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Survival in the Period of Social Protection Delivery Disjunction in Zimbabwe: A Case of Public Assistance Beneficiaries in Norton and Mhondoro

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Abstract:

Zimbabwe is facing financial challenges which have weakened many organizations and social delivery systems. The liquidity crunch has rendered the government social services programmes redundant. The government and implementing partners are undertaking a programme face-lift of the former Public Assistance caseload Monthly Allowances into Harmonised Social Cash Transfers (HSCT). HSCT are being rolled out in phases with other Districts still to be included. Currently the government has covered about 20 districts out of a total of 65. Monthly Allowances payment in areas where HSCT are yet to be introduced is practically not available as the assistance takes a long time before it is deposited despite government's undertaking to continue disbursing. In the case of Norton and some Districts who are yet to have HSCT programme the MA payment was last disbursed once in June 2014 and having distributed twice only in previous year in the month of February where it was paid for the month of January and February. This has left people deeply immersed in vulnerability. The paper looks at survival strategies these vulnerable groups are resorting to in the absence of the payment. Some of these survival strategies include, meal skipping where they skip a meal in order to survive. Either they eat in the morning and skip the afternoon to eat in the evening. Complete withdrawal of children from schools and seeking employment as maids and gardeners, in terms of health services some have adopted traditional medicine instead of allopathic medicine.

Keywords: Disjunction in social policy delivery, public assistance beneficiaries and survival strategies

1. Introduction

Norton District is located nearly 45 km from the capital city Harare and falls in Mashonaland West administratively. The district is relatively small in terms of its geographical coverage and used to house some big industries like Dandy Zimbabwe, Makwiro, Hast, Hunyani, Morton Jeffery waterworks among other industries which gave employment and means of survival for the small town's residence which unfortunately have closed or downsized their operations. The area as it also houses Lake Chivero and borders with the Darwendale dam has also a booming fishery business which also gives another avenue for survival and food addition. The area is composed of different people of a varying background who can be categorized into three main compartments in terms of geographical locations. The district's mixed populations has the (a)Urban component located in the suburbs that include low, medium and high density (b) Peri-urban component who are those in surrounding farming areas (c) rural component who are mainly rural folks from Mhondoro wards 8, 9 and 10 (Chingwere, Kaveru and Dzumbunu). The rural wards are approximated at 45 km away from Norton again.

The rural part of the Norton District depends mainly on rain fed agriculture for their survival. Zimbabwe in general and Mhondoro in particular in the recent decade was and still a drought prone area. The area is characterized by both types of poverty drivers the covariant and the idiosyncratic, however "transient" poverty is the most visible of the two and with cases of abject poverty on the increase due to bad harvest recorded in the past years as well as the country's ailing economic situation. Hulmes and Shepherd (2003) defined "transient" poverty as a temporary disruption of normal livelihood patterns which can be compensated for by provision of social or family assistance and likely cured by a better harvest or a general upswing in the economy. The social provision by the government has been affected by economic challenges and the negative trickledown effect on industries within the area shifted the well-being to the negative a situation further compounded by poor harvest in the agricultural rural areas. This further reduced family assistance and increasing capability poverty among the people and further weakened social welfare in the district. The Public Assistance beneficiaries in year 2013 only received their assistance for two months which was deposited in February a combined payment for the months of January and February. In 2014 the disbursement was done once for one month in June making it a total three months an equivalent of US\$60.00 per head over a period of 20 months.

Johnson (1990), defines social welfare as societally organized activities aimed at maintaining or improving human well-being. This definition encompasses both formally and informally organized services by government, voluntary organizations and individuals. Social welfare in Zimbabwe is framed mainly with the need to combat adverse poverty, hunger, deprivation and destitution achieved mainly by way of income redistribution or social compensation. This paper will center on Maintenance Allowances (MA) under the Public Assistance (PA). Kaseke (1995) postulated that social welfare systems reflect the social,

political, economic and cultural environment in which they exist. Gil (1989) weighs in by reinforcing this view leaning much on the egalitarian approach by pointing out that social welfare are also shaped by cultures. Cultural elites recruited from various strata of power and influence impose on a social welfare fabric. The course of the social welfare policy in Zimbabwe is inundated by preferences and tastes of the most powerful. This can be true in the case of some parts of Zimbabwe where issues of Public Assistance have drastically deteriorated. Monthly maintenance allowances are no longer being honored on time. The shift from Monthly Allowances as provided by Public Assistance to a new paradigm of Harmonised Social Cash Transfers indicates the developmental course of Zimbabwe in terms of Social Service provision. Beneficiaries of PA assistance in districts where HSCT are yet to be rolled out are going without any assistance the transition has created a gap and further immersed beneficiaries into deprivation.

The technocrats have in terms of government and other implementing partners have seen it fit to embark on an approach shift from the Monthly Allowance payments under PA to new design of Harmonised Social Cash Transfers. This is a noble undertaking by the government and involved partners for according to Mutetwa and Muchacha (2013) HSCT are a good design as it has lots of advantages one of the advantages being community participation. However this shift although on paper has an undertaking to continue the disbursement of the Monthly Allowances under PA to those districts where HSCT are yet to be rolled out it is still a challenge as these beneficiaries are going for months without receiving their monthly payments. This service has almost been rendered extinct due to none payment and beneficiaries have relapsed into poverty. This further confirms Kawewe's (1995) claim that social welfare systems reflect the social, political, economic and cultural environment existing. Zimbabwe is a developing country better expressed as among the least developed countries and its systems of governance is in constant change in pursuit of improvements. The country is further compounded by an economic downturn that has made it difficult for the government to pay the beneficiaries in time and hence a disjointed and unpredictable payment schedules.

The scenario at the interface of the PA disbandment and HSCT inception in various districts who already have (HSCT) and those yet to be rolled out resembles a sorry state. Despite an undertaking by government to continue the programme till it has been phased out by the HSCT the reflection on the grounds depicts a none-existence of the service provision. Pumphrey (1971) and Johnson (1990) view social service as methods used to help people who are unable to provide for themselves and also as methods used to help individuals, groups and communities improve their social functioning by improving the standard of living and providing recreation. Norton district consist of such individuals who are unable to provide for themselves in the urban, peri-urban and rural parts of the district. The Regional Hunger Vulnerability Programme (2006) gave characteristics of a social protection mechanism which it depicted as a programme with following key features: predictability, durability, consistency and transparency. Taking a look at the interface of Maintenance Allowances under PA and HSCT the residues of the PA do not fit in the above stated characteristics. The PA is still principal in some districts without HSCT and makes the de facto government social protection mechanism. Technically the service can be termed to be in operation but practically none-operational. Norton district only got two payments of the MA for 2 years from 2012 to 2014 by and large this invalidates PA in these districts as a social protection mechanism as it has shed off some of the anticipated features of predictability, durability, consistency as stated above.

2. Maintenance Allowance (MA) under Public Assistance (PA)

Mutetwa and Muchacha (2013) viewed Public Assistance as a traditional form of social protection in Zimbabwe. It is guided by the statutory provision of the Social Welfare Assistance Act (Chapter 17: 06). It supports the elderly person, people with disabilities, indigent, and children in need of care. The programme was or is given following means-testing procedures. Those who qualified for the assistance would then receive monthly payment of US\$20.00. The clients would be asked to open an account with the People's Own Savings Bank (POSB) and the money would be deposited in their accounts and they would check by each month end. This according to Mutetwa and Muchacha (2013) was a form of exclusion to those who could not reach the area of service for instance the District Social Services/Welfare Office (DSSO or DSWO) for means-testing and the POSB for opening an account. This made the service not accessible to some deserving clients given the hustles it involved for example in Norton District.

The PA is a precursor to the HSCT a programme with a cash transfer component as alluded above and supported by Munro (2001). The PA was tailor made for people who are destitute and unable to work and provide for themselves making it more remedial than proactive. The prospective beneficiaries are to have no known family members, aged, chronically ill and that subset of the chronically poor. PA has been in operation since Zimbabwe's independence in 1980 although during the colonial period was provided following conspicuous racial lines and demarcation and by independence it was broadened to cover the African majority although it had also an urban bias. Munro (2001) argued that its impact on the livelihoods of beneficiaries was difficult to evaluate. Although having some semblance of truth this can be misleading as the programme did transform the livelihoods of the beneficiaries in a significant way. For instance school drop outs were minimal as opposed to what can be witnessed now when the programme is on its lowest ebb in Norton district.

3. Challenges and Survival Strategies

Munro's (2001) findings of difficulties in evaluation however do not make the programme a complete failure although he does not conclude that way. However the findings of this paper rather clearly resonate to that of Kaseke (1998) that the programme's selective coverage and little resources allocated to it in face of many persons in need only benefits a few. This is clearly spelt out from the situation prevalent now in face of a semi-withdrawal of the service where guardians are forced to pull out their kids from school. Mr. Tapera a beneficiary of the programme had this to say,

"kamari ikaka kaitibatsira taikachengeta vana vachienda kuchikoro mari yechikoro ingori 15 dhora saka kaitokwana kuti mwana aende izvezvi kakapedzesera kaare kuuya muzukuru wangu akatararawo..."

[This money was helpful, we could keep it for kids to send them to school and their fees are US\$15 and it was enough for children to go school. Now the money lasted way back and my grandchild is seated at home.]

This bears witness to the usefulness and impact the MA under PA had on its beneficiaries. Human beings are active agencies according to Giddens' (1990) structure-agency theory. They make informed decisions according to resources at their disposal in case of livelihood matters. The people always have a priority list in terms of their survival handbooks. In face of challenges especially that compete for scarce resources a determination in terms of priority is made. The number one aspect is of surviving and keeping life. In this situation the beneficiaries are resorting to withdrawing their kids from schools so that the little that they have they channel it to consumption. A living uneducated child is better than a dead but educated child as pointed by Mr. Tapera when he added that,

"...zvitorinani kuti asaende hake kuchikoro twushoma itwotwo twerent tiwane yekudya, pane kuti afe nenzara achivavarira kuenda kuchikoro asinakudzidza arinani pane guva..."

[...it is much better for him to leave school and save the little we get from rent for food, than for him to die of hunger in pursuit of education, an uneducated somebody is better than a grave...]

Mr. Tapera and his family of 3 owns a 2 roomed house in one of the high density suburbs of Katanga of which 1 room he rents it at a charge of US\$15.00 which leaves him with barely nothing after deducting rates and other charges for electricity, water among other expenses. The MA payment was to a large extent complementing the income they got from the rentals.

It is imperative for the government to engage a shift of focus in terms of service provision approach from PA's MA to HSCT. Agreeing with Kaseke's (1998) and Mutetwa and Muchacha's (2013) postulations that the programme is isolated from other programmes implemented in conjunction with other donors as it is solely administered by the Department of Social Services, there is need to disband it for a more inclusive approach. Cognoscente of that need for shift the government was supposed to solidly put in place an interim measure that was to cushion the people during the transition. The Social Services Officer in the Department of Social Services in Norton pointed out that the government still upholds the need to continue with MA payment until such as a time when HSCT are introduced in the district. Mr. Kuringenyika the District Social Services Officer (DSSO) for Norton highlighted that,

"...the government has not abdicated its responsibility to the vulnerable; it still maintains that MA payment is still much in force in districts yet to have HSCT. A clear distinction between failing to pay in time and complete withdrawal should be made. The government is of course not paying in time due to other challenges but definitely not on the basis of lack of will..."

A verbal promise not accompanied by action however has landed a majority of the beneficiaries in poor living standards. The beneficiaries as highlighted above in order to survive have devised an escape route of prioritizing essentials. This has worked strongly in reducing the living standards of the concerned people. Some services has been struck off their priority list and making do without, this do not mitigate risks of socio-economic insecurity but worsens them and further drives away the realization of Millennium Development Goals as Chitambara (2010) postulated of a social protection service. As food has taken poll position on the hierarchy of demand other services such as electricity and water has been sacrificed. Mr. Mabasa a beneficiary of the programme has resorted to firewood collection despite his advanced age coupled with a bodily disability and ailment. Him being in ownership of a house like Mr. Tapera he pays no rent and no fees as his child is now in University sponsored by Capernaum Trust. He has substituted electricity for wood and his house is with no electricity for the past six months and more. Mr. Mabasa's house has no running water as the Town Council Authorities have disconnected the water supply and relies on those with wells and mainly utilizes the St Eric's primary school water supply point which they have placed outside. All these two services are of profound importance to the Human Development Index when looking at development of a community and individuals. Their absence given the fact that it is in a urban setup greatly lowers the living standards. Previously with a steady and almost steady flow of the MA payment Mr. Mabasa pointed out that they could afford to settle other bills and now they have since accrued beyond their reach.

Most beneficiaries have indicated that their lives are more vulnerable with the delay in terms of payment and the seemingly abandoned programme. Some of these beneficiaries received a near to complete package of services that besides the monetary payment they received Assisted Medical Treatment Orders (AMTOs). This is mainly due to a multiplicity of ailments that accompany old age as most of the beneficiaries are old aged people. Kaseke (1997) points out to AMTOs as some of the non-contributory social assistance schemes given by government. Norton as a District does not have a government hospital but a council owned hospital which do not acknowledge the AMTOs. This has left the clients with the need to travel to Harare for medical attention. The MA played a greater part in providing bus fares for their travelling to and from Harare to get free medication and specialist checkups. Free medication now seems to be out of reach as they cannot afford to go to Harare to get treatment.

In face of such a challenge on the medical front the beneficiaries have resorted to cheap pain killers and allopathic medicine which in most cases do not bring out the much desired outcomes. Bury (1997) in his critic of allopathic medicine in favor of the bio-medical approach highlights the efficiency of the modern practice castigating the traditional practice as dangerous and unreliable as it is founded upon superstition, lay beliefs and being very irrational. This according to him have greatly reduced quality of treatment and living standards of the beneficiaries as they have withdrawn from their bio-medical treatment and opting for cheap traditional and white garment (Faith healing from the clergy and prophets) treatment. A total of 3 beneficiaries who were to be part of the interviews were discovered to have succumbed to their illness mainly due to withdrawal of treatment due to lack of funds to go for medical attention and checkups. (All of the deceased were well known to the researcher for their conditions which required constant dialysis (kidney problem) and chemotherapy (cancer) and other checkups. The researcher worked with them before leaving the service.) This challenge is not only limited to the urban segment only but it is also of high proportion in peri-urban and rural areas where transport charges are even higher to get to major hospitals for specialized treatment.

The delay in MA disbursement has also resulted in the escalation in hunger levels. Chambers (2006) defined hunger as the lack of food that leads to starvation. The urban community or segment of the district survives mainly on commodity purchase from retail outlets. Although they do practice urban farming not everyone owns a piece of land and also due to age and other conditions such as sickness, among others they do not subsidize themselves with agricultural products. They rely on agricultural products from the peri-urban and rural areas sold at the market place in Norton. In the face of poor harvest like the experience of the past years commodities at the market are a bit expensive since they will be in scarcity. This has caused vulnerability to worsen among all sections in the district the peri-urban, urban and rural. These people are chained in a production and consumption ecosystem where the rural and peri-urban people rely on their continued production on land from the urban remittances in monetary form or inputs and also the urban relying on the peri-urban and rural people for cheap agricultural commodities. This link has been weakened because of financial challenges from the urban area which has negatively impacted production and ultimately market prices putting a toll order on the unemployed and labor constrained MA beneficiaries.

Coping has been defined as an array of short-term strategies adopted by households and communities in response to a crisis (Berkes and Jolly, 2001). Mararike and Nyamwanza (2012) postulated that coping strategies can be broadly taken to mean mechanisms strengthening a household's position against risks and minimizing the effects of various stresses and shocks. They have identified various ways that include diversifying crops and livelihood sources (hunting mice and locust, wild fruits and veggies), and conducting various tradeoffs, property and assets selling. The beneficiaries of the MA have resorted also to selling their belongings to offset a negative well-being coming in after an erratic MA payment. In the urban areas some utensil has been sold in order to raise enough for their food but however the properties on sale do not fetch much on the market as they will be old and tattered. Items including beds, old sofas, kitchen units and fridges have been sold by some beneficiaries. In the rural areas and peri-urban settlements those who owned small livestock like goats and fowl they also sold them or trade for food staffs to raise enough to offset the hunger. This although according to Mararike (1999) is one of the role played by assets in rural survival, it has greatly depleted their already strained resource base.

The art of skipping meals is an old survival strategy vulnerable people adopt in order to save the little that they have. Manjengwa et al (2012) also noted this practice where they pointed out that in most instances poor households often eat food which is of poor nutritional value. In some instances poor people or those facing food challenges they skip meals so as to spread even the little that they have. When MA was still constant and a little bit predictable beneficiaries points out that they rarely resorted to skipping meals but could do that when their provisions were running out and waiting for their payment. Skipping of meals is now more of a norm as they are not sure when their payment would be effected. This strategy is practiced in all parts of the district's sections. This has greatly reduced their bodily nourishment and their structures could be visibly identified that they are lacking adequate food and nutrition by mere observation.

The MA beneficiaries just like other indigents of community in the rural areas are also resorting to casual agricultural labor or work (maricho) to survive. Mararike and Nyamwanza (2012) in focus group discussions they carried out in Chiredzi, Chimanimani and Mbire they found out that casual labor dominated as a survival strategy in face of stresses and shocks. Similarly although of a different nature beneficiaries of MA in face of delayed payments they engage in casual labor in their communities. This type of casual labor takes a new twist from the one discovered by Mararike and Nyamwanza where mostly because the people who resided in border towns like Chimanimani, Chiredzi and Mbire got opportunities in other countries in their proximity. This one involves the exploitation of the kinsman. Because the beneficiaries are old and labor constrained they coordinate their households members usually the young to look for casual work including, fencing, watering the gardens, herding goats and cattle to get a living. This in turn guarantees them draught power during the farming season and also an additional source of food as milk and meat when they milk the goats and cows or when owners slaughter their beasts for consumption.

Manjengwa et al (2012), points at migration as another way of coping with adverse effects of poverty and other forms of ill-being. In the case of Manjengwa the migration under spotlight was mainly international migration where people usually the able bodied would cross borders to seek employment in neighboring countries like Botswana, South Africa, and Zambia among others. The people in Norton district and especially the cohort under study resorts to a much local type of migration the rural to rural, urban to rural, rural to urban and urban to urban kind of migration in search of greener pastures or to stay with relatives. Most cases visited indicated a close link between Norton and Mhondoro as historically Mhondoro was the main feeder to the small town of Norton's industries and these people they to some extent kept their rural ties alive, in face of serious challenges in urban areas they moved back to their rural areas where living conditions are assumed to be cheap and affordable. In some cases they are taken by their relatives in other urban areas to stay with them. Similarly those in rural and peri-urban areas they also migrate from their areas to other rural areas in search of fertile lands or their own pieces of land or to stay with their relatives in urban areas who would be doing well or in other rural areas where they assume to have an improvement on their conditions of leaving.

4. Conclusion and Recommendations

The decision to migrate the MA under the Public Assistance to Harmonized Social Cash Transfer which encourages the community or beneficiary participation is quite plausible. The need to migrate them to a more accessible HSCT given its mobility as it delivers the cash on the beneficiaries' door steps by way of communally agreed cash distribution points accessible to all makes a lot different from the bank account system that is bureaucratic and a means of exclusion due to its technical requirements and moreover the distance travelled by other beneficiaries to acquire the services. However the challenge is on the implementation of the transition where particular attention is given to HSCT and the MA not much attended to. Since the past shapes the present and the present is the past for the future similar policy disjunctions has to be avoided. The HSCT will definitely be amended in some ways in the near or distant future and consideration in avoiding a policy vacuum or unpolished bridging exercises like the

shift from MA to HSCT. The government and other stakeholders should put in place reliable mechanisms to cushion people in the transition course that a change in service delivery does not push them into vulnerability.

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