forms of discrimination (Doss et al., 2008), Ghana to date effectively lacks significant *de facto* protections of women's rights to land (Rünger, 2006). The Intestate Succession Law of 1985,¹¹ designed to eliminate gender discrimination in inheritance by granting the courts the right –in the absence of a valid will – to distribute property without respect to gender or age, has gone largely unenforced because of severe implementation constraints (e.g. widespread ignorance of its existence; illiteracy among potential beneficiaries and a lack of legal aid; and costliness of enforcement) (ibid). Instead, customary laws and practices continue to dominate. Ghana exhibits both matrilineal and patrilineal systems of land rights but, regardless of the system, women are disadvantaged (ibid). Women enjoy slightly higher levels of land use rights under the matrilineal system, in which they can derive rights via non-marriage, via marriage, upon divorce or upon widowhood. However, women's usufruct rights to their husband's land are forfeited in the event of divorce or death of a husband. Moreover, women's relatively greater access to landholdings in matrilineal systems is declining as a result of increased cultivation of cash crops, which seems to have shifted inheritance and usufruct rights to favour men (Manuh, 1989). Under patrilineal systems, women's rights are entirely

9 The same data show that access to agricultural credit has increased among both groups since 1998/99, up from 4% of women and 16% of men, suggesting an increasing trend toward commercialisation of land rights.

10 Access to agricultural credit is highly dependent on the nature of land ownership. Whether the patterns of land ownership (often used as collateral) in Ghana differ significantly between men and women is still the subject of some debate. A 2001 survey of households in two districts of Ghana (Savelugu and Nanton) found that men individually owned land in 72.3% of farm households, whereas women individually owned land in only 47.7% (in Doss et al., 2008).

However, another study (ISSER, 2007) found that patterns of land ownership do not differ dramatically between women and men, *except* in the proportions who derive ownership based on lineage, where 30% of women compared with 13% of men claimed lineage-based land rights. According to the authors, because of the norms, rules and conditions attached to the use of lineage land, that more women farm on lineage land 'can constrain production and investment decisions and can adversely affect the ability of women to access credit'.

11 According to this law, wives could receive three-sixteenths of family farms, children nine- sixteenths and surviving parents one-eighth, with the remaining eighth divided according to custom. The reigning interpretation has been that all wives share three- sixteenths of the farm (Doss et al., 2008).

derivative and, although they can inherit land from their fathers, female children inherit decidedly less land than male children and are not able to pass these rights to their children (Manuh, 1989; Nukunya, 2003; Wrigley-Asante, 2008). Often, women are merely temporary custodians of their male children's rights and hence lack any sort of permanent land tenure security (Amuzu, 2009).

The current global economic crisis is likely to exacerbate the economic and social risks and vulnerabilities women in Ghana already face. In general, the groups most likely to be affected are smallholder farmers, households dependent on remittances and the urban poor, all of which comprise significant numbers of women. The Food and Agriculture Organisation (FAO, 2009) recently found that, while cocoa producers – predominantly men – have been somewhat cushioned by relatively stable international cocoa prices, shea nut producers – mostly women – appear to be the most affected. Shea nut collection is an important income buffer against food insecurity for women producers, providing about one-third of income in some areas, but shea nut volumes and prices have declined drastically as a result of the crisis (WFP, 2009). High food prices are also plaguing vulnerable families and threatening their food security (ibid), with particularly negative effects on women, who are typically responsible for buying and preparing meals. Likewise, as unskilled labourers, such as those in the timber industry, find fewer and fewer opportunities for work, remittances sent home to their families are declining, which negatively impacts on women dependent on this support (FAO, 2009). Observers are hopeful that Ghana's social protection system will mitigate the effects of the crisis, at least among beneficiary households (ibid).

3.2 Social risks and vulnerabilities

Many of these economic risks and vulnerabilities are reinforced and/or exacerbated by gendered social institutions and cultural practices. Compared with its Human Development Index (HDI) ranking of 152nd out of 182 countries, although still a poor performer Ghana scores relatively higher on the Gender-related Development Index (GDI), ranking 126th out of 182 countries (UNDP, 2009a; 2009b). Indeed, Ghana has been making significant investments in health and education in recent years,¹² and is already seeing human capital gains in these areas. Overall literacy rates are improving (increasing among women from 48.5% in 1997 to 53.4% in 2003, and among youths from 64.1% in 1997 to 68.7% in 2003).¹³ Similarly, improvements in the infant mortality rate (which declined to 50 per 1000 live births in 2004-2008, down from 77 in 1984-1988), and the under-five mortality rate (down to 80 per 1000 live births from 119 in 1989-1993, showing a significant acceleration in the rate of progress in recent years) are signs of progress toward meeting MDG 4 (ODI and UNICEF Ghana, 2009b). These gains contrast somewhat with the relatively modest progress in meeting MDG 5, reducing the maternal mortality rate (MMR). Although consistent historical data are hard to come by, the World Health Organization (WHO) estimates that Ghana managed to reduce the MMR by only one-quarter during the 1990s, behind target for MDG 5 (ibid).

Meanwhile, a number of gender-specific threats to human capital persist. These include child labour and trafficking, which are clearly gendered (de Lange, 2009). The International Programme on the Elimination of Child Labour of the International Labour Organization (ILO-IPEC) defines child labour as 'work that deprives children of their childhood, their potential, and their dignity, and that is harmful to physical and mental development'.¹⁴ Of particular concern are forms of child labour that interfere with children's school enrolment or retention. An analysis of 1997 Core Welfare Indicators Questionnaire (CWIQ) data showed that 13.2% of the children who stopped attending school, and 40.3% of children who never attended school, are economically active (IPEC, 2004). A recent study found that girls as a group are more likely than boys to engage in

12 From 1997-2006, the Government of Ghana (GoG) allocated 7% and 22% of total central expenditure to health and education respectively (compared with just 5% on defence). This compares favourably with other countries in the region.

13 While female literacy has improved more rapidly over the past decade, a gender gap remains among adults and youths. See ODI and UNICEF Ghana (2009b), based on GSS (2005a).

14 <http://www.ilo.org/ipecc/facts/lang--en/index.htm>.

child labour with negative effects on their human capital development (Blunch and Verner, 2000), which the authors argue may reflect cultural norms. The same study found that child labour increases with all children's age, but that this effect is decidedly more pronounced for girl children. Girl children work more, and increasingly so as they age, than boys. This finding is confirmed in de Lange (2009), although data show that, in agriculture a higher percentage of boys work than girls.¹⁵ The type of labour in which children are engaged also varies with gender. Case studies of child labour in four districts, two at the Volta lake and two in coastal areas, showed that, while boys were often engaged in fishing, girls and women were more likely to engage in fish processing and trading, where the type of work ranged from light to the worst forms of labour (Zdunnek et al., 2008). Household chores and trading are also predominantly done by girls (de Lange, 2009), although much of this domestic labour is not captured under the traditional ILO definition of child labour, which does not include household chores (Allais, 2009).¹⁶ Among girls, domestic labour is also prevalent outside the home. An IPEC survey of child domestic workers in Ghana revealed that 81% of them lived with their employers (ILO-IPEC, 2004). Girls as well as boys who work away from home are often contracted under 'deferred payment' conditions, which can mean they are in service sometimes for up to four years (Zdunnek et al., 2008), which for all intents and purposes amounts to indentured slavery.

Child prostitution is also a growing problem in Ghana, although data are difficult to obtain (ILO-IPEC, 2004). Girl migrants to urban centres, like many of the *kayayei* girl porters, are especially at risk of engaging in commercial sex as a means of survival (ibid). One study found that, a large proportion of girls engaged in commercial sex work surveyed were from rural regions, especially in the north, reflecting the stark regional inequalities outlined earlier (ibid). Sex workers, both girls and women, are particularly vulnerable to a number of serious health risks, including rape and other forms of physical assault, as well as sexually transmitted diseases.¹⁷

Ghana is not ranked on the UNDP's Gender Empowerment Measure (GEM), which measures the extent to which women are active in political and economic life, one of the inputs for which is the number of women in government. Women occupy several key positions in top levels of government in Ghana. For example, the current Speaker of the Parliament, the highest leadership position of that body, is a woman, Joyce Bamford-Addo.¹⁸ Likewise, women preside over several top ministries not typically headed by women, including Trade and Industry, Justice and Attorney General, Information and State of the Presidency.¹⁹ However, trends in women's representation in the legislature and at lower levels of government are somewhat less encouraging. In Ghana, the number of women holding seats in Parliament ranged from 19-25 through the 1990s²⁰ although, as of the 2008 elections, only 19 women were elected, down from 25 in the previous election. This figure represents only 8.3% of Members of Parliament (MPs), a low showing when compared with the regional average of 17.6%.²¹ A recent ranking placed Ghana 112th on a scale of 150 countries measuring women's activity in politics (Dudome, 2009). At the district level, district assemblies consist of elected and appointed members. The number of women elected to these increased from 1998-2002 by 73%. For appointed members, a quota system originally set the number of female

15 Data from cocoa farming shows greater boys' participation for most activities; equal gender participation rates were found in sowing, fetching water and gathering/heaping/transporting pods (de Lange 2009). Gender-disaggregated data are not available for food crops where, in light of what we know about women's activities, girls are expected to be more highly involved.

16 A recent IPEC study on gender gaps in child labour found that, when a broader definition of child labour is employed, girls work more than boys, largely because of their domestic duties (Allais, 2009).

17 Of the respondents in the ILO-IPEC study, 74% admitted that they had been forced at one time or another to have sex against their will, and less than 50% of the children engaging in sex used condoms.

18 http://www.parliament.gh/about/leadership/leadership_parliament.html.

19 Even if women occupy key positions, the proportions of women are still quite low. It appears that only six of 22 ministers are women and, of the 24 members of the Council of State – the top level of advisors to the President – only three of the appointed members and none of the elected or *ex officio* members are women. See http://ghana.gov.gh/index.php?option=com_content&view=category&layout=blog&id=81&Itemid=228.

20 <http://www.statsghana.gov.gh/SPHW.html>.

21 See <http://www.ipu.org/english/home.htm>.

representatives at 30%, which was subsequently raised to 50% in 2002. In all, only six districts met the quota, while in 97 out of 110 districts women made up only around 35.5% and only 11 of 110 district chief executives were women (Ofei-Aboagye, 2004). It is safe to say that women are generally underrepresented at all levels of government, from the district to the national level (CEDAW, 2005).

These disparities notwithstanding, over the past decade and a half the Ghanaian government has shown certain legislative and institutional commitments to improving the situation of women and girls, as reflected in its relatively strong ranking on the Organisation for Economic Co-operation and Development (OECD) Social Institutions and Gender Index (SIGI) (54th out of 102 countries). In addition to being a signatory to several international conventions protecting the rights of women and other vulnerable groups,²² Ghana has enacted a series of quite progressive laws protecting women and other vulnerable groups. Tables 2 and 3 outline the progress and constraints surrounding legal protections for women as well as the 'gender machineries' involved in implementing these commitments.

In spite of these legal/institutional protections of women and certain aggregate hints at progress, stubborn disparities in human capital remain – which are largely shaped by cultural norms, socialisation and social institutions. Culturally accepted expectations about women's roles in the household, community and market perpetuate vicious circles of 'little opportunity' in Ghana, as elsewhere in the developing world (CEDAW, 2005).

Time poverty resulting from disproportionate household care responsibilities (e.g. from the additional burdens of food preparation, fetching water, caring for dependents, etc) remains a significant constraint. In the most recent GLSS, women reported spending an average of 6.3 hours per day on household activities, compared with 4.2 hours for men, while the gender gap in household time burdens was even wider for rural areas: 6.6 for women versus 3.9 for men.²³ Recent studies on time use in Ghana confirm that women experience significant time poverty (Coulombe and Wodon, 2008), finding that improving women's access to water and electricity (Costa et al., 2009; IPC, 2009) can increase the amount of time women spend on remunerable activities and reduce their excessive time burden. The consequences of time poverty are manifested too in terms of intensity of deprivation, since shocks affecting dependents in the household also disproportionately affect caregivers, who tend to be women.

Customary laws, such as those surrounding land tenure and inheritance, continue to disadvantage women. In practice, cultural practices often take precedence over legal norms, just as legal institutions can fail to account adequately for traditional systems and social institutions in design and implementation. Here, polygamy, a social institution widely practised in many parts of Ghana, stands out as a clear example of the state 'talking past' the traditional reality. Family laws in Ghana often do not even consider polygamy. For example, the Intestate Succession Law governing inheritance is silent on the issue of multiple wives. Hence, when a husband of multiple wives dies, it is not clear to whom the land or other assets should pass, nor how they ought to be divided. Courts are left to their discretion, and women are severely disadvantaged, often 'rendered impoverished' (CEDAW, 2005).

Finally, social ills like GBV and harmful traditional practices continue to threaten women and girl children in Ghana. Violence against women serves to disempower them, while sexual violence and exploitation expose women and girls to serious reproductive and other health risks. Studies on violence against women in Ghana have shown that women are at greatest risk of experiencing violence between the ages of 10 and 18 (Ardayfio-Schandorf, 2005). In Ghana, violence against

22 These include the Universal Declaration of Human Rights (1948); the UN Convention on the Elimination of All Forms of Discrimination Against Women (1979); the UN Convention on the Rights of the Child (1989); the ILO Convention on the Worst Forms of Child Labour (1999); the ILO Convention on Minimum Age for Employment (1973); and the African Charter on People's and Human Rights.

23 Author's calculations based on GLSS 5 (GSS, 2008).

women can involve anything from wife beating, defilement and rape to forced marriages, female genital mutilation (FGM) and widowhood rights. Several laws exist that aim to reduce or eliminate these practices. In 2007, Ghana's Parliament passed a law outlawing domestic violence,²⁴ largely in recognition of the serious deficiencies in past law, which granted husbands immunity in charges of assault against their wives.²⁵ Article 26(2), an amendment to the 1992 Constitution, the Law Against Female Genital Mutilation and Harmful Traditional Widowhood Practices, prohibits 'all customary practices which dehumanize or cause injuries to the physical and mental wellbeing of a person' (CEDAW, 2005, paraphrasing the Constitution). Indeed, Ghana was the first African country to ban FGM (in 1994).

Not surprisingly, because these beliefs and practices are so entrenched, implementation of these laws has not lived up to expectations. Certain harmful traditional practices, notably FGM and a ritual known as *trokosi* (see below), continue to pose a threat to young girls in particular in Ghana. These practices can provoke serious physical as well as psycho-social damage, which can have lifelong consequences for adolescent girls. Country-wide estimates as to the number of girls undergoing FGM in Ghana vary from as low as 3% to 30%, with marked regional variation.²⁶ Girls from northern regions, where FGM is historically more prevalent (Medical News Today, 2004; Oduro et al., 2006), are at a greater risk. However, recent data (Oduro et al., 2006) show a significant decline in the number of girls exposed to this practice,²⁷ suggesting that efforts since the 1990s to reduce its prevalence have not been futile.

Young girls in some parts of Ghana are also exposed to a harmful traditional ritual known as *trokosi*. Practised among the Southern Ewes,²⁸ *trokosi* is a form of ritual slavery in which girls, sometimes as young as four, are offered to the gods to atone for an (often deceased) relative's 'sins or crimes'. Enslaved to local priests, the girls are confined to the local shrine, required to perform sexual services for the priests as well as heavy labour in the fields. They are denied access to education and health care and 'required to spend the rest of their lives as "wives of the gods" through the gods' medium, the fetish priest' (IPPF, 2006).

Elderly women represent another group that is particularly vulnerable to social risks stemming from certain negative cultural beliefs and practices. Rooted in stereotypical attitudes, accusations of witchcraft are often directed against older women, who are blamed for various misfortunes that befall communities, notably the untimely death of young people (Adinkrah, 2004; Coker-Appiah and Foster, 2002). Accused witches generally lose the livelihood support of their family or social networks and, isolated and excluded, are left extremely vulnerable to economic and health risks (GoG, 2007a). Even worse, they are in danger of becoming victims of physical assault or even murder (Adinkrah, 2004). These 'witchcraft-related femicides' represent an extreme form of gender discrimination that can be linked to the social, economic and political status of women, as well as the values, beliefs and norms that engender the contexts in which these crimes occur (ibid).

The physical and mental health risks associated with FGM and *trokosi* in particular, and violence against women more generally, are widely documented. But the difficulties associated with eliminating these practices are compounded by social attitudes that reinforce them. Many are rooted in deep socio-cultural norms and expectations about women's roles and duties, so much so that women victims themselves often perceive them to be 'normal' (Amoakohene, 2004). Furthermore, women are very often 'perpetrators', as is commonly the case with FGM practitioners. Although both FGM and *trokosi* are forbidden under Ghanaian law, police are often

24 www.mowacghana.net.

25 <http://genderindex.org/country/ghana>.

26 www.gawwwweb.org/index.php. See also Jalulah (2008) and Oduro et al. (2006).

27 The study examined delivery outcomes of a sample of women in the Kassena-Nankana district and found that the prevalence of FGM had declined from 35% in 1996 to about 21% in 2003. According to the Ghanaian Association for Women's Welfare (GAWW), country-wide FGM rates have declined from 12% to 3.8% (www.gawwwweb.org/index.php).

28 *Trokosi* is also practiced in parts of Togo and Benin (IPPF, 2006).

reluctant to intervene in the face of such deep-seated cultural beliefs (ODI and UNICEF Ghana, 2009a).

Table 2: Gender-related legislation and policy provisions in Ghana

Policy or provision	Year	Objectives	Implementation issues
Intestate Succession Law	1985	Outlines uniform distribution procedures governing the distribution of common property in the event of the death of a spouse where no living will exists. Further states that the matrimonial home and related effects shall be distributed in equal shares among the spouse and children.	Does not address distribution of property under polygamy, an omission which disproportionately affects women since decisions are left to a court's discretion.
Constitution	1992	Art. 26(2) bans all 'customary practices which dehumanize or cause injuries to the physical and mental wellbeing of a person', while Charter 6 of the Directive Principles of State Policy prohibits discrimination based on gender (see CEDAW, 2005). The non-discrimination clause empowers Parliament to enact affirmative action laws, which it subsequently did in 1998. The Constitution's labour laws also enshrine the right to three months' paid maternity leave, while also asserting in Art. 27(2) state responsibility to provide child care for working mothers of preschool-aged children.	The rights to maternity leave or child care are limited to those employed in formal employment, effectively excluding large parts of the working women population. The state and employers have been slow to provide child care facilities, most of which are provided in the private sector and many of which close at midday, compromising women's ability to work full-time (CEDAW, 2005). The Early Childhood Care and Development Policy (see below) aims to correct some of these imbalances.
Criminal Code Amendment Acts	1994, other dates	In accordance with Art. 26(2) of the 1992 Constitution, Ghana has passed subsequent laws banning specific customary practices which are harmful to women in particular. In 1994, Ghana became the first African country to ban FGM. It has also banned harmful traditional widowhood practices, as well as the practice of <i>trokosi</i> .	Implementation of laws stemming from Art. 26(2) has been hampered by entrenched attitudes surrounding harmful customary practices among certain segments of society, as well as limited enforcement capacities. The law does not address witchcraft accusations and the serious implications for many, often elderly, women, who can be killed by male relatives, beaten or sexually abused, or left economically destitute as a result.
Affirmative Action Policy	1998	Establishes a 40% quota for women's representation. Covers all government and public boards, commissions, councils, committees and official bodies, the Cabinet and the Council of State. In 2002, the Ministry of Local Government raised the quota for women in district assemblies to 50% (Kakooza & Kawuma Advocates, 2006).	Progress in achieving the affirmative action targets has been very slow owing to low literacy levels and concrete policy measures to address structural inequalities. Over 10 years after the policy was established, women account for only 8% of Parliament; of 143 appointees to district assemblies, only nine were women (GNU, 2009; Selby, 2009).

Policy or provision	Year	Objectives	Implementation issues
The Children's Act	1998	Restricts early marriage by setting a minimum age of 18. Also grants parental authority to both parents, challenging patrilineal systems in which children belong to the paternal extended family. Also includes a non-discrimination clause that prohibits discrimination based on a number of grounds, including gender.	Early marriage among girls is still quite common, with rates varying significantly by region (e.g. from 10% in Greater Accra to 31% in Upper Western (UNICEF Ghana, 2009). The father still has superseding rights to children in the event of the dissolution of marriage.
Marriage Ordinance		Outlaws polygamous marriage and prohibits men from marrying again except where there has been a legal divorce.	Polygamy is still common among some communities. Enforcement of the Ordinance is constrained by entrenched cultural beliefs, as well as a lack of awareness of the law among women.
National Gender and Children's Policy	2003	Sets out to mainstream gender and children's issues into Ghana's national development process by: redressing imbalances owing to gender inequalities through policy review, legal reform and enforcement of legislation; providing a national framework for policies; strengthening women's role in economic development; promoting children's development and protection; promoting women's equal access to economic resources and benefits; and enhancing children's survival and development. Sensitisation and training of planners in gender and child analysis are central elements.	
Early Childhood Care and Development Policy	2004	The goal is to promote the survival, growth and development of children aged 0-8 through comprehensive strategies aimed at children, their parents and caregivers. It also has a poverty reduction dimension. Its objectives include promoting observance of legislative and institutional protections of children's rights; mainstreaming children's concerns at all levels of government planning; providing fee-free tuition and preschool education in collaboration with other actors; promoting nutrition and food security; reducing infant and child mortality rates; supporting both caregivers and parents through training as well as improving their income-earning capacity; and improving institutional capacity and enforcement capacities of existing laws related to children's rights.	Included among the many policy targets are the elimination of gender disparities in primary school enrolment; reduction of maternal mortality rate; and provision of antenatal care to all pregnant women. Although it contains many positive elements, the policy has been criticised for appearing to reinforce perceptions that women are solely responsible for the care of children. Also, child care facilities are overwhelmingly located in urban areas (CEDAW, 2005).

Policy or provision	Year	Objectives	Implementation issues
Human Trafficking Act	2005	Criminalises any form of human trafficking, including of children, imposing a minimum five-year prison sentence for traffickers as well as requiring that they pay compensation to victims. Also authorises specific services for trafficked persons, including temporary care, tracing of family, counselling and rehabilitation, which are provided by the Ministry of Women and Children's Affairs (MOWAC) through the Human Trafficking Fund.	
Domestic Violence Act	2007	Outlaws harmful acts, threats or acts likely to result in physical, sexual, economic or emotional abuse, within the context of a domestic relationship. Acts of domestic violence are punishable with a fine, a maximum prison term of two years, or both.	Prior laws did not prohibit domestic violence and even granted husbands immunity in charges of assault.
GPRSI	2003	Recognises gender as both a cause and a dimension of poverty and women as specifically disadvantaged as food crop farmers, in education enrolment and retention and in the informal economy. Resulted in the establishment of the Women's Development Fund and microcredit scheme within MOWAC.	Lacked specific targets for assessing vulnerabilities and targets of women. The monitoring and evaluation framework was particularly lacking in this regard.
GPRSII	2005	More effectively mainstreamed gender into each of the thematic areas covered by the document, setting gender-specific targets for monitoring and evaluation. Called for improved collection and analysis of gender-disaggregated data and recognised the importance of women's empowerment as a 'prerequisite for good governance'. Also outlined the framework for the subsequent national social protection framework.	
NSPS	2007	Adopts a gender-sensitive approach and mainstreams gender as one of six pillars. Anticipates the establishment of the LEAP cash transfer programme, articulating the justification for social protection programmes targeting the vulnerable and excluded, notable among whom are women.	Lacks a thorough discussion of gender-specific vulnerabilities in its poverty analysis as well as in its presentation of the potential benefits of the LEAP.

Sources: www.mowacghana.net; <http://genderindex.org/country/ghana>; CEDAW (2005); GoG (2003; 2005; 2007).

Table 3: Gender-related agencies in Ghana

Agency or provision	Years	Objectives	Implementation issues
MOWAC formerly National Council on Women in Development (NCWD)	NCWD set up in 1975 and became MOWAC in 2001	Following the first UN Conference on women, Ghana set up the NCWD to work in collaboration with NGOs, civil society organisations (CSOs) and other professional bodies to promote women's issues and interests. In 2001, it was elevated to Cabinet status as MOWAC, which comprises two departments, Department of Women (DoW) and the Department of Children (DoC). MOWAC engages in policymaking, planning and coordination of DoW/DoC activities in support of women and children, with DoW/DoC responsible for implementation.	MOWAC's effectiveness has been constrained by insufficient funding; inadequate human resources; and lack of availability of gender-disaggregated data. Lack of effectiveness may be a result of the dual roles of coordination and implementation, which can undermine each other.
Women's desks and gender desk officers	1995	Following the Beijing Conference, women's desks and gender desk officers were established in each of the national ministries, departments and agencies to ensure the incorporation of gender in sectoral policies and programmes. More recently, gender desk officers have also been established at the district level.	Gender desk officers have been relatively ineffective in influencing sectoral policies, although the National Gender and Children's Policy has created a more conducive enabling environment and MOWAC, hoping to improve capacity, has conducted training of gender desk officers.
Women's Development Fund	2002- 2003	Financed from a share of Ghana's Heavily Indebted Poor Country (HIPC) funds and a Japanese grant, the fund benefits women traders, farmers, food processors and others. It includes a microcredit scheme, as well as training and skills development, to promote women's entrepreneurship.	Although women must have an account with the fund, no collateral is required. The fund has been quite successful, benefiting some 200,000 women by 2005, totalling over \$20 million, with an estimated recovery rate of 98%.
Ministry of Agriculture, Women in Agricultural Development Division		The unit has developed a gender policy and strategies for improving women's productivity in agriculture, including the sensitisation of extension officers to work with women and generate gender-disaggregated data.	
Women's Caucus	1993	The Women's Caucus, an association of female MPs, was established at the inception of the Parliament.	Dissolved in the third and fourth republics (2001-2005) owing to partisan divisions, but was reinstated in 2005. ²⁹
Ghana Police Force, Domestic Violence and Victims Support Unit (DOVVSU) formerly Women and Juveniles Unit	1998	Set up to protect victims of domestic violence and forms of sexual abuse that tend to affect women and children the most (UNICEF Ghana, 2009). When the Domestic Violence Law was passed, the unit was reorganised into DOVVSU in order to emphasise the domestic violence component, while the name was changed to sound more gender-neutral.	

Sources: CEDAW (2005); Coker-Appiah and Foster (2002); Kakooza & Kawuma Advocates (2006).

²⁹ http://ghana.fes-international.de/pages/01_program/01_key_institutions.htm.

3.3 Overview of vulnerabilities in our sites

The above discussion mapped out aggregate gender differences at the national level. However, given the cultural, ethnic, agro-ecological and religious diversity that characterises Ghana, not surprisingly there is also significant variability across regions. In this section, therefore, we spotlight the context-specific economic and social vulnerabilities experienced by men and women in the Northern Region (see Box 2 for a general overview), focusing particularly on our two districts, Chereponi and Gushiegu (see Table 4), and the coping strategies at their disposal. Drawing on the survey data as well as the life history interviews, this provides the context for our analysis on the gendered impacts of LEAP in the sections that follow.

Box 2: Economic and social vulnerabilities in Ghana's Northern Region

The Northern Region has been particularly susceptible to vulnerability, through fluctuating commodity prices, natural disasters (as highlighted by major floods and drought in 2007) and its still high reliance on subsistence agriculture. Poverty levels are significantly higher than in the rest of the country as a result of food insecurity. A study for the Chronic Poverty Research Centre (CPRC) (Oduro and Aryee, 2003) noted that:

'Vulnerability to poverty in the northern communities is predicated upon food security. This part of the country tends to have a single rainy season. The dual rainy season in the south of the country reduces somewhat the food security constraint. An obvious risk associated with agriculture is variable rainfall, (compounded by the lack of irrigation and rainwater storage systems), as was highlighted by the 2007 floods in the northern region of Ghana.'

Human capital indicators are also very poor. While nearly 70% of all school-age children nationally are enrolled in primary schools, in the Northern Region the rate is just 50% (Harsh, 2008). Overall, health care remains poor. The three northern regions together have less than 9% of Ghana's hospitals, although they account for more than 17% of the total population. The ratio of health clinics to population is only slightly below the national average but, since the north is vast, most people must travel much longer distances and the extra costs can be prohibitive for the poor (ibid). This is reflected, for instance, in poor child mortality rates. The 2003 DHS survey shows that the under-five mortality rate was significantly higher in the three northern regions, with a rate in Northern Region (154 per 1000 live births) that was about two times higher than that in Greater Accra (75 per 1000 live births) (GSS et al., 2004).³⁰ And as the 2007 Ghana Human Development Report (UNDP Ghana, 2008) notes:

'Bringing the northern regions to par with the South requires intensive social and financial investment beyond the current levels. Strong political and socio-cultural will as well as sheltered funding arrangements are required ... [in order to] enhance capabilities in human development and restore the dignity and progress of the excluded in these areas.'

Disparities between the Northern Region and rest of the country are also reflected in gender-related well-being indicators. According to 2008 DHS data (GSS et al., 2009), the level of educational attainment for women in the Northern Region was the lowest, with 65.7% of women without education compared with a national average of 21.2%. Similarly, the Northern Region has the lowest level of literacy: only 25.7% of women were literate, versus a 62.9% average for the country (44.3% for men compared with a 76.8% national average). A similar pattern applies for reproductive health: fertility rates are very high, with an average of 7.4 members per household, yet only 26.3% of women had an institutional birth, against the national average of 57.131%. There is also a higher proportion of households headed by females (14.1%) compared with the national average (11.0%).

Interestingly, however, the 2008 DHS measures for women's empowerment show a more mixed picture. For example, 72.6% of women in the Northern Region replied that they control their own cash earnings, one of the highest proportions of all regions, including 60.9% for Greater Accra (57.9% national average). Additionally, the share of women whose cash earnings are greater than those of their husband in the

30 Data on child mortality by regions are unavailable in the 2008 DHS survey.

31 The 2008 DHS does not have figures for maternal mortality.

Northern Region is 10.3%, slightly higher than the 9.9% national average. In the analysis of women's participation in household decision making, women in the Northern Region are close to the national average rather than at the bottom. On the other hand, attitudes towards domestic violence are among the worst, with 65.4% of men justifying beating their wives for some reason, against a national average of 36.6%.

Table 4: Overview of research site characteristics

	Chereponi			Gushiegu		
District population	51,954			104,643		
Main livelihood sources	Subsistence farming			Subsistence farming		
Poverty ranking	Second highest in region ³²			Fourth highest in the region		
Main language	Anufu, Likpakpa, Twi			Dagbani, Pukpali		
Main religion(s)	Islam (dominant), Christianity			Islam (dominant), Christianity		
Presence of NGOs	Campaign for Female Education (Camfed), Northern Eastern Corridor Integrated Development Programme (NECIDA), ActionAid Ghana, Integrated Development Centre, Rural Integrated Literacy Development Programme, Savannah Farmers Association			MALITTI Development Organisation, Action on Disability and Development, Catholic Relief Services (CRS), New Energy, Community Life Improvement Programme, Rural Life Improvement Programme, Tisongtaba Development Foundation, World Vision		
Number of LEAP beneficiary households	101			154		
Male vs. female LEAP beneficiaries	51 males 50 females			39 males 115 females		
Type of beneficiary (e.g. OVC, elderly, disabled)	Mainly elderly and some disabled			Elderly and disabled		
Place of payment	School park, community centre (distance of 2km)			School compound, community centre (distance of 1km)		
Community	Wonjuga , about 6.5km miles from Chereponi	Jakpa , about 6.5km from Chereponi	Tanbo , about 14.5km from Chereponi	Nachem , about 1.5 hours from Gushiegu ³³	Sala , about 15 minutes from Gushiegu	Kpatinga , about 30-35 minutes from Gushiegu
Community population ³⁴	N/A	N/A	N/A	N/A	N/A	1982
Main livelihood sources	Farming, mainly corn, vegetables, yam, folium, millet, guinea-corn; petty trading	Farming, mainly corn, vegetables, millet, guinea-corn, yam; petty trading	Farming, mainly corn, vegetables, millet, guinea-corn, yam; petty trading	Farming, mainly corn, vegetables, millet, guinea-corn, yam; petty trading	Farming, mainly corn, guinea-corn, millet, yam, vegetables; petty trading	Farming, mainly yam, corn, vegetables(yam on a large scale); petty trading
Main language	Anufo	Anufo	Likpakpa	Pukpali	Dagbani	Dagbani
Main religion(s)	Islam (dominant), Christianity	Islam (dominant), Christianity	Christianity	Christianity (dominant), Islam	Islam (dominant), Christianity	Islam (dominant), Christianity

32 Because Chereponi is a newly created district – it used to be part of Saboba until 2008 – local government structures are not yet fully functional and the change has created a vacuum in authority. For instance, the lack of an NHIS office has meant that many people who paid for their contribution have reportedly been unable to claim their benefits.

33 Community-level population statistics are available for Gushiegu but neither Sala nor Nachem appear, possibly because they were too small. See http://www.ghanadistricts.com/pdfs/Gushiegu_Demographic_Chara.pdf.

34 As Chereponi is a new district, there are no demographic data available for communities www.ghanadistricts.com/districts/?news&r=6&_id=172.

Presence of NGOs	Camfed	E. P. AGRIC	None		Community-driven Initiative for Food Security (CIFS)	Shea butter processing factory (NGO owned), World Vision
Number of families receiving LEAP	22	16	17	39	42	34
Male vs. female LEAP beneficiaries	16 males 6 females	7 males 9 females	5 males 12 females	10 male and 29 female	16 male and 26 female	6 male and 28 female
Place of payment	Community centre; 2km average walking distance	School compound; 2km average walking distance	Community centre; 2km average walking distance	School compound; 1km average walking distance	Community centre; 1km average walking distance	Community centre; 1km average walking distance

In terms of the specific economic vulnerabilities experienced in our research sites, our findings highlighted the importance of environment-related factors, which negatively affected agricultural activity and food security. Common problems identified included droughts, floods, pollution, deforestation, plant diseases and pests, as well as death of livestock. Indeed, a number of families reported being able to eat only once a day or having to consume leaves during the lean season.³⁵ Unemployment and underemployment were also identified as being of critical importance (28.4% identified it as the most significant intangible risk of the past five years).

Ill-health also emerged as a significant risk, with 18.3% of all respondents claiming sickness or death of a family member as the biggest intangible risk they had faced over the past five years. Health issues also featured consistently in the life history interviews as a key source of economic vulnerability, facing men and women alike. Families reported frequently being compelled to sell household assets (e.g. small livestock such as sheep, goats or guinea fowl) or to take on extra paid work to cover health expenses (both medical fees and related transportation costs, especially to access main hospitals in urban centres for treatment of serious illnesses), because of a lack of health insurance. Some interviewees had initially been enrolled in the NHIS but were unable to afford to renew this once it had expired (Married man, Gushiegu, 2009; Elderly man, Gushiegu, 2009; Widow, Gushiegu, 2009). Others had never been able to pay the registration fee for the NHIS and had been forced to take out loans from family members to cover health costs (Adolescent male, Gushiegu, 2009). Still others had signed up for the NHIS and paid their contributions but never received the card (Widow, Chereponi, 2009).

However, there were also some important differences in vulnerability experiences across districts, especially in terms of the experience of lifecycle stresses, in part because of varying customs between different ethnic groups. While funerals emerged as a major risk among survey respondents in both districts, FGDs identified that Kokomba communities (from Gushiegu) spend relatively more on funerals and expensive gifts on the occasion of daughters' first-born children, whereas Dogombas (from Chereponi) spend more on dowry payments and weddings.

Table 5: Types of shocks and stresses by region

	Percentage of households affected		
	Chereponi	Gushiegu	Total
Environmental shocks	85.5	90	87.85
Economic shocks	38.45	42.95	40.65
Lifecycle shocks	36.34	51.35	43.55

³⁵ These are vegetable leaves which are normally dried and stored for the lean season. Most of them are believed to contain high calories thereby preventing hunger.

Overall, there were also broad similarities between male- and female-headed households, with some notable exceptions. Male-headed households were more likely to identify environmental shocks and the absence of productive resources and capital as significant risks, whereas female-headed households appeared to be more concerned about unemployment or underemployment. The costs of lifecycle ceremonies (such as funerals and weddings) were also seen as more burdensome among female-headed households.

Table 6: Types of shocks and stresses by gender

	Percentage of households affected		
	Male	Female	Total
Environmental shocks	88.1	77.5	87.85
Economic shocks	44.9	33.75	40.65
Lifecycle shocks	41.1	47.9	43.55

Turning to social risks and vulnerabilities, intra-household tensions by gender and generations emerged as an important concern (with over 90% of respondents responding in the affirmative). Key sources of intra-household tensions included disputes over control of resources (42%), land (42%) and food (49%). Decision making (over labour, mobility, participation in social programmes, etc) was identified by 31% of respondents, while care-giving and distribution of domestic responsibilities were mentioned by considerably fewer (9.2% and 10.2%, respectively). District-wise differences were minimal, but were significant depending on the gender of the head of the household – male-headed households reported higher tensions over control of resources and land, whereas in female-headed households food and decision making were much more significant.

There were significant differences too in the level of social capital (measured by group membership in religious organisations, savings/credit groups, youth, women and peasants organisations and labour unions) enjoyed by district and by gender of household head. Overall, there was much greater participation in all but women’s groups in Gushiegu (and a significant degree of multiple group memberships), and in all but peasant associations among male-headed households (59.1% versus just 25% among female-headed households). These group membership disparities also translated into higher capacity to rely on such groups for support in times of crisis at the district level, but the pattern was more mixed among male- and female-headed households. Female-headed households were more likely to rely on self-help groups and religious organisations for support whereas their male-headed counterparts were more likely to rely on savings and credit groups, youth associations and extended family members.

Box 3: Gendered intra-household vulnerabilities

Overall, our qualitative findings suggest a stark gender division of labour in these northern Ghana communities. Typically, men view themselves as the primary workers on their farms, acknowledging only that wives and children might ‘sometimes help’, despite the fact that in reality women have many responsibilities in farming their husband’s land (including planting, weeding and harvesting).

‘Ah do women have any role on the farm? Women can help harvest and sew. That is it. They have their own farms and only help him at harvest time ... Women don’t farm, they depend on men for their sustenance’ (Elderly married man, Gushiegu, 2009).

As a result, men generally decide on the use of household income, although women are able to control the proceeds from the sale of goods (such as shea nuts, ground nuts, soya) from their own plots of land.

Men also appear to have strong control over female family members’ labour and consumption of resources:

‘I may want to do something else later in life, such as learning how to sew and buying a sewing machine, but it will depend on whether my husband allows me to do so’ (Adolescent female, Gushiegu, 2009).

Another adolescent girl lamented that, although she makes some of her own decisions, her life has been driven largely by her father's orders and she is unable to remember anything good happening in her life. She also notes that had she been male she would have had more choices:

'I look forward to the day my brothers get married as their wives will be in charge of domestic work. Men can do a variety of things, including raising yam mounds and migrating for work' (Adolescent female, Chereponi, 2009).

Men seem to concur with this gendered order. One man emphasised that he makes the decisions in the household:

'The food is for me. The woman asks permission if we run out of flour' (Married man, Chereponi, 2009).

Other sources of female vulnerability relate to traditional attitudes with regard to women's reproductive roles. While the overall fertility rate in Ghana is 4.5 children per woman,³⁶ women are subject to very high fertility rates in these northern communities, with families averaging seven children. Women noted that men seek to exercise control over women's fertility:

'Children are a gift from god, but if I had thought about family planning I would have needed to get my husband's agreement to use it' (Married woman, Chereponi, 2009).

In other cases, girls are betrothed to young men not of their choosing, often much older. Such attitudes also mean that girls often face more limited educational opportunities. In the case of scarce household resources – either financial or labour – sons' schooling is likely to be prioritised over that of daughters. For instance, one respondent explained that she was not allowed to go to school as she had to do the housework in her father's home until he remarried (Adolescent girl, Gushiegu, 2009). Girls' human capital development is subject to further limitations in the Gushiegu community on account of a tradition whereby fathers give their girls to their sisters to raise, which in practice usually results in aunts under-investing in girls' education and relying on their nieces for cheap domestic help.³⁷ Even in a case where a brother shared part of his LEAP cash transfer with his sister to support his daughters this did not lead to their enrolment in school (Widower, Gushiegu, 2009).

Interestingly, however, other sources of gendered intra-household tensions, including polygamous relationships, family violence and widowhood, which we had hypothesised may be a source of social vulnerability for women, did not emerge among our respondents as significant issues. In the case of polygamy, which is widespread in the communities under study, respondents did not identify household composition as a major source of vulnerability and instead tended to acknowledge cooperative relations among wives and sharing of the burden of household work. Despite growing awareness about the prevalence of family violence in Ghana, this too did not emerge as a significant concern. Instead, women and men both talked of harmonious household relations. Possible reasons for this provided by key informant social workers in the area include very clear and generally well accepted gender roles, whereby women are expected to follow the authority of male family members – whether fathers, brothers or husbands – or possibly a lack of awareness of such violence as a violation of individual rights and thus underreporting of abuse. Interviews with social workers in the area suggested that the former explanation was more likely.

Finally, although stigmatisation of widows linked to witch accusations is a significant social issue in the Northern Region, we did not find strong evidence of this among our respondents. One elderly woman complained of stigmatisation by her brothers' wives but this appeared to be a result as much of her suffering from leprosy as of her widowhood status (Elderly woman, Gushiegu, 2009). Another mentioned that older men are more respected than their female counterparts but, again, more material manifestations of age and gender-related vulnerabilities were not discussed (Elderly woman, Chereponi, 2009).

In order to cope with the abovementioned intersecting economic and social vulnerabilities, our findings suggest that households rely on a wide range of coping mechanisms, including formal/government social protection mechanisms (such as cash or asset transfers); individual

³⁶ <http://web.unfpa.org/focus/ghana/background.htm>.

³⁷ The assumption is that a sister is considered a man's 'own blood' and she may return to her brother's house. However, if a woman leaves her husband with her children, this results in daughters being raised by someone who is not a blood relative. Aunts therefore typically keep their nieces in their household until they are old enough to get married.

efforts (undertaking additional paid or unpaid work, reducing quality and quantity of food consumption, harvesting crops early); adverse coping strategies (including distress sale of assets, increasing indebtedness, migration, relying more on children’s labour inputs and withdrawing children from school); and social/community-based help (relying on family members, social networks). Faith also emerged as a critical coping mechanism, with many respondents referring to divine intervention as a way to understand their life trajectories. Religious faith helped respondents accept their circumstances better but also appeared to lessen their impetus to seek to change their lot.

District variations were significant, with households in Gushiegu significantly more likely to rely on individual efforts (38% individual efforts including 18.3% adverse coping strategies such as going into debt and distress sale of assets) than households in Chereponi (16.3% and 2%, respectively) as their primary coping mechanism. By contrast, Chereponi respondents were more likely to rely on formal or government coping strategies as a secondary option, whereas those in Gushiegu were more likely to resort to social forms of support.

Coping strategies drawn on by male- and female-headed households were relatively similar, although some gender differences did emerge. The survey findings highlighted that male headed households were more likely to resort to adverse coping approaches, whereas the qualitative findings indicated that women will work on others’ farms or harvest leftovers as an economic coping strategy but that this is never done by men (especially in Gushiegu). There is also less female than male migration, although in Gushiegu there are more cases of women migrating (as *kayaye*).

Table 7: Households dependent on specific coping mechanisms by region (%)

	Chereponi	Gushiegu	Total
Formal/government	18	11	14
Individual efforts	14	23	19
Migration	10	8	9
Adverse coping strategies	13	16	14
Social (informal) help	17	20	18

Table 8: Households dependent on specific coping mechanisms by gender (%)

	Male	Female	Total
Formal/government	15	13	14
Individual efforts	18	20	19
Migration	10	7	9
Adverse coping strategies	16	10	14
Social (informal) help	19	17	18

Having mapped out the gendered patterning of the main economic and social vulnerabilities and coping strategy approaches at the national level as well as in our research sites, we now turn to a more in-depth discussion of LEAP, its objectives and the extent to which it is addressing gender-specific vulnerabilities.

4. Social protection responses to gender vulnerabilities: How gender sensitive is LEAP?

4.1 Engendering social protection in Ghana

The Ghanaian government – through investment over the past five years in a range of social protection initiatives, including the NHIS, the Education Capitation Grant, the School Feeding Programme, several community-based public works programmes and the LEAP programme – has exhibited a strong and growing commitment to social protection (ODI and UNICEF Ghana, 2009b). This commitment is clearly articulated in the GPRSI and GPRSII as well as the NSPS. These key policy documents also reflect progressively more explicit attention to gender issues and related policy implications.

The GPRSI recognises gender discrimination as among the manifestations of a multidimensional conceptualisation³⁸ of poverty (GoG, 2003), citing the ‘disadvantaged position of women in society’ as among the potential causes of poverty. It also identifies a number of areas in which women are specifically vulnerable, including food crop production (here, women dominate the sector, which suffers from ‘by far’ the highest poverty rates); education enrolment and retention; access to credit markets; and the informal economy, where women are disproportionately represented as a result of insufficient and inadequate education and training. Despite this broad recognition of the need to address various forms of gender inequality, the GPRSI was criticised for its lack of specificity when addressing gender in the diagnostic, the thematic areas and policy matrices and – importantly – the framework for monitoring and evaluation (GoG, 2005).

Accordingly, the GPRSII sought to address these criticisms by mainstreaming gender and vulnerabilities and exclusion into all of the thematic areas (GoG, 2005), incorporating gender mainstreaming processes at various stages (as opposed to only one in the case of the GPRSI) in the document’s preparation, setting more gender-specific targets and highlighting the need for gender-disaggregated data collection and analysis capacities.³⁹ Importantly, the GPRSII goes further than its predecessor in setting goals for women’s empowerment, including closing gaps in the legal framework that limit women’s capacity to participate in public decision making, and highlights gender equity as a ‘prerequisite of good governance’. Finally, the GPRSII outlines the basic social policy framework for mainstreaming the vulnerable and excluded into a subsequent national social protection strategy.

Of the three documents, the NSPS treats gender most comprehensively, although there is still room for improvement. It adopts an explicitly ‘gender-sensitive approach’ to its framework for reducing poverty and empowering socially disadvantaged groups, integrating it as the fifth of six ‘pillars’ (GoG, 2007a). It details gender-related vulnerabilities and acknowledges that ‘women bear the brunt of extreme poverty in Ghana and remain at the top of the list of excluded and vulnerable groups in society’. The NSPS also sets the stage for the formulation of the LEAP programme (see Box 4 for an overview of programme objectives).

38 The GPRS ‘focuses on four dimensions of poverty, namely poverty as a lack of income or consumption poverty; poverty as lack of access to basic social services, e.g., water, health and educational services; poverty as deprivations in human development, i.e., capacity development; and poverty as a multidimensional deprivation, such as physical weakness, powerless in decision making, vulnerability, isolation, gender discrimination, and inability to access legal or political rights’ (GoG, 2003).

39 This call extends even to the macroeconomic framework: ‘all impact analyses of macroeconomic measures will contain a gender dimension’.

Box 4: Core objectives of Ghana's LEAP programme

Launched in March 2008, in little over a year the LEAP programme had been implemented in 74 districts of 178 districts,⁴⁰ reaching over 26,000 households and 131,000 individuals (ODI and UNICEF Ghana, 2009b).⁴¹ LEAP is housed under the Ministry of Employment and Social Welfare (MESW)⁴² and implemented under the Department of Social Welfare (DSW), which has some limited experience with a small social grant/cash transfer programme that targeted 2500 OVC⁴³ and paid for their incorporation into the NHIS (sometimes referred to as the 'pre-pilot' phase).

Pitched as a 'developmental rather than remedial' approach to poverty reduction (GoG, 2007b), LEAP aims to use cash transfers to 'cushion' the poor and 'encourage them to seek capacity development and other empowering objectives', enabling them to 'leap' out of poverty. Similar to other conditional cash transfers around the globe, LEAP sets both positive conditions – including school enrolment and retention, registration at birth, accessing postnatal care, including immunisations for young children – and negative ones, namely, ensuring that children are neither trafficked nor engaged in the worst forms of child labour. The disproportionate labour burden that girls face, for instance, has been recognised as a key reason for gender-specific educational disparities, with girls facing significant time constraints that translate into poorer completion and achievement results (Assemblywoman, Chereponi, 2009). The provisions against child labour, in particular, set the programme apart from others of its kind.

The developmental returns of these demand-side health and education-related conditionalities, however, depend on matching them with supply-side interventions, without which the gains will be diluted. It is important in the Ghanaian case to emphasise from the outset that conditions are at best quasi conditions, as there are few means and resources in place to assess compliance. Nevertheless, as ODI and UNICEF Ghana (2009b) argue, the very act of establishing these criteria communicates the importance to parents of investing in these areas and reflects a 'developmental rather than punitive' approach (GoG, 2007b).

Of the 28.5% of Ghana's population who are poor, LEAP targets the 18.2%⁴⁴ who are classified as extremely poor, although criteria and means of targeting are still undergoing a process of refinement. Targeting is initially geographical (region, district, community), based on poverty maps and other resources, such as GLSS/GSS household data, but beyond this the approach is somewhat varied at district and community levels. Beneficiaries were initially planned to be incorporated in an additive fashion over a five-year pilot rollout, whereby OVC and people over 65 years were to be targeted in the first two years, followed by PWD in the third and so on, although pregnant and lactating mothers are not recommended for coverage at all during the five-year pilot phase owing to capacity constraints (see Section 5 of GoG, 2007b).⁴⁵ However, in practice, households are being selected based on a combination of their poverty status and the presence in their household of any one of the three categories of vulnerable groups.⁴⁶ Furthermore, while heavy targeting is to be used only in urban areas, again because of capacity constraints, rural areas are to be lightly targeted, whereby all households in a targeted community benefit (saving on administrative costs but opening the door for inclusion errors).

The regular LEAP programme (as opposed to the Emergency LEAP initiative discussed in Box 5) has the potential to positively impact women, both directly as beneficiaries of social transfers and indirectly as caregivers of beneficiaries who stand to benefit from a number of complementary programmes and services. Nevertheless, as a strategy document, the NSPS lacks specificity with regard to policy (including gender-specific) targets and, despite its claim to apply a gender-sensitive approach, the bulk of the poverty analysis lacks reference to gender inequalities or the specific vulnerabilities experienced by women and girls.

40 The total number of districts exceeds the number predicted in the LEAP design report (158) to exist by 2009.

41 It should be noted that this number exceeds the goal set in the original design report (GoG, 2007b) to cover 50 districts in the first year.

42 Formerly known as the Ministry of Manpower, Youth and Employment (MMYE).

43 Ghana is reported to have 213,000 OVC. An estimated 27% of orphans are HIV/AIDS infected (GoG, 2007a).

44 Figures from 2005/06 government data.

45 A pilot cash transfer targeted at pregnant and lactating mothers is ongoing but evaluation results are not yet available.

46 Farmers and fisher folk are expected to be 'implicitly covered' through the identification of the extremely poor, constituting the largest of the five targeted groups. By some estimates, they make up almost half of expected recipients (Future Agricultures, 2009).

Box 5: Emergency LEAP

Emergency LEAP was established to address food insecurity and flooding in some parts of the country. The first phase of started in September 2008 and ended in February 2009, and the second began in November/December 2009. In contrast with the regular LEAP programme, where the selection criteria are based on a combination of poverty status and belonging to specific vulnerable group, emergency LEAP beneficiaries are geographically targeted – i.e. all members of targeted locales are eligible.

Some 18,230 beneficiaries from 20 districts in 8 out of the 10 regions in the country were covered in Phase 1 (only Brong Ahafo and Central Regions were excluded), and many were subsequently retargeted and mainstreamed into the regular LEAP. In Phase 2, 13 districts in the 3 northern regions have been under emergency LEAP on account of floods. Here, 12,732 households were identified but 11,182 actually received the grant as of January 2010. Plans are also underway to retarget in order to mainstream them into the regular LEAP. This retargeting is important as it enhances the ability of the programme to support households suffering from longer-term vulnerabilities, including gender-related vulnerabilities, which will require a more sustained intervention than emergency type assistance can provide.

4.2 Gender dimensions of LEAP programme design

The extent to which gender considerations have been embedded in LEAP is also mixed. Of the six overall LEAP programme objectives, two are most relevant from a gender perspective.

The second objective outlines the goal of reaching targeted beneficiaries, including OVC, extremely poor persons over age 65 and PWD, but caregivers of OVC (overwhelmingly women) are identified as a targeted group in the criteria for accessing the grants. Thus, women are targeted directly as caregivers of OVC⁴⁷ and/or as PWDs or people over 65 years themselves, and indirectly as recipients of complementary services insofar as they are caregivers for PWD and the aged. Of note here is the fact that the government explicitly seeks a gender balance among aged beneficiaries. The NSPS, in discussing LEAP, recognises elderly women as especially vulnerable: '[older people's] social and family networks tend to weaken [as they age]', making them 'destitute eventually, particularly elderly poor women' (GoG, 2007a). Potential tangible benefits of LEAP to this population include improving consumption and health, but also – importantly – their social status within and outside the household (ibid), for example by improving their bargaining or decision-making power.

Nevertheless, while the NSPS highlights the potential of cash transfer programmes to positively impact on individuals, bringing them 'greater recognition, inclusion, and autonomy' (GoG, 2007a), it does not elaborate on the mechanisms through which this occurs, nor does it expressly make the link to women's empowerment. Empowerment is conceptualised in the NSPS and the design report as a function primarily of the complementary services and programmes rather than of the cash transfer itself, and is silent on issues of intra-household dynamics and decision-making power. As discussed above, however, experience with cash transfers in other countries, notably in Latin America, suggests that when transfers are paid to women they can positively impact on women's bargaining power and status in the household and the community.

The sixth objective of the LEAP design report, on the other hand, speaks explicitly to adopting a gender-sensitive approach to programme implementation. Such an approach would be manifest in three ways: i) ensuring 'a reasonable balance between men and women aged 65 years and above' in the payment of transfers; ii) providing 'necessary assistance to discharge their duties' to men when they are determined to be caregivers; and iii) giving 'special care ... to identify girls engaged in the worst forms of child labour such as hired domestic work' (GoG, 2007b). Yet, while making gender equality goals explicit is commendable, the design again suffers from a lack of specificity and clearly defined measureable indicators. In particular, while the third outcome, to take 'special care' to locate girls engaged in worst forms of child labour, is well intentioned and may well serve

47 Preliminary evidence suggests that only 10-15% of current beneficiaries are male (ODI and UNICEF Ghana, 2009b).

an awareness-raising function, it is more of a guideline to action than a specific target, and implementing it will require significant investment in sensitisation training for DSW personnel on the ground.⁴⁸

In general, many of the conditionalities, as well as meeting the programme's graduation objectives,⁴⁹ will require a well-articulated system of complementary services. The LEAP design report outlines a broad array of potential linkages between LEAP and other programmes, such as microfinance initiatives, supplementary feeding, agricultural inputs and skills training (ODI and UNICEF Ghana, 2009b). While LEAP's comprehensive vision emphasising the importance of complementary services is commendable, how beneficiaries will actually be linked to them is far from well defined. On the one hand, MESW's dual responsibility for LEAP and many of the complementary programmes, coupled with the anticipated establishment of the Single Registry, offers reason to be optimistic about the potential to coordinate the various programmes (ibid). On the other hand, it will be important that such measures be adequately budgeted for and included in the programme's monitoring and evaluation efforts.

Moreover, the design report envisions the creation of a new Social Protection Directorate and a consequent restructuring of the institutional framework within which LEAP resides. This process is related to the government's goal of creating a Single Registry, modelled after Brazil's *Cadastro Unico*,⁵⁰ which would track all beneficiaries of social programmes in Ghana under a single database, an innovation which has the potential to streamline coordination among agencies in the medium term. This system is a key component of LEAP's monitoring and evaluation mechanisms but will require a considerable investment with regard to coordination and capacity strengthening, which may be beyond the currently envisaged resource inputs of the programme.

Beyond its potential to impact positively on consumption, education and health, and to reduce detrimental practices and behaviours, LEAP's design opens the door for citizen participation in select aspects of programme governance and implementation. Where community-based targeting is used, the community LEAP implementation committees (CLICs), in which respected community members assist with the identification of eligible beneficiaries, are potential venues in which women could take an active role, thereby improving their status in the community. The CLICs are also to be called upon to assist in the important task of monitoring compliance with programme conditions, such as school attendance, even providing 'encouragement/counselling to recalcitrant beneficiaries' (GoG, 2007b). However, to date there is a lack of affirmative action provisions to ensure that women are adequately represented on the CLICs. More specifically, no criteria were consistently followed to determine the composition of CLICs to ensure that women are adequately represented and encouraged to fully participate, and potentially contribute to the benefit of other women.

48 The design report acknowledges that 'some of the peculiar constraints facing girl children call for careful consideration of what it will take for their households to be able to satisfy conditionalities' (GoG, 2007b). However, some experts point out that cash transfers are actually 'least likely to be effective against the worst forms of child labour, such as slavery, sexual exploitation and armed conflict' (Tabatabai, 2009). Moreover, while it may not be fair to assess a programme on what it was never intended to do, an analysis of the gendered dimensions of LEAP would be remiss not to point out certain omissions as regards the status of women and girls in the programme design. In particular, certain practices that are specifically harmful to girl children's and adolescents' human capital development, such as child marriage and fostering of girls whereby they end up in a form of domestic servitude, are not explicitly tackled under the framework. Although it may not be advisable to incorporate these practices in the programme's negative conditions (doing so could arguably 'overload' the programme with objectives and target populations), gains could be derived from including them among those treated in the DSW sensitisation campaigns that complement regular delivery of cash transfers.

49 Graduation goals vary by category: the extreme poor over 65 receive support until death; subsistence farmers receive grants for three years; PWD and their caregivers will be subject to reapplication every two years; and caregivers of OVC will receive grants until the eligible child is 15 years of age or has completed basic school. Meaningful success on each of these targets depends on linking beneficiaries with coordinated complementary services.

50 Indeed, the Brazilian government closely collaborated with the Ghanaian government in the design of LEAP, which in many ways resembles Brazil's *Bolsa Família* (see <http://www.ipc-undp.org/ipc/africa-brazil.jsp>).

Beneficiary fora, which are to be held every two months on paydays, present another opportunity for community participation. Such structures are important as potential opportunities for interaction among social welfare officers from DSW, community leaders and beneficiaries themselves, providing a 'feedback loop' which can facilitate improvements in implementation as well as linkages with complementary services and informal social protection mechanisms in the community (ODI and UNICEF Ghana, 2009b). How to encourage the participation of women in these fora is not addressed in the LEAP design documents, however.

The preceding discussion highlights the fact that evaluating the gender-specific impacts of LEAP requires an examination of a broad range of variables: female participation rates in the programme (both as beneficiaries and in decision-making roles); changes/reductions in time burdens of women caregivers as a result of the flexibility that the cash transfers potentially offer; improved access rates of postnatal care by HIV/AIDS-infected pregnant and lactating mothers, potentially reducing the rate of mother-to-child-transmission of the disease; gender-specific outcomes in the areas of OVC education and health status; progress in eliminating the worst forms of child labour and trafficking, especially among girl children; and improvements in women's status and decision-making power in the household. This, in turn, requires carefully collected gender-disaggregated data as well as analytical capacities on the part of programme evaluators. Given the DSW's monitoring and evaluation constraints, as outlined above, measuring these impacts is likely to prove challenging in the short to medium term at least.

5. Effects on individuals, households and communities

The translation of a programme design document into practice is always an imperfect science, as programmes are not implemented in a vacuum but rather interact with pre-existing socioeconomic, institutional and cultural conditions and systems. In this section, we analyse the tangible as well as intangible impacts of the LEAP programme on gender relations at the household and community levels, drawing on existing evaluations as well as fieldwork from the Northern Region of Ghana.

5.1 Impacts at individual and household level

Overall, beneficiaries commonly report they are using their cash grants for payment of NHIS premiums, to purchase school supplies and for essential food items (ODI and UNICEF Ghana, 2009b) (see Box 6). These basic household expenses are typically seen as women's domain and, as such, LEAP can be seen to be contributing to what Molyneux (1985) terms women's 'practical gender needs', although the value of this was recognised by both male and female respondents across the lifecycle.

Box 6: Use of LEAP cash grants by beneficiaries from selected communities in Northern Ghana

Improved food consumption is a major benefit of LEAP as the following quotes testify:

'Money is used mainly to buy food. I would like fertiliser and also to be able to pay for medical care but the amount is insufficient' (Married woman, Gushiegu, 2009).

'LEAP has helped me in terms of health and food. Now we eat three times a day whereas we used to eat only once' (Adolescent, Chereponi, 2009).

'I use half for food and keep half for emergencies' (Elderly widow, Chereponi, 2009).

'LEAP helps us buy food if we run out. We no longer cry of poverty and hunger. It has also helped my family to cope with increased prices' (Married man, Chereponi, 2009).

'LEAP increases my independence – I can now buy my own food' (Female FGD, Tanbo, 2009).

'LEAP helps in providing food in times of low yields, floods and droughts; it helps to prevent children going to school without school lunch money' (Male FGD, Sala, 2009).

Beneficiaries also noted that it in some cases the LEAP transfer helped with health care costs, but owing to the small size of the transfer, the impact was limited:

'LEAP helps me to take care of my children after the death of my husband and to access better health care and drugs, especially for the children when they are sick' (Female FGD, Tanbo, 2009).

'Pregnant women can now be sent to the hospital for better care' (Male FGD, Sala, 2009).

'Our NHIS card has expired. I wish the LEAP payment was larger as we couldn't renew it given the cost. If we had money we would renew their health insurance' (Married woman, Chereponi, 2009).

Investment in children's schooling was another important gain identified by LEAP beneficiaries:

Children are happy to go to school unlike before. Now they have money for food at school and there is also food for them at home after school' (Male FGD, Wonjuga, 2009).

'LEAP enables us to buy school uniforms, books and fees; it makes it easier for children to remain in school' (Female FGD, Tanbo, 2009).

'LEAP helps to provide for children's basic needs at boarding school' (Male FGD, Sala, 2009).

'Children from LEAP households are better off than other children' (Female non-beneficiary FGD, Sala, 2009).

Other tangible benefits at the household level included improved access to loans from family and friends as a result of greater confidence in the ability of programme beneficiaries to pay back loans and the ability to hire labour to work on farms (especially in the case of female-headed households) and to improve housing. Female FGDs, however, highlighted that transfers were inadequate to serve as start-up capital for new businesses, unlike larger one-off loans (from NGOs), with which some beneficiaries were familiar.

Beneficiaries also noted several intangible gains stemming from the transfers linked to providing households with a greater sense of security. Male FGD respondents, for instance, noted that LEAP had helped households cope with natural disasters such as droughts and floods and provided a cushion against price increases (Male FGD, Wonjuga, 2009). Female FGD respondents similarly noted that it helped them to cope with crop destruction from flooding (Female FGD, Tanbo, 2009).

Significantly for this report, however, the transfer does not seem to have changed household dynamics notably, as the testimonies from both men and women in Box 7 highlight. There appear to be a number of possible reasons for this relative lack of change, including low transfer amounts,⁵¹ limited public awareness efforts about the value of transfers going to women and therefore perhaps reducing the attention given to women's care-giving role and related time burden and absence of a specific education component (such as those in Latin American programmes). Moreover, the relatively vibrant civil society in Latin America has highlighted gender inequality issues, but this sector is much thinner in Ghana, especially outside Accra. As such, there are fewer reinforcing messages and initiatives in the communities where LEAP is being rolled out to take advantage of LEAP's gender sensitisation potential. Moreover, key informant interviews repeatedly highlighted that, although there are some gender-focused NGO initiatives in the region, none is involved in LEAP (Assemblyman, Wonjuga, 2009; Social Welfare Officer, Gushiegu, 2009).

Box 7: LEAP and intra-household dynamics

Overall, our research findings suggested that the LEAP transfer has not altered household gender relations, but instead has tended to be managed in line with existing gender roles and responsibilities, whereby decision making rests with husbands, brothers and sons. Some male FGD respondents noted that there was less intra-household quarrelling as resources are less scarce. However, in general respondents noted that dynamics were largely the same and that women still faced considerable time burdens and limited voice:

'The LEAP money is given to our husband who tells everyone what the money should be used for. He consults his wives and seeks a consensus but he decides' (Married woman, Gushiegu, 2009).

'I make the decisions about how to use the LEAP money – my two wives do not disagree with me' (Married man, Gushiegu, 2009).

'When my husband was alive he consulted me about decisions. I now receive LEAP money and give it to my son who decides how to use it. He gives me some of it back' (Elderly widow, Gushiegu, 2009).

⁵¹ The size of the grant (ranging from a minimum of GH¢8 up to GH¢15 per household, according to number of dependents) is still quite small, calling into question the extent to which it can have an appreciable impact on the well-being of household members (UNICEF Ghana, 2009). Our primary research findings supported this, with most lifehistory respondents indicating they felt the transfer amount to be too small. However, the size of the LEAP transfer is in line with international trends in social grant amounts (20-40% of national per capita poverty line (GoG, 2007b)) and compares favourably with per capita incomes of people in the poorest areas. The estimated monthly per capita income for the poorest two regions, the Upper West and Upper East, is GH¢10.83 (authors' calculations based on GLSS 5 data (GSS, 2008)). Perhaps one reason why the transfer is perceived to be small is the low level of income of the ultra-poor recipient households, so that LEAP only marginally helps. Additionally, the programme had begun only a few months prior to the research, and so households had only received a few months worth of support rather than being able to assess its potential longer-term cumulative effect.

'There have been no changes in household dynamics as a result of LEAP' (Married man, Chereponi, 2009).

'My son decides how to spend the LEAP money. He makes good decisions about how to spend it' (Widow, Chereponi, 2009).

'I give all of the LEAP money to my older sister, but I decide how it should be spent. I provide the money for the women' (Elderly man, Chereponi, 2009).

'LEAP has not influenced relations between men and women' (Female FGD, Nachem, 2009).

'LEAP has not affected family relations. Household members relate in the same way as before' (Female FGD, Tanbo, 2009).

'LEAP has not influenced the time women spend on domestic chores' (Female beneficiary and non-beneficiary FGDs, Jakpa, 2009).

'Part of the reason why there is cordiality and harmony in households is because women agree to husbands' orders; they are submissive and thus there is no conflict' (Assemblywoman, Chereponi, 2009).

'It is not easy identifying women as beneficiaries – in some cases husbands won't allow women to be interviewed to determine programme eligibility and in other cases women are only allowed to receive the benefit if there are no male household members or if male family members are disabled and unable to receive the transfer directly' (Social Welfare Officer, Chereponi, 2009).

5.2 Impacts at community level

Our findings suggest that, despite the relatively small size of the transfer and the fact that LEAP has been operating for only about a year in our sites, the programme has had some important community-level impacts, although these too have had limited effects on gender relations. While a common concern of targeted programmes is the risk of community tensions, FGDs suggested that LEAP had generally been positive in terms of social capital development. Non-beneficiaries and beneficiaries alike pointed out that beneficiaries share food for all to enjoy from their LEAP transfer (Female non-beneficiary FGD, Sala, 2009); help cover neighbours' health costs in the case of persistent illness (Female FGD, Tanbo 2009); support neighbours to pay school fees (Male FGD, Wonjuga, 2009); and provide loans to non-beneficiaries (Male FGD, Sala, 2009). There was also a general consensus that LEAP enhances beneficiaries' abilities to contribute to community projects, including repairing boreholes (Female beneficiary and non-beneficiary FGDs, Jakpa, 2009; Female FGD, Sala 2009), renovating a local dam (Male FGD, Sala 2009) and contributing to pay community teachers in order to improve children's school retention (Female FGD, Tanbo, 2009). Importantly, while non-beneficiaries were disappointed not to be included in the programme, there was a common view that the programme had not led to community tensions. Some even opined that LEAP had contributed to increased social cohesion and social networking through more regular community meetings and discussions about community issues (Male FGD, Wonjuga, 2009; Female beneficiary and non-beneficiary FGDs, Jakpa, 2009) and enhanced confidence that the government could help their community (Male FGD, Wonjuga, 2009). For instance, female FGD participants in Tanbo noted that they now meet more regularly with the local assemblyman about community issues (Female FGD, Tanbo, 2009). Moreover, while beneficiaries were clear that the programme had not yet provided any formal capacity building or education, the social welfare officers responsible for overseeing LEAP had made an effort to make recommendations about spending the transfer wisely, including buying nutritious food, spending it on the care of beneficiaries (especially in the case of the aged or disabled) and supporting children's schooling.

In terms of women's participation in programme governance, equal participation of women in LEAP local governance structures, including the CLICs and the beneficiary fora, would suggest a useful measure of the programme's impact on community gender relations. However, our findings

generally suggested that, while women have been invited to programme-related village meetings, their participation has not yet translated into an effective voice. As one widow from Chereponi explained, '*women are invited to meetings but they have nothing to say, so they don't really participate*' (Widow, Chereponi, 2009). Moreover, women's representation in the CLICs in our research sites was minimal. In Kpatinga and Galwei communities, all those sitting on the five-member committees were male and in Sala/Sampubga, the seven members of the committee were all male. Only in Nachem was there one female CLIC member (of six).

6. Drivers of programme impacts

A number of political-institutional and socio-cultural drivers have contributed to the mixed implementation record of the gender dimensions of LEAP.

In terms of political/institutional drivers, partisan politics, an underinvestment in capacity building for programme implementers, inadequate coordination mechanisms, and weak political support for the project by district authorities emerged as key constraints to realising the gender-related goals of the NSPS and LEAP design documents. First, the timing of the rollout of LEAP in the Northern Region has played a key role in its uneven implementation to date. In the initial phase of LEAP, despite very high poverty and food insecurity rates in the north of the country,⁵² a political decision was made to ensure that LEAP was implemented in regions across the country and to build on a pre-pilot programme in HIV/AIDS-prevalent districts in the south (ODI and UNICEF Ghana, 2009a). With the support of a specifically earmarked World Bank loan, the programme was subsequently scaled up in the north, but this coincided with the presidential election in late 2008 and thus was perceived to be highly politicised. For instance, an NGO programme officer noted that, when LEAP selection was initially taking place, opposition party supporters refused to be identified as beneficiaries as they believed it to be a politically linked programme; once the opposition won the election and continued the programme, they realised that inclusion in the programme was not party specific. They were then too late to be included (NECIDA Programme Officer, 2009). Local political actors generally concurred that, because LEAP beneficiaries were recruited around election time, a great deal of confusion was generated about programme objectives (Assemblyman, Gushiegu, 2009; Regional Director of Social Welfare, Tamale, 2009), and that this politicisation has unfortunately been perpetuated even post-election in the identification of programme beneficiaries. Problems of elite capture of the CLICs and inaction in the face of irregularities were reported by district welfare officers (Assemblywoman, Chereponi, 2009; Social Welfare Officer, Chereponi, 2009).

Second, although social protection programmes, and especially LEAP, are growing in profile in national-level circles, investment in ensuring effective programme implementation at the district and community levels seems to have been quite limited in general, especially with regard to gender-related design commitments. Social welfare officers lamented the high workload that the programme has generated and an inability to effectively monitor its implementation and outcomes, with only untrained National Youth Employment Programme public works participants to support the process and inadequate transport options to visit beneficiary communities regularly (Social Welfare Officer, Gushiegu, 2009).⁵³ According to the design report, the DSW has 'very limited experience in implementing a direct social grants scheme' (GoG, 2007b).⁵⁴ In particular, data collection and analysis capacity in the DSW is very limited, constraining efforts to effectively monitor and evaluate programme impacts. As experience with cash transfers in other countries has shown (Mexico's *Oportunidades* stands out in this respect), improvements in these technical capacities will likely be crucial to the programme's long-run political and financial viability.

Concerns about limited training for programme implementers were also widespread – training had been cursory only and poorly targeted, with people not involved with the programme included in some cases and those on the frontlines, including members of the District LEAP Implementing Committee and CLICs, excluded in others (Social Welfare Officer, Chereponi, 2009; Regional

52 The World Food Programme (WFP) and the World Bank are in the process of refining a map of food-insecure communities (in response to the floods of 2007).

53 The National Youth Employment Programme (which aims to create 500,000 jobs between 2006 and 2009), is the country's largest public works programme, including support to district DSW officers (ODI and UNICEF Ghana, 2009a).

54 Interestingly, the report goes on to say that LEAP would provide the DSW with the momentum to 'replace essential capabilities that have been lost through the erosion of the corps of professionals during the 1980s and 1990s ... under structural adjustment'. This begs essential questions about programme efficiency and cost effectiveness.

Director for Social Welfare, Tamale, 2009). This is particularly problematic given the important role social welfare officers play in defining the criteria employed locally for targeting beneficiaries. Efforts to provide training to new appointees to related posts post-election had also been poor (Assemblywoman, Chereponi, 2009). Moreover, while a considerable degree of the potential of LEAP relates to the opportunity to discuss programme conditionalities with communities and other relevant issues related to the well-being of vulnerable groups (i.e. aged, disabled, OVC, girl children) in beneficiary fora, social welfare officers have not received any specific guidance or training about what to discuss with communities (Director of Social Welfare, Tamale, 2009). Indeed, even the definition of caregiver to be employed in the selection of beneficiaries appeared to differ across districts and communities. At the regional level, the definition adopted was 'the person who cooks, bathes, etc, the beneficiary'. This is typically a woman rather than a man (Regional Director for Social Welfare, Tamale, 2009) and recognises that '*women are better at managing resources than men ... and more honest*' (Social Welfare Officer, Gushiegu, 2009).

'When we initially chose beneficiaries, we didn't think about ensuring that females were recipients, but in hindsight it would have been better for women to receive it as we have seen that they spend resources more wisely' (Assemblyman, Wonjuga, 2009).

But this was not universally understood. In Chereponi, by contrast, the understanding was that the programme transfer was paid to the household head (typically male in the region) (Social Welfare Officer, Chereponi, 2009), and thus caregiver was being equated with 'breadwinner'.

Thirdly, the programme is seen as driven by the central government and as such has minimal involvement from district authorities. This is reflected in the limited role played by the DLIC, and the fact that many district officers are unaware of the details of the programme. In Gushiegu, for example, the Gender Desk Officer had only a vague idea of the programme and its aims and had not been encouraged by district leadership to forge synergies with the programme despite the fact that most recipients in the district are women.

Another key concern relates to the absence of effective coordination mechanisms. Although the programme design has provision for a district coordinating body – the DLIC – key informants emphasised that the DLIC in Chereponi district was '*not functional at all*' owing to a lack of funds (Social Welfare Officer, Chereponi, 2009). Importantly, too, the gender desk officer had not played any role to date in LEAP and was of the view that the programme was '*not yet really operational*' (Gender Desk Officer, Gushiegu, 2009). As a local legislator pointed out:

'There is no coordination between social sector actors. There are education and health officers in the district but the assembly doesn't coordinate with them and, although there should be a position of gender desk officer, we don't even have one in Chereponi' (Assemblywoman, Chereponi, 2009).

Indeed, government officers with responsibilities for promoting gender equality are generally absent from LEAP implementation committees (Regional Director of Social Welfare, Tamale, 2009).

For LEAP to realise its potential to tackle the multidimensionality of poverty and vulnerability faced by beneficiary communities, the emphasis on linkages to complementary services facilitated by a Single Registry system is crucial. However, little progress appears to have been made in working towards such synergies. National-level protocols on complementary services have not been signed or rolled out, and nor have regional-level LEAP implementation committees been set up to involve key actors such as the Regional Department of Women's Welfare (ibid). Indeed, while MOWAC is involved in tackling a number of key age- and gender-related economic and social vulnerabilities identified in the NSPS and LEAP design documents, linkages with LEAP appear not to have been discussed to date. For instance, the gender desk officer in Gushiegu is involved in supporting income-generating programmes for women; awareness raising to promote the importance of girls' school completion, especially among traditional leaders, and to highlight the risks of child marriage

and early childbearing; initiatives to develop women's self-esteem and tackle family violence; enhanced access to pre and postnatal health services; and tackling the stigmatisation of 'witches' (see Box 8 below) and risks of human trafficking. Like the district social welfare officers, gender desk officers are seriously under-funded (the post is unsalaried and reliant on the volunteer labour of officials with other fulltime posts) but coordinated efforts to maximise scarce financial and human resources earmarked for gender mainstreaming at the district level could be possible and help address some of the underlying vulnerabilities that cash transfers alone will fail to resolve.⁵⁵

Box 8: Combating social stigmatisation of the aged

The phenomenon of social marginalisation of elderly women, usually widows, through their labelling as witches is a serious problem in the north of Ghana. NGOs (such as World Vision and ActionAid) and increasingly the government have been providing support to 'witch camps', which have been set up by communities in order to cast away these stigmatised women, who have been abandoned owing to alleged involvement with the occult. NGO and government initiatives to support these women include provision of basic needs such as food, clothing and shelter, as well as opportunities for wage labour work on farms or construction sites, or training and support for them to set up microenterprises to help provide some level of financial security. Part of the problem, however, is that the belief in witchcraft is widespread; efforts have often focused on freeing women wrongly accused of being 'witches' rather than seeking to deconstruct such categorisation more generally. Interestingly, in Kpatinga, one of our research sites, the community selected six women among a total of 34 in a local witch camp as LEAP beneficiaries (Social Welfare Officer, Gushiegu, 2009). It is not clear whether other communities have similarly identified witches as a vulnerable group needing social protection.

It is important to note that young girls are also negatively affected by the phenomenon of witch camps. Young girls are often sent by their families to take care of elderly female relatives, frequently at the expense of their education, not just because of time poverty but also because of the risk of social stigmatisation, which may result from being associated with witches and make integration into mainstream schools difficult. In some camps that have grown large, such as Kukuo, those girls providing support have grown older and have had children of their own (married or out of wedlock) so these children face a similar fate of poverty, marginalisation and no access to education.

Source: Adinkrah (2004); Boakye (2010); key informant interviews, 2009.

In addition to the political and institutional challenges identified, evidence of traditional attitudes about gender roles and responsibilities could constrain the programme's gender impacts. This is highlighted by the limited change in household dynamics as a result of LEAP, where most spending decisions continue to be made by male household heads, despite the transfer recipient being a woman.

Rallying full government support at different levels of government continues to be a limitation. To garner political and institutional buy-in, Ghana's social protection strategy has aligned with the broader economic growth objectives of the country. Ghana's national development strategy, the GPRSII, is strongly focused on growth and harnessing human resources in order to meet the country's goal of reaching middle-income status by 2015. As such, the NSPS has had to be framed in language that recognises these development priorities, as the following statement illustrates (GoG, 2007a):

'The Strategy is founded on the philosophy that all Ghanaians if afforded the opportunity, can contribute towards the process of transforming Ghana into a middle income country by the year 2015. Vulnerable and excluded segments of the population potentially reverse the gains of overall developmental efforts because of their tendency to take away rather than contribute to national economic activity. Furthermore, the youth (aged between 15-35 years) who are the most vibrant sector of the society and constitute an estimated 26% of the total population require critical attention. Their situation is characterized by among others unemployment with its attendant problems of social vices, disillusionment and poverty [but they are] ...full of potentials which if properly harnessed could be

⁵⁵ Note that this earmarked funding was a condition of donor joint budget support to district assemblies (Director, Regional Department of Women's Welfare, Tamale, 2009).

channelled towards effective human resource development and also for socio-economic advancement.’

In this regard, advocates for social protection within the government have made good use of a growing body of evidence that links social protection to human capital development and higher economic growth (ibid):

‘The misconception that Social Protection represents wasteful handouts to undeserving poor people has been overtaken by recent research and thinking, which indicates that it contributes to development and growth in several ways. It facilitates investment in human and physical assets thereby reducing the risk of future poverty. It enhances risk-taking livelihood strategies. It provides safety nets and facilitates social and economic cohesion, reducing the likelihood of conflict. Finally, it helps correct market failures such as imperfect credit and insurance markets. It is therefore an indispensable element of economic growth and ultimately, an effective development strategy.

This instrumentalist approach, however, does suggest that there will be a strong focus on cost effectiveness and perhaps not the readiness to invest in more resource- and time-intensive capacity strengthening and empowerment-oriented components of the programme design document. Moreover, while CSOs could play an important role in building public support for social protection, their role so far has been limited, perhaps particularly so in the Northern Region (Social Welfare Officer, Chereponi, 2009).

7. Conclusions and policy implications

Cash transfers are increasingly emerging as an important strand of social protection initiatives, in not only middle- but also low-income countries, and represent an initiative with strong potential to address a range of gendered economic and social vulnerabilities. Overall, our gender analysis of Ghana's quasi-conditional LEAP cash transfer programme has found that the programme has made a useful contribution to the costs faced by poor households for basic consumption and basic services, many of which are often viewed as women's responsibilities. Moreover, by targeting caregivers of OVC, supporting disabled people (whose care is often undertaken by able-bodied women within the household) and ensuring that aged women are included as beneficiaries, the programme is also helping to address the vulnerabilities of a significant group of poor women. Including non-involvement in trafficking and child labour as a programme condition also has the potential to raise awareness about some of the particular social vulnerabilities that girls and female adolescents may face. Our findings suggest, however, that a number of programme design features, and especially implementation practices, should be improved as LEAP continues to be rolled out, in order to improve overall programme effectiveness and fully harness the programme's transformatory potential.

7.1 Policy and programme design

Integrating gender issues into policy and programme design entails strengthening attention to gender dynamics at the household and community levels, as well as ensuring gender-sensitive mechanisms are embedded within programme governance structures.

At the **household level**, LEAP's targeting criteria draw on some of the positive lessons regarding gender-sensitive targeting. Caregivers of OVC are explicitly recognised, which is important, especially in ensuring that resources are provided to enable these children to be raised on equal terms as a caregiver's own offspring. However, as we discuss more below, although the definition of caregiver in the design document specifies caring responsibilities, its implementation has been less clear-cut, thereby reducing the potential to recognise and support the value of care work within the household. Moreover, the strong emphasis found in other countries on targeting women as caregivers, given the greater likelihood of their investment in the human capital of their children, is less prominent in LEAP rhetoric, even in the design document. On the one hand, recognising that both men and women can take on care-giving roles could be seen as an important step in promoting gender equality. On the other hand, however, if there is not a clear message that the cash grant is designed to support women in their care-giving roles and to empower them within the household, then the transfer may simply be added to the household resource pot without contributing to any positive spill-over changes in intra-household dynamics.

Other gender provisions in terms of beneficiary targeting involve the promotion of a gender balance among the elderly, as an acknowledgement of the particular economic and social vulnerabilities that elderly women, especially widows in the north of the country, face, and the inclusion of women with disabilities as beneficiaries on equal terms with men. Both of these are important and innovative design features, which merit monitoring over time to assess the extent to which the transfers are shaping intra-household relations for women who belong to these social groups.

At the **community level**, LEAP's negative conditions, i.e. the non-involvement of children in trafficking or the worst forms of child labour, represent an important gender-related dimension. These conditions pertain to all children, but the programme design document recognises that girls are more vulnerable to such forms of exploitation. While the monitoring mechanisms laid out in the design document are relatively weak – the volunteer CLIC committees for which only minimal training is envisioned – the incorporation of these conditions into programme design does at least

signal a recognition that these problems exist and that it will require community-level efforts to combat them.

The beneficiary fora are also a potentially useful mechanism for raising awareness and generating a community dialogue about other gender-specific economic and social vulnerabilities. Social welfare officers to date have been using this forum to encourage beneficiaries to invest the transfers in the human capital development of their children and to enrol in the NHIS. These could be expanded to encourage, for instance, girls' school retention, to highlight the risks associated with early marriage and to raise awareness about women's reproductive health rights and how to address family violence, which remains under-reported in the country. Although the fora topics appear to have been rather *ad hoc* and dependent on individual social welfare officers, linkages with MOWAC during the training of programme implementers could help strengthen the attention given to gender inequalities in these community interactions.

At the level of **programme governance**, the programme design document encourages women's participation but there are no concrete affirmative measures in place to ensure a gender balance in terms of CLIC membership, nor are there recommendations for monitoring and evaluation efforts to assess the extent to which women are represented on these committees. In our research sites, membership was overwhelmingly male. We would suggest that broader efforts are made to monitor women's involvement in these committees, given the potentially important role they can play in terms of beneficiary targeting, monitoring of compliance with conditionalities and potentially helping to shape the content of the beneficiary fora.

7.2 Implementation issues

Gender-sensitive programme design is a critical first step, but effective implementation requires strong political will and adequate investment in both human and financial capital in order to realise the potential of innovative programme design features. An obvious programme strength is the inclusion of high numbers of female beneficiaries (five of six communities in our research sites had a greater number of female than male beneficiaries), including female household heads. Overall, however, the effectiveness of LEAP as an instrument to tackle gender-specific economic and social vulnerabilities has been hampered by a number of significant yet not insurmountable implementation shortcomings.

First, while cash transfers have the potential to raise awareness of the value of care work, our research findings suggest that the definition of caregiver applied to the recipient of the cash transfer is inconsistently understood and applied. Although the preference for targeting women is underlined during trainings, it is not a rule and does not always take place. In some sites, the role was associated with the practical tasks of caring for vulnerable family members but in others it was equated with the household head, thereby reinforcing the *status quo* in the case of patriarchal male-headed households. If LEAP is to have a transformatory impact and address not just economic vulnerability but also social vulnerability, then ensuring that programme implementers are aware of the targeting rationale, and that their implementation thereof is carefully monitored, should be prioritised.

A related point refers to the length, targeting and content of training for DSW staff involved in programme implementation, for CLIC members and for officials involved in the delivery of complementary services. Our findings suggest that training to date has been short, inadequately targeted and poorly resourced (for instance, there is an absence of training manuals that could provide greater consistency and give social welfare officers reference material to help shape decision making as new issues emerge). Moreover, the potential of training sessions to sensitise participants to the gender-related aspects of vulnerability and mechanisms to tackle these remains underutilised. While there is strong evidence that poverty and vulnerability are highly gendered experiences in Ghana, this does not appear to be well integrated into the capacity-building

components of the programme yet. In particular, more could be done to maximise the regular interactions that social welfare officers have with local communities on payment days, to initiate community dialogues on ways to address gender inequalities such as gender-based violence, early marriage, the costs of child labour, especially for girls' human capital development, and gendered forms of social stigmatisation, including that faced by women accused of witchcraft in the north of the country. If the beneficiary fora are to play a role in sensitising communities to these concerns and devising community-appropriate responses, then more will need to be invested in social welfare officers, the CLICs and local assembly members (who often serve as CLIC focal points and play a support role in the identification of beneficiaries and dispersal of payments), so that they can provide the necessary leadership and facilitation skills.

A third critical dimension of programme implementation that emerged from our research was the need to strengthen inter-sectoral coordination on a variety of levels. The LEAP programme design recognises that poverty and vulnerability are multidimensional, and calls for strong linkages with complementary service providers, but in practice such linkages remain underdeveloped. As a first step, it will be important to raise awareness of LEAP and its objectives among basic service providers and also among regional and district-level gender desk officers, who have a specific mandate to tackle gender inequalities, so that possible synergies can be discussed. While gender desk officers do not have a specific budget, they do have the requisite capacities to support gender-sensitive social protection programming and so could be a valuable asset for supporting LEAP social welfare officers. Another key mechanism here with considerable potential is the CWIQ, which is regularly carried out by GSS and could help social welfare officers identify district-specific vulnerabilities and better target complementary services to programme beneficiaries' needs.

Opportunities for the synchronisation of data collection, monitoring and evaluation and reporting mechanisms could also be identified and capitalised on, especially given the investment of the DSW in a Single Registry system for all programme beneficiaries. At a minimum, it will be important to review the number of male and female caregivers of beneficiaries, as well as the distribution of beneficiaries from male- and female-headed households relative to the local population. In the medium term, joint inputs into the content and rollout of beneficiary fora could be explored, given that the gender-related vulnerabilities identified in the LEAP design and NSPS documents will require a multi-pronged approach. A system for the mapping of and cross-referrals to complementary services available in each locality will also need to be prioritised and budgeted for if it is to be realised, possibly drawing on services provided by both government and NGO actors to reduce service coverage challenges.

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Appendix 1: Key social protection programmes in Ghana

(Protective measures) Social assistance and social services

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcome
Including amount of transfer/waiver	Title; timeframe, administrative arrangements (who coordinates the programme, who funds the programme, who delivers the programme)	Details of whether gender inequality is considered in the design of the programme in general and/or whether the programme addresses any gender specific risks and vulnerabilities	Does the programme link beneficiaries to other programmes or services? Health, education, credit skills, training etc	Including any gender specific objectives	Who is targeted and how is targeting done	How many households or beneficiaries-disaggregated by sex if possible	Results of impact evaluations at community, household and intra-household level
Provision of employment	National Youth Employment Programme It was started in 2006 and coordinated by the ministry of youth and sports but have sub coordinates at the regional and district levels. A division in the ministry enrolls all youth with the accredited certificate for work. It is funded by the GoG. The youth are employed in agriculture, health, sanitation, ICT, education, trading and vocations, and community protection (guards).	The programme is designed to meet the unemployment problems faced by the youth in the country. It is aimed at all the youth with no gender specific inequality consideration	The youth register is linked to the youth in agriculture programme and other programmes. It is not a standalone programme	To provide and equip the youth with skills to help them to develop themselves. Over all aim is to eradicate extreme poverty and hunger.	All youth. The youth have to register at the unemployment centre.	Covers the ten regions of Ghana. (Sex disaggregated data not available).	Has provided jobs for 108,403 youths in the country as at 2008.
School fees waivers To ensure that all school-age children received free and Compulsory quality primary education by 2005.	Free Compulsory Universal Basic Education Started in 1996. The programme is coordinated by the Ministry of Education. It is funded by the GoG with assistance from other development partners like the World Bank, WFP, French and Dutch embassies. It is	The directorate of girl education unit under the Ministry of Education ensures that the girl child is not denied access to education. This is given a high priority in the programme implementation	--	To improve access to basic education to all children. Poverty intervention to reduce strain on poor families.	It is targeted at deprived school children. It is however targeted at more girls than boys	Covers the whole country	There has been increase in school enrolment for basic education. Even mature people with no education are involved. Some schools in the district

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Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcome
	delivered by the Ghana Education Service.						level are said to be recording admission rate of older folks who had no form of basic education during their time.
<p>Conditional and Unconditional Cash Transfer</p> <p>Approximately \$8 - \$15 monthly social grant plus complementary programmes. The grants are supposed to last for at least three years. Orphans and vulnerable children are to benefit till age 15 in some cases.</p>	<p>Livelihood Empowerment Against Poverty</p> <p>The programme was started in 2006 and is co-ordinated by the ministry of Manpower, Youth and Employment. It is funded by GOG, DFID and UNICEF. The programme is delivered by several ministries and departments some of which are: Manpower, Youth and Employment, department of Social Welfare, Food and Agric, Health, local government and rural development, Women and Children's Affairs etc.</p>	<p>It was designed to provide financial assistance to the extremely poor and vulnerable people in Ghana. Women and polygamous households are some of the preferred recipients. It is aimed at improving basic needs, health etc of the beneficiaries. The conditions are that one must make sure children (if any) are in school and that all new-born babies are registered with the Births and Deaths Registry, attend post-natal clinic and complete all immunization prescribed by the Expanded Programme on Immunization (EPI beneficiaries must also register for the NHIS and reduce worst forms of child labour.</p>	<p>The programme links beneficiaries to complementary services that would enhance their wellbeing. Some of these are the NHIS, FCUBE, NYEP etc. It also engages beneficiaries in self-sustaining income generating activities.</p>	<p>It is aimed at providing a spring –board to help the extreme poor to 'leap' out of the malaise of extreme poverty to a stage where they will be able to fend for themselves</p>	<p>Targeting based on GLSS 5 data. The programme targets the extremely poor in Ghana. Targeting is done at the district level by the Department of Social Welfare. Beneficiaries must have insecure incomes, low asset positions, poor housing and no or low education. It targets the ff: Pregnant women /lactating mothers living with HIV/AIDS, subsistence farmers and fisher folks, care-takers of orphans and vulnerable children, the extremely poor above</p>	<p>8,000 households benefitted in 54 districts as at 2008. Sex disaggregated data not available. The programme is targeted at 15,000 households in 50 districts in 2009; 35,000 households are targeted in 50 districts by 2010; 50,000 households in 70 districts by 2011; 115,000 households in 100 districts in 2012; and 164,370 households in 138 districts beyond 2013.</p>	<p>There have been good response and documentaries to show the successes of the project. However, the before and after events or results will be analyzed soon.</p>

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcome
					65yrs Persons with severe disabilities. It was first piloted in Ghana's 40 most deprived districts.		
School Subsidy Every public primary school receives an amount of GH¢3 (US\$2) 1 per pupil enrolled per year.	Capitation Grants First piloted in 2004. Nationwide in 2005/2006 school academic year. It is a policy of school fees abolition in the form of giving grants to schools. Funded by the GoG and other donors like UNICEF. It is coordinated by the ministry of Education. The maximum number of pupils per school allowable for each year is determined in advanced for audit purposes. The grant is managed by key players like the district director of education, circuit supervisors (provides the day to day supervision and implementation of the school performance improvement plan (SPIP) and head teachers (ensures the effective utilization of the capitation grants) among others.	The problems faced by poor families in paying for their children's school fees are considered in the design of the programme.	Beneficiaries get education, teachers also benefit by getting their salaries in time.	To achieve universal primary education in Ghana and children's right to education ensured.	All registered public basic schools in Ghana. They must be under the Ghana Education Service.	Enrolment of girls increased slightly more than that of boys 18.1%/ 15.3% in 2006.	Enrolment increased by 33.6% for pre-school, 11.4% for primary and 12.1% for Junior high school in the 40 most deprived districts of Ghana. Reports show that each region experienced increase in enrolment with the northern regions having the highest.
School Subsidy To provide one hot meal a day for pre and primary public school children.	Ghana School Feeding Programme It was started in 2005. The government of Netherlands supports the GSFP by co-funding the feeding cost on a 50:50 basis but with an	The inability of children to concentrate and stay in schools due to hunger was highly considered. It is aimed at all children girls and boys.	Beneficiary pupils are to benefit from a de-worming exercise. This is yet to be implemented.	To retain children in school To encourage school attendance and	Targeted at communities with low school attendance rate, low school enrolment, high school drop-out	Began in 10 pilot schools across the ten regions. It currently benefits 987 public schools with a total	Program helped increase enrolment by 20.3% compared to an average of

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Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcome
	annual ceiling. It is coordinated by the ministry of Education and the Ghana Education service			performance.	rates.	number of 477,714 children in all the districts across the country. Sex disaggregated data not available.	2.8% in other schools. Besides, there has been improved attendance by 19.3 percent in schools benefiting from the program compared with 3.2% in non-GSFP schools. The programme has created over 12,000 jobs.
School Subsidy Free school uniforms for one million basic school pupils are allocated for in the 2009 budget.	Free School Uniform Distribution of the uniforms is to be started in Sept 2009. Funded by the GoG. It is coordinated by the ministry of education and the Ghana education service. Delivered by Ghana education service.	The inability of children especially in rural areas to attend school due to the fact that their parents cannot afford to buy school informs for them was highly considered in the design of the programme	Programme is expected to be linked with already existing programmes such as the elimination of child labour, the school feeding programme and the Livelihood Empowerment Against Poverty (LEAP) programme. This link is yet to be determined.	It is part of efforts to relieve burdens on poor parents and encourage attendance in school	Targeted at pupils in deprived communities. Criteria for selection yet to be known.	--	--
Social Service for Disabled Persons Organisation of games and programmes for the disabled people.	The National Association of Disabled People This was started in 2004 by the NPP government. The programme is funded by the GOG, coordinated and delivered by the ministry of youth and sports. Other NGOs and institutions like the Voluntary Services	The limited opportunities available for disabled persons are considered. This programme therefore aims to provide them with a source of income and entertainments.	The very good sportsmen and women amongst them are helped with visa to travel outside for international disabled games if one comes up.	To reduce poverty and integrate the disabled into the society	Mostly disabled sportsmen and women.	--	The general performance of the disabled in Ghana when it comes to sports is not encouraging. The disabled people now meet and have

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcome
	Organization (VSO) work with the ministry to organize games/programmes for the disabled people in the country.		The disabled get good income out of this.				fun. Others share knowledge.
Rehabilitation Service Liberation, emancipation and rehabilitation of female victims/subjects under traditional cultural ritual bondage practices	Liberation and Rehabilitation of 'Trokosi' Victims. Started around 1993. It is funded by GoG, NGOs and international donors. Its advocates use the media, durbars, workshops to inform the public. The victims are given counselling. Legislation done to get the victims released and practitioners jailed.	Gender inequality was highly considered in the practice and seeks to free and rehabilitate the victims.	Establishment of Vocational Training Centre to offer modular skills training to liberated subjects and their immediate dependants. Implementation of micro-credit schemes to support livelihood programmes of subjects. Over 15 schools have been established to offer formal education. Estimated enrolment as at 2007/2008 is 4000 of both girls and boys.	To liberate and rehabilitate female girl victims under traditional ritual practices (<i>Trokosi</i>)	Girls under cultural ritual practices in South-Eastern Ghana (Volta, Greater Accra).	Over 300 shrines with over 5,000 subjects liberated between 1993 and 2008	Over 1000 girls have been trained in income generation ventures. Rehabilitation of liberated subjects in modular livelihoods skills training, counselling and HIV/STIs. Liberated victims are living normal lives in both urban and rural areas. Some are financially independent. Promulgation of the Criminal Amendment Law in 1998 making the practice a criminal Act in Ghana. The practice is now gone underground especially in the Volta region.

(Complementary measures) Complementary basic services and complementary pro-poor or growth with equity macroeconomic policy frameworks

Type of social protection Including amount of transfer/waiver	Programme information Title; timeframe, administrative arrangements (who coordinates the programme, who funds the programme, who delivers the programme)	Programme design Details of whether gender inequality is considered in the design of the programme in general and/or whether the programme addresses any gender specific risks and vulnerabilities	Programme linkages Does the programme link beneficiaries to other programmes or services? Health, education, credit skills, training etc	Programme objectives Including any gender specific objectives	Targeting eligibility Who is targeted and how is targeting done	Coverage How many households or beneficiaries-disaggregated by sex if possible	Results/ outcomes Results of impact evaluations at community, household and intra-household level
Child Care and Development	Early Childhood Care and Development Policy (ECCD) The policy provides a framework for the guidance of government and all stakeholders in their effort to support the survival, protection and development of children in their early years. The overall responsibility for ensuring appropriate and successful policy implementation lies with the Ministry for Women and Children Affairs. To ensure the implementation of the policy and programmes funding is sourced from the ff: Parents, communities, private proprietors/investors, NGOs, development partners, philanthropic organizations/personalities and the government of Ghana.	-	-	To promote the survival, growth and development of all children (0-8 years) in the country.	Targeted at all children	-	-

(Preventative measures) Social insurance

Type of social protection Including amount of transfer/waiver	Programme information Title; timeframe, administrative arrangements (who coordinates the programme, who funds the programme, who delivers the programme)	Programme design Details of whether gender inequality is considered in the design of the programme in general and/or whether the programme addresses any gender specific risks and vulnerabilities	Programme linkages Does the programme link beneficiaries to other programmes or services? Health, education, credit, skills, training etc	Programme objectives Including any gender specific objectives	Targeting eligibility Who is targeted and how is targeting done	Coverage How many households or beneficiaries-disaggregated by sex if possible	Results/ outcomes Results of impact evaluations at community, household and intra-household level
Maternal Health Care To provide free ante-natal and post-natal care to pregnant women and lactating mothers	Free Maternal and Infant Health Care It was started in 2008. Funding was provided from a debt relief fund under the Heavily Indebted Poor Countries (HIPC) initiative. It is partly funded by GoG and the UK government. The UK government gave the GoG £42.5m to start the programme. It is coordinated by the ministry of health and delivered under the national health insurance scheme (NHIS) in all public health facilities, accredited private providers and faith-based health facilities.	Aimed at addressing maternal and infant mortality in the country	Beneficiaries are linked to the NHIS	Aims at achieving the MDG of reducing infant and maternal mortality.	All pregnant and lactating mothers nationwide	Coverage is nationwide	Increased utilization of maternity services. Women now deliver at skilled maternity centres rather than the house decreasing maternal mortality. Since maternal death has fallen, more babies are also being delivered safely. Also the proportion of households falling into extreme poverty as a result of paying for baby delivery services has reduced from 2.5% to about 1.3%.
Health Planning and Services Aims to effectively mobilize community	Community-based Health Planning and Services (CHPS) Was adopted in 1999 Is a national strategy for promoting equitable,	The CHPS brings health services closer to the community especially to poor and vulnerable groups majority of which are women living in rural	Capacity building for health care providers and community members.	To provide community mobilization and participation skills for health officers,	It was first targeted at health providers and community members in deprived areas of the country.	30 districts out of 110 districts started to implement it in 2000. About 104 districts began its	There has been good feedback with the introduction of CHPS especially with regards to reduction in child

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Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
<p>residents and resources to increase coverage improve responsiveness and deliver more equitable and cost-effective health care.</p>	<p>accessible, and quality community-based health services to all in the country. It is coordinated by the ministry of health and the Ghana health service. Other partners include the Population Council, Save the Children, Intrah/PRIME II, JHPIEGO.</p>	<p>areas. It is a primary strategy for reaching the unreached.</p>		<p>behaviour change communication skills for health workers and community members, and to improved quality of primary health services in rural and peri-urban Ghana.</p>		<p>implementation in 2003. It is now nationwide. Sex disaggregated data not available</p>	<p>mortality. Navrongo in Northern Ghana recorded significant decreases in child mortality of 68% in eight years.</p> <p>CHPS has provided amongst others: Community Health Education Skills Toolkit (CHEST Kit) for family planning and child health and Journey of Hope (JOH) tool for HIV/AIDS education.</p>
<p>Health Insurance To provide basic healthcare services to persons resident in the country through mutual and private health insurance schemes. Covers over 95% of diseases that affect Ghanaians.</p>	<p>National Health Insurance Scheme (NHIS) It was established under Act 650 of 2003. The sources of funding include; 1. Premiums from subscribers. 2. 2½% National Health Insurance Levy. 3. 2½% Social Security and National Insurance Trust (SSNIT), deductions from the formal sector. 4. Funds from Government of Ghana to be allocated by Parliament. 5. Returns from investment. It is coordinated by the National Health Insurance Council</p>	<p>The scheme exempts the following from premium payments; 1.70+ 2.Children under 18yrs 3.Formal sector employees 4.The very poor (indigent) 5. Pregnant women from July 2008</p>	<p>-</p>	<p>To provide equitable and universal access to health care for all Ghanaians</p>	<p>All Ghanaians</p>	<p>The scheme covers all the 10 regions of Ghana. The scheme had almost 12,269,503 registered members as at 2008, representing 54% of the population.</p> <p>Sex disaggregated data not available.</p>	<p>Substantial increase in use of formal medical care services for illnesses. There is also a decrease in self treatment and informal care seeking.</p> <p>Premium payments considered as barriers for the poor.</p> <p>Age based exemption for children and the aged have worked as intended.</p>

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
	and delivered by all public health facilities and accredited private providers						
Disaster Insurance Prevention and management of disasters; provision of relief for disaster victims	The National Disaster Management Organization (NADMO) An agency of the Ministry of Interior, Ghana. NADMO coordinates the activities of various bodies in the management of disasters. Funds mainly from the GoG.	Gender inequality is not considered in the prevention and management of disaster in the country. Also, relief is targeted at all affected without any particular consideration for gender	Provides rehabilitation services for persons affected by disasters. Provides training at the community level for the prevention and management of disasters.	To manage disasters and similar emergencies	All persons affected by disaster in the country	Offices at the national, the district and the zonal levels.	Provided disaster relief to victims under the 2008 floods in northern Ghana.

(Transformative Measures) Social equity measures

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
Type of Social Protection Including amount of transfer/waiver	Title; timeframe, administrative arrangements (who coordinates the programme, who funds the programme, who delivers the programme)	Details of whether gender inequality is considered in the design of the programme in general and/or whether the programme addresses any gender specific risks and vulnerabilities	Does the programme link beneficiaries to other programmes or services? Health, education, credit skills, training, etc	Including any gender specific objectives	Who is targeted and how is targeting done	How many households or beneficiaries-disaggregated by sex if possible	Results of impact evaluations at community, household and intra-household level
Social Equity To eliminate child labour in Ghana	National Programme for the Elimination of Worst Forms of Child Labour in Cocoa (NPECLC) The programme started in 2006. Technical and financial assistance is from UNICEF, ILO, DFID, International cocoa initiative, Danish government. The programme is co-ordinated by the programme manager working under the ministry of employment	The programme was designed to protect vulnerable children who may be forced to work on their parents' farms.	Support and rehabilitation of children involved in the Worst form of child labour (WFCL), other poverty reduction programmes in the country like child care and development, LEAP etc	Aimed at reducing the incidence of the worst forms of child labour in cocoa production processes to the barest minimum by 2011, while contributing to the elimination of WFCL from	It targets mainly children in cocoa growing areas of Ghana.	About 1300 children have benefitted from the programme. Sex disaggregated data not available.	Has created a knowledge – based platform and has helped in capacity building. School enrolment is on the increase in cocoa producing areas.

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Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
	and social welfare.			all sectors in the medium to long term			
Social Equity Prevention of domestic violence	Domestic Violence Act 2007 (DVA) To provide protection of women/partners from domestic violence. Funded through Voluntary contributions from government, individuals, NGOS and the private sector. Moneys approved by Parliament for payment into a Fund. It is coordinated by the ministry of women and children's affairs with technical assistance from the Victims of Violence Management Board.	The programme was designed to prohibit all forms of violence that could be meted against women and children. Victims receive free medical support and counseling. Legal aid is also provided to aid them in court	Programme is linked to the Ghana Police Service (DOVVSU), Social Welfare and other agencies. Victims are linked with NGOs and agencies that provide counseling and shelter.	To handle issues of women and children's abuse. To bring offenders to law and to provide support for the victims	Designed specifically to assist abused women and children	DOVVSU offices located in all ten regions of the country.	DOVVSU recorded 11, 471 cases of domestic violence in 2007. Only 10 cases had so far been processed for court due to lack of credible evidence.
Social Equity To reduce and punish human trafficking in the country	Elimination of Human Trafficking (Human Trafficking Act 2005) It is coordinated by the ministry of women and children's affairs, Department of Social Welfare, Ghana Health Service, Ghana Education Service with the human trafficking management board providing technical assistance. It is funded by; voluntary contributions, money that parliament may approve for payment into the fund, grants from bilateral and multilateral sources. NGOs like, US Association for International Migration (USAIM), International Organization of Migration	The programme was designed to prevent both internal and external trafficking of poor and vulnerable persons.	The programme is linked to other poverty reduction strategies like LEAP, school feeding programme, school uniform provision, prevention of domestic violence etc. Rescued victims are provided with employable skills and employment opportunities. Rescued child victims of internal trafficking are taken to government run shelters for 3	To prevent, reduce and punish human trafficking. To rehabilitate and reintegrate trafficked persons	All persons, women, men and children	Country wide but started along the Volta lake where children were being trafficked on a large scale	Hundreds of children have been liberated, counseled and sent to school. Low reporting rate. Between 2000 and 2004, only 8 cases of child trafficking were reported to the DOVVSU. The practice still continues but on a lower rate than before 2005.

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
	(IOM), Christian Council of Ghana, Friends for Human Development, World Vision and Association of People for Practical Life Education. (APPLE)		<p>months before reuniting them with their parents. They receive psychological care, medical care and basic education.</p> <p>In exchange for the safe return of the children, the IOM offer parents/fishermen new up-to-date equipment, micro credits and training to enable them become financially self-sufficient.</p>				
<p>Affirmative Action Policy To improve women's participation in leadership and gender integration in public life.</p>	<p>Ghana Affirmative Action Policy Formulated after Beijing to ensure equal participation of women in political life. It is coordinated by Ministry of women and children Affairs and NGOs</p>	<p>The affirmative action proposals were presented in 1998 as recognition of the limited participation rate of women in decision making. It was designed to ensure power sharing and to increase women's participation in decision making. Quota is given as to the number of women that have to be represented in public institutions like parliament, executive etc</p>	<p>Promotion of girls' education as part of free compulsory basic education (FCUBE), prevention of domestic violence,</p>	<p>The policy was to ensure 40% representation of women in decision-making and executive positions at all levels of government, Allocation of a 50% quota of female government appointees to the District Assemblies, Establishment of a women's desk in all ministries, department and agencies,</p>	<p>All women in Ghana</p>	<p>-</p>	<p>Women still constitute less than 10% of principal actors in decision making in the country. Women participation in politics was generally low, increasing at a pace of 0.5 % per year. In 2008, women parliamentarians constituted 11%, a 1.5 % point increase over the previous 9.5% in 2007. Currently, women constituted only 5.8% of cabinet</p>

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Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
				Promotion of girls' education as part of free Compulsory Basic Education Increased enrolment of girls at the tertiary level.			positions and 20% of ministerial positions; women occupy only 17% of chief directors' positions. They comprise only 12% of the council of State. Only 8.3% were in ambassadorial positions, 8.7% of the district chief executives and 10% of total assembly members in the 138 districts in the country

(Promotive measures) Public works programmes and productive transfers

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
Including amount of transfer/waiver)	Title; timeframe, administrative arrangements (who coordinates the programme, who funds the programme, who delivers the programme)	Details of whether gender inequality is considered in the design of the programme in general and/or whether the programme addresses any gender specific risks and vulnerabilities	Does the programme link beneficiaries to other programmes or services? Health, education, credit, skills, training, etc	Including any gender specific objectives	Who is targeted and how is targeting done	How many households or beneficiaries-disaggregated by sex if possible	Results of impact evaluations at community, household and intra-household level
Micro Finance To serve micro and small entrepreneurs with loans, deposits and other financial services that enables them to increase their income and help	Sinapi Aba Trust (SAT) Christian microfinance organization founded in 1994.	Gender inequality is highly considered. Majority of the loan recipients are women.	Beneficiaries benefit from specialized business training in entrepreneurial skills, basic accounting, savings tips, and credit acquisition. In addition, SAT	To provide loans which will serve as the mustard seed through which opportunities for enterprise development and income	The active poor	From 1 to 15 Branches nationwide: Started with one branch in Kumasi and has increased branch network nationwide to 15 namely: Kumasi,	Impact study (available at SAT)

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
transform their lives. Average loan size is \$609.			partners with health institutions to educate clients on socially related issues that affect their lives, such as AIDS education, nutrition, and family relationships	generation are provided to the economically disadvantaged , but active poor, to transform their lives.		Offinso, Mampong, Akomadan, Kasei, Tachiman, Sunyani, Tamale, Bolgatanga, Wa, Koforidua, Accra, Ho, Cape Coast, and Takoradi There are 76,000 active clients. Women receive 82.6% of the loans.	
Micro Finance Alongside the introduction of improved technologies, manufacturing processes and products is the provision of loans for equipment acquisition and working capital, engineering design. GRATIS together with ITTUs provide short and long term training for over 8,000 people annually. Over one million Ghanaian cedis (GBP £250,000) of loans disbursed to graduates	The Ghana Regional Appropriate Technology Industrial Service (GRATIS) Project This project was established in 1987. GRATIS coordinates a network of Intermediate Technology Transfer Units (ITTUs). Funding comes from the GoG, the EU and CIDA. Funding for specific projects is provided by the GTZ and DFID. Delivered by ITTU.	Gender inequality in access to credit is considered but not a goal of the project.	Young people, especially women are trained in the art of dyeing and printing to produce quality batik for the local and international market.	The objectives are to promote small scale industrial growth; to improve incomes and employment opportunities, to enable micro, small and medium enterprises to increase productivity.	The scheme gives a start up loan to GRATIS graduates to begin work	GRATIS operates through a network of Intermediate Technology Transfer Units (ITTUs) in nine regions of Ghana	Graduates are self employed in income generating ventures especially those in the batik and tie-and-dye industry. Steady income after graduation compared with those without training.
Micro Finance Created as part of	The Microfinance and Small Loans Centre	Women are given 'priority' under	Linked to all employment and	The main objective is to	It is targeted at all individuals	A 2006 estimates states	---

Gendered Risks, Poverty and Vulnerability in Ghana

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
<p>poverty reduction strategy programme. It is a policy agenda for poverty reduction and economic growth laid out by the GoG and the World Bank. Individual beneficiaries receive between USD 1,025 and USD 2,562 and will pay an interest rate equal to the Bank of Ghana's prime rate of 16 % with another 2.5 %. Groups receive USD 2,562 to USD 20,500 and pay a 10 % interest rate. In addition, groups will be given a month grace period. Only those individuals involved in agriculture ventures will be given a year's grace period on interest payment</p>	<p>(MASLOC) The MASLOC was established in 2004 to manage the NPP government's micro and small credit programs. The scheme is to administer, coordinate and monitor microcredit schemes in the country and to make sustainable financial services available to all individuals, co-operatives and other groups in grassroots communities in Ghana. The World Bank is the major financier of the programme.</p>	<p>MASLOC's policy</p>	<p>poverty reduction programmes in the country</p>	<p>help the poor especially women generate wealth, save and expand their mini-enterprises thereby leading to urban and rural poverty reduction.</p>	<p>and groups of all trades who need financial assistance to start or expand their businesses.</p>	<p>that about 279,000 women in Ghana had benefited from the programme.</p>	
<p>Public Works Provision of Affordable Housing</p>	<p>Affordable Housing Programme The programme started in 2005. It is solely co-ordinated by the ministry of works and housing with funding from the GoG and other foreign donors like EXZIM bank.</p>	<p>The government's affordable housing programme is aimed at providing affordable housing for both men and women. No specific gender considerations.</p>	<p>-</p>	<p>To create affordable housing and as such create jobs for the people. Aim at creating jobs for tradesmen, women who</p>	<p>The general population is targeted. The project aims at designing disabled access housing unlike orthodox housings</p>	<p>There is supposed to be construction sites at the various regional capitals, but now sites are only located in Accra, Kumasi,</p>	<p>A total of 50,000 flats/blocks have been put up under this scheme and more than 20,000 people have been engaged as workers. All flats are located in the</p>

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Type of social protection	Programme information	Programme design	Programme linkages	Programme objectives	Targeting eligibility	Coverage	Results/ outcomes
	It is delivered by the ministry of works and housing, NGOs like the Habitat for Humanity Ghana (HFHG) and CHF International.			deal in food-staff, artisans and contractors (Ghanaians) who later employ others too.(e.g. labourers, masons, Carpenters etc. to curb haphazard building in the country and decrease rent advance payment	structures that does not consider disabled persons.	Tamale, Wa and Koforidua.	urban areas. There is no result yet. Past programmes showed that the rich and well to do in society always take hold of the system. The poor are not reached.
Inputs Transfer To provide employment for the youth through the provision of agriculture inputs.	Youth in Agriculture Project. In the 2009 budget, GoG proposed a Youth in Agriculture Project that aimed at training 1200 youth in agri-business, supporting 7,000 youths with inputs to cultivate 5600 ha of maize, rice or sorghum in 70 districts in the country. With this programme interested youths are provided with land, fertilizers, seeds and herbicides/ weedicides to venture into agriculture. It is coordinated and part delivered by the ministry of food and agriculture. The inputs are to be delivered at district level.	The programme is designed to support interested youths as such gender equality is not considered.	All other poverty reduction strategies in the country	To inculcate in the youth the need to get involved in agriculture. Serves as government intervention to reduce poverty.	The programme targets the youth mainly between the ages of 18-35 years.	Recruitment was made for about 10,000 youth throughout the country to be engaged in agriculture. Kassena-Nankana District in the Upper East Region is assisting over 600 youth who have ventured into agricultural production during the current cropping season.	No data yet

Appendix 2: Research instruments

Life history questions

<p>Key information</p> <p>Aims:</p> <ul style="list-style-type: none">• To explore in-depth individuals' gendered experiences of risk and vulnerability, and the individual, household, community and policy-level factors which shape available coping/resilience strategies• To gain an understanding of the relative importance of the focus social protection programme intervention in diverse individuals' lives <p>Scope:</p> <ul style="list-style-type: none">• Eight life histories among participants per sub-national district for the following life stages:<ul style="list-style-type: none">○ Adolescent (m and f)○ Married (m and f)○ Single-headed hh (m and f)○ Aged (m and f) <p>Data collection and other issues:</p> <ul style="list-style-type: none">• Gift• Recorded, transcribed and English verbatim translation• Field notes on interview dynamics• Interview to last between 60 and 90 minutes <p>Useful resources:</p> <ul style="list-style-type: none">• 'Report on CPRC workshop: Panel Surveys and Life History Methods'. See especially page 8 (Figure 2, Life History Diagram, Bangladesh)

Life history interview questions for adolescents (male and female)

Introductions

- Basic background information (name, age, place of birth, living arrangements etc)
- Explain the objectives of this study and the format of the interview

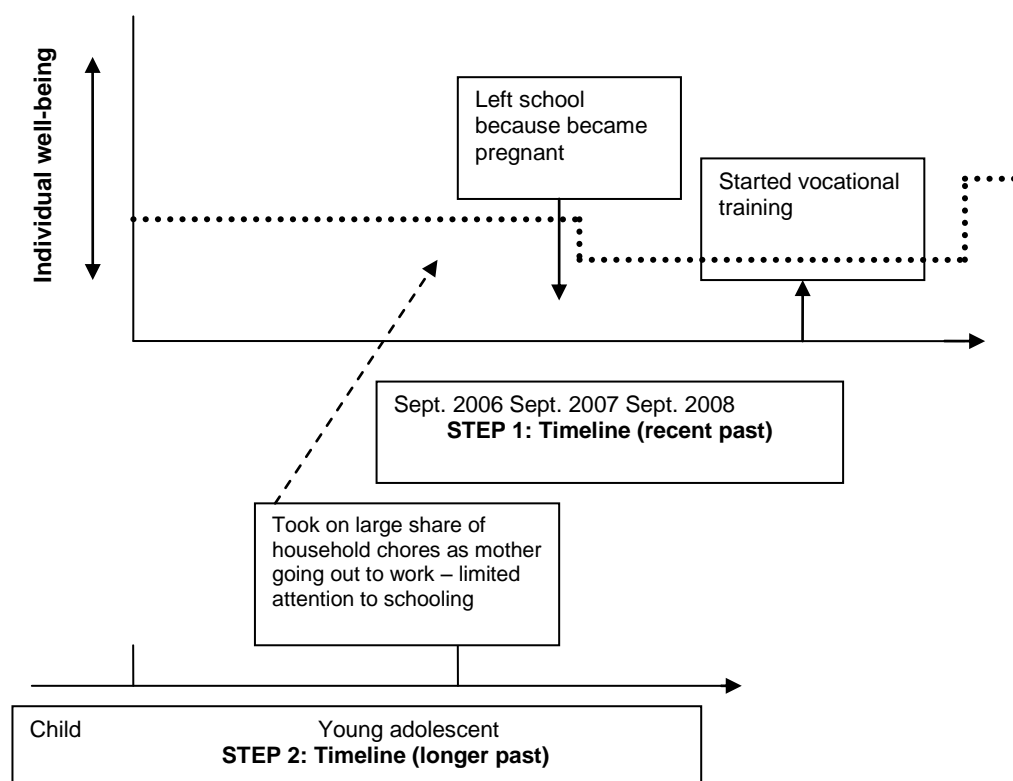
General (optional depending on judgment of lead qualitative researcher in country team)

- What are some of the key challenges that girls/boys [choose the same sex as your interviewee] of your age in this village face? E.g. at the following levels:
 - Individual level (e.g. lack of schooling, health-related problems, hunger, violence, teenage pregnancy)
 - household level (e.g. lack of decision making in the household; unequal allocation of time doing tasks in and out of the household between siblings; unequal distribution of food)
 - Community (lack of participation in community decision making, lack of provision of basic services; lack of opportunities for young people; significant generational differences between old and young)
- Have they always faced these challenges?
- How do people tend to cope with these challenges? E.g.
 - Borrow money (from relatives, friends, micro-finance institutions)
 - Work in paid employment
 - Make different family arrangements (e.g. living with different family members)

Individual recent past

- Can you tell us about your life over the last two or three years?
- Has anything gone particularly well during this period? What have been the positive changes? Who and what was responsible?
- What particular challenges have you faced over the last two/three years?
- Can you explain why you think you face these challenges?
- Have you / your family tried to overcome these challenges? What strategies have you used? How well have these strategies worked?
- Have other families in the village also used these strategies to overcome similar challenges?
- How do you think your options / strategies have been similar or different from girls/boys (opposite sex to interviewee) of the same age?
- Have you been involved in any government or non-government programmes/activities that have helped you overcome these challenges?
- Has the LEAP provided specific support to overcoming these challenges? If no – why not? If yes - in what way?

Interviewer draws key events on a timeline over the past two/three years in order to summarise content (STEP 1 in diagram below).



Longer past

Interviewer uses a longer visual timeline to prompt the discussion around the longer past (e.g. interviewer draws a longer timeline underneath the one above (shorter timeline) and draw arrows between the two to show connections) (STEP 2 in diagram above).

- Thinking back to when you were younger, can you map out **key events** in your life up until now (positive and negative) that have influenced the type of choices you have made or the alternatives you've had? Why have these been important?
 - At individual level (e.g. schooling, health)

- Household level (e.g. livelihood opportunities; available household resources; decisions in the household to spend on schooling, health, income generating; changes in the family (birth, death, marriage, divorce etc));
- Community level (e.g. discrimination/exclusion from community activities or resources; exclusion from participating in community decision making, violence)
- How has the way you and/or your family lived life until now influenced the way you deal with the challenges you identified before?
- Do you ever think that if you had made a different choice before, your life would be different now? What would you have done differently?

Future plans

- Given your present circumstances what are you planning to do in the short term? What are your longer term plans?
- How do you think your options are similar or different from someone from the opposite sex of the same age?
- To what extent can the LEAP help you achieve your short term and long term plans?
- How would you change the social protection programme to better meet your needs?
- Is your view the same as others in the household or do different members have different opinions?

Life history questions for married/single/aged (male and female)

Introductions

- Basic background information (name, age, place of birth, living arrangements etc).
- Explain the objectives of this study and the format of the interview

General

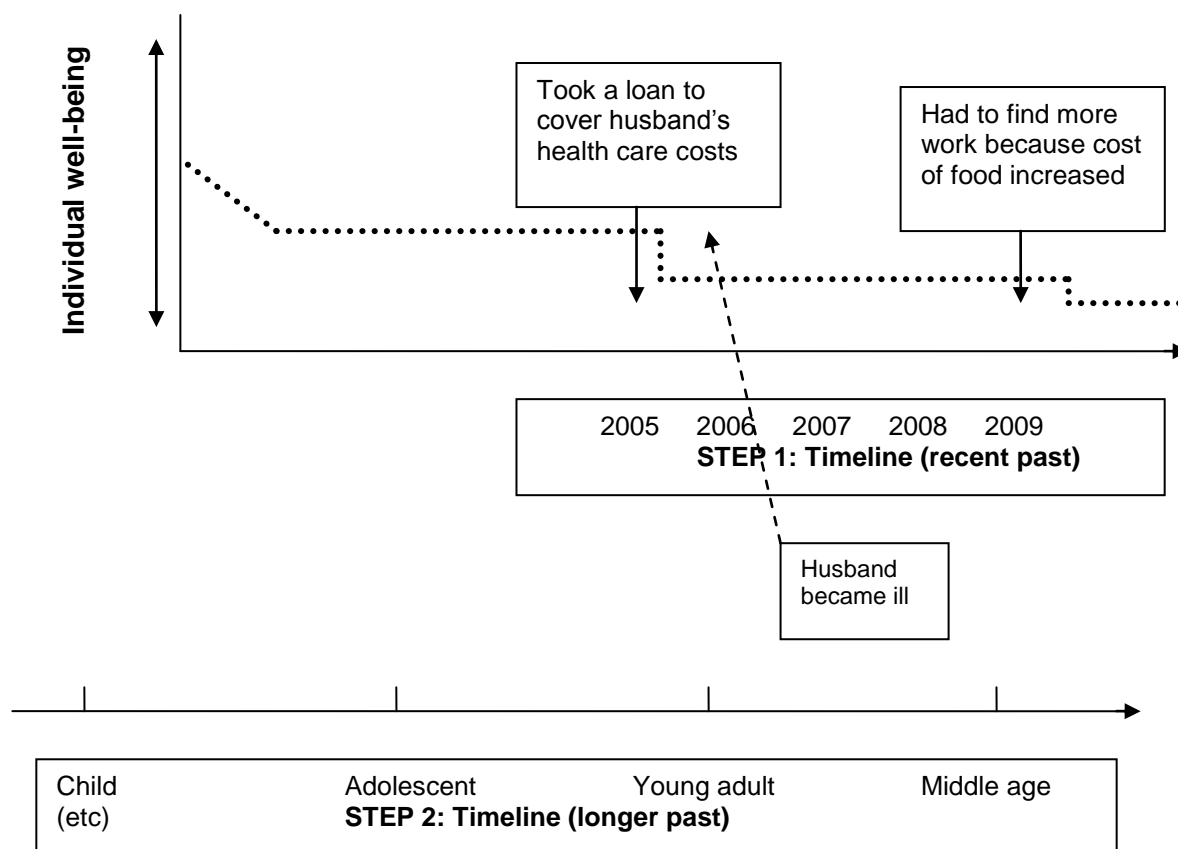
- What are the some of key challenges that women / men [choose the same sex as your interviewee] your age in this village face?
 - individual level (e.g. lack of schooling, health-related problems, food insecurity, violence, lack of ownership of assets (e.g. land, livestock, housing))
 - household level (e.g. lack of decision making in the household over household expenditure e.g. on productive activities, on health and education, on food; unequal allocation of time e.g. in domestic and care responsibilities and income generating activities; unequal distribution of food in the household)
 - Community (lack of participation in community decision making, lack of provision of basic services)
- Have they always faced these challenges?
- How do people tend to cope with these challenges?

Individual recent past

- Can you tell us about your life over the last two or three years?
- Has anything gone particularly well during this period? What have been the positive changes? Who and what was responsible?
- What particular challenges have you faced over the last five years?
- Can you explain why you think you face these challenges?
- Have you tried to overcome these challenges? What strategies have you used? How well have these strategies worked?
- Have other families in the village also used these strategies to overcome similar challenges?
- How do you think your options / strategies have been similar or different from women / men [choose opposite sex to interviewee] of the same age?
- Have you participated in any government or non-government programmes/activities that have helped you overcome these challenges?

- Has the LEAP provided specific support to overcoming these challenges? If no – why not? If yes - in what way?
- Over these last five years has anything gone particularly well? What have been the positive changes? Who and what was responsible?

Interviewer draws key events on a timeline over the last five years in order to summarise content. STEP 1 in diagram below.



Past

Interviewer uses the visual timeline to prompt the discussion around the longer past (e.g. interviewer draws a longer timeline underneath the one above (shorter timeline) and draw arrows between the two to show connections). STEP 2 in diagram above.

- Thinking back to when you were younger, can you map out key events in your life up until now (positive and negative) that have influenced the type of choices you have made or the alternatives you've had?
 - At individual level (e.g. schooling, health)
 - Household level (e.g. livelihood opportunities; available household resources; decisions in the household to spend on schooling, health, income generating; changes in the family (birth, death, marriage, divorce etc));
 - Community level (e.g. discrimination/exclusion from community activities or resources; exclusion from participating in community decision making)
- How has the way you have lived your life until now influenced the way you deal with the challenges you identified before?
- Do you ever think that if you had made a different choice before, your life would be different now? What would you have done differently?

Future plans

- Given your present circumstances what are you planning to do in the short term? What are your longer term plans?
- How do you think your options are similar or different from someone from the opposite sex at the same life stage?
- To what extent can the social protection programme help you achieve your short term and long term plans?
- How would you change the social protection programme to better meet your needs?
- Is your view the same as others in the household or do different members have different opinions?

Focus group discussions

Key information

Aims:

- To understand the strengths and weaknesses of the implementation of the focus social protection intervention
- To understand the strengths and weaknesses of the focus social protection intervention in terms of shaping community experiences of inclusion/ exclusion and/or discrimination

Scope:

- 4 FGDs (2 men, 2 women) per sub-national unit with programme participants

Data collection required:

- Maximum 75 minutes
- Provision of snacks
- One person leading
- One person recording identity of participants and the sequence in which they speak
- One translator for ODI team
- Detailed notes from discussion around the four questions including areas of debate among participants and dominant opinion among participants for each question
- Observation of group dynamics

Useful resources:

- Slater, R. and Mphale, M. (2008) Cash transfers, gender and generational relations: evidence from a pilot project in Lesotho. See especially Annex 2.

Focus group discussion: Key questions/themes and suggestions for prompts

- 1. What have been the direct impacts of the social protection programme on the household?**
 - Improving economic security
 - Improving food consumption (quality and quantity)
 - Helping to provide better protection and care for household members
 - Improving household human capital
 - Providing adequate protection from the impacts of shocks (e.g. community and idiosyncratic shocks)
- 2. What have been the indirect impacts of the social protection programme on the household?**
 - Has participation in the programme influenced power relations between men and women? Between generations? How and why?
 - Has participation in the programme influenced access to social capital (formal and informal)?
 - What impact does the programme have on child well-being?
 - Impact on access to credit services
 - Reduce impact of seasonality
- 3. What have been the direct impacts of the social protection programme on the community?**
 - Increased access to/utilisation/accumulation of community assets – for whom?
 - Increased utilisation of social services

4. What have been the indirect impacts of the programme on the community?

- Better quality basic social service
- Increased civil society agency to demand entitlements – representing which types of groups?
- Increased government responsiveness to citizen demands
- Reduced exclusion of marginalised social groups
- Negative impact on community E.g. exacerbating existing community tensions
- Tensions between women in different social groups

N.B. For analysis, refer back to conceptual framework levels: individual, household and community

Household survey on gender and social protection (Ghana)

Instructions

1. Who? This questionnaire should be answered by caregivers/beneficiaries of the LEAP programme who are either:
 - a. Female heads of household or
 - b. Adult women or men who are either household head or partner of the household head. Please ensure proportion of respondents from categories in a) and b) is proportionate to the proportion of female headed households who are programme beneficiaries in the district.
2. How should households be selected? Based on the register of LEAP beneficiaries, select households that are not neither extremely poor nor transient poor (middle poor) but be sure to fulfil the quota of a).
3. How much time? We envisage approximately 1 hour per survey (max 1.5 hours) and that one researcher can complete 5 surveys per day
4. Use the surveys to help you select the life history case studies – all life histories should be a member of a household who was surveyed
5. Financial incentive structure of 2.20 Ghana Cedis per household is provided.

A. BASIC HOUSEHOLD PROFILE (defined by: sleep under the same roof/compound and eat from the same kitchen)

1. Head of household tick 1 () if male 2 () if female
2. Name of location
 - 2.1 Region = _____; 2.2 District = _____; 2.3 Name of town/village = _____
3. How long have you lived in this community? _____
 1. 01 = less than one year
 2. 02 = between one and five years
 3. 03 = more than five years
4. Are you a member of the LEAP Programme?
1= Yes; 2= No
5. **Household roster:** For all hh members (including respondent) please fill out this table:

Member id	Name of the household member	Relationship of Respondent to HH members (See code 1)	Sex 01=M 02=F	Age In completed years	Marital status (see code 2)	Highest education level achieved (see code 3)	Religion (see code 4)	What does each household member do? (list up to 3 activities in order of how much time is spent) (Use code 5 on page 3)		
								Activity 1	Activity 2	Activity 3

1										
2										
3										
4										
5										
6										
7										
8										
9										
10										

Code 1: Relationship 01=father 02=mother 03=aunt 04=uncle 05=brother 06=sister 07=son 08=daughter 09=grandson 10=granddaughter 11=inlaw 12=wife 13=husband 14=other (state)

Code 2: Marital status: 01=single; 02=married; 03=divorced/ separated; 04=widowed; 05=cohabitation; 06=polygamous relationship (record number of wife)

Code 3: Education level 01= Pre-school 02=Primary 03=Junior high school; 04=Senior High school; 05=Tertiary education; 06=vocational training; 07= middle school 08=religious education; 09=adult literacy; 10=illiterate

Code 4: Religion: 01=Orthodox Christian 02=Muslim; 03=no religion 04= protestant; 05=Animist; 06=Catholic; 07=Hindu; 08=Buddhist; 09=Other (state)

Code 5. Activity

Agriculture	Non-agriculture	Unemployed or unpaid
01 – self-employed (food)	07 – self-employed (manufacturing)	13– unemployed
02 – self-employed (non-food/cash crop)	08 – self-employed (business)	14 – household chores
03 – aquaculture	9 – self-employed (services)	15 – care of household dependent (sick, disabled, child, elderly)
04- livestock	10 – wage employment	16 – begging
05 – wage employment	11- regular waged employment	17 – schooling
06 – other (specify)	12 – other (specify)	28- play
		19- unpaid herding
		20– other (specify)
21 – public works programme		

6. Does your household own farmland? _____ 1= yes; 2= No. If no, skip to Q8.

7. If yes, please indicate the type of land.
1=Agricultural 2=Commercial 3=Residential 4=others

8. **Household assets** (fill in code 6 below):

- a. Livestock _____
 - a.1 Which ones? _____
 - a.2 How many of each? _____
 - b. Equipment (e.g. farming inputs) _____
 - c. Transport _____
 - d. Communication tools _____
 - e. Toilet type _____
 - f. Drinking water _____
 - g. Number of living rooms in house _____
 - h. Savings (in bank, farm produce storage, credit group, susu) _____
- If yes, how much have you saved in Ghana cedis or/and in farm produce storage? _____
- i. Do you have loans/credits? _____
 - What is the value of these loans? _____
 - j. Other _____

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Code 6

Livestock 1=yes 2=no	How many of each?	Equipment	Transport	Communication tools	Toilet type	Drinking water	Number of living rooms in house	Savings in bank	Savings in forms of storage of farm produce	Loans/credits (e.g. in forms of farm inputs/ services, money) 1=Yes 2=no. If yes, how much -----and can you make the payments?
01=poultry		01= hoes	01=working bicycle	01=working mobile phone	01= forest/field/ open place	01= well	01=1 room	01=yes. If yes how much-----	01=yes. If yes how much? --- -----	01=yes can make payments
02=sheep		02=water pump	02= animal and cart	02=working landline phone	02= neighbours/ relatives – latrine	02=mechanised borehole	02=2 rooms	02=no	02=no	02=no can't make payments
03=cows		03=animal plough	03= horses	03=radio	03=own pit latrine	03=piped into dwelling	03=3 rooms			03= don't know if I can make payments
04=oxen		04=Cutlass	04=donkey	04=TV	04=Public latrine	04=piped into neighbours or relatives' dwelling	04=4 or more rooms			
05= mules		05=pest spraying machine	05= public transport		06=water closet	05=public standpipe				
06= donkeys		06=tractor plough	06= motor bike		05=none	06=protected well				
07= goats		07= other farming equipment-specify	07=walking			07=stream				
08 = other, specify						09= dam				
						10=rainwater collection				
						11=Sachet water				
						12= water bought from tankers				

9. Do you own the house you live in? (e.g. family property, non-rented), (1=yes; 2=no)
If no skip to question 14

10. If yes, materials from which WALL of the house is made

- 1= Brick/concrete/stone
- 2= Adobe/mud
- 3= Wood/branches
- 4= Galvanized iron
- 5= Matting
- 6= Other: specify_____

11. Materials from which the ROOF is made

- 1= Straw/thatch
- 2= Earth/mud
- 3= Wood/planks
- 4= Galvanised iron
- 5= Concrete/ cement
- 6= Tiles/slates
- 7= Other: specify_____

12. Materials from which the FLOOR is made

- 1= Earth
- 2= Wood
- 3= Stone/brick
- 4= Cement/tile
- 5= Laminated material
- 6= Other: specify_____

13. What is the main type of fuel you usually use for cooking?

- 1= Firewood
- 2= Kerosene/paraffin
- 3= Charcoal/coal pot
- 4= Gas/electricity
- 5= Cow dung
- 6= None
- 7= Other: specify _____

14. What is the main type of energy source you usually use for lighting

- 1= Lantern
- 2= Candle
- 3= Gas
- 4= Electricity
- 5= None
- 6= Other: specify_____

B. SOCIAL CAPITAL

15. To what kind of groups do members of your household belong? (fill 1= if yes; 2= if no in each box) Take member id from Q5

Member id (from Q5)	Religious organisation	Savings/ credit group (eg. susu)	Trade organisation (eg. Millet sellers association)	Women's association	Youth association	Peasants association	Labour union	Self-help group	Other – please specify	No involvement
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										

16. Who can you rely on for support (financial, personal, in-kind) in hard times? (Mark 1 = yes ; 2= no) (Fill for only household members above 15 years; refer to list of HH members in question 5)

Member id (from Q5)	Extended family members	Neighbours	Religious organisation	Local NGO	Self-help group	Savings/ credit group	Women's Association	Peasant association	Youth association	Traditional authority	Community leader	Work colleague	Other
1													
2													
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

C. KEY TYPES OF RISKS AND VULNERABILITIES

C1. Tangible/ economic risks

17. Has your household suffered from any of the following types of vulnerabilities over the last five years? Are particular family members more affected than others? If so, who?

Types of vulnerabilities (codes for risks)	1=Yes; 2=No	extent of effect 1=small; 2= medium; 3= high	Which family members are affected the most (list up to three member ids from Q 5)		
			mem code	mem code	mem code

Types of vulnerabilities (codes for risks)	1=Yes; 2=No	extent of effect 1=small; 2= medium; 3= high	Which family members are affected the most (list up to three member ids from Q 5)		
			mem code	mem code	mem code
1. Environmental vulnerabilities					
1.1 = pollution (e.g. dust, domestic smoke, vehicular etc)					
1.2= deforestation					
1.3=droughts					
1.4=floods					
1.5= death of livestock					
1.6=outbreak of insect and pests					
1.7= Others (specify)					
2. Economic vulnerabilities – a lack of:					
2.1. =employment					
2.2=regular employment					
2.3=adequate pay					
2.4= access to credit					
2.5=access to land					
2.6=access to productive assets					
2.7=access to markets					
2.8=access to extension services					
2.9=access to affordable education services					
2.10=access to affordable health services					
2.11=access to affordable vet services					
2.12= secured livelihood (note: leap promised secured livelihood)					
2.13=peace (e. g. ethnic clashes, tribal and political unrests)					
2.14=Others (specify)					
3. Lifecycle events – costs associated with:					
3.1= marriage ceremonies					
3.2= religious festivals (e. g. Islamic festivals, traditional festivals, Christmas)					
3.3=funerals					
3.4=birth of another child					
3.5=death of a family member					
3.6=serious acute illness of a family member					
3.7= serious chronic illness					
3.8 = other					

C2: Social risks

18. In every family some household members are in need of more support than others. Do you have family members who fall into the following categories? In your family who is (are) the main care-giver(s) for the following and for how many hours a week?:

	Yes/No? If yes, how many?	Main care giver? (give code from q5)	Hours per day spent caring for this category of family member (refer to q5 for activity of HH member)

To What Extent is the LEAP Cash Transfer Programme Making a Difference?

1	Infants (0-3)			
2	Young children (3-11)			
3	Adolescents (12-18)			
4	Sick adults			
5	Disabled			
6	Aged			
7	Other			

19. In many families there are tensions and conflicts between men and women and young and old. In your household what are the key sources of these tensions/conflicts? Who are these tensions between?

Tension code	Types of tensions/conflicts	1=Yes; 2=no	If Yes, between whom? 01 – husband and wife 02- children and parents 03 – children and grandparents 04 – daughter and mother-in-law 05 – daughter and father-in-law 06 – Son and parents-in-law? 07- other, specify
20.1	Control over resources	If yes which resources? 01=land 02=food 03=housing 04=money 05=livestock 06=others specify	
20.2	Decision making on expenditure		
20.3	Care/responsibility of children/sick/elderly		
20.4	Distribution of domestic responsibilities		
20.5	Decision-making over mobility		
20.6	Decision making over labour allocation		
20.7	Decision making about government or NGO programme participation		
20.8	Other, specify		
20.9	No tensions in household		

20. Does your household face any of the following types of social discrimination?

	1= yes; 2=no
Religion	
Ethnicity	
HIV/AIDS status	
Polygamous household status	
Poverty status	
Migrant status	
Female headed household status	
Political affiliation	
Barrenness/infertility	
Late marriage	
Having no son	

21. Has your household experienced any other big changes or events in the last year? (e. g. global food crises, high fuel prices)
a. What have been the two most important changes? (positive or negative)

- i. -----
- ii. -----
- b. What caused these changes?
 - i. -----
 - ii. -----
- c. Have things got better or worse overall? _____
- d. Have the changes had the same impact on all members of the household or have they been more significant for some members than others? If so for whom and why?

22. Has your household experienced any other big changes or events in the last year? (e. g. global food crises, high fuel prices)

- a. What have been the two most important changes? (positive or negative)
 - i. -----
 - ii. -----
- b. What caused these changes?
 - i. -----
 - ii. -----
- c. Have things got better or worse overall? _____
- d. Have the changes had the same impact on all members of the household or have they been more significant for some members than others? If so for whom and why?

D. COPING STRATEGIES

23. Summarising from the previous section (see q18), what are the 2 most important tangible risks/challenges your family has faced over the last five years?

- a.
- b.

24. Summarising from the previous section (see qs18-22), what are the 2 most important social/intangible risks (e.g. time poverty, a lack of social capital, social discrimination, intra-household conflicts) your family has faced over the last five years?

- a.
- b.

25. For each of your four biggest risks (2 tangible and 2 social/intangible), what the main coping mechanism did you employ?

(1=yes; 2= no)
(use codes from questions 18).

	Risk 1 Code=____	Risk 2 Code=____	Risk 3 Code=____	Risk 4 Code=____
1. Received government / NGO support				
- Received a cash transfer [e. g. leap]				
- Received an asset transfer [name]				
- Enrolled in public works programme [name]				
- Enrolled in social insurance programme (health, agriculture) [name]				
2. Undertook more paid work				
3. Undertook more unpaid work				
4.Reduced food consumption quantity for				
• Adult males				
• Adult females				

	Risk 1 Code=_____	Risk 2 Code=_____	Risk 3 Code=_____	Risk 4 Code=_____
• Female children				
• Male children				
5.Reduced quality of food consumed for				
• Adult males				
• Adult females				
• Female children				
• Male children				
6. Relied on social networks for food, money or support				
7. Joined a group to which you previously didn't belong				
8. Joined a rights-based group				
9. Migrated				
• Adult males				
• Adult females				
• Female children				
• Male children				
10. Developed a new group				
11. Distress sale of assets. What was sold? To which family member did it belong? (use codes from question 5)				
12. Increased indebtedness				
13. Withdrew girls from school				
14. Withdrew boys from school				
15. rely on social networks for protection and emotional support				
16 rely on family members for protection and emotional support				
17. rely on children to take on more of household responsibilities				
20. other				
21. Nothing				

26. In order to cope with these risks, based on what we have just talked about your family has used the following main coping strategies [*summarise what interviewee has explained so far*].

- a. _____
- b. _____
- c. _____

However, we know that in some cases these types of coping mechanisms are not available or do not work. For example, in some places, some individuals or families might be forced to break up, desert certain members, abuse certain members, agree to send children away to work or for marriage, perpetrate physical, sexual, psychological violence against girls.

- a. What types of problems like this are you aware of in your community? List three key problems.
 - i. _____
 - ii. _____
 - iii. _____
- b. How widespread to you think these behaviours are in your community?

	Problem 1	Problem 2	Problem 3
01=not at all 02=a little 03=relatively widespread 04=widespread			

E. CONDITIONALITIES AND LINKAGES OF SOCIAL PROTECTION PROGRAMMING

27. We know that as a LEAP beneficiary household you must fulfil some conditions. Which of the following conditions have you fulfilled and which household member is responsible for them? (fill 1= if yes; 2= if no in each box) Take member id from Q5

Member id from Q5	eliminate worst forms of child labour	register for the National Health Insurance Scheme (NHIS)	register all births and deaths in the household	ensure that all school going age children are in school	attend post natal clinics	complete all (EPI) immunizations	Others please specify
1							
2							
3							
4							
5							
6							
7							
8							
9							

28. Does the LEAP programme link you to other complementary services? (Fill 1=Yes 2=No)
If yes which programmes?

- 1=Health
- 2=Education
- 3=Skills/job training
- 4=Engagement in income generating activities (eg. NYEP)
- 5=Others: Specify

29. IMPACT OF SOCIAL PROTECTION PROGRAMMING

30. What impact has your involvement in the LEAP Programme had on your household and household members' experiences of vulnerability and risk?

Member id (from q5)	Since when have you been involved in LEAP 1= One month or less; 2= Six months or less ; 3= Up to one year 4=Up to two years; 5=Three years or more	To what extent has LEAP made a difference to tackling the risks identified above for the following family members? 1=High; 2=Medium; 3= Low; 4=No impact	What have been the positive impacts of LEAP? (use Code 16.1)	What have been the negative impacts of LEAP? (use Code 16.2)
1				
2				
3				
4				
5				

6				
7				
8				
9				
10				
11				
12				

<p>Code 16.1 : positive impacts of LEAP</p> <ol style="list-style-type: none"> 1. Improved livelihood security 2. Improved household consumption 3. Improved access to basic health services 4. Improved access to basic education services 5. Improved access to extension services 6. Improved access to credit 7. Decreased household tensions between men and women 8. Decreased household tensions between young and old 9. Reduced women's time poverty 10. Improved participation in the community 11. Improved women's decision-making power within the household 12. Reduced social exclusion in the community 13. Other 	<p>Code 16.2 : negative impacts of LEAP</p> <ol style="list-style-type: none"> 1. transfer is inadequate since inception 2. transfer has become inadequate (e.g. after the rise in fuel prices, food costs) 3. conditionalities are too time-consuming to comply with 4. it only benefits one type of family member (not the whole household) 5. it provides a stop gap measure but does not lead to sustainable change 6. it creates tensions between men and women, children and adults 7. it aggravates existing tensions between men, women, adults or children 8. it aggravates time poverty 9. it is stigmatising 10. it is not flexible to existing household activities 11. it is not flexible to existing productive activities 12. it has not adequately addressed prevailing social norms/ attitudes 13. another type of transfer/programme would be more suitable 14. other
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Key informant interviews

Key information

Aims:

- To enrich our overview of social protection design and evaluation decision-making processes
- To explore political economy dimensions of the integration of gender into social protection policies and programmes
- To better understand implementation dynamics (of the above) at the sub-national level

Scope:

- National level GOs, NGOs, int'l agencies and donors
- Sub-national implementing agencies (GOs and NGOs)

Data collection required:

- Detailed notes about content of interviews in terms of our key questions above
- For issues relating to framing of social protection debates we require *verbatim* notes
- Recorded tape (preferable for back up purposes)
- Brief field notes describing interview dynamic and other relevant information
- Full list of key informants details – position, organisation name, where they fit in alignment influence matrix

Useful resources:

- DFID (2009) Political Economy Analysis How To Note

Key informant interviews at national level

1. Stakeholder analysis

- a. Map key social protection stakeholders according to the stakeholder analysis figure below (aligned and powerful). Include governmental, international and national agencies.
- b. Map women's agencies machineries – e.g. from national government level to local level (e.g. gender focal points)

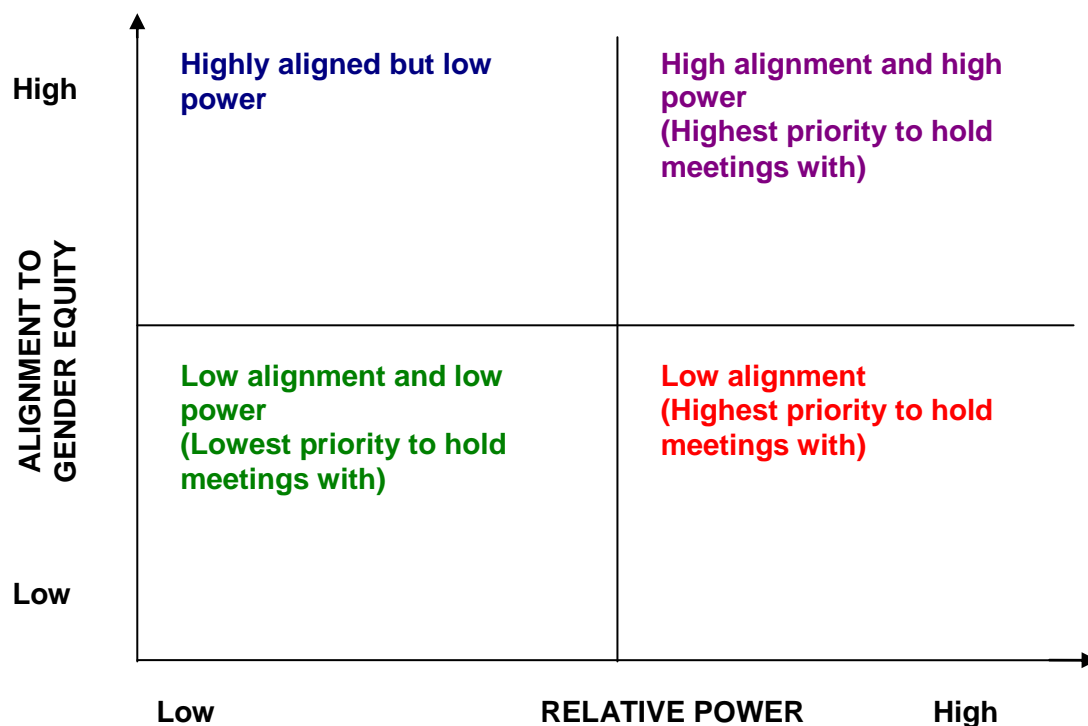
2. Key informant interviews – who to interview

- a. Refer to stakeholder analysis figure and prioritise meetings with “powerful” stakeholders (aligned and non-aligned)
- b. Identify who to talk to in an institution/organisation by starting with existing contacts and using the snowballing technique (asking them to refer you to other individuals in a given institution/organisation)

3. Semi-structured interview questions

- a. If you are unsure of whether the institution/organisation/individual is aligned or non-aligned, ask the non-aligned questions first to get an idea (then you can move to the aligned questions if appropriate)
- b. See matrix of questions below to give an idea of the types of questions we need to ask – please add in specific country-focused/specific social protection programme questions if/when appropriate

Key social protection stakeholders



Key informant questions at national level

N.B. In order to avoid standard answers on gender, it is important that interviewers refer back to the background work to identify key gendered risks and vulnerabilities and social risks which can be used to prompt the interviewee to think in more depth and more systematically about gender in social protection policy and design.

NOT ALIGNED Objectives: 1. To understand to what extent gender has been integrated in to the design of social protection policy and programme	Country/Programme-specific additions
<ul style="list-style-type: none"> • What are the main goals of your social protection programme / policy? 	<ul style="list-style-type: none"> •
<ul style="list-style-type: none"> • What factors have been most influential in the development of social protection? (e.g. government priorities, attainment of MDGs, civil society pressure, donor funding). • What are some of the challenges which constrain the scaling up of social protection? 	<ul style="list-style-type: none"> •
<ul style="list-style-type: none"> • To what extent do you think that the types of vulnerabilities and risks your programme is trying to address (e.g. see goals above) have been considered by gender? Can you give some examples? (prompts can be used to refer interviewee to country specific risks and vulnerabilities) 	<ul style="list-style-type: none"> •
<ul style="list-style-type: none"> • To what extent are social risks considered in social protection programmes in your context (can prompt with country specific examples of social risks and vulnerabilities)? What explains your view? 	<ul style="list-style-type: none"> •

<ul style="list-style-type: none"> • What kind of evidence shapes the design and evaluation of social protection policy and programmes? (e.g. poverty data and analysis? disaggregated by gender? Programme M&E?) 	•
<ul style="list-style-type: none"> • With which actors (NGO and GO) do you work most closely on this agenda? 	•
<p>ALIGNED Objectives:</p> <ol style="list-style-type: none"> 1. To identify the pathways (recent and historical) in which gender has been successfully integrated into the design of social protection policy and programming at a national level; 2. To identify the key actors driving the social protection and gender agenda forward; 3. To identify the challenges which have been overcome (or still need to be overcome) to successfully integrate gender into the design and implementation of social protection policy and programme. E.g. political / ideological resistance from other Ministries/departments/organisations? Administrative challenges – e.g. resources, staff capacity, co-ordination? 	Country/Programme-specific additions
KEY QUESTIONS	•
<ul style="list-style-type: none"> • In what ways is gender integrated into the design of social protection policy and programming in your context? Can you provide some specific examples? (Prompts can be used to refer interviewee to country-specific gendered risks and vulnerabilities) 	•
<ul style="list-style-type: none"> • What strategies have been used so far to integrate a gender perspective into social protection design? 	•
<ul style="list-style-type: none"> • What are the challenges/ tensions involved in enhancing the integration of gender into social protection policies and programmes? 	•
<ul style="list-style-type: none"> • What are the potential opportunities for strengthening gender sensitivity of social protection design and implementation? 	•
<ul style="list-style-type: none"> • What factors (political economy, cultural drivers and historical legacies) have shaped policy choices about social protection? (in general and at specific historical junctures (e.g. 2008 food price crisis?). • To what extent have these factors in turn shaped the relative strength of a gender perspective in social protection policy decision-making? 	•
<ul style="list-style-type: none"> • What was the role of research and/or programme evidence within this decision-making process? 	•
<ul style="list-style-type: none"> • What are the constellation of actors (GOs and NGOs) which have influenced the decision-making process around social protection and gender? 	•
<p>INFLUENCE (ask to all interviewees)</p> <p>Objectives:</p> <ol style="list-style-type: none"> 1. Assess the relative influence of key actors in shaping the social protection agenda 	Country/Programme-specific additions
<ul style="list-style-type: none"> • What is your role in informing / influencing the design / resource allocation to social protection policy and programming? How would you rate your influence in the social protection decision-making arena in comparison to other actors? What accounts for this? 	•
<ul style="list-style-type: none"> • What is the role of national / international civil society in shaping the social protection agenda in your country? 	•

<ul style="list-style-type: none"> • What is the role of the donor community in shaping the social protection agenda? 	
<ul style="list-style-type: none"> • What role has research or programme evidence played in this process? 	<ul style="list-style-type: none"> •
<ul style="list-style-type: none"> • What role has the framing of specific social protection debates played in this process? E.g. do different actors have different objectives for social protection? (E.g. rights based approaches? social protection for non-productive poor (children and elderly?) or social protection to contribute to economic growth / food security etc). What are these? Have different discourses on social protection this created conflict or tensions? 	<ul style="list-style-type: none"> •

In addition, questions can be asked to plug specific knowledge gaps that were not addressed through the matrix or literature review:

- a) M&E systems
- b) Data collection systems especially with regards to gender indicators
- c) Learning from programme implementation

Key informant interviews at sub-national level: implementers, programme staff, local government

N.B. In order to avoid standard answers on gender, it is important that interviewers refer back to the background work to identify key gendered risks and vulnerabilities and social risks which can be used to prompt the interviewee to think in more depth about gender in social protection policy and design.

- A) Coverage (gendered and general)**
- B) Quality (gendered and general)**
- C) Underlying reasons for quality and coverage of implementation**

Implementing / coordinating agencies	Country/programme-specific additions
COVERAGE	
Are you satisfied with the implementation of the programme to the target population so far? Why (or why not)?	
Can you tell us more concretely the results of coverage to date? (disaggregated by sex, social group etc.)?	
Are there any barriers which women face in particular to participating (partially or fully) in the programme (e.g. timing of participation in the programme conflicts with domestic and/or income generating activities; women are not allowed to move freely to participate in programme meetings). Do these challenges differ by age? How can the barriers be overcome?	
If you want more coverage of specific target groups (e.g. women and girls) what are the constraints and how would you overcome them? (Explore the socio-economic constraints, and at different levels (hh, intra-hh etc))	
Do you think there are social groups which have not been included that should be included and why? (e.g. outside the scope of the existing social protection programme?)	
QUALITY	
To what extent do the people in charge of operationalising the programme have knowledge on gender or are sensitised to gender issues?	
To what extent have women been consulted in the design and implementation of the programme?	

Are there any complaints mechanisms which beneficiaries and non-beneficiaries (excluded) can access?	
Does the programme's implementation consider gender vulnerabilities / constraints that might reduce its impact or reach? (e.g. women's time constraints, child care responsibilities etc). Please give examples.	
What measures have been put in place to promote a more equitable demand for the uptake of the programme e.g. communications / information?	
UNDERLYING REASONS FOR COVERAGE AND QUALITY	
What have been the roles of each level of government in the implementation of the programme? Which kinds of conflicts have arisen? e.g. resources, decision-making. How could these conflicts be resolved?	
To what extent are different agencies involved in delivering social protection? E.g. gender-focused organisations/government departments (e.g. women's affairs offices). To what extent are the gender focal points involved or briefed in programme implementation?	
How is staff capacity evaluated for implementation of the programme? What are the main limitations? (staff capacity number or quality)	
Are the resources available sufficient for effectively delivering the programme? Do the implications of resource constraints affect women and men differently? To what extent are the gender components outlined in policy/programme design documents budgeted and allocated? (e.g. child care facilities)	
Is there conflict between institutional objectives and programme objectives for the main implementer of the programme?	
To what extent has civil society been involved in the social protection programme?	
To what extent is there demand at the community level for the programme? Who has been taking the lead role in this?	
To what extent has the implementation of the social protection programme had spill-over effects to the implementation of complementary services (e.g. basic services).	

Appendix 3: Key informant interview list

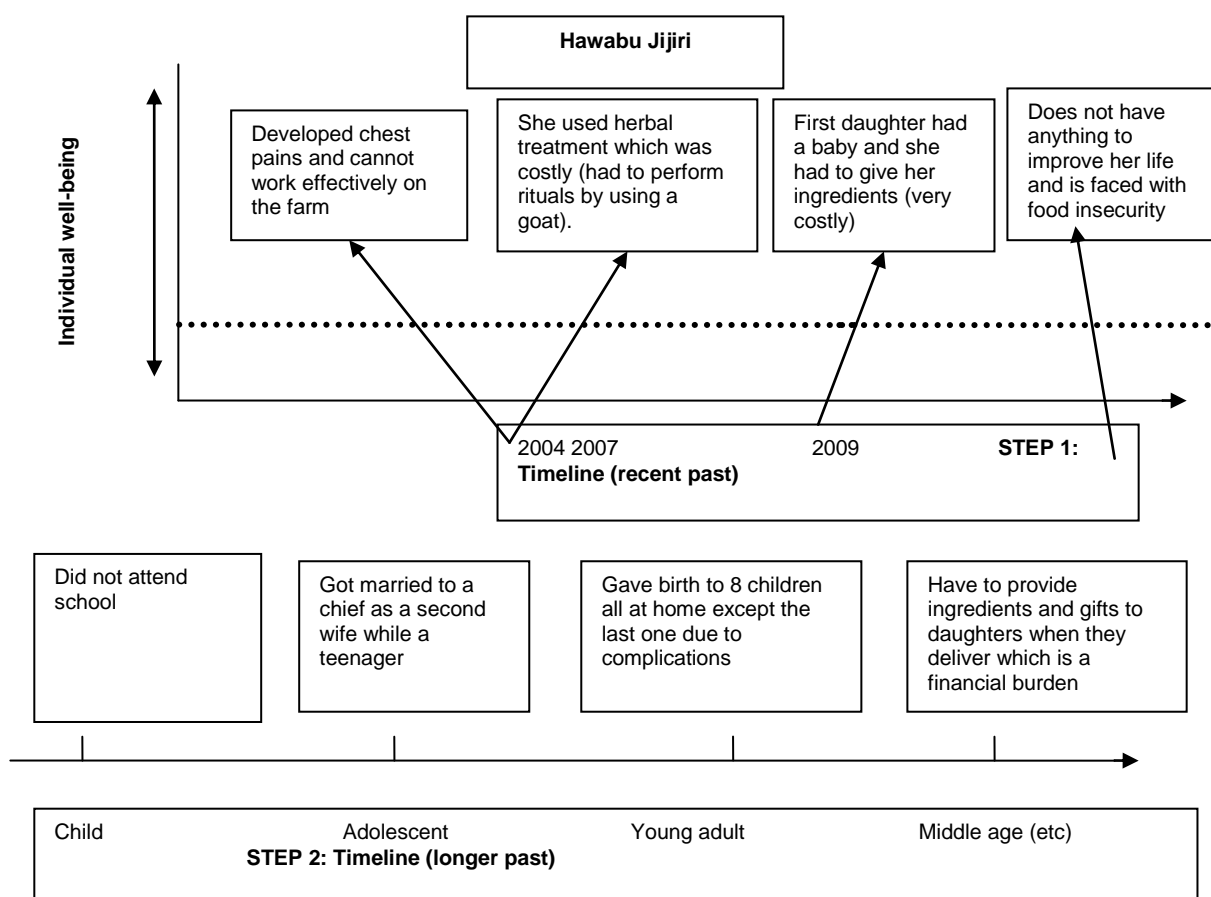
	Role	Name
Chereponi	1. District Social Welfare Officer	Dorkrugu S. Tia
	2. CLIC Member/Assemblyman	Kofi K. Daniel
	3. DLIC Member /Assemblywoman/Preschool Coordinator	Hawa Sulemana
	4. NECIDA Coordinator	Amadu Kwabena Alhassan
Gushiegu	5. District Social Welfare Officer	P.Z. Ziblim
	6. CLIC Member/Assemblyman	Abukari Abdulai
	7. District Gender Desk Officer	Ruby Osman
Tamale	8. Director, Regional Department for Women's Welfare	Mr. I.P.S. Zakari-Saa
	9. Director, Regional Department for Social Welfare	John Ankrah
Accra	10. Department of Women Deputy Director in Charge of Research, Information and Advocacy	Mrs. Mabel Cudjoe
	11. Department of Children Head of Programmes and Projects	Mrs. Ruth Addison
	12. Department of Children Head of Information and Research	Mr. Sylvester Alex Kyei-Gyamfi
	13. Department of Children Assistant Programme Officer	Florence Ayisi-Quartey
	14. Ghana Health Service Economist/Policy Analyst/Gender Focal Person-	Charles Adjei-Acquah
	15. DSW Assistant Director (National LEAP Coordinator)	Lawrence Ofori Addo
	16. WFP Senior Programme Assistant	Emma Anaman
	17. UNFPA Gender Programme Analyst	Mrs. Mercy Osei-Konadu
	18. ARK Foundation Director of Programmes	Marian Attah-Boahene
	19. UNICEF Social Policy Specialist	Charles Dzradosi
	20. UNICEF Chief, Child Protection	Sheema Sen Gupta
	21. DFID Social Development Advisor, Human Development and Accountability Team	Graham Gass

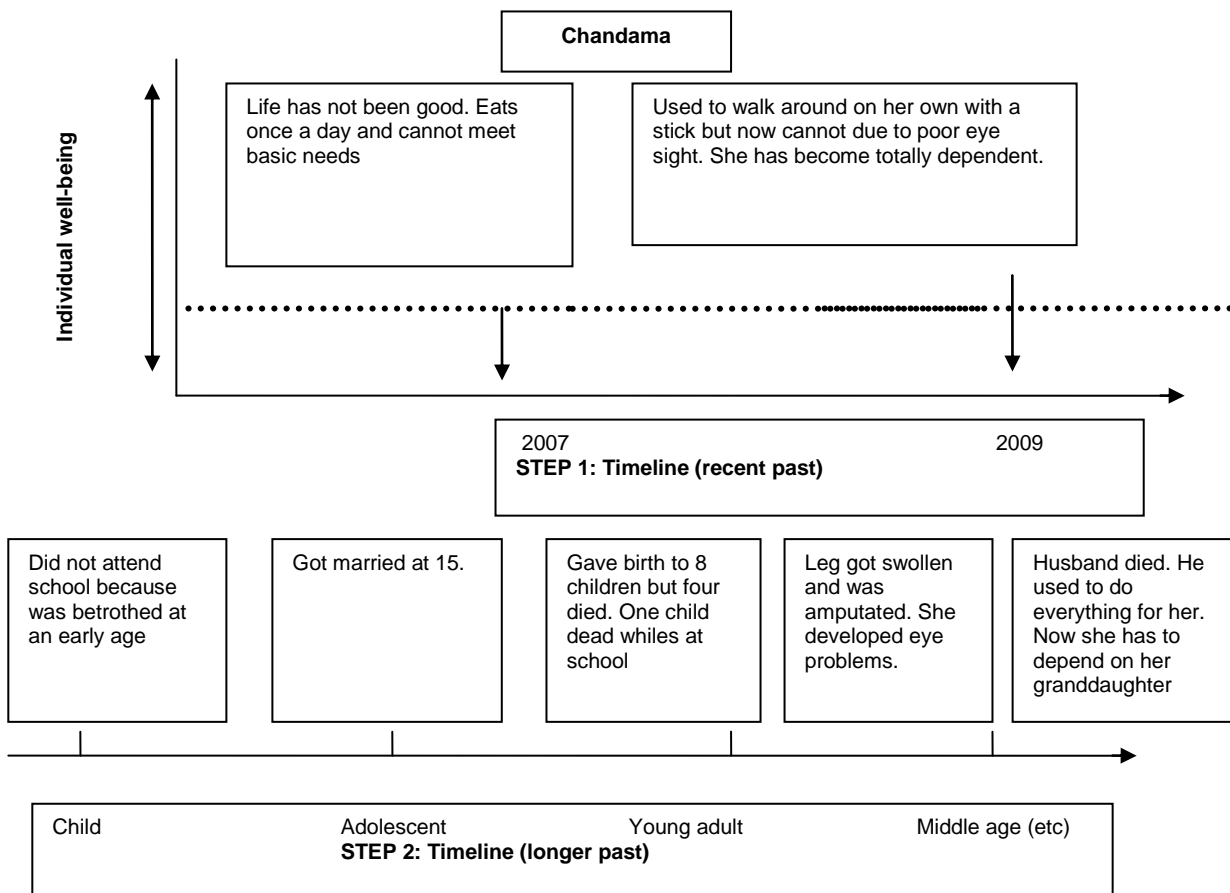
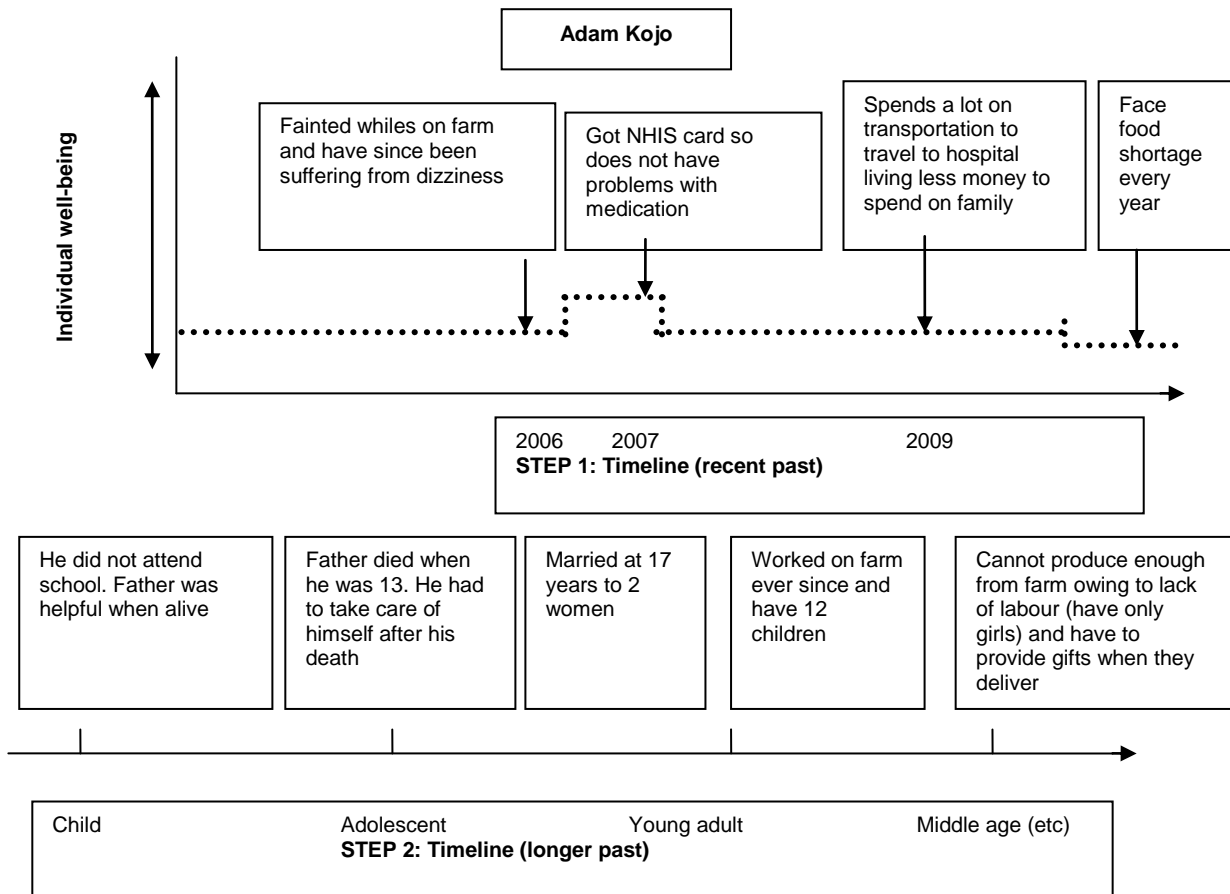
Appendix 4: Life history graphics

Type of respondent	Name	Age	District	Community	Educational status	Marital status	Household makeup
Married woman	Hawabu Jijiri	56	Gushiegu	Nachem	Illiterate	Married to a chief (1 of 2 wives)	8 children
Married man	Adam Kojo	38	Gushiegu	Nachem	Illiterate	Married to 2 women	12 children
Adolescent boy	Tia Yabdoo	17	Gushiegu	Sala	Illiterate	No	Lives with parents and 3 younger sisters
Adolescent girl	Rukaya Abdulai	19	Gushiegu	Kpatinga	Illiterate	Traditionally married	1 child. Stays with grandmother and 3 other family members
Adolescent boy	Abdul-Rauf	16	Chereponi	Wonjuga	Illiterate	No	Lives with mother and 9 younger siblings
Aged woman	Chandama	70+	Chereponi	Wonjuga	Illiterate	Widow	Had 8 children. 4 dead. Now shares a room with granddaughter
Married man	Yussif	28	Chereponi	Wonjuga	Preschool. Stopped before Primary 1	Married to 1 woman	4 children
Aged man	Alhassan Imoro	60+	Gushiegu	Kpatinga	Illiterate	Married to 2 women	17 children, 14 died. Lives with 15 extended family members
Aged woman	Memunatu Abukari	60+	Gushiegu	Kpatinga	Illiterate	Married but separated from husband because of leprosy. Husband died 1 year ago	7 children. 6 dead. 1 surviving suffers from mental illness
Single household head male	Musa Fushenie	45	Gushiegu	Kpatinga	Went to school but stopped at Primary 2	Wife died 3 year ago. Not married again due to poverty	5 children
Single household head female	Bange Nwumban	70	Gushiegu	Kpatinga	Illiterate	Husband is dead (she was 1 of 2 wives)	10 children, 3 dead

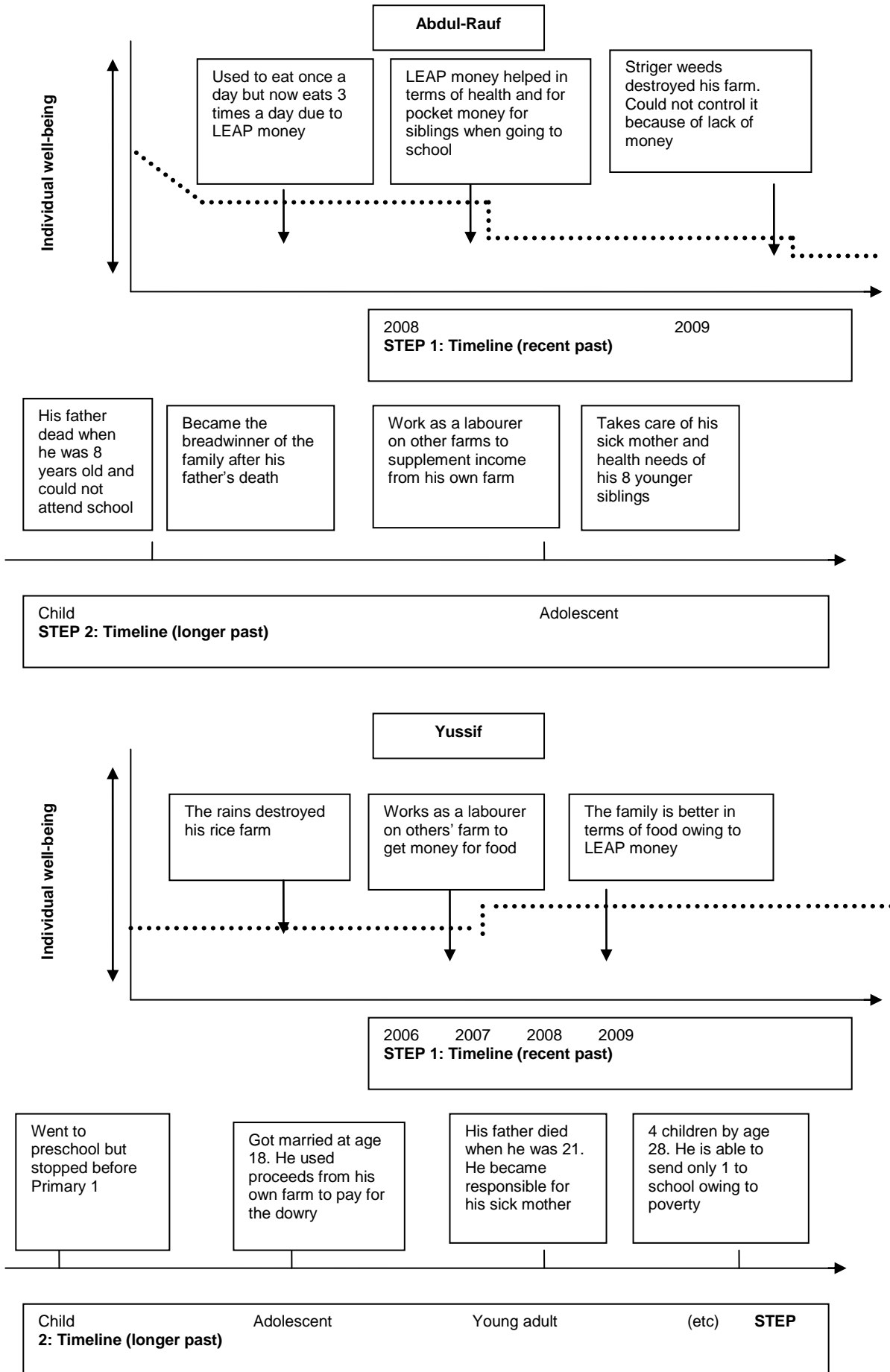
To What Extent is the LEAP Cash Transfer Programme Making a Difference?

Adolescent boy	Osman Mohammed	19	Chereponi	Tanbo	Went to school but stopped at Primary 6	Aunt's daughter is fiancée	Lives with mother who is blind and 4 other household members
Adolescent girl	Zenabu	15	Chereponi	Tanbo	Illiterate	Betrothed to a 36-year-old divorcé	Lives with 5 other family members
Single household head female	Mayimba	60+	Chereponi	Tanbo	Illiterate	Widow	Lives with 5 children and 2 grandchildren
Aged man	Akor-ka	80+	Chereponi	Wonjuga	Illiterate	Married 2 women, 1 died	Lives with 8 family members
Married woman	Mumbu	25+	Chereponi	Tanbo	Went to school but stopped at pPrimary 3	Married and has a 15-year-old rival	Lives with 8 other household members

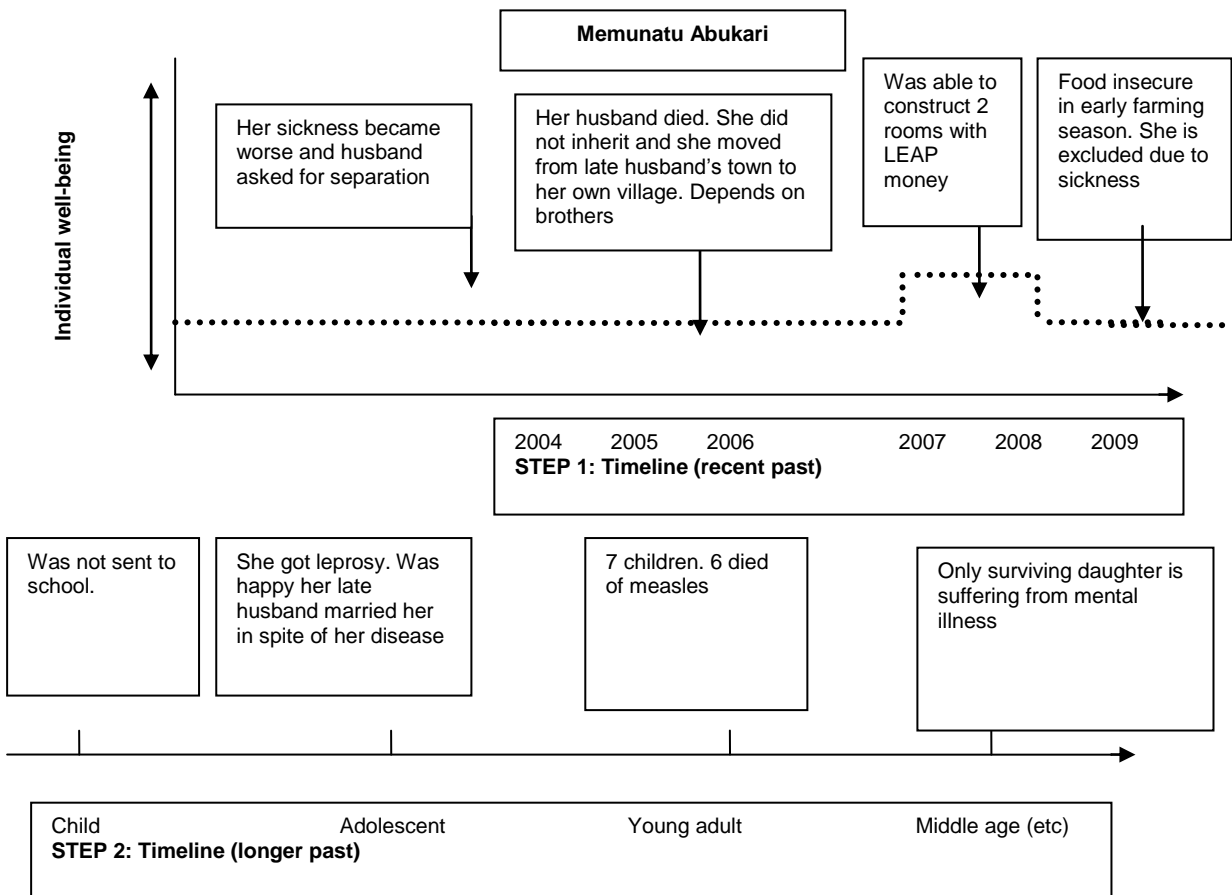
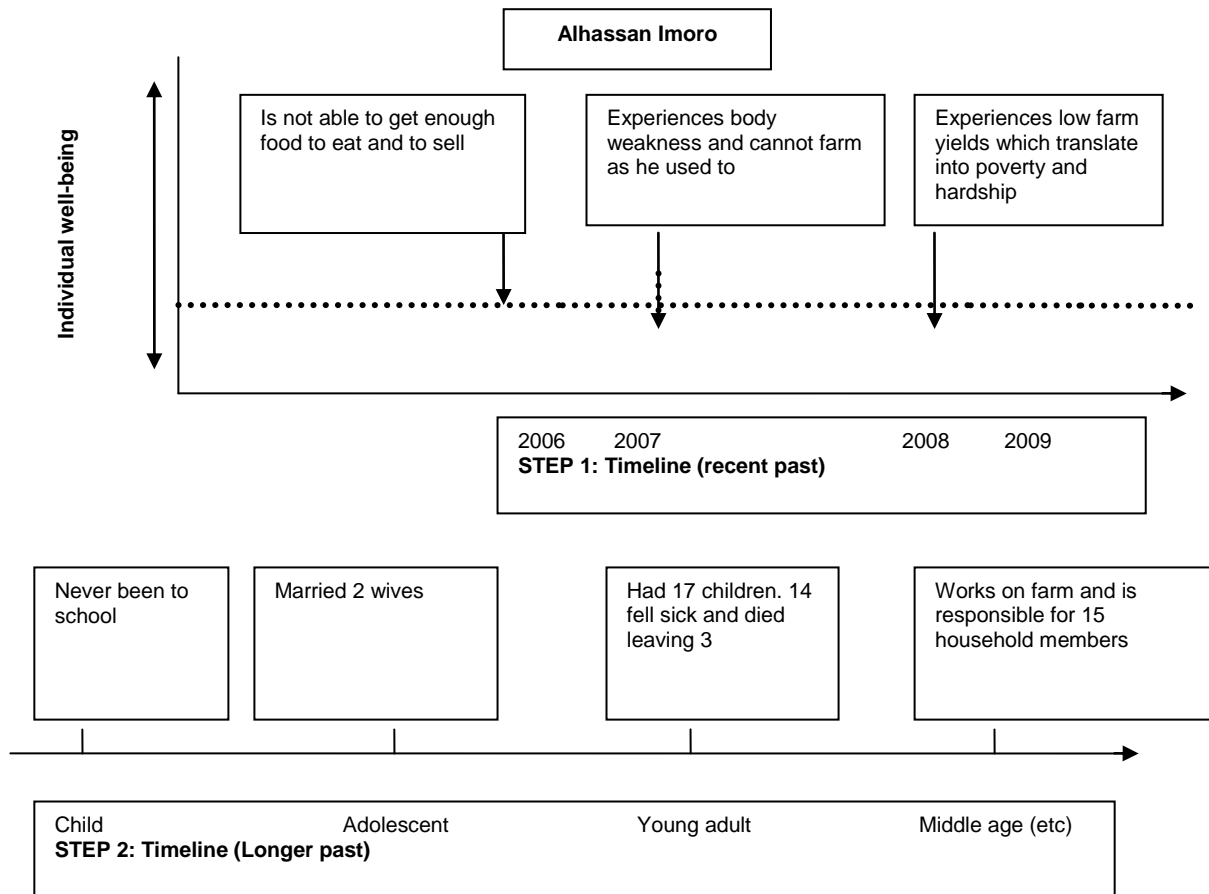


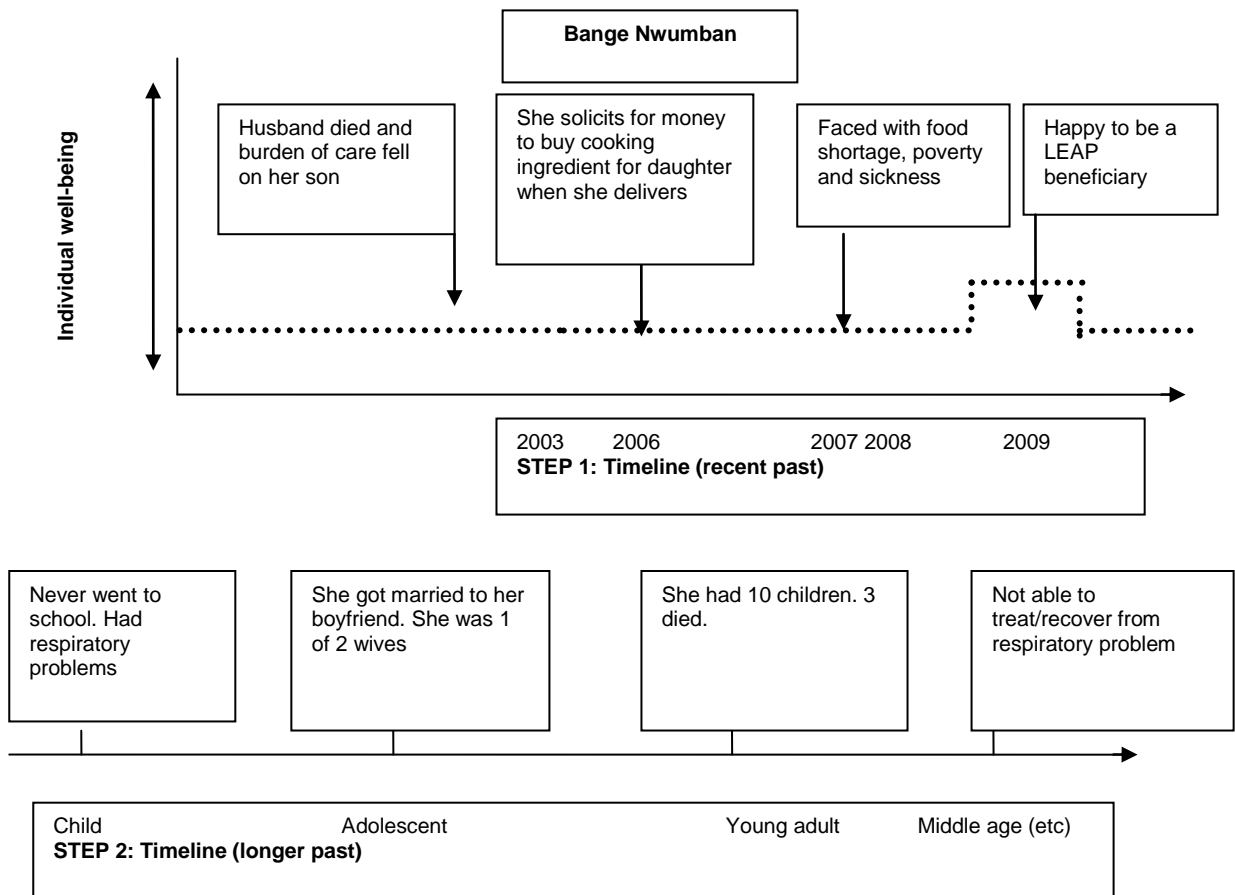
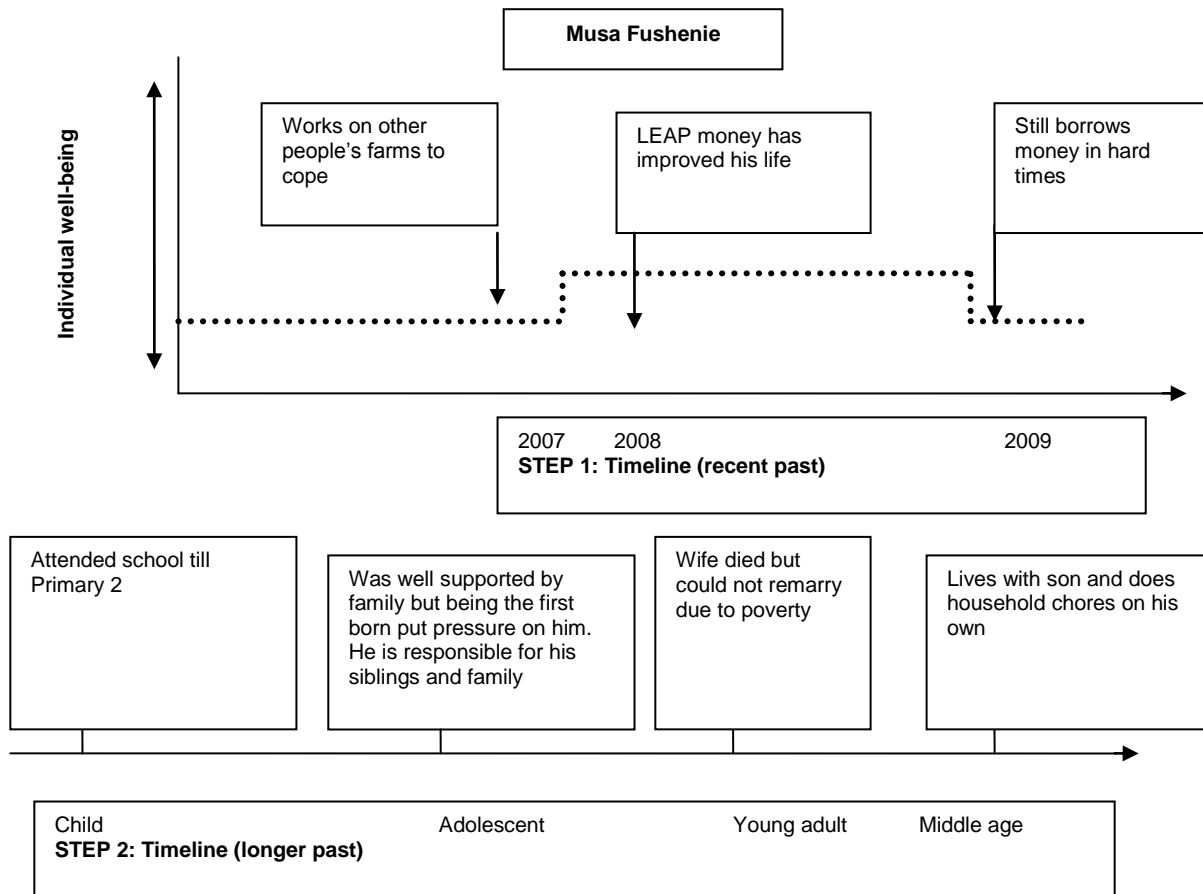


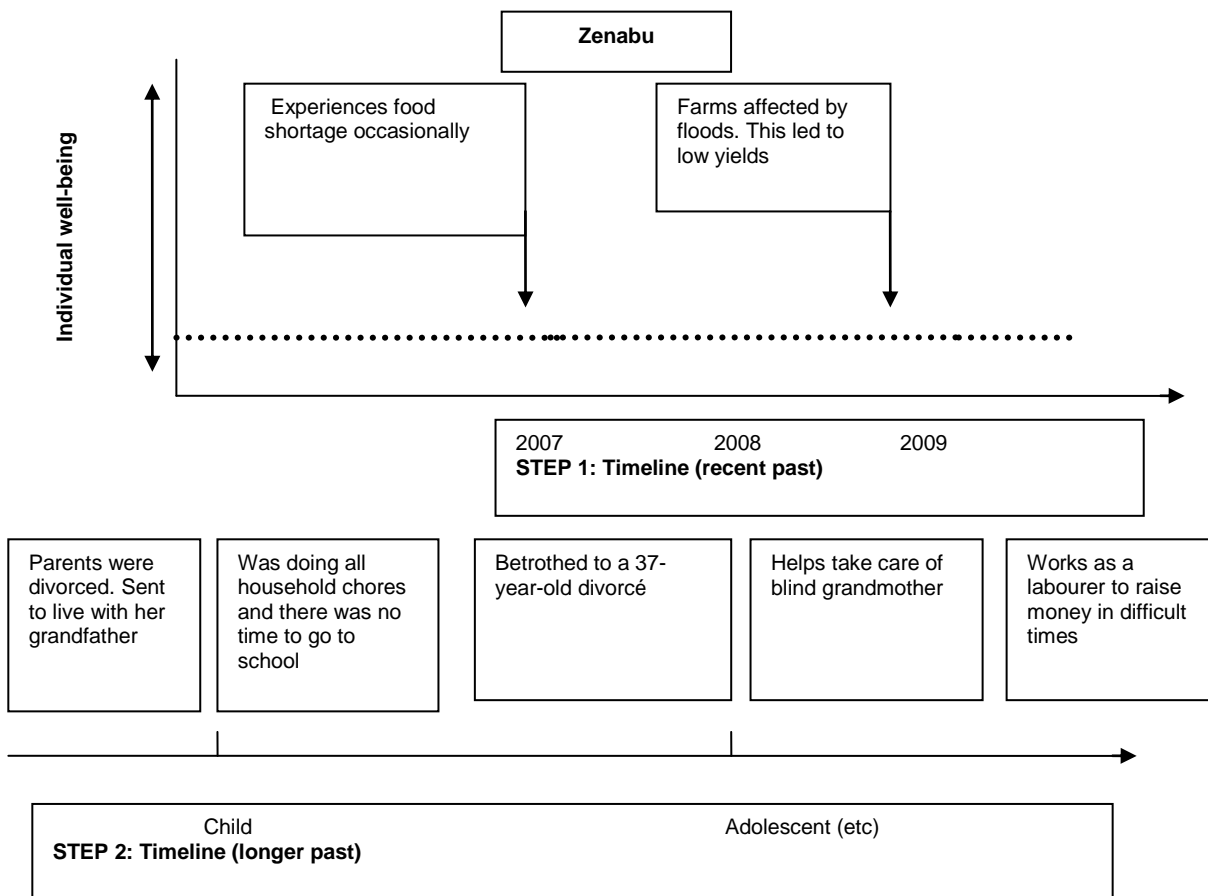
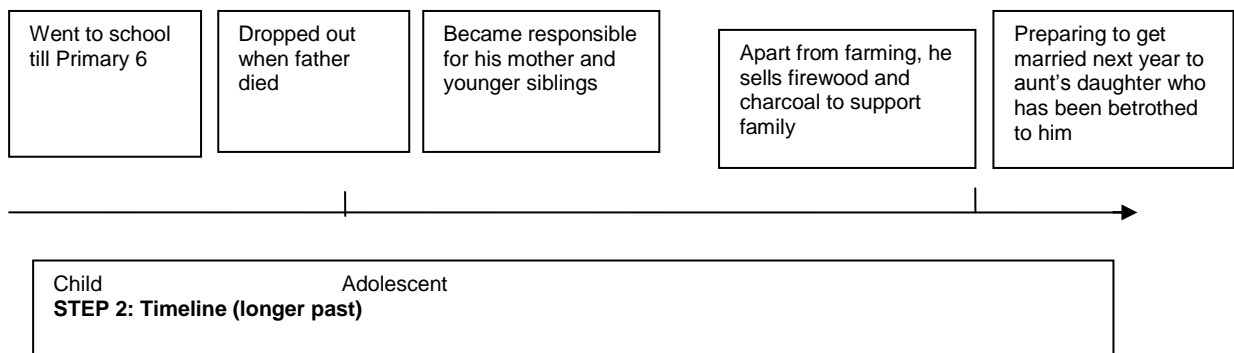
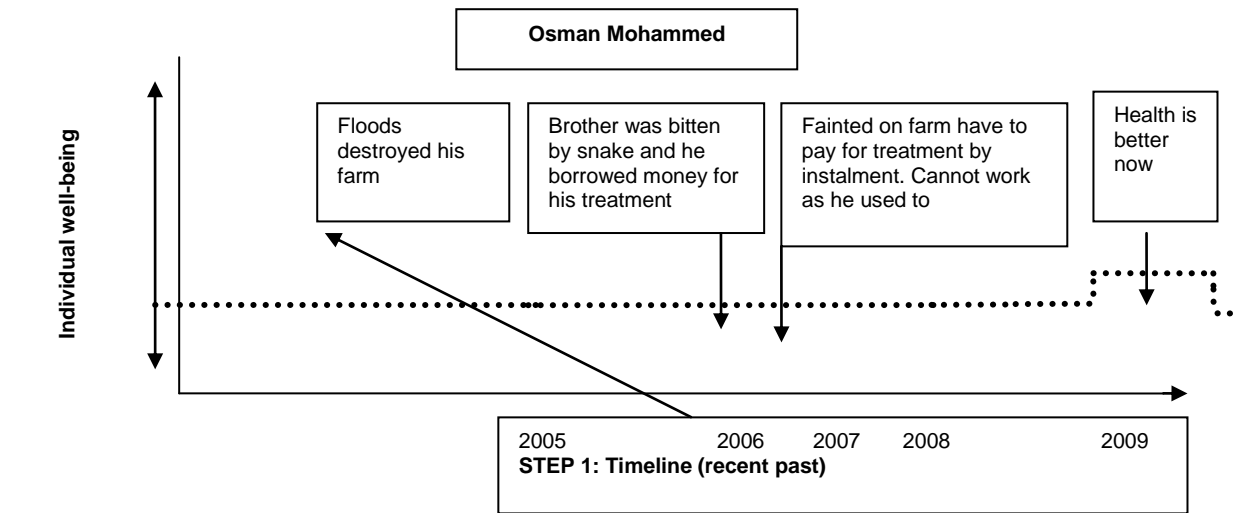
To What Extent is the LEAP Cash Transfer Programme Making a Difference?

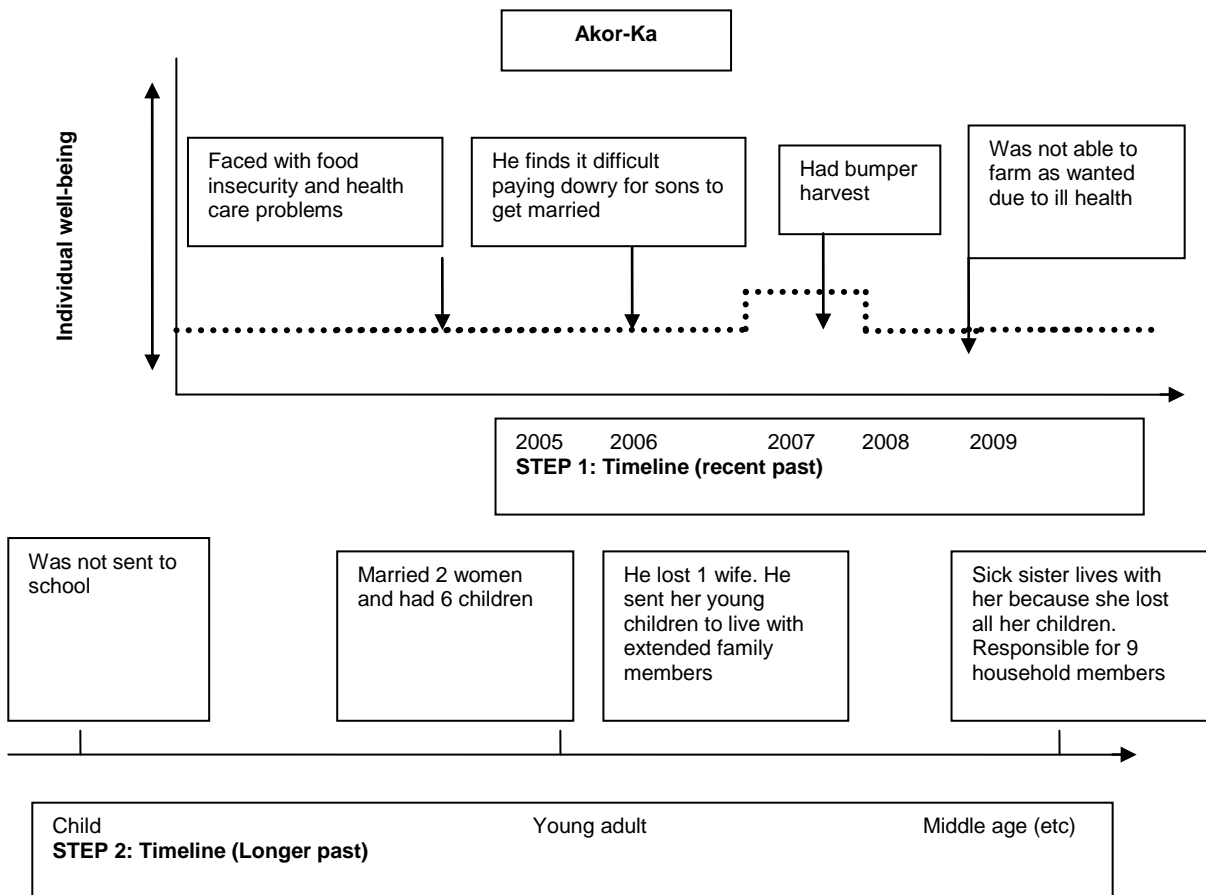
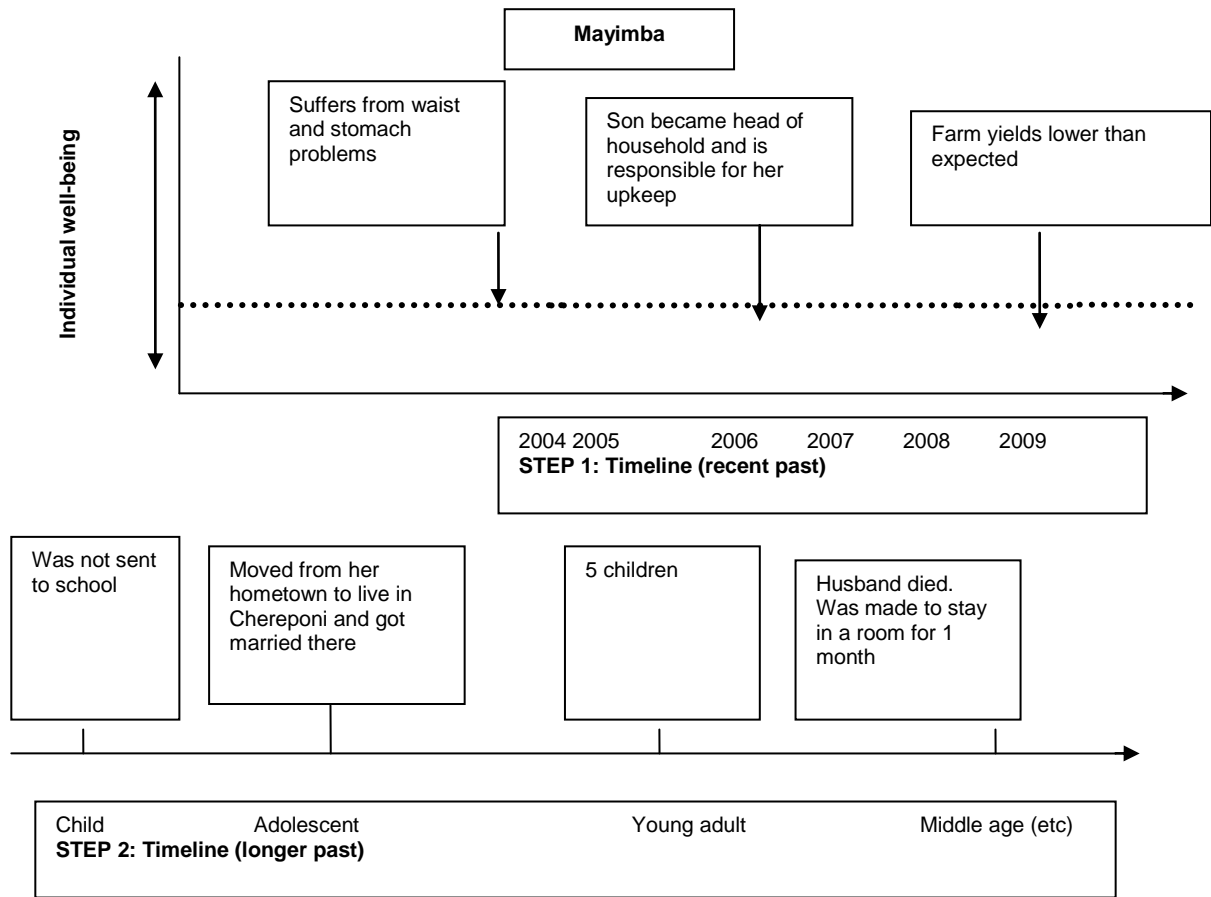


To What Extent is the LEAP Cash Transfer Programme Making a Difference?









To What Extent is the LEAP Cash Transfer Programme Making a Difference?

