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

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Key points

- While Ghana has made strong progress in aggregate poverty reduction, gender vulnerabilities and risks remain significant
- The LEAP cash transfer programme addresses some gender-specific vulnerabilities, such as costs of basic consumption and services, and the ability to repay loans
- Overall programme effectiveness could be improved, however, through a more consistent targeting approach, gender-related community awareness activities, and inter-sectoral coordination to link complementary services

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Ghana is hailed as a success story in African development. Economic growth has hovered around 5-6% in recent years, and by most accounts the country is on track to halve income poverty by 2015, in line with the Millennium Development Goals (MDGs) (UNICEF Ghana, 2009). Poverty fell from 52% in 1991/92 to 28.5% in 2005/06 (GSS, 2008), and living standards for many have improved substantially. Its Human Development Index (HDI) ranking is 152 of 182 countries. Although still a poor performer, Ghana scores relatively well on the Gender-related Development Index (GDI) at 126 (UNDP, 2009a; 2009b). Despite these aggregate gains, income inequality has increased as shown by the worsening Gini coefficient (ISSER, 2007) and women in Ghana are generally poorer than their male counterparts (Wrigley-Asante, 2008). Women are less literate, face heavier burdens on their time and are less likely to utilise productive resources (e.g. GoG, 2003). A majority of female-headed households (61% of urban and 53% of rural) fall into the poorest quintile of the population, and this number has increased from around 25.7% in 1960 to over 33% in 2003 (Ardayfio-Schandorf, 2006).

Social protection has contributed to Ghana's poverty reduction progress. The Government expanded social protection programmes to the poorest and most vulnerable (see Table 1 below). This project briefing analyses findings from an ODI study funded by the UK Department for International Development (DFID) which explores linkages between gender and social protection effectiveness. It focuses on the Government's cash transfer programme, Livelihood Empowerment Against Poverty (LEAP) – a pioneering initiative for the West African sub-region.

Gendered risks and vulnerabilities

Women in Ghana face multiple constraints. In the most recent Ghana Living Standards Survey (GLSS), women reported spending an average of 6.3 hours per day on household activities, compared with 4.2 hours for men. Women's access to and control of assets and productive inputs is a major challenge: although their role in agriculture is important, their productivity is constrained by limited access and ownership of land and credit or inputs (ISSER, 2007). Despite this, social protection policies and programming have focused more on economic risks

Table 1: Selected social protection instruments in Ghana

Type of social protection instrument	Programme example
Social assistance	• National Youth Employment Programme aims at providing employment for youth. • LEAP cash transfer provides financial assistance to the poor and vulnerable. • The Free School Uniform Programme. • Capitation Grant abolishes school fees by substituting these with grants to schools. • School Feeding Programme provides one hot meal a day for targeted public school children.
Social insurance	• Free Maternal and Infant Healthcare addresses maternal and infant mortality in the country. • National Health Insurance Scheme aims at providing basic healthcare access.
Social equity	• National Programme for the Elimination of Worst Forms of Child Labour in Cocoa. • Elimination of Human Trafficking (Human Trafficking Act 2005). • Domestic Violence Act 2007. • The Children's Act 1998.

and vulnerability – such as income and consumption shocks and stresses – and less on social risks. However, gender inequality, social discrimination, unequal distribution of resources and power within the household, and limited citizenship are equally if not more important in keeping households poor. Many economic risks and vulnerabilities are reinforced or exacerbated by gendered social institutions and practices. For instance, women's land tenure limits their economic security. The Government has made progress in eliminating some of these social vulnerabilities. There has been considerable development in legislation to advance gender equality in recent years in Ghana, including the 2005 Human Trafficking Act and the 2007 Domestic Violence Act.

Notwithstanding this progress, discriminatory gendered practices that undermine girls' and women's human capital development persist. Intra-household gender power relations are highly unequal, resulting in women's limited decision-making, particularly in relation to time use, and in some cases gender-based violence. Child labour and trafficking are significant problems and highly gendered, with girls especially vulnerable in domestic worker posts. Early marriage, although decreasing, is still practised in some areas, negatively impacting girls' education and future intra-household power relations. Polygamy, a widely practised social institution in many parts of Ghana, may disadvantage women in terms of access to land and other resources due to tensions between traditional practices and national family laws (CEDAW, 2005). Elderly women appear to be especially vulnerable on account of lower life-time earnings and weaker social ties and networks as they age, leading to a high burden of care, particularly with the spread of HIV/AIDS and social discrimination. Harmful traditional practices are generally highly gendered, such as the case of elderly women accused of witchcraft and banished from the community (Amuzu et al., 2010).

Social protection response to gender vulnerabilities

The Ghanaian Government's commitment to social protection is clearly expressed in the Ghana Poverty Reduction Strategy (GPRS) I and II as well as the National Social Protection Strategy (NSPS). These policy documents also pay progressively explicit attention to gender issues and related policy implications. GPRS I recognises gender discrimination as a manifestation of poverty, citing the disadvantaged position of women in society as among potential causes of poverty. It identifies a number of areas in which women are specifically vulnerable, including their over-representation in food crop production, a sector with the highest poverty rates; lower education enrolment and retention; insufficient access to credit markets; and their participation in the informal economy. Despite this broad recognition of the need to address various forms of gender inequality, GPRS I lacked specificity when addressing gender in the diagnostic and thematic areas, policy matrices and the monitoring and evaluation framework.

GPRS II sought to address these shortcomings by mainstreaming gender and other social vulnerabilities and exclusion into all thematic areas, poverty reduction targets, data collection and analysis. Importantly, GPRS II sets a number of goals for women's empowerment, such as closing the gaps in the legal framework that limits women's capacity to participate in public decision-making, and highlights gender equity as a prerequisite of good governance. Finally, GPRS II outlines the basic social policy framework for mainstreaming the vulnerable and excluded into the subsequent NSPS.

NSPS treats gender most comprehensively, although there is room for improvement. It adopts an explicitly 'gender-sensitive' approach in its framework for reducing poverty and empowering socially disadvantaged groups, integrating it as the fifth of six pillars. 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'. NSPS also sets the stage for the formulation of the LEAP programme.

Objectives of the LEAP programme

LEAP was launched in March 2008 and by mid-2009 had been implemented in 74 of 178 districts and reached over 26,000 households and 131,000 individuals. Adopting a 'developmental rather than remedial' approach to poverty reduction (GoG, 2007), it aims to use cash transfers to 'cushion' the poor and 'encourage them to seek capacity development and other empowering objectives' thus helping them 'leap' out of poverty. Like other conditional cash transfer programmes, LEAP sets positive conditionalities which promote synergies with complementary social services – including advancing children's school enrolment and retention, registration at birth, uptake of post-natal care and immunisations for young children. It also includes a number of conditionalities aimed at eliminating certain behaviours, such as ensuring children are neither trafficked nor engaged in the worst forms of child labour, for example as domestic workers, to which girls are especially vulnerable. However, in Ghana, these remain 'quasi'-conditions, as there are few means and resources to assess compliance. Nevertheless, establishing these criteria communicates the need to invest in these areas (ODI and UNICEF Ghana, 2009).

Of the 28.5% of Ghana's population who are poor, LEAP targets the 18.2% 'extremely poor', (criteria and means of targeting are still being refined). Initially, beneficiaries were to be incorporated over a five-year pilot, whereby Orphans and Vulnerable Children (OVCs) and people over 65 years would first be targeted, followed by people with disabilities. The original design document paid some attention to the linkages between gender inequalities and poverty, including the particular vulnerability

of older women. In contrast to cash transfer programmes in other parts of the world which select women as recipients of the cash grant, LEAP's manual of operation does not include this as an explicit requirement, reducing the likelihood of this being a systematic practice. Nevertheless, the NSPS does recommend female caregivers be prioritised, as this is likely to have maximum impact on the household, so some implementers have opted to use this criteria. There is also a provision that women should be represented in the Community LEAP Implementation Committees (CLICs). In practice, households are selected based on a combination of poverty status and presence of any one of the three categories of vulnerable groups. Given capacity constraints, a limited number of rural areas are being targeted, while the number of targeted beneficiaries in each community is high. This saves administrative costs but leads to inclusion errors.

Programme impacts and implementation

LEAP is making a positive contribution to address some gender-specific vulnerabilities, but there are important challenges to be tackled. ODI research suggests LEAP is helping households meet a range of practical gender needs, including recovering costs related to children's wellbeing (for which women are usually responsible) such as the purchase of school supplies, accessing health services (by being able to purchase the national health insurance card), as well as paying for some maternal health costs (see Box 1). Cash transfers are also enabling households to buy essential food items and receive and repay loans from family and friends to better cope with the environmental shocks such as drought, flood and related price increases.

In principle, LEAP contributes to the socio-economic development of the poorest households, particularly those caring for a vulnerable household member. Although women are not explicitly targeted in the LEAP programme outline, there is an acknowledgement that women are usually caretakers and as such should receive support. This support does not, however, seem to have noticeably reshaped household dynamics, whereby decision-making rests with husbands, brothers and sons (see also Box 2). Moreover, some women who receive the cash transfer have not been able to significantly improve their conditions as they still face considerable time burdens and limited voice. This is for a number of reasons: (i) the transfer amount is low and does not provide women with any significant financial independence; (ii) the transfer is not consistently received by women; and (iii) there is no systematic sensitisation about balancing household gender roles or empowerment. Further, there is weak civil society engagement, without which messages and initiatives are less likely to be reinforced at the community level. As a result, there has been little change in women's community participation, with their limited attendance at meetings failing to translate into an effective voice.

A number of politico-institutional and socio-cultural drivers have contributed to the mixed implementation record of LEAP's gender dimensions. Key constraints include the following: partisan politics (LEAP's roll-out in the north coincided with the run-up to the 2008 presidential election), under-investment in capacity-building for programme implementers (including no gender training), and weak coordination mechanisms. A general absence of government officers responsible for gender equality (such as gender desk officers) from District LEAP implementation committees, as well as inconsistent inclusion of women in CLICs, constitute additional challenges.

Box 1: Use of LEAP cash grants by beneficiaries

Improved food consumption

'*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 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, Gushiegu, 2009).

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

Investment in children's schooling

'*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, Chereponi, 2009).

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

Improved but limited healthcare

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

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

Box 2: LEAP and intra-household dynamics

'*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).

'*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).

'*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 Focus Group Discussant (FGD), Gushiegu, 2009).

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

Conclusions and policy implications

Overall, LEAP is making a useful contribution to costs faced by poor households for basic consumption and services. 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 potential for supporting progress towards gender equality.

Caregivers are recognised as recipients of the LEAP cash transfer, but the definition is sometimes equated with 'breadwinners', which does little to recognise the value of their care work. Programme implementers should emphasise that LEAP aims to support caregivers (predominantly women) to meet their care responsibilities. At the same time, it will be important to raise awareness and support behavioural change among men and boys about the importance of their involvement in care, if girls and women are to realise their full educational and income-generating potential.

LEAP's design document provides for gender balance among non-caregiver beneficiaries (people living with disabilities and the aged), as well as in CLICs. It will be critical, however, to focus more on caregivers (not household heads) of OVCs and monitor inclusion of women to assess the full impact of the programme on intra-household and community gender dynamics.

Beneficiary fora – regular meeting spaces between programme social workers and beneficiaries – are also a potentially useful approach for raising awareness and generating a community dialogue about other gender-specific economic and social vulnerabilities. Well designed gender training could ensure social welfare officers (in conjunction with district gender desk officers and some CLIC members) use these spaces as an opportunity for gender-based sensitisation, including, for example, on issues related to girls' school retention, risks associated with early marriage, women's reproductive health rights, and how to address family violence (which remains underreported in the country). Gender training should also help sensitise government officers delivering complementary services (such as healthcare or agricultural extension) to tackle key gender vulnerabilities and ways that LEAP and related social protection mechanisms can help address these vulnerabilities.

Strengthening inter-sectoral coordination, especially with the Gender Desks – the agency mandated to promote gender empowerment at the district level – would go a long way to improve gender synergies in programme implementation. It would also help ensure linkages to complementary services as originally intended by LEAP, to tackle the multidimensional nature of gendered poverty and vulnerability.

Finally, opportunities for synchronisation of data collection, monitoring and evaluation and reporting mechanisms need to be identified and capitalised upon, 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 issues raised in beneficiary fora and participation in complementary services promoted.

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