

Beneficiary and community perspectives on the Palestinian National Cash Transfer Programme



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Our research aimed to explore the perceptions of cash transfer programme beneficiaries and implementers and other community members, in order to ensure their views are better reflected in policy and programming.



Introduction

Key points:

- De-developmental policies, recurring insecurity and dependency on donor funding are among the key challenges in advancing social protection in the Occupied Palestinian Territories.
- The Palestinian National Cash Transfer Programme is an important but limited component of female-headed households' coping repertoires.
- Programme governance requires urgent improvement. Bolder efforts to reduce inclusion and exclusion errors, invest in human resource capacity and improve communication with beneficiaries could help tackle the multidimensionality of poverty and vulnerability while also strengthening social cohesion and state–citizen relations.

There is growing evidence internationally of positive links between social protection and poverty and vulnerability reduction. However, there has been limited recognition of the social inequalities that perpetuate poverty, such as gender inequality, unequal citizenship status and displacement through conflict, and the role social protection can play in tackling these interlinked socio-political vulnerabilities.

This country briefing synthesises qualitative research focusing on beneficiary and community perceptions of the Palestinian National Cash Transfer Programme (PNCTP) in Gaza¹ and West Bank², as part of a broader research project in five countries (Kenya, Mozambique, OPT, Uganda and Yemen) by the Overseas Development Institute (ODI) in partnership with national research teams. The research was commissioned by the UK Department for International Development (DFID) and involved primary and secondary data collection and analysis.

Given the particular vulnerabilities female-headed households (FHH) - such as widows, divorced and separated women - face in the OPT context, the research sample focused on FHHs and included beneficiary and non-beneficiary households and refugees and non-refugees living in urban and peri-urban areas (Rafah and Beit Lahia in Gaza and Jenin and Hebron in West Bank).

Country context

The unique political, economic and socio-cultural context of the Occupied Palestinian Territories (OPT) presents opportunities as well as challenges for implementing social protection. The Palestinian Authority (PA) is strongly committed to a social protection agenda and a rights-based approach to human welfare, supported by on-going programme strengthening and lesson learning. However, key challenges remain: the long-drawn-out Israeli–Palestinian conflict and internal factional conflict between the two main Palestinian political parties; relentless restrictions on the movement of people and goods and the consequent strangled economy and dwindling job opportunities, especially in Gaza; limited coordination among the wide array of actors in social protection and relief; and a dearth of social accountability mechanisms.

The PNCTP, launched in 2010 in West Bank and in 2011 in Gaza, is the largest unconditional cash transfer programme in the OPT targeting extremely poor households. Representing approximately 1% of national gross domestic product (GDP)³, it is managed by the Ministry of Social Affairs (MoSA) with substantial international funds. As a result of a 2009/10 merger of the Relief and Social Services Social Safety Net (funded by the TIM/PEGASE⁴ mechanism) and the Social Safety Net Reform Project (funded by the World Bank), the programme underwent an important shift from categorical to poverty-based targeting and quickly achieved a substantial increase in coverage⁵ – from 55,000 to more than 95,000 households⁶, with almost half (41,000) being female-headed. The PA and its development partners nonetheless acknowledge that there remain around 125,000 extremely poor households in both West Bank and Gaza in need of assistance, with 15,000 eligible households on a waiting list in Gaza.

Eligibility for the PNCTP is determined through a proxy means test formula (PMTF) that measures different aspects of consumption, while a joined-up policy



approach means extremely poor households in the programme are eligible for free health insurance, food assistance, educational fee waivers and lump sum disbursements from the MoSA Emergency Assistance Programme. Cash transfers of between 750–1,800 New Israeli Shekels (US\$195–468) per quarter are paid to the household head or designated representative (in case of incapacity due to illness or disability) and are intended for general household use. The cash amount is calculated so as to bridge 50% of the household poverty gap^{7,8}.



Before the Intifada I used to go to work at 5 o'clock in the morning until 4 o'clock in the afternoon. Our economic situation became much better during my work in Israel [...] I felt good because I could feed my kids. Now, though, life is so difficult.

Poverty, vulnerability and coping strategies

Perceptions and nature of poverty and vulnerability

In Gaza, deliberate de-developmental policies, including the imposition of human-made barriers to mobility, recurring violence, displacement, unemployment and loss of assets, are key drivers of deepening poverty, chronic humanitarian needs and rising psychosocial ill-being. A staggering 40% of the population in Beit Lahia and 42% in Rafah live in extreme poverty⁹, while unemployment rates stand at 28.5% and 33%, respectively. Statements like ‘Everyone is poor here and in Palestine!’ and ‘You are closed up, there are no industries and no jobs’ were common, indicating widespread perceptions that poverty is prevalent and is a direct outcome of the on-going blockade. Humiliation and loss of dignity were also widely associated with these processes, together with feelings of frustration and desperation, which were often palpable during fieldwork discussions.

In the West Bank, while not as high as in Gaza, poverty levels are still significant - in Jenin 24.8% and in Hebron 32.5% - and have risen significantly since the Second Intifada, which began in late 2000. Unemployment stands at 22%, and multiple respondents highlighted this as a key driver of poverty.

‘Before the Intifada I used to go to work at 5 o’clock in the morning until 4 o’clock in the afternoon. Our economic situation became much better during my work in Israel [...] I felt good because I could feed my kids. Now, though, life is so difficult’ (female beneficiary, 65, Jenin)

In both Gaza and West Bank, households where the head is unemployed, which have many children, members with substance abuse problems, disabilities or chronic illnesses, or residing in refugee camps, as well as FHHs, are widely perceived as particularly vulnerable to poverty. In addition to the structural and political factors that constrain most of the population to make strategic life choices and lead empowered lives, FHHs are also confronted

with deep-rooted conservative gender perceptions, norms and expectations. Many are prevented by family and/or community pressures from exercising their rights to freedom of movement, choosing if and whom to marry, taking up paid work outside the home and exercising their agency more broadly in terms of making life choices for themselves and their children. Vulnerabilities linked to intra-household tension and violence, psychosocial ill-being and social isolation were also a common theme among female respondents in both sites.

Coping strategies

The coping strategies that households and individuals in OPT are adopting are overwhelmingly negative. Distress strategies such as poor food consumption, indebtedness, selling personal belongings, withdrawal of children from school, child labour and marrying daughters off early are widespread. Taking on paid work to supplement the family income is less common – because of both the scarcity of employment opportunities and strong social norms preventing women’s involvement in the labour force. For those who do find employment, it is universally in the informal sector, poorly paid, and is viewed very much as a strategy of last resort.

Many respondents, FHHs in particular, also seek relief and social assistance from formal providers (including local and international non-governmental organisations (I/NGOs), Islamic organisations, the UN Relief and Works Agency (UNRWA) and MoSA) and informal providers (such as nuclear and extended family members, who typically provide gifts, food and *zakat*¹⁰, cash transfers, individual charitable donors). As one non-beneficiary noted:

‘One time my daughter had an accident and did not have health insurance [...] the hospital threatened to imprison my husband if I didn’t pay. I went to MoSA but no one helped me, so finally I found a decent charitable person who paid the money to the hospital’ (FHH middle-aged, Hebron)



However, many were also quick to add that informal social support, both financial and in-kind, from relatives, neighbours and friends had decreased substantially in recent years, and explicitly linked this to the general impoverishment of the population.

Many households stretch their limited resources to ensure sons and, in particular, daughters, are able to go to university. Investing in the higher education of girls appears to be expanding among Palestinian families, including those in lower socioeconomic quintiles, and is a positive strategy. However, structural and social constraints continue to limit the opportunities for girls and young women to translate these gains in education capital into labour market participation.

In the face of rising psychological ill-being and poverty, men and women adopt divergent coping strategies. Drug addiction as a way to cope with feelings of powerlessness and frustration is a worrying phenomenon on the rise among young and adult men in Gaza, and to a significant but lesser degree in the West Bank. Engagement in risky livelihood strategies, such as rubble collection near the buffer zone in Beit Lahia and work in the ‘tunnel industry’ in Rafah¹¹, is also on the rise among boys and young and adult males. By contrast, in both the West Bank and Gaza, feelings of resignation, self-imposed isolation, and minimising social relationships were strategies mentioned by most impoverished FHHs.

Experiences of CTs and perceptions of programme design and implementation

A number of programme design elements are contributing to positive effects at the individual, intra-household, household and community levels; conversely, there were frequent mentions of the negative repercussions that withdrawal of assistance would have at all levels (see box on page 9).

All beneficiaries regarded the programme as an important component of their overall coping repertoire. The transfer is allowing FHHs to meet basic family needs and is widely seen as a critical safety net. At the individual level it is giving women greater economic independence and a valued sense of security and enhanced psychological well-being. Expressions such as *'feeling a sense of security'*, *'improving morale'* and *'decreasing anxiety and worry'* were common.

At the household level, the transfer has helped smooth consumption patterns, allowed the purchase, on credit, of essential household items and basic services, and facilitated some investment in social capital, including participation in social occasions such as weddings, and also in human capital, particularly education. Looking back at nine years as a recipient of MoSA cash assistance, a 45-year-old widow in Rafah stated that first and foremost the PNCTP had given her *'the ability to educate and raise [my] children'*.



The PNCTP is a compensation for the Palestinian people, because they have been uprooted and displaced.

Negative effects include dependency, largely because of a lack of a viable exit strategy. Additionally, at the community level, tensions and feelings of envy towards beneficiaries were reported, linked to the new source of income, especially in Gaza. While these feelings are not escalating into overt violence, they need to be addressed through improved communication to beneficiaries and community members about programme functioning and targeting mechanisms – particularly in light of the decreased social cohesion Gazan communities are experiencing, as well as broader concerns about political instability in the regional context of the Arab Spring.

Perceptions of programme design and implementation

Despite MoSA's explicit commitment to empowering the poor and marginalised through participatory planning¹², involvement of PNCTP recipients in programme roll-out to date has been limited. There is general awareness that the programme has undergone some changes, but the objectives and rationale, and general PNCTP functioning, remain a mystery for most. Most beneficiaries and community members remain largely unaware of the shift from categorical to poverty-based targeting and the pivotal role of the PMTF. The vast majority are under the impression that eligibility criteria are linked to poverty and vulnerability, but many also assume that political affiliation and/or the pervasive patronage influences inclusion. There is also a widespread view in Gaza that social workers ultimately retain decision-making power on eligibility, programme retention and the amount of cash disbursed.

PMTF: The majority of respondents agreed the PNCTP was indeed targeting the poorest families in OPT. There were, however, widespread mentions of both inclusion and exclusion errors. Terms such as 'injustice' and 'unfairness' were frequently used during discussions on targeting and eligibility criteria, such as when describing the importance given to housing conditions and family size. In Gaza, similar perceptions were expressed in relation to cases where following the launch of the PNCTP the payment slip had been transferred from the original recipient,



who belonged to a vulnerable group such as FHHs, to other family members, most often their male kin with whom they live.

Sources of funding: When asked where they thought PNCTP funding came from, the overwhelming majority of interviewees stated the European Union (EU). While all respondents were aware of the establishment in 2007 of a parallel MoSA in Gaza, run by Hamas, none thought Hamas was responsible for the programme's administration and funding, and instead there was general recognition that the PNCTP was managed by MoSA in Ramallah. A number of Gazan beneficiaries, particularly refugees, viewed PNCTP funding as a replacement for more robust and effective international political action, and perceived the PNCTP as palliative and a way to make them forget about their rights. The PNCTP was also overwhelmingly seen as humanitarian assistance, to which Gazans have become increasingly accustomed, rather than an important part of the Palestinian social protection system.

'The PNCTP is a compensation for the Palestinian people, because they have been uprooted and displaced' (young male refugee, beneficiary, Rafah)

In the West Bank, respondents gave little credit to the PA for its role in the programme, particularly funding, but nevertheless viewed the programme's foundations as sound, seeing it as their

‘right’ and as a form of support that was more ‘dignified’ than charity:

‘The benefit is our right – in Israel people get X and Y. Here we get barely a thing. They take from us but don’t give us anything. There are just 10 metres between me and the Arabs in Israel but they are living much better than me. It is our right’ (young female, non-beneficiary, Hebron)

Experiences with social workers: For the majority of beneficiaries, interactions with social workers had largely been positive. In Gaza, many felt social workers understood their problems and empathised with them; in the West Bank, their role was often appreciated but seen as limited, given the infrequency and brevity of their home visits. Some, however, described them as disrespectful and ‘unhelpful’, especially during visits at MoSA offices.

Social workers, on the other hand, highlighted increased caseloads following the PNCTP launch. One in Beit Lahia stated that his caseload had risen from 350 to 800 families; another in Jenin had 700 cases. If each social worker is to reach everyone on their list, a household visit reportedly needs to last an average of 10-15 minutes. Social workers also widely felt they had essentially become data collectors, with the bulk of their work now centred on filling out forms, rather than providing psychosocial support to vulnerable clients. As one social worker put it, *‘we feel as if we are machines.’*



Cash transfer access and distribution:

The vast majority of PNCTP recipients interviewed complained of long waiting times and queues, particularly on the first day the cash can be collected, since virtually everyone is in need of money and most rush to the bank. In Gaza, the situation sometimes degenerates into clashes and general disorder, with the police at times resorting to beating beneficiaries in queues outside the bank. All this generates high levels of stress and feelings of humiliation among beneficiaries.

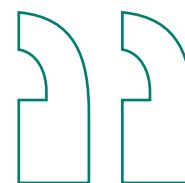
Amount and frequency of cash transfers:

All PNCTP recipients indicated that the amount of cash is insufficient to cover basic household needs, especially in large families, and that without additional sources of assistance they would be unable to cope. While the cash transfer is widely perceived as a reliable and regular source of household income, all beneficiaries interviewed also strongly expressed their preference for cash to be distributed on a monthly rather than quarterly basis so that they could better manage their debts and ensure a more frequent influx of cash into the household.

Programme governance and accountability

Given that social protection can make a critical contribution to the development of the state-citizen social contract, here we discuss key mechanisms for promoting citizens’ rights and responsibilities within the context of the PNCTP.

As access to Gaza remains difficult – a result of the ongoing blockade and internal factional divisions – MoSA Ramallah handles the PNCTP management and decision-making structure, while programme implementation takes place in Gaza, with some degree of coordination with the Hamas-run MoSA. This ‘remote management’ solution has allowed assistance to continue and, since the PNCTP’s launch in Gaza in June 2011, substantially expanded coverage. In the West Bank there is a notable degree of political will towards tackling poverty and vulnerability on the part of the PA, also reflected in the relatively quick pace with which the PNCTP reforms have been undertaken since 2010.



The benefit is our right – in Israel people get X and Y. Here we get barely a thing. They take from us but don’t give us anything.

While this is positive, a number of key areas of programme governance in both territories need strengthening, particularly around human resources (social workers in particular), interagency coordination, M&E mechanisms, information flows and fiscal sustainability.

Poor investment in human resources capacity is a critical shortcoming, and needs to be addressed as a priority. Social workers are pivotal to programme implementation but, because of data collection demands and large caseloads, they have little time to support vulnerable families, including facilitating linkages to vital psychosocial services. In Gaza, their capacity is especially weak and is a result of the sudden large-scale evacuation of qualified staff from their positions, in the wake of the Hamas takeover and the ongoing lack of capacity-building support as per the ‘no contact’ policy with Hamas¹³. Furthermore, underinvestment in both staff capacity and information sharing at different levels has meant that – as highlighted above – many beneficiaries mistakenly suspect programme eligibility is linked to political affiliation and/or patronage, and that social workers (rather than poverty targeting) decide who is eligible and the amount they receive.

Social workers are also often unable to explain to beneficiaries the poverty targeting and rights-based approach underpinning the PNCTP, and struggle to efficiently carry out their bridging role between programme designers and beneficiaries.



The importance of cash transfers in the lives of FHHs

The PNCTP is helping FHHs address a broad range of vulnerabilities: *'People have knocked on our door because they do not know where to go or to whom to turn. It is as if we are the address for all society's problems'* (Director of MoSA, Jenin).

Respondents from Gaza and the West Bank emphasised a number of key areas for improvement, but nevertheless placed a high value on the programme – not just economically but also socially and psychologically:

'No one comes to help us [...] In reality we have no support – only the MoSA transfer now – God bless' (Bedouin widow, elderly, Anata).

'The cash transfer is like the father of my kids' (FHH, 48, Jenin).

'The cash transfer protects us from begging and burdening our families' (FHH, 33, Jenin).

'It is the vein of our life' (divorced woman, 44, Beit Lahia).

'The PNCTP is like first aid that resuscitates the victim' (widow, elderly, Rafah).

'Women like us would be lost without it' (divorced woman, 53, Rafah).

Coordination mechanisms within and across government agencies, development partners and NGOs are weak. Clear links with some ministries (e.g. women's affairs, justice and labour) have yet to be established, although there is growing cooperation with UNRWA in an effort to avoid duplication of support. Linkages with the wide range of national and international NGOs providing relief and social services are also weak. An added layer of complexity relates to coordination between MoSA Ramallah and MoSA Gaza, which appears to be mostly ad hoc and does not follow systematic and consistent procedures.

This said, the national registry database system represents an excellent tool for facilitating coordination on poverty and vulnerability reduction across government agencies at central and subnational levels, and potentially also with NGOs. This database was established quite recently, so this potential is yet to be realised and, as such, careful attention will need to be paid to legal and data protection issues. The database also represents an important opportunity for M&E. MoSA has been cooperating proactively with development partners in a range of impact assessment initiatives on various programme aspects, but a clear M&E strategy, including participatory approaches, has yet to be embedded.

The programme's fiscal sustainability looks uncertain given the extent of PA dependency on donor funding, including for PNCTP financing, and in light of declining funding in recent years. As yet, there is also no viable exit strategy for beneficiaries, which is especially challenging in the prevailing political context and given the limited job opportunities available to vulnerable groups, particularly in Gaza. However, it is unlikely that PNCTP assistance will be provided forever, and even less likely that the current high level of coverage and huge costs of cash assistance provision can be sustained in the longer term.

In terms of delivering accountability, in the West Bank a grievance mechanism is in place, but complaints are often not responded to in a timely and systematic way. The Complaints Unit has limited staffing, its electronic database is not yet operational and as such it is dealing with only 40-50% of complaints. Lack of clear guidance on the decision-making role of regional social protection committees, which 'vet' new applications, has also caused tensions.

MoSA Gaza has also established a grievance mechanism, but most beneficiaries either ignore the existence of such channels or find them unhelpful. Most have struggled to have their concerns addressed, with many receiving contradictory information when contacting MoSA Ramallah or MoSA Gaza. In the absence of regional social protection committees in Gaza, household eligibility is determined predominantly through the PMTF, which is run in Ramallah. Given the political division between the PA and Hamas, possibilities for MoSA Ramallah to further investigate the situation of applicants and beneficiaries in Gaza are very limited, if they exist at all.

There is also a dearth of feedback and social accountability mechanisms (e.g. community scorecard or social audit approaches), whereby programme implementers listen to beneficiaries and other community members' views on a regular basis. No respondent mentioned having joined any PNCTP assessment or evaluation. However, many expressed a strong desire to be more involved in the programme at different levels: in M&E, providing on-going feedback and assessing eligibility and targeting. Some Gazan beneficiaries explicitly suggested the establishment of an independent committee, with membership drawn from community members and beneficiaries, precisely to carry out these functions and ultimately enhance participation and accountability.



People have knocked on our door because they do not know where to go or to whom to turn. It is as if we are the address for all society's problems'

(Director of MoSA, Jenin)

Conclusions and policy implications



Overall, our findings highlight that beneficiaries recognise the PNCTP as an important component of their coping repertoires and that, especially for FHHs, it is often the primary source of support. A number of important programme design features also stand in good stead for making ongoing and future inroads into poverty and vulnerability reduction. These include: the successful merging of cash transfer programmes into a single national programme under an overarching national social protection policy; the development of a single registry/computerised database for all beneficiaries that has the potential to be shared at all levels and across agencies; the establishment of a poverty-focused targeting mechanism that has been found to have a good level of inclusion of extremely poor people; and the twinning of cash transfers with other forms of social assistance, including food aid, basic service fee waivers and social health insurance coverage.

This said, our qualitative research study with beneficiaries and non-beneficiaries highlighted a number of areas where the programme could be strengthened so as to reduce inclusion and exclusion errors; more effectively tackle the multidimensionality of poverty and vulnerability; improve the deployment of human resources involved in implementation; and strengthen community involvement in decision making, especially in relation to programme governance, accountability and M&E.

Recommendations emerging from our research are organised into six key areas, highlighting key differences between Gaza and West Bank where appropriate. In this context it is important to highlight that Gazan programme decision-makers and implementers need to be as involved as possible in any reform processes so as to promote joint ownership over new programme initiatives, and that reforms be informed more broadly by other programme M&E evidence and considerations of resourcing, feasibility and cost effectiveness.

Targeting

- Take steps to reduce inclusion errors in a context of severe resource scarcity;
- Complement the PMTF approach with qualitative assessments;
- Expedite processing time and streamline support documentation procedures;
- In Gaza, establish interagency social protection committees; in West Bank, strengthen the mandate and decision-making role of community networks. Simultaneously ensure adequate checks and balances to minimise opportunities for clientelism;
- Introduce a cadre of MoSA data collectors to implement database development and verification processes, to complement the role of social workers, freeing up the latter to facilitate referrals to other services and support and address people's psychosocial vulnerabilities and needs.

Transfer amount and frequency

- Introduce inflation indexing of payments to mitigate spikes in living costs;
- Increase frequency of cash delivery to every two months to help beneficiaries smooth expenditure and consumption patterns;
- Consider options to reallocate resources within existing budget parameters.

Capacity building

- Invest in capacity building for social workers, focusing on M&E and learning approaches, as well as specific challenges facing the most vulnerable (including FHHs, Bedouin communities and people with disabilities);
- Invest in programme awareness-raising and opportunities for cross-agency synergies;
- Establish incentives and monitoring systems to support social workers' professional development and enhance their motivation, especially given Gaza's complex 'remote management' approach;
- Create and develop linkages between MoSA and UNRWA social workers to foster cross-agency learning, exchange experiences and capacity building (including through on-the-job training and mentoring).

Citizen awareness-raising

- Invest in awareness-raising efforts with beneficiaries and wider communities to strengthen information flows, accountability and state–citizen relations;
- Utilise banks as points of interaction so community members can better understand programme features and processes and access information about additional programmes and sources;
- Communicate programme information and success stories via radio and print media.

Programme governance and accountability

- Develop a programme governance framework, including greater decentralisation and citizen participation in M&E and social accountability processes;
- Strengthen grievance procedures and feedback channels;
- Strengthen coordination across government agencies, NGOs and religious organisation service providers, facilitated by the national registry and a mapping of complementary services and programmes;
- Strengthen coordination among development partners and international NGOs, especially regarding M&E, information exchange and learning;
- Strengthen coordination and communication between MoSA Ramallah and MoSA Gaza, particularly around targeting; social workers' professional advancement; and reinstatement of at least some of the workforce that is currently at home.

Tailored packages of social assistance

- Ensure future rollout is embedded within a broader social protection strategy that includes linkages to complementary forms of social assistance (e.g. asset transfers, fee waivers), social security and social services;
- Undertake district-specific mappings of available public, private and NGO relief and social protection services to identify potential synergies, as well as critical gaps; develop a costed action plan to address these;
- Promote shifts in gender norms, roles and expectations through behavioural change communication efforts with implementers and communities alike to strengthen the contribution of the programme to tackling gender-specific vulnerabilities;
- Develop employment counselling units within MoSA to support beneficiaries to supplement their income and gradually exit from the programme;
- Develop and implement tailored social assistance and social services to people with disabilities and the chronically ill;



- Develop and promote the uptake of integrated psychosocial support services, including local community centres where beneficiaries can meet and discuss issues of common concern;
- Provide opportunities to undertake voluntary work to support MoSA activities to improve citizens' sense of self-worth, identity and potentially longer-term employability.

- 1 <http://www.odi.org.uk/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8180.pdf>
- 2 <http://www.odi.org.uk/sites/odi.org.uk/files/odi-assets/publications-opinion-files/8179.pdf>
- 3 MoSA (2011) 'Business Strategy, May 2011'. Ramallah: MoSA
- 4 A European mechanism established in February 2008 by the European Commission (EC) to channel assistance to the PA in support of a broad array of activities in the four priority sectors of the Palestinian Reform and Development Plan (PRDP) (http://eeas.europa.eu/occupied_palestinian_territory/tim/pegase_en.pdf).
- 5 MoSA informants estimated that around 125,000 Palestinian households currently live in extreme poverty.
- 6 MoSA (2012) 'SSNRP Progress Report for the World Bank, First Quarter 2012'. Ramallah: MoSA.
- 7 The poverty gap is the difference between the estimated household consumption (the total consumption score calculated through the PMTF) and the extreme poverty line.
- 8 A system of payment to beneficiaries' bank accounts has recently been introduced in West Bank; in Gaza cash transfers continue to be disbursed to beneficiaries through payment slips, which can be collected (and exchanged) either directly at the bank or at MoSA.
- 9 UNDP (2009) 'Inside Gaza: Attitudes and Perceptions of the Gaza Strip Residents in the Aftermath of the Israeli Military Operations'. Jerusalem: UNDP.
- 10 Zakat is prescribed by the Koran as an obligatory payment by each individual to benefit the poor. It is calculated as a yearly tax, proportional to an individual's wealth.
- 11 Since the imposition of the blockade in 2007 a network of tunnels built under the Gaza–Egypt border in the Rafah area have stimulated local demand. They have supplied Gazans with a wide range of otherwise unavailable goods, including fuel, construction materials and consumables, and have become a local lifeline.
- 12 MoSA (2010) 'The Palestinian National Program for Social Protection "Cash Transfer Strategy"'. Ramallah: MoSA.
- 13 Because Hamas is a designated foreign terrorist organisation under many counter-terrorism laws, following the establishment of the Hamas government several donors enforced a 'no-contact' policy, which entails the absence of any relations with the Hamas administration, including diplomatic, political and economic ties and also the provision of humanitarian and development assistance.

TRANSFORMING CASH TRANSFERS

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