FACTORS INFLUENCING IMPLEMENTATION OF SOCIAL PROTECTION PROGRAMMES IN KENYA:
A CASE OF CASH TRANSFER PROGRAMME FOR ORPHANS AND VULNERABLE CHILDREN IN KIBERA SLUMS, NAIROBI COUNTY

BY
LOYCE KWAMBOKA MOSE

A Research Project Report Submitted in Partial Fulfilment for the Requirements of the Award of a degree of Master of Arts in Project Planning and Management.
University of Nairobi

2015
DECLARATION

I declare that this research project report is my original work and has not been presented for award in any other university.

Loyce Kwamboka Mose
L50/67649/2013

Signature.................................... Date......................

This research project report has been submitted for examination with my approval as University Supervisor.

Signature……………………………… Date…………………………

Prof. Harriet Kidombo
Associate Professor,
Department of Educational Studies
University of Nairobi
DEDICATION

This research project report is dedicated to my beloved husband Sephone Ombachi and my son Colin Nyaoma for their steadfast love and encouragement. You have been my underlying motivation whenever things are tough to look into the future with more expectations. I also want to appreciate my parents for giving me an education that has brought me this far.
ACKNOWLEDGEMENT

I would like to express my sincere gratitude to the following people and institutions for their kind support without which this study would not have been successful. First and foremost, I convey my sincere gratitude to the University of Nairobi for granting me an opportunity to study my master’s programme. My special gratitude goes to my supervisor Professor Harriet Kidombo who is also the Dean School of Continuing & Distance Education at the University of Nairobi for her guidance, mentorship and support in her characteristic humble and respectful way. Her comments and support shaped the development of this report.

My special gratitude is extended to my lecturers at the School of Continuing and Distance Education of the University of Nairobi particularly the Associate Dean for Postgraduate Studies Professor Christopher M. Gakuu, Associate Dean for Undergraduate Programmes, Professor Charles Rambo, Chairman of the Department of Extra Mural studies and all the other senior professors and lecturers. Your support, diligence and selflessness are highly appreciated. Warm regards are also extended to the entire staff at the Department for the invaluable assistance accorded to me during my studies.

I thank all my classmates who gave me companionship and support that I needed for this studies. My sincere thanks go to Mr Peter Muchai and Mr Ochieng from children’s department for facilitating me with reading material and data collection. My sincere thanks goes to all my respondents from Kibera for accepting to provide me with data for this research.
TABLE OF CONTENT

DECLARATION .......................................................................................................................... ii

DEDICATION .......................................................................................................................... iii

ACKNOWLEDGEMENT ......................................................................................................... iv

TABLE OF CONTENT .......................................................................................................... v

LIST OF FIGURES ................................................................................................................ vii

LIST OF TABLES ................................................................................................................ viii

ABREVIATIONS AND ACRONYMS ..................................................................................... ix

ABSTRACT ........................................................................................................................... x

CHAPTER ONE: INTRODUCTION ........................................................................................... 1

1.1 Background of the study ............................................................................................. 1

1.2 Statement of the problem ......................................................................................... 4

1.3 Purpose of the Study ............................................................................................... 6

1.4 Objectives of the Study ........................................................................................... 6

1.5 Research Questions .................................................................................................. 6

1.6 Significance of the Study ......................................................................................... 7

1.7 Basic Assumptions of the Study .............................................................................. 7

1.8 Limitations of the Study .......................................................................................... 8

1.9 Delimitations of the Study ........................................................................................ 8

1.10 Definition of Significant Terms ............................................................................... 8

1.11 Organization of the study ......................................................................................... 9

CHAPTER TWO: LITERATURE REVIEW ............................................................................... 10

2.1 Introduction ................................................................................................................ 11

2.2 Implementation of social protection programmes .................................................. 11

2.3 Role of Targeting on influencing implementation of cash transfer programme .......... 13

2.4 Role of Financing on influencing implementation of cash transfer programme .... 18
2.5 Legal framework and its influence on implementation of cash transfer programme ……22
2.6 Socio-Culture influence on implementation of cash transfer programme………………24
2.7 Theoretical framework………………………………………………………………………235
2.7.1 Social contract theory …………………………………………………………………25
2.8 Conceptual Framework……………………………………………………………………27
2.9 Knowledge gap ………………………………………………………………………………28

CHAPTER THREE: RESEARCH METHODOLOGY………………………………………………29
3.1 Introduction:…………………………………………………………………………………….29
3.2. Research Design…………………………………………………………………………………29
3.3. Target Population………………………………………………………………………………29
3.4. Sampling size and sampling Procedure …………………………………………………30
3.5. Methods of Data Collection …………………………………………………………………31
3.5.1 Pilot Testing of the Instrument…………………………………………………………32
3.5.2 Validity of Research Instrument…………………………………………………………32
3.5.3 Reliability of Research Instrument…………………………………………………………32
3.6 Data collection procedures……………………………………………………………………32
3.7 Data Analysis Techniques……………………………………………………………………33
3.8 Ethical Consideration…………………………………………………………………………33
3.9 Operational Definition of Variables…………………………………………………………34

CHAPTER FOUR: DATA ANALYSIS, PRESENTATION AND INTERPRETATION……………………………………………………………………………………………………36
4.1 Introduction……………………………………………………………………………………36
4.2 Questionnaire Return Rate……………………………………………………………………36
4.3 Demographic Characteristics of the Respondents…………………………………………37
4.4.1 Financing and Implementation of cash transfer programme…………………………40
4.4.2 Targeting and its influence on cash transfer programme……………………………44
4.4.3 Socio-cultural Factors and its influence on cash transfer Programme……………….47
4.4.4 Legal Framework and implementation of cash transfer Programme…………………50
CHAPTER FIVE: SUMMARY OF THE FINDINGS, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATION

5.1 Introduction........................................................................................................52
5.2 Summary of Findings........................................................................................52
5.2.1 Findings on Financing and Implementation of cash transfer Programme........52
5.2.2 Findings on Targeting and Implementation of cash transfer Programme........52
5.2.3 Findings on Socio-cultural Factors and Implementation of cash transfer Programme..52
5.2.4 Findings on Legal Framework and Implementation of cash transfer Programme......53
5.3 Discussions on findings......................................................................................53
5.3.1 Financing and Implementation of cash transfer Programme.........................53
5.3.2 Targeting and Implementation of cash transfer Programme..........................54
5.3.3 Socio-cultural Factors and Implementation of cash transfer Programme..........56
5.3.4 Legal Framework and Implementation of cash transfer Programme..............57
5.4 Conclusions........................................................................................................58
5.5 Recommendations.............................................................................................59
5.6 Suggestions for Further Research.....................................................................59

REFERENCES........................................................................................................60

APPENDICES........................................................................................................65

APPENDIX I: Letter of Transmittal of Data Collection Instruments..........................65
APPENDIX II: Research Questionnaire.....................................................................66
APPENDIX III: Table for Determining Sample Size For a Given Population............76
APPENDIX IV: Authorisation letter from university..................................................77
APPENDIX V: Research Permit................................................................................78
LIST OF FIGURES

Figure 1: The Conceptual Framework.........................................................27
LIST OF TABLES

Table 2.1: Knowledge Gap ................................................................. 28
Table 3.1: Sample distributions of respondents ........................................... 31
Table 3.2: Operational Definition of Variables table ...................................... 34
Table 4.1: Questionnaire return rate .......................................................... 36
Table 4.2: Participants’ Age ..................................................................... 37
Table 4.3: Respondents Gender ................................................................ 37
Table 4.4: Respondents level of education .................................................. 38
Table 4.5: OVCs’ level of education .............................................................. 38
Table 4.6: Registered caregivers ................................................................. 39
Table 4.7: OVCs’ with birth certificates ....................................................... 39
Table 4.8: Regularity of payment ............................................................... 40
Table 4.9: Amount of cash given per household .......................................... 40
Table 4.10: Payment point ..................................................................... 41
Table 4.11: Convenience of mode of payment ............................................. 41
Table 4.12: Government allocation to the cash transfer programme since 2004/2005 ... 42
Table 4.13: Inferential statistics on financing ............................................... 43
Table 4.14: Spearman’s Rho for financing and implementation of cash transfer programme. 43
Table 4.15: Identification of beneficiaries into the programme ....................... 44
Table 4.16: How respondents got to know about the programme .................... 44
Table 4.17: Exclusion of needy people from the programme ......................... 45
Table 4.18: Relationship between targeting and programme efficiency ........... 45
Table 4.19: Spearman’s Rho for Targeting .................................................. 46
Table 4.20: Female OVCs are most affected by negative happenings in society .... 47
Table 4.21: OVC school dropout rates are higher for the girl child than boy child .... 47
Table 4.22: Incidences of physical and sexual child abuse ................................ 48
Table 4.23: OVCs benefiting from cash transfers are stigmatized ................... 48
Table 4.24: Orphans dropping out of school into early marriage ..................... 49
Table 4.25: Spearman’s Rho for Socio-cultural Factors ................................ 49
Table 4.26: Level of awareness of caregivers of OVC on laws and policies on children ... 50
Table 4.27: Knowledge of caregivers on where to report cases of OVC abuses ....... 50
Table 4.28: Spearman’s Rho for Legal Framework ....................................... 51
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>AIDS</td>
<td>Acquired Immune deficiency Syndrome</td>
</tr>
<tr>
<td>BWCs</td>
<td>Beneficiary Welfare Committees</td>
</tr>
<tr>
<td>CT</td>
<td>Cash Transfer</td>
</tr>
<tr>
<td>CCT</td>
<td>Conditional cash Transfer</td>
</tr>
<tr>
<td>CRC</td>
<td>Convention on Rights of children</td>
</tr>
<tr>
<td>DCO</td>
<td>District Children Officer</td>
</tr>
<tr>
<td>DFID</td>
<td>Department for International Development</td>
</tr>
<tr>
<td>GDP</td>
<td>Gross Domestic Product</td>
</tr>
<tr>
<td>GOK</td>
<td>Government of Kenya</td>
</tr>
<tr>
<td>HH</td>
<td>House hold</td>
</tr>
<tr>
<td>HIV</td>
<td>Human Immuno Deficiency Virus</td>
</tr>
<tr>
<td>KAIS</td>
<td>Kenya Aids Integrated Survey</td>
</tr>
<tr>
<td>KNBS</td>
<td>Kenya National Bureau of Statistics</td>
</tr>
<tr>
<td>LOC</td>
<td>Location OVC Committee</td>
</tr>
<tr>
<td>MICS</td>
<td>Multiple Indicator cluster Survey</td>
</tr>
<tr>
<td>MIS</td>
<td>Management and Information System</td>
</tr>
<tr>
<td>NPA</td>
<td>National Plan of Action</td>
</tr>
<tr>
<td>NSPP</td>
<td>National Social Protection Policy</td>
</tr>
<tr>
<td>ODI</td>
<td>Overseas Development Institute</td>
</tr>
<tr>
<td>OECD</td>
<td>Organization for Economic Cooperation and Development</td>
</tr>
<tr>
<td>OVC</td>
<td>Orphan and Vulnerable Child</td>
</tr>
<tr>
<td>OVCCT</td>
<td>Orphans and Vulnerable Children Cash Transfer</td>
</tr>
<tr>
<td>SCOSC</td>
<td>Sub-County OVC Sub-Committee</td>
</tr>
<tr>
<td>SPSS</td>
<td>Statistical Packages for Social Sciences</td>
</tr>
<tr>
<td>UK</td>
<td>United Kingdom</td>
</tr>
<tr>
<td>UNDHR</td>
<td>United Nations Declaration of Human Right</td>
</tr>
<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>WFP</td>
<td>World Food Programme</td>
</tr>
<tr>
<td>VCOs</td>
<td>Volunteer Children Officers</td>
</tr>
</tbody>
</table>
ABSTRACT

Majority of the Kenyan orphans live under extreme poverty conditions with relatives or guardians who are also often poor and therefore unable to provide basic care for these children. The ‘Cash Transfer for Orphans and Vulnerable Children’ (CT-OVC) in Kenya is a government-supported programme intended to provide regular and predictable cash transfers to poor households taking care of OVC. This study focused on Kenya’s urban informal settlement slum of Kibera, an important caseload of vulnerable population inundated with frequent shocks and stresses that tend to perpetuate and recycle generational poverty. This study sought to examine factors influencing implementation of cash transfer programme for OVC. The study sought to establish how financing, targeting, legal framework and socio-cultural factors influence implementation of the programme. This study was delimited to Kibera Laini Saba location which has a total of 159 households benefiting from the programme. Using the Krejcie and Morgan table for determining sample size, 113 individuals were selected to constitute the sample size for the study. The study adopted a descriptive survey design. Stratified sampling was used to select the sample size of 113 respondents from the target population. Questionnaires with both closed and open ended questions were used to collect data. Content and construct validity were determined through review of questionnaire by children officers to ascertain that it was comprehensive for the proposed study. Split-half method was used to test the reliability of questionnaire to ensure that the results obtained through its use were consistent from one respondent to the other. The questionnaire was split into two equivalent halves; odd and even questions for all questions, and then a correlation coefficient for the two halves was computed and adjusted to reflect the entire questionnaire using the Spearman-Brown prophecy formula. A correlation of 0.946 was computed from the two halves and this was corrected using the Spearman-Brown prophecy formula and yielded a corrected Spearman-Brown reliability of 0.972. The instrument was therefore reliable since the correlation was above 0.8. Data collected was cleaned, coded, categorised and analysed using SPSS software version 19. It was established all the four factors studied had a positive correlation on implementation of cash transfer programme for OVC. The study established that there exists a significant positive relationship between financing and the implementation of the cash transfer program for OVC in Kibera slums, Nairobi, with a Spearman’s correlation coefficient of 0.474. The study established that there is a significant positive relationship between targeting and the implementation of the cash transfer programme for OVC in Kibera slums, Nairobi, with Spearman’s correlation coefficient of 0.437. The study established that there is a significant positive relationship between socio-cultural factors and the implementation of the cash transfer programme for OVC with spearman’s correlation coefficient of 0.456. The study established that there is a significant positive relationship between the legal framework and the implementation of the cash transfer programme for OVC in Kibera slums, Nairobi, with Spearman’s rank correlation coefficient of 0.454. The study recommends an increase in administrative capacity of the programme to ensure efficiency when targeting beneficiaries to the programme. There is need to review the amount of cash given per household to match number of OVC per household. There is also urgent need for government to sensitize people on policies and laws governing OVC.
CHAPTER ONE:

INTRODUCTION

1.1 Background of the study

Social protection refers to the public actions taken in response to levels of vulnerability, risk and deprivation which are deemed socially unacceptable within a given polity or society (Conway, de Haan and Norton 2000). Through income or in-kind support and programmes designed to increase access to services (such as health, education and nutrition), social protection helps realize the human rights of children and families. Social protection strategies are also a crucial element of effective policy responses to adverse economic conditions, addressing not only vulnerabilities caused or exacerbated by recent crises but also increasing preparedness to future uncertainty.

Social protection plays an important role in providing income support and services, redistribution and promoting inclusive growth in countries across the world. For example, recent significant reductions in income inequality in Latin America, the world’s most unequal region, have been attributed in part to the expansion of public cash transfers (Gasparini and Lustig, 2011). Such trends have increased interest for the development of social protection in other middle- and low-income countries.

The growing recognition of the potential role of social protection has led to increased interest in the introduction and further expansion of such policies in developing countries. Among multilateral and bilateral actors in the international development community, initiatives to promote and coordinate efforts on social protection development have flourished in recent years. They include the ILO’s Social Protection Floor initiative aimed at ensuring national minimum policy packages are adopted by countries world-wide. Regional initiatives include the African Union’s Social Policy Framework for Africa, with a chapter on social protection and recommendations on how to strengthen coordination between national and regional policy initiatives.

As a result of daunting socio-economic and political challenges facing Kenya, including 46% of the country’s 38 million people living below poverty line, a rapidly growing number of
orphans and vulnerable children half of which have resulted from a HIV/AIDS pandemic which has hit the country in the last two decades, social protection programmes for the country’s poor and vulnerable population have become increasingly important both economically and politically. HIV/Aids has worked in tandem with other endemic diseases, conflict, urbanization and increasing levels of poverty and inequality to claim the lives and well-being of many productive adults leaving many children orphaned and vulnerable. According to the (Central Bureau of Statistics, 2004) about 32% of households are headed by single women while the proportion of households headed by children or grandparents is also on the increase. This has made community-support systems severely constrained in providing supplementary care. Social protection has an important role to play in protecting children and enhancing capability.

Through various national economic, political and social development blue prints and the Constitution of Kenya, the government has in the past two decades placed several measures to protect the rights, social image, livelihoods, vulnerability to poverty and self-development of the most vulnerable populations in the country. The most prominent and successful framework is the social protection where cash transfer program is an integral component.

In 2013, the government of Kenya through an Act of Parliament approved a more robust social protection framework to generate positive reforms to social assistance programs in the country through enactment of Social Assistance Act, 2013. The framework referred to as the National Social Protection Policy (NSPP) aims to strengthen the delivery of social assistance to poor and vulnerable populations in the national and county levels and promises progressive realization of the rights to social security and protection to persons who are unable to support themselves and their dependents.

The OVCCT program was launched in 2004 in Kenya with broad objective of strengthening households’ capacities to provide a social protection system through regular cash transfers to families with OVC, in order to encourage fostering and retention of orphans and vulnerable children (OVC) in their families within the communities and to promote their human capital development. OVCCT is currently the largest CT programme in the country. Kenya has an estimated over 2.4 million orphans and vulnerable children half of which have resulted from death of parents due to HIV and AIDS crisis. Kenya’s OVC-CT programme started as a pre-pilot project covering 500 OVC households in three districts (Kisumu, Garissa, and Kwale).
By 2009, the government funding to the program increased to US $9 million from USD US$800,000 allocated in 2005 and coverage increased to 47 districts. Every year since then, the program has received increased budget allocations from the government. For example in 2011/2012 the program was allocated Kshs. 2.8 billion, and in 2012/2013 Kshs 4.4 billion. In 2013/2014, the program received a lion share of Kshs 8 billion.

The program is grounded on multiple national legal and policy frameworks and international commitments. In particular Article 53 of the 2010 Constitution of Kenya spells out the rights of children and the need for their protection. Every child has the right to: Free and compulsory education; basic nutrition, shelter and healthcare; protection from abuse, neglect, harmful cultural practices, exploitative labour, parental care and protection which includes equal responsibility of both parents whether married or unmarried. The national policy on orphans and vulnerable children developed in 2005 is one of the earliest policy frameworks that grounded in the OVCCT program in the pilot and scale up phase.

The OVCCT program provides regular support to poor households caring for OVCs in the intervention areas and its geographical targeting is guided by an OVC CT program Expansion Plan which is developed at the national level on the basis of poverty and vulnerability criteria. Once locations have been identified, operational structures like the Sub-County OVC Sub-Committee (SCOSC), the Location OVC Committee (LOC) members and Beneficiary Welfare Committees (BWCs) are established and trained. Household-level data is collected and analysed to assess their likelihood of being poor against national standards. A list of potential beneficiaries is generated, and validated at the community baraza. The approved list of households targeted for support is then entered into the management information system, enrolled in the program and issued with a program identity card.

OVCCT supported households received payments of Ksh 4,000, in cash, every two months via Payments Service Provider. There are two Payment methods; the Postal Corporation of Kenya (PCK) and Equity Bank. The program implementation organs are responsible for follow up with households in the communities where concerns are raised about the care being received by a child. LOC members are required to visit households to raise awareness on appropriate care and to provide advice on problems households are encountering in caring for children. Community awareness sessions are also conducted in the community to promote understanding of the program and to help households deal with health and family issues.
The program covers children below 18 years. The program places developmental responsibilities to care givers of the beneficiaries that include; ensuring OVC aged 0-5 years receive immunization and growth monitoring, OVC aged 6-7 regularly attend basic education; OVC acquire birth certificates and care givers attend awareness sessions.

Kibera’s history goes back to ‘colonial period’ when the urban layout was based on government-sanctioned population. This was the era of racial segregation that separated people into the enclaves for Africans, Asians and Europeans. As an informal settlement, Kibera dates back to the 1920s’ when the British colonial government decided to let a group of ‘Nubian soldiers from Sudan to settle on a wooded hillside outside Nairobi. The British colonials then failed to repatriate the Nubians to their country or to compensate them with land title deeds to these acquired lands from the Kenyan people. Nubians built homes, and set up businesses while they were still squatters with no legal rights and they called the place Kibera, meaning ‘forest’.

Kibera is divided into nine official villages, each with its own village elder. They are: Kianda, Soweto, Kisumundogo, Lindi, LainiSaba, Siranga/Undugu, Makina, and Mashimoni. The living conditions within Kibera are different depending on the area. There are very poor areas and there are estate areas with up to four storey houses, but the majorities are simple mud houses with a tin roof. Except for the few roads around the estate areas all the tracks between the houses are mud. Improvements are made by people’s or NGO’s efforts. (GOK, 2005.) Kibera is the largest slum in Nairobi. The 2009 Kenya Population and Housing Census reports Kibera's population as 170,070.

1.2 Statement of the problem
Children constitute a particularly vulnerable group in developing countries. They account for a large share of the population in developing countries like Kenya. Poverty and vulnerability among children have an impact not only on the quality of their lives, but also on the quantity of life. Developing countries show significantly higher infant mortality rates, which are a direct consequence of poverty (Barrientos & DeJong 2004). To experience poverty early in life predisposes the individual to the probability of less schooling. This often leads to
intergenerational transmission of poverty as the effects stay with them into the future and are then passed on to their children.

Study by (Ikiara 2009) noted that the socio-economic and political challenges facing the country have brought worrying trends; 46% of the country’s 38 million people are living below the poverty line, there are a rapidly growing number of orphans and vulnerable children. Social protection programmes for the country’s poor and vulnerable population have become increasingly important both economically and politically. There are an estimated 2.4 million orphans in Kenya. Children of parents with HIV and AIDS become vulnerable long before their parents die. Other children are made vulnerable due to one or both parents being ill from a terminal disease like cancer (Ikiara, 2009).

The majority of the Kenyan orphans live under extreme poverty conditions with relatives or guardians who are also often poor and therefore unable to provide basic care for these children. Evidence from various parts of the country indicates that poor, elderly grand-parents are the most important group of caretakers for Kenyan orphans. Another noticeable and worrying trend is that there a rapidly increasing number of child-headed households arising from the death of both parents and in situations where there are no relatives or other guardians to take care of the orphans in terms of providing basic needs such as food, housing, clothing, health care and education. Kibera slums is an urban informal settlement faced with similar problems where is growing number of orphaned children who are left with one parent mostly mothers to care for them. Most of these widows have no skills hence rely on manual jobs to sustain their lives.

While some valuable research has been conducted on OVC in Kenya, significant gaps remain. The lack of vital strategic information is hindering policy makers and programme leaders from making well-informed decisions about the path forward. However, with limited resources available to divide between programming and research, a reasonable balance should be found to answer key questions without sacrificing support for critical services. This study therefore sought to find out factors influencing implementation of social protection programmes in Kenya with specific focus on cash transfer programme for orphans and vulnerable children in kibera slums, Nairobi County.
1.3 Purpose of the Study
The purpose of this study was to examine factors influencing implementation of social protection programmes in Kenya: case of cash transfer programme for orphans and vulnerable children in Kibera slums Nairobi County, Kenya.

1.4 Objectives of the Study
This study was guided by the following objectives:
1. To assess the influence of financing on the implementation of cash transfer to orphans and vulnerable children in Kibera slums Nairobi County, Kenya.

2. To examine the influence of targeting on the implementation of cash transfer to orphans and vulnerable children in Kibera slums Nairobi County, Kenya.

3. To assess the influence of socio-cultural factors on the implementation of cash transfer to orphans and vulnerable children in Kibera slums Nairobi County, Kenya.

4. To examine the influence of legal framework on implementation of cash transfer to orphans and vulnerable children in Kibera slums Nairobi county

1.5 Research Questions
The study sought to answer the following research questions:
1. How does financing influence implementation of cash transfer programme for orphans and vulnerable children in Kibera Slums Nairobi County, Kenya?

2. How does targeting influence implementation of cash transfer programme for orphans and vulnerable children in Kibera slums Nairobi County, Kenya?

3. How do socio-cultural factors influence implementation of cash transfer programme for orphans and vulnerable children in Kibera slums Nairobi County, Kenya?

4. How does legal framework influence implementation of cash transfer programme for orphans and vulnerable children in kibera slums Nairobi County?
1.6 Significance of the Study
With the outstanding rise in the number of orphans and vulnerable children that have left many families and communities with enormous child care problems, it will be necessary to understand the factors influencing provision of the social protection programmes for these OVCs. It is hoped that this study will create knowledge in this area of study and contribute to the growing body of literature. The study will particularly benefit organizations as well as individuals who have continuously supported social protection programmes in Kenya. The information will be useful to the Children Officers since it will enable them to make effective strategic plans as well as advice the government accordingly to increase allocation of resources to programmes of orphans and vulnerable children. The county government, chiefs, assistant chiefs and other government representatives will benefit from the information that will be gathered in this study. More importantly, they will be able to advise the public and partners on the importance of bolstering social protection programmes to assist orphans and vulnerable children.

1.7 Basic Assumptions of the Study
It was assumed that targeted respondents would be willing to participate in the survey. It was assumed that all the information that would be given by the respondents will be true and accurate.

1.8 Limitations of the Study
The study faced a number of limitations: The road network in Kibera slums is poor making travel in some areas to be difficult. To address this problem, I used the services of Volunteer Children Officer and known residents who are familiar with the area. Kibera is known for its insecurity and therefore I used known residents of kibera who are familiar with the area and are known to the respondents. There was language barrier due to high illiteracy levels in the study location and therefore we had to translate the questions to Swahili language to ensure comprehension. The study was limited to only one slum in urban settlement therefore generalizations to other Slum/urban areas should be done with caution.

1.9 Delimitations of the Study
This study was delimited to factors influencing implementation of social protection programmes in Kenya with specific focus on cash transfer programme for orphans and
vulnerable children. The geographical scope was selected from beneficiary household families with orphans, vulnerable families within Laini Saba location of Kibera slums Nairobi County. The research targeted caregivers of beneficiary households of the programme in Kibera slums Nairobi County.

1.10 Definition of Significant Terms

Caregiver: A person who has taken the responsibility of caring for orphans and vulnerable children

Cash transfer: Is the provision of small predictable sums of money to ultra-poor families with children to alleviate household poverty. They reduce overall inequality and poverty and improve income (UNICEF, 2010).

Child: A child is a person under the age of 18 years as defined by the Children’s Act No. 8 of 2001.

Financing: Provision of monetary resources to fund cash transfer programmes.

Legal Framework: A broad system of rules that governs and regulates decision making, agreements, and laws.

Orphan&Vulnerable Child: An orphan is a child whose mother or father or both are dead. A vulnerable child is defined as one whose safety, wellbeing and development are for various reasons, threatened including children who are emotionally deprived and traumatized (UNICEF, 2010).

Socio-Culture: These are set of beliefs and values inculcated in people through their socialization process.
**Social protection:** Policies and actions including legislative measures that enhance the capacity of the poor and vulnerable to improve and sustain their lives.

**Targeting:** Identification and selection of households with orphans and vulnerable children.

**Vulnerable Group:** The bulk of households in need of basic social protection headed by the elderly, widows, children or individuals who are disabled or chronically ill.

### 1.11 Organization of the study

This study is organized in five chapters. Chapter One gives the general introduction of the study which includes background information to the study, statement of the problem, the purpose of the study, the study objectives, research questions, limitations and delimitations of the study, basic assumptions and definition of significant terms.

Chapter two presents the literature review highlighting theoretical information covered in the study with the aim of identifying knowledge gaps. This includes review of all available materials and books published and unpublished.

Chapter three covers research methodology to be used in the study, research design, target population, sampling procedure, description of research instruments, validity and reliability of research instruments, methods of data collection, procedures for data analysis, operational definition of variables and ethical considerations.

Chapter four covers the data analysis, data presentation, interpretation and discussion of study findings while Chapter Five summarises the research findings, and draw conclusions, recommendations and suggests areas of further research.
CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction
This chapter reviewed studies done in the field of social protection. It looked at factors that influence implementation of social protection programmes with specific focus on cash transfer programmes for orphans and vulnerable children. Cash transfers have been implemented globally and this chapter sought to review factors that have influenced implementation of these programmes in other parts of the world and how they compare to Kenya situation.

2.2 Implementation of Social Protection Programmes

There is an international consensus that social protection programmes is a powerful way to fight poverty and promote inclusive growth among vulnerable populations throughout the world. In Africa, there is growing interest in Social Protection in providing predictable social assistance to poor and vulnerable populations. This has been articulated in the African Union Social Policy Framework, thus making Social Protection a key strategy in poverty reduction across Africa.

Cash-based responses have a long history, despite their frequent portrayal as new and innovative. Clara Barton, one of the founding figures of the American Red Cross, helped to organise cash relief following the Franco-Prussian War of 1870–71, and in response to the Galveston floods in Texas in 1900. In late nineteenth century India, famine responses included what we would today call Cash for Work programmes. In 1948, the British colonial administration in Sudan distributed cash to famine-affected people. Millions were employed in Cash for Work projects in the early 1970s in India. Large-scale Cash for Work programmes were implemented in Botswana in the 1980s. Although not an exhaustive list, this serves to make the point that providing people with cash in emergencies has a long pedigree, and should not be seen as especially new or exceptional. (Harvey & Bailey, 2011.)

Cash transfers have played a key role in reducing poverty in industrialized nations for more than 50 years, but until the past decade, cash transfers were thought to be unaffordable or impossible to deliver in poorer countries (Bryant 2009). Since the 1990s, large-scale cash
transfer schemes have been launched in a growing number of developing countries, including Brazil, Colombia, Honduras, Mexico, Nicaragua, and South Africa. Increasingly, these schemes are being seen as a right of citizenship, and evidence is growing that they can help tackle hunger, increase living standards, and improve the education and health of the poorest families.

In developing countries social protection is mainly focused on three kinds, social insurance which refers to security that is financed by contribution based on insurance principle, social assistance is the transfer of resources to groups deemed eligible due to deprivation and social legislation is the legal framework that defines and protects citizen’s rights and ensures minimum civic standards to safeguard the interest of individuals (Norton, et al 2001). In Kenya, social protection focuses on Social assistance, social security and Health insurance (GOK, 2011). Social transfers include child support grants, orphan care grants, disability grants, social pensions, and transfers to poor households, among others. Their objective is to alleviate poverty, provide social protection, build human capital or reduce economic vulnerability. Even where services are provided for free or fees waivers operate the poor and socially excluded still face access barriers such as the costs of transport uniforms, medicines and loss of income from children attending school rather than working.

The Cash Transfer for Orphans and Vulnerable Children in Kenya is a culmination of many years’ efforts to deal with growing numbers of orphans and vulnerable children (OVC). It was conceived in the run up to the general elections in 2002, stemming from the realization that elements of social protection, especially family and communal mechanisms were breaking down in the face of the growing AIDS pandemic, a demographic momentum that led to increased numbers of orphans (Alviar & Pearson 2009). The idea for the programme took root in 2004 with the development of the first version of a National Plan of Action (NPA) for OVC, followed by the establishment of a National Steering Committee (NSC). By the end of the year, the programme was in place through the initiative of the Ministry of Home Affairs with funding and technical support by United Nations Children’s Fund (UNICEF) (Bryant 2009). The CT-OVC aims to encourage fostering of OVC and support development of their potential by strengthening the capacity of families to protect and care for them. It also aims to render and mobilize support for community based responses in the care of OVC. The programme is premised on the idea that orphaned children in Kenya are
located within a social environment that the potential to provide care and support but lacks adequate capacity.

2.3 Role of Targeting on influencing implementation of cash transfer programme

Targeting is a tool that is meant to concentrate the benefits of transfer programmes to the poorest segments of the population. All targeting mechanisms have the same objective: to correctly identify which households are poor and which are not (Manasan & Cuenca, 2009). Targeting’s main aim is to allocate scarce social protection resources more efficiently to the poorest and most vulnerable. Yet targeting itself can be costly, and along a number of different dimensions. The most direct costs are administrative – the bureaucratic costs of assessing the means of programme applicants, and re-assessing participants on an ongoing basis. Added to this government cost are the private costs applicants incur while applying for benefits – time and transportation costs travelling to the respective government offices, queuing, and the fees (and sometimes bribes) required for the necessary documentation. Across Latin America, Conditional Cash Transfer (CCT) programmes are the most prevalent source of support for poor and vulnerable households. The conditions are generally related to “desired” social behaviour. The key factor making CCTs politically acceptable are the conditions – commonly requiring school-age children to enrol in school and achieve a minimum attendance level, or women’s attendance at post-natal clinics. These conditions have implications for targeting such that CCT programmes such as Progresa / Oportunidades in Mexico, Bolsa Familia in Brasil and Red Solidario in El Salvador primarily target households with infants or children of school-age which are also means-tested. In these cases, the targeting approach is social categorical, but means-testing, or proxy-means-testing is generally used as the mechanism to reach people.

In resource-constrained Africa, financial efficiency dictates that cash transfers are effectively targeted to those that are intended to benefit; from a poverty reduction perspective it is important that this coincides with effectively targeting the poorest households. However, two significant challenges to effective targeting are particularly acute in many African countries. First, the very high poverty rates observed in many African countries complicate determining a suitable target population for a cash transfer programme. In some countries, targeting everyone below the official poverty line could imply targeting well over half the country’s population, which may be fiscally unsustainable. The challenge then becomes to determine
which sub-set of the poor to target. Defining the ‘extreme poor’ and distinguishing them from the ‘poor’ in a reliable and socially and politically acceptable manner may not be straightforward. Second, designing effective and operationally feasible mechanisms to target a given population is technically complex and resource-intensive. The required technical and material capacity may not exist in the institutions responsible for the cash transfer programme, particularly given the traditional weakness of African social welfare ministries (Hurrel, A. Mertens F & Pallerano L 2011).

Budgets are constrained, and transfer programmes save money by not making transfers to those (usually the ‘non-poor’) who do not need them. Targeting improves the efficiency and cost-effectiveness of programmes. Higher proportions of non-poor in the population tend to increase the saving from targeting. Related to this, targeting can improve programme effectiveness with a limited budget by providing those who need support with sufficient resources, rather than spreading resources too thinly to make much difference. There is a humanitarian argument for prioritising those most in need of assistance, and targeting is designed to achieve this prioritisation. As the World Food Programme’s handbook states, “the purpose of targeting is to identify those most in need and ensure they are covered by an intervention,” (Sharp 2001)

Major constraint on targeting in sub-Saharan Africa is administrative capacity. Currently, many cash transfer programmes outside middle income South Africa are implemented by civil society organisations (with the exceptions of Lesotho and Swaziland and the OVC cash transfer programme in Kenya which are implemented by governments) who are able to devote specialised staff and intensive training and outreach to effective targeting (Hurrel, A. Mertens F & Pallerano L 2011). Scaled up programmes implemented by the government can often struggle to achieve the same levels of quality, and implementation and dynamic errors may tend to increase. There may also be costs to other programmes, as government staff is diverted from their duties on other programmes. In the OVC programme, for example, targeting is conducted by village chiefs, elders, and specially elected committee members, who are not paid for their work and who have other duties and activities, and targeting suffered because of these low resources. However, the argument that low administrative capacity in sub- Saharan Africa makes targeted programmes less well targeted does not mean they are inoperable. Moreover, it overlooks a broader problem: that most governments’ capacity to implement large cash transfer programmes is limited and that distributing cash
may be at least as challenging as targeting them. For instance, the Swaziland Old Age Grant (which is a universal programme) was effectively targeted but the Post Office was unable to maintain the distribution (Ellis 2008).

Targeting determines how eligible individuals and households are identified and reached in practice. It ranges from universal options to mechanisms for categorical selection (e.g. by age, disability, HIV and AIDS status), self-targeting, geographical targeting (e.g. populations in natural disaster affected areas), unverified means-testing, proxy means testing (based on easily observable characteristics associated with poverty) and community-based selection.

Effective targeting can reduce the cost of transfers compared to universal provision: targeted CCT programmes in Latin America and the Caribbean typically absorb less than one percent of GDP. However, they also entail higher administrative costs, particularly when some of the basic infrastructure of administrative or survey-based information systems are not already in place and have to be introduced specifically to service the targeting needs of a cash transfer programme.

All targeting methods are imperfect and result in exclusion errors (those who should but do not receive a transfer) and inclusion errors (those who should not receive the benefit but do). The scale of these errors and the balance between exclusion and inclusion is determined by the fit between the intended coverage level, the targeting method used, and the national poverty profile. (Hurrel, A.Mertens F & Pallerano L 2011). So, for example, a proxy means test that attempts to identify the poorest 10 percent of a population will perform poorly when the bottom 60 percent of the population have very similar, low living standards and is also likely to fuel resentment from those who fail to receive the benefit. Geographical targeting performs relatively well when the poor are highly concentrated in particular areas, and less well when poor and rich live in the same places. In practice, cash transfer programmes usually adopt multiple targeting mechanisms. Good targeting requires an assessment of the distribution of poverty, targeting costs and political acceptability, and relates to programme objectives. In practice, the best results are often achieved by combining two or more forms of targeting.

The decision on whether to target, and if so how, will need to be guided both by good technical and fiscal analysis and by considerations of administrative capacity and political acceptability. Targeting poorest groups rather than providing universal categorical transfers is
challenging: there are generally significant inclusion and exclusion targeting errors and relatively high administrative costs. On the other hand, universalism is relatively expensive, so there are trade-offs.

Kenya’s cash transfer program uses a combination of geographical targeting, community targeting and proxy means testing. The use of community based targeting and proxy means testing are more likely to reach the poor households as it makes it easier for communities to understand the process and it’s less costly in terms of data requirements (Kenya Social Protection sector review 2012). Kenya’s Cash Transfer for Orphans and Vulnerable Children (CT-OVC) Programme was designed to provide cash assistance to households caring for OVC while encouraging OVC human capital development. The initial pilot enrolled 500 households in Garissa, Kwale and Nairobi (approximately 3,000 OVC) in 2004. The program continued to Phase 2 after positive impacts were observed in education, health, and nutrition. This second phase covered approximately 7,500 OVC in thirteen districts.

The CT-OVC incorporates two features of cash transfer programs found in demonstrations across Sub-Saharan Africa: it targets the poor and incorporates community-based identification mechanisms to select program recipients. The targeting mechanism used by the program is based on geographic location, community, and individual selection. Districts were selected based on the prevalence of HIV and other technical criteria, such as whether the district would receive donor support. The community-based targeting process is led by members of the community called the Location OVC Committees (LOCs) who are in charge of identifying households within selected geographic areas based on eligibility criteria.

Household eligibility to cash transfer is determined basing on two criteria; the residence of at least one OVC in the household or whose main caregiver is chronically ill and has poverty characteristics (Fizbein & Shaby, 2009). Characteristics of household members include the following: none of the adults in the household should have attained a standard 8 level of education; the caregiver of the household is not currently working or he/she is working but is not a farmer or laborer; or, the caregiver possesses less than two acres of land. House infrastructure indicators include the following: the walls are made of mud/cow dung or grass, sticks, or makuti; the floors or roof are made of mud or cow dung; or, the toilet is a pan, bucket, or the household lacks a toilet (Sudhanshu & Benjamin, 2006). Household consumption indicators include the following: drinking water is sourced from the river, lake,
pond or borehole; the household uses firewood for lighting fuel; or, firewood or residue, animal waste, or grass is used as cooking fuel. Household asset indicators include the following: the household lacks property in the village or elsewhere; has two or less zebu cattle; no hybrid cattle; five or less goats; five or less sheep; no pigs; or no camels (Rafael, 2008).

The LOCs are instructed to visit all households that appear impoverished and have children. The LOCs then complete a form that lists the basic eligibility conditions to determine whether the household meets the eligibility criteria. Once the fieldwork is completed, all members of the LOC decide which households qualify or not by discussing the eligibility and needs criteria collected in the targeting form. This preliminary eligibility list is then sent to Nairobi for input into the program’s Management and Information System (MIS). In stage two of the targeting process, enumerators return to those households identified by the LOCs as eligible and collect more detailed information on household demographic composition, caregiver characteristics, and the proxy variables listed above. Because at times more households are identified by the LOC than the budget can accommodate, the OVC Secretariat in Nairobi prioritizes households based on risk factors. The ranking system first prioritizes child headed households (less than 18 years of age) and, among them, households with more orphans or vulnerable children, followed by the eldest caregivers and, within them, households with more orphans or vulnerable children. All the eligible households are listed and ranked for each program location and then validated by a community assembly. At this time, program officers explain the rules of the targeting system and announce each name out loud in the established order according to priority criteria.

Households are then invited to apply for the program (Coady, 2004). An additional ranking system is employed to identify families with greater vulnerability. The management both at the local and the national level (OVC Secretariat) play a major role in identifying the households to be prioritized, the number of the households and the amount of resources like money to be allocated to each household (Hartill, 2011).

The family is generally the optimal environment for a child to develop. Assistance programs should enable vulnerable children to remain in a loving family situation where they can maintain stability, care, predictability, and protection. Supporting family capacity, whether the head of household is an ill or widowed parent, an elderly grandparent, or a young person,
helps build a protective environment for effectiveness. There are, however, instances when residential care might be the only practical alternative; for example, abandoned children, particularly HIV positive children, for whom there is no alternative. Every institution that cares for children should give priority to keeping siblings together. Also, it is important to encourage and maintain strong links with extended families, reintegration of children back into the community, and securing a stable, family-based placement (Traflon, 2009).

2.4 Role of Financing on influencing implementation of cash transfer programme

Every social arrangement protecting the economic welfare of an individual, a family, or a community must be financed by someone. In principle, funding can come from an almost infinite number of sources. In the context of the on-going global financial crisis, and in light of current discussions about international development goals beyond 2015, Social Protection is increasingly seen as essential – not just to tackle rising levels of risk and vulnerability but also to promote social justice, of which social inclusion is an integral part (Economic Commission for Africa et al., 2012). Sustainable financing for the social protection sector remains a challenge, particularly in the context of high poverty incidence and fiscal constraints,

At an economic level many countries face real fiscal constraints in financing social transfers. Understanding affordability requires information about both the static and dynamic conditions of the national treasury, as well as the availability of international assistance and credit. Affordability is both a short-term and long-term question. Using both domestic and international sources, a country may be able to fund an ambitious social transfer programme.

Social protection spending ranges between zero and twenty percent of national income in most low- and middle-income countries, but spending in half the countries ranges between three and nine percent.

The variability of social protection spending decisions by low- and middle-income countries reflects differences in both perceptions of affordability and political will. Effective interventions require a sizable commitment of financial resources—social assistance programmes in developing countries usually require 1-2% of national income. Government’s generally finance this significant commitment over the longer term from tax revenue, although development partner support can play an important interim role or cover up-front
development costs. Increasingly, development partners are developing longer term instruments—up to ten years in some cases—to support the permanent commitments governments must make to their people in building social protection systems.

Depending on the social protection context within the country, some resources may be mobilised by reallocating existing government expenditure. For example, Indonesia has substantially reduced spending on generalised food subsidies with few social protection benefits by implementing more efficient unconditional cash transfer programmes. Senegal is currently considering cash transfer initiatives as a substitute for similarly expensive general price subsidy programmes for food.

Social transfer programmes are affordable in a broad range of low income countries. Zambia’s Kalomo pilot—which provides the equivalent of $15 per month to a thousand poor households—could be scaled up to the poorest ten percent of the population for less than $20 million—0.3% of national income and less than one percent of current government spending. Similar programmes could be provided in other African countries for usually less than half percent of national income (less than 3% of current spending).

First, a vital consideration in introducing or scaling up social assistance is the capacity of the state to mobilise funds and other resources (Barrientos & Niño-Zarazúa, 2011). In its assessment of the affordability of CTs, the UK Department for International Development (DFID, 2011) notes that, where a government decides to invest in CTs, spending is typically within an overall budget for a wide range of sectors, and reflects judgements regarding the comparative advantages (e.g. value for money or political gains such as greater state legitimacy) for achieving broader economic and social goals.

The biggest discrepancy between the need for basic social protection and the ability to provide it is found in most of the countries of sub-Saharan Africa. The impact of HIV/AIDS in this region has resulted in the highest relative number of orphans and households which have lost their breadwinners. Growing poverty, especially in rural areas, has also lead to the breakdown of traditional family and community-based informal social safety nets. In addition, structural adjustment has reduced the number of households with formal sector employment that is covered by social insurance and pension schemes. For all these reasons,
countries in sub-Saharan Africa have a large and growing number of households that are unable to support.

The case for state-managed basic social protection derives from the government’s responsibility to protect, promote and guarantee the social, economic and cultural rights of its citizens. Governments have to budget for social protection in the same way as they budget for health and education (Kenya National Social Protection Policy 2011)

Finance is rightly perceived as one of the main constraints on the expansion of social protection, especially in low income countries. Stakeholders in the social protection arena have called on the Government of Kenya to progressively increase financing for social protection in the country and ensure expansion in a sustainable manner. This was among the top calls for action at the conclusion of the first-ever National Social Protection Conference Week in Kenya held between 27TH – 30TH January 2015 at Kenyatta International Convention Centre in Nairobi. The OVCCT program in Kenya was launched in 2004 with broad objective of strengthening households’ capacities to provide a social protection system through regular cash transfers to families with OVC, in order to encourage fostering and retention of orphans and vulnerable children (OVC) in their families within the communities and to promote their human capital development. OVCCT is currently the largest CT programme in the country. Kenya has an estimated over 2.4 million orphans and vulnerable children half of which have resulted from death of parents due to HIV and AIDS crisis.

Kenya’s OVC-CT programme started as a pre-pilot project covering 500 OVC households in three districts (Kisumu, Garissa, and Kwale). By 2009, the government funding to the program increased to US $9 million from USD US$800,000 allocated in 2005 and coverage increased to 47 districts. Every year since then, the program has received increased budget allocations from the government. For example in 2011/2012 the programme was allocated Kshs. 2.8 billion, and in 2012/2013 Kshs 4.4 billion. In 2013/2014, the programme received a lion share of Kshs 8 billion and ksh 9 billion in 2015/16.OVCCT supported households received payments of Ksh 4,000, in cash, every two months via Payments Service Provider. There are two PSP; the Postal Corporation of Kenya (PCK) and Equity Bank. The amount of cash is not intended to cover all of a child’s expenses but to ensure that the households are able to foster their children and cover part of their basic food, health, and education costs. This helps families meet the children’s immediate needs and invest in their development so
they can break the poverty cycle. From past studies beneficiaries and donors felt there was a need to rationalise the CT according to household size. Beneficiaries acknowledged the significant role the CT played in their lives but at the same time requested that the amount be increased to cushion them from inflation.

A key feature of social transfers is that to be effective, they need to be regular and predictable therefore reliable delivery systems must be in place. Most social transfer programmes round the world pay on monthly basis following typical cash requirements cycle of developed countries. Many social transfer programmes in Latin America for instance in Columbia, Nicaragua and Jamaica pay on bi monthly basis. In Nepal pensioners collect their money every four months. In Zambia’s Kalomo district payments are made on monthly basis (Devereux, 2000).

Payment arrangements involve ensuring that regular delivery of the cash transfer is made to the caregiver within the household who will most effectively allocate it in line with the programme objectives. Samson et al 2006:73 argues that regular and reliable payments provide the recipients (caregivers) with the security and choice that provide the greatest flexibility and developmental impact, maximizing benefits and value to the beneficiaries. Regularity facilitates more planning. Late or irregular payments can foster a reliance on informal credit, often at high interest rates which erode benefits and can create debt traps. The reduced frequency (compared to monthly payments) reduces administrative and private costs, thereby releasing more money to the needs of the OVC. It may also facilitate some types of investment opportunities. However, reduced frequencies may create hardships for households which may not be able to conserve the benefits over an extended payment cycle (Samson et al 2006).

Various modes of payment strategies are used in ensuring that beneficiaries access their money. This involves some withdrawing of cash at designated pay points placed at post offices, schools or other public buildings on a particular day or week of the month, and disbursed monthly, bi-monthly or quarterly. In Zambia beneficiaries receive their payments either through their bank accounts or local payment points (Samson et al 2006). An increasing number of Governments are switching to innovative mechanisms of electronic delivery of cash transfer. This reduces the administrative costs and “leakage” corruption and
fraud. In Brazil electronic transfer helped cut administrative costs by nearly sevenfold from 14.7% to 2.6% of grant value while in South Africa delivery cost reduced by over 62% (Arnold et al 2011).

In Kenya various models of payments have been used. These include the use of Government district treasuries, State corporations, commercial banks and E-wallets. Between 2005 and 2010, Ksh. 17.8 billion was channelled through different delivery models, 11% through district treasuries and 10% through postal corporation of Kenya (Kenya Social Protection sector review 2012). Upgrading payment mechanism can substantially reduce the cost to Government by involving private players in areas where they have significant comparative advantage over government (Arnold et al 2011). This Public Private Partnership with the post office payment system has led to 99.5% successful and reliable disbursement of cash to beneficiaries. The post office system is wide spread nationally (Jackson & Butter, 2011)

2.5 Legal framework and its influence on implementation of cash transfer programme

Children rights are human rights specifically adapted to the child because the rights take into account their fragility, specificities and age appropriate needs. These rights consider vulnerable character of the child which implies necessity to protect them due to their age and degree of maturity. Children will always depend on adults for their rights to be realized fully.

There are lot of efforts to strengthen child protection systems in Sub-Saharan Africa (Lynch & Onyango, 2013). The African states have acknowledged the rights of children by coming up with African Charter of 1990 which ratified by Kenya on July 25, 2000. The Charter was developed to domesticate the International Law of Children’s Rights. The African Charter stipulates all the right of African child member on the member states. The rights of children in Africa remain difficult to be realized due to poverty among states. (Rwenzura 1998) states that poverty alone accounts for many problems faced by children in Africa.

The UN Convention on the Rights of the Child (CRC) requires state parties to take all appropriate legislative, administrative, social and educational measures to protect the child from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child. Such protective measures include effective procedures for the establishment of social programmes to provide necessary
support for the child and for care givers, as well as for other forms of prevention and for identification of child maltreatment.

The implementation of children’s right is an international agenda with both developed and developing countries having a hand in the process. States are faced with different child related issues emanating from contextual perspectives for instance, cultural beliefs, socio-economic status and religious ethics and family values. Thus, there is a need to work both with individual families and communities and to continue the advocacy battle for universal acknowledgment of children’s rights and the provision of services to promote the welfare of children and protect them from abuses.

The Kenyan state is recognised in some policy arenas as a leader in Africa for the care and protection of children at risk. The African Child Policy Forum (ACPF) has ranked Kenya first among all African countries for ‘its effort to put in place an appropriate legal and policy frame-work for children’ (ACPF 2008 ), and Kenya has been evaluated as one of the most child-friendly African governments (sixth among 52 governments). Indeed, with its Children’s Act(2001) and associated protocols and personnel for implementation, Kenya seems to have domesticated the UN Convention on the Rights of the Child (UNCRC 1989) and the African Charter on the Rights and Welfare of the Child (ACRWC 1990). A study of children’s experiences, however, uncovered how disregard for children’s perspectives and a lack of accountability for children’s care have been enfolded within operations of the Kenyan state’s official care and protection system.

Social protection is underpinned by the Kenyan constitution. Specifically, Article 43 guarantees all Kenyans their economic, social and cultural rights, including rights to health, education, food, and decent livelihoods. Article 53 addresses children’s rights. The right to social security is explicitly stated, binding the State to “provide appropriate social security to persons who are unable to support themselves and their dependents.”

Kenya has established the National Council for Children Service whose mandate is to safeguard and promote the rights and welfare of children. Therefore it creates institutions that will protect the rights of children. The council is responsible for ensuring that Kenya realizes its international obligations relating to children such as fulfilling the reporting requirements. The Government of Kenya supporting the OVC children despite the fact that the population of OVC children is on increase and not forgetting the OVCs are mostly in poverty stricken areas. This compounds their vulnerability there are doubts whether the government is a
position to cater for the welfare of the increasing population of OVC children in Kenya considering the current trends of HIV& AIDs.

The Law of Succession Act, Cap 160 is the principle statute that governs matters of inheritance, succession and administration of the estates of deceased persons. It secures the inheritance rights of OVCs by providing that property left behind for double orphans devolves to them in equal shares, where they are more than one. This is regardless of the sex of the orphans. It further provides that where there are surviving children, the estate cannot be administered by only one person. This checks possible wastage of the estate.

The Employment Act is the principle statute on labour issues in Kenya. It sets out rules for employment of children and prohibits the employment of children in certain places. The Act acknowledges the spectre of child labour in Kenya as it makes provisions for children employed in industrial undertakings. It is however silent on children employed in other undertakings.

Extreme poverty affects the welfare of children adversely. It limits the children access to important services and facilities like healthy foods education and medical care. Child prostitution though prohibited by law is on increase as result of steady rise in poor children and orphaned children. HIV/AIDS has serious impacts on family systems and structures across the globe. The rise and emergence of child-headed families is a noticeable and drastic impact that HIV/AIDS has had in many families in sub-Saharan Africa. Previous studies conducted in many parts of Southern Africa show that there has been a significant increase in the proportion of children who are double orphans due to HIV/AIDS (Meinjes et al, 2009). These double orphans are children who have lost both parents and as evidence tend to show in Southern Africa, these children are living on their own and rarely receive any form of support from extended kinship networks. The prevalence of child-headed families in Zimbabwe is reported to be increasing steadily. The average number of children who are living without parental care and supervision in Zimbabwe was estimated to be above 100 000 in 2010 (Meinjes et al, 2009).This leads to child labour since they have to fend for their families.

Due to ineffective legislation on child labour extreme poverty has forced children to forego education. Slow implementation of legal framework particularly at community level affects
the right to education especially to girl child due to early marriage. The judicial systems are still slow in making judgement on issues affecting children. At times there is preference of settling the matter outside the court or taking cultural adjudication process to avoid high costs and time consuming process of court procedure.

2.6 Socio-Culture influence on implementation of cash transfer programme

According to (UNESCO 2001), Culture is the whole complex of distinctive spiritual, material, intellectual and emotional features that describe a society or a social group. It includes not only arts and letters, but also modes of life, the fundamental rights of the human being, value systems, traditions and beliefs. (Kiriti 2003) notes that bias in culture is manifested at all levels ranging from national institutional level, government policy, community level, household and individual levels. Culture refers to the way people live in society. It includes the belief system, the activities, behaviour (interaction processes) and the food they eat in a given society.

There are major socio-cultural challenges facing children who are orphans in developing countries. In Bangladesh, Brazil and South Africa, cash transfers provided to women have a greater positive impact on school attendance by girls compared to boys (Devereux, 2005). In Pakistan for example, it was quite apparent from the data collected in many studies that many orphans are struggling to remain in school as a result of a variety of socio-cultural practices, but particularly the impact of HIV and AIDS and extreme poverty (World Bank, 2010). The great majority of the students in school are either double orphans or paternal orphans, circumstances that usually imply reduced financial means for staying in school or attending regularly. Although there are a number of programmes that assist double orphans with their school needs, there are very few programmes aimed at assisting other vulnerable children and such programmes only minimally help these children.

In Kenya, many children who are orphans, particularly boys in the rural areas, are forced to drop out of school because of poverty. Girls were reportedly forced to interrupt their schooling to look after younger siblings or ailing members of their families or eventually opt out of school into early marriage to escape extreme poverty. Early marriage often by young girls to much older men has been reported as increasing the vulnerability of these young girls to contracting HIV (MOH, 2012)
In Kenya, culture dictates that a man should be the sole bread winner of the family. This way, many men are exposed to health hazards at a tender age and some are pushed by the continuous insatiable needs by their families forcing them to engage in criminal activities, leading to high death rates among male parents thus many widows. Separation in Kenya due to distance has seen many families break and later on the women are affected most especially when the husband goes to a urban working place, remarries a young woman and leaves the ailing one in the village who later on passes on. This leaves the family with orphans who later lack direct support they need. (DFID, 2009).

A common fear is that women will have less control over how cash is spent than over in-kind resources such as food aid, and that men may be more likely to misuse cash by buying items such as alcohol or cigarettes. Resources that women can control are widely seen as leading to better outcomes for children’s well-being and household food security. Understanding intra household decision making processes is always difficult and the only clear conclusion from the existing literature is that more research is needed. Where men do control how cash is spent, this may create tensions within households (Devereux et al 2006).

2.7 Theoretical framework

A theory is a set of interrelated constructs, definitions and propositions that present a systematic view of phenomena by specifying relations among variables, with the purpose of explaining and predicting the phenomena (Kerlinger, 1973). (Odegi-Awuondo 1993) views a theory as a general statement of fact couched in a way that it is refutable. It is a mental picture of how society is structured, works and changes. This study was guided by the following theory.

2.7.1 Social contract theory

Social contract refers to the set of mutual rights and obligations binding citizens with their polity.” (Flanagan 1999: 135) This comes to form a “bargain”, whereby: “one will enjoy the rights and reap the benefits of the social order if s/he lives by its rules and fulfils the responsibilities of membership.” (Flanagan 1999: 135). The normative tendency involves advocating for a contractual approach to social protection (and public policy more broadly). This means promoting a specifically contractual approach to social protection interventions
themselves (as in the case of conditional cash transfers) and/or efforts to locate social protection within more binding sets of relationships and agreements as a means of ensuring their political sustainability. This resonates with contemporary social protection debates in international development, particularly in terms of the popularity of conditional cash transfers. As the World Bank has noted with reference to the Bolsa Família programme in Brazil “Conditional cash transfers provide money directly to poor families via a “social contract” with the beneficiaries – for example, sending children to school regularly or bringing them to health centres.” (Rawlings and Rubio 2005).

Adopting a social contract perspective to social protection clearly places national governments and their citizens – rather than donors – at the centre of the matter. Donor agencies are generally ill-suited to promoting the types of political changes required to catalyse or strengthen social contracts around social protection in Africa, and the very notion might be considered to run counter to the thrust of a social contract approach.

2.7.2 Universalism theory

Universalism is an integral system based on the provision of social welfare for all through public or private institutions rather than partial and individuals subsidies. Programmes are established universally to serve everybody and are financed by Government. In this approach institutions are obligated to deliver social services to all without constrains. As a principle universalism focuses in Society as a whole; it does not distinguish by class, religion, age, race, sexual orientation, or gender.

Universalism in social policy is a re-distributive institutional approach; it considers social welfare as a very important institution of society providing general services outside the market on the basis of the necessities’ principle (Titmuss R 1974). This model incorporates the redistribution’s system of available resources along time. State will promote mechanisms of wide social solidarity and universalism in reason to that the social policy's customers are the total population and the notion of collective social responsibility exists, based of the shared citizenship.

2.8 Conceptual Framework

The interrelationships between the study variables are conceptualized as shown in Figure 1 below;
Independent variables

Financing
- Adequacy of project budget
- Adequacy of amount of cash transfer to beneficiaries
- Timeliness of disbursement of funds to beneficiaries.

Targeting
- Selection of target population
- Selection of households
- Ranking of households

Socio-cultural
- Early marriage
- Boy child preference

Legal framework
- Enforcement of children’s Act
- Level of awareness by caregivers of OVC on policies and laws governing OVC

Dependent variable

Implementation of social protection programmes
- No of OVC accessing school
- No of OVC who have acquired birth certificates

Government policies

Moderating variable

Figure 1: Conceptual Framework
2.9 Knowledge gap

The research observed the gaps identified within the review of relevant literature as shown in the Table 2.1.

**Table 2.1: Knowledge Gap**

<table>
<thead>
<tr>
<th>Variable</th>
<th>Author and year</th>
<th>Findings</th>
<th>Knowledge gap</th>
</tr>
</thead>
<tbody>
<tr>
<td>Financing</td>
<td>Barrientos &amp; Niño-Zarazúa (2011)</td>
<td>Most developing countries lacked capacity to implement cash transfer programmes due to limited resources</td>
<td>Emphasis was on government capacity to mobilise funds and not adequacy of amount disbursed to beneficiaries</td>
</tr>
<tr>
<td></td>
<td>Ellis (2008)</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Hurrel, A. Mertens F &amp; Pallerano L (2011)</td>
<td>Targeting objective is to correctly identify which households are poor</td>
<td>Emphasis was on identifying potential beneficiaries and not administrative constraints faced by developing countries</td>
</tr>
<tr>
<td></td>
<td>Manasan &amp; Cuenca (2009)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legal framework</td>
<td>Lyncha &amp; Onyango (2013)</td>
<td>Strengthening child protection systems in African countries</td>
<td>Emphasis was on strengthening child protection systems and not actual enforcement of laws and awareness campaigns to public on laws and policies governing OVC</td>
</tr>
<tr>
<td>Socio-cultural factors</td>
<td>Eric Mugaisi (2014)</td>
<td>Dynamics of how economics come into play with socio-cultural factors</td>
<td>Emphasis was more on economics and not negative socio-cultural factors</td>
</tr>
</tbody>
</table>
CHAPTER THREE

RESEARCH METHODOLOGY

3.1 Introduction:
This chapter describes the methodology that was adopted in order to reach the sample population, collect and analyse data so as to answer the research questions. This section consists of the research design, target population, sample and sampling procedures, data collection instruments and their administration on the respondents, data collection procedures and data analysis procedures that were used.

3.2. Research Design
Research design refers to the procedures selected by a researcher for studying a particular set of questions or hypothesis; this includes the researcher’s choice of quantitative or qualitative methodology and how, if at all, causal relationships between variables or phenomena are to be explored. (Orodho, 2009).

This study employed the use of a descriptive survey research design. Kraemer (1993) describes a descriptive survey as a means of gathering information about the characteristics, actions or opinions of a large group of people. Surveys are capable of obtaining information from large samples of the population. This design is suitable as it will bring out information on attitudes that would be difficult to measure using observational techniques. Equally, surveys require minimal involvement to develop and administer and are quite easy for making generalizations. (McIntyre, 1999).

3.3. Target Population.
The target population of the study was 159 beneficiary households with orphans and vulnerable children in Kibera Laini Saba location, Nairobi County (Figure is obtained from database from children department). The 159 caregivers of household’s beneficiaries live in Laini Saba slum area in Kibera.
3.4. Sampling size and sampling Procedure
Sample design is a definite plan determined before any data are actually collected for obtaining a sample from a given population, the statement about the sample should be true in relation to population (Orodho, 2008). Both stratified and simple random sampling was used to allow full participation of the respondents.

The sample size corresponding to a population of 159 was obtained from the Krejcie and Morgan’s 1970 table and using proportions, the size of the sample for each stratum was calculated. From the table, a sample size that corresponds to 159 participants is 113. Simple random sampling was used to select the household heads. One officer from the implementing agency was included in the sample.

Table 3.1 Sample distribution of respondents

<table>
<thead>
<tr>
<th>Stratum</th>
<th>Target Population</th>
<th>Sample size</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer from implementing agency</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Caregivers aged between 10-18 years</td>
<td>20</td>
<td>9</td>
</tr>
<tr>
<td>Caregivers aged between 19-55 years</td>
<td>94</td>
<td>72</td>
</tr>
<tr>
<td>Caregivers aged 56 years above</td>
<td>45</td>
<td>31</td>
</tr>
<tr>
<td></td>
<td>160</td>
<td>113</td>
</tr>
</tbody>
</table>

3.5. Methods of Data Collection
Data was collected from the identified respondents using questionnaires. Each question was based on the objective of the study and ensured that each question was relevant. Questions on the questionnaire were read out to the respondents by the researcher and responses recorded. Open ended questions were used to seek the respondents’ opinion on some specific issues while close ended questions gave the respondents an option for a particular answer from the multiple choice.
3.5.1 Pilot Testing of the Instrument
Initial testing of the instrument was done with respondents from the target population in Laini Saba location of Kibera County to ensure that they understood the questions. The subjects of the pre-test were encouraged to give suggestions concerning the instructions, clarity of the questions, and sensitivity of the questions and flow of the questionnaire. The pilot testing was done with fifteen respondents. The fifteen respondents were not included in the final survey. After the filled pilot questionnaires were received together with the suggestions and comments by the respondents, the questionnaire was reviewed to find out the comprehension and suitability of the wordings used the sequencing of the questions and the time taken to complete each questionnaire. The study of the completed pilot questionnaires gave an indication of the reliability of the instrument through the responses received.

3.5.2 Validity of research Instrument
The validity of the instrument is concerned with the instrument measuring what it purports to measure and nothing else. Ensuring that the questions were easily comprehensible, were clear, used simple words familiar to all the respondents and that they conveyed only one thought at a time contributed to instrument validity (Kothari, 2004). Construct and content validity was determined through review of the questionnaire by children officers who are experts and practitioners in social protection work to ensure adequate coverage of specific objectives of the study.

3.5.3 Reliability of research Instrument
(Mugenda & Mugenda 2003) defines reliability as measure of degree to which a research instrument yields consistent results or data after repeated trials. Split-half method was used to test the reliability of questionnaire to ensure that the results obtained through its use were consistent from one respondent to the other. The questionnaire was split into two equivalent halves; odd and even questions for all questions, and then a correlation coefficient for the two halves was computed and adjusted to reflect the entire questionnaire using the Spearman-Brown prophecy formula; \[ rsb = \frac{2r_{hh}}{1+r_{hh}} \]; where \( r_{hh} \) is the correlation coefficient between the two halves and \( rsb \) is the adjusted correlation also known as Spearman-Brown reliability. A correlation of 0.946 was computed from the two halves and this was corrected using the Spearman-Brown prophecy formula and yielded a corrected Spearman-Brown reliability of 0.972. The instrument was therefore reliable since the correlation was above 0.8.
3.6 Data Collection Procedures

A permit to conduct the research was obtained from the National Commission for Science, Technology and Innovation before the data collection process commenced. The children officer in Kibera helped in the recruitment of the five Research Assistants and one volunteer children officer who were familiar with the area. The Research Assistants were then briefed and trained on data collection. Research assistants made appointments with the respondents on the time they were available to answer the questions and they asked the questions in the order in which they were listed in the questionnaires and recorded the respondent’s answers in the spaces provided. The purpose of the survey was explained to each of the respondents and their consent obtained before data collection commenced.

3.7 Data Analysis Techniques

Orodho (2002) defines data analysis as the examination of what has been collected in a survey or experiment and making deductions and inferences from this data through organizing the data, breaking it into manageable units, synthesizing it as well as searching for patterns.

After the questionnaires were returned, the raw data collected was cleaned, edited, coded and tabulated in line with the study objectives. The quantitative data collected using the closed ended items of the questionnaire was assigned ordinal values and analysed using statistics of frequency tables, percentages, mode and median through Statistical Package for the Social Sciences software.

3.8 Ethical Consideration

The concern for ethics in research may be seen as part of civil and human rights. I obtained a research permit from NACOSTI at the Ministry of Education authorising me to carry out the research and collect data. I wrote a transmittal letter informing the respondents that the research is purely for academic purposes and assuring them of confidentiality of their identities considering that some of them were aged and chronically ill.
3.9 Operational Definition of Variables

The Operational definition of variables will help to measure the variables appropriately. Table 3.2 shows the type of data that the study will gather, and analyse.
<table>
<thead>
<tr>
<th>Objectives</th>
<th>Variable</th>
<th>indicator</th>
<th>Measure</th>
<th>Measurement scale</th>
<th>Data collection method</th>
<th>Study design</th>
<th>Level of analysis</th>
</tr>
</thead>
<tbody>
<tr>
<td>To determine the extent to which financing influences the implementation of cash transfer to orphans and vulnerable children in Kibera slums</td>
<td>Financing</td>
<td>Adequacy of project budget Adequacy of amount of cash transfer to beneficiaries Timeliness of disbursement of funds to beneficiaries</td>
<td>Amount of cash allocated in programme budget Amount to cash disbursed to beneficiaries The process of disbursing funds to households</td>
<td>Nominal Ordinal</td>
<td>Questionnaire</td>
<td>Descriptive</td>
<td>Descriptive</td>
</tr>
<tr>
<td>To examine the influence of targeting in the implementation of cash transfer to orphans and vulnerable children in Kibera slums</td>
<td>Targeting</td>
<td>Selection of target population Selection of households Ranking of households</td>
<td>The selection Procedure. Tools for selection of households</td>
<td>Nominal</td>
<td>Questionnaire</td>
<td>Descriptive</td>
<td>Descriptive</td>
</tr>
<tr>
<td><strong>vulnerable children in Kibera slums</strong></td>
<td><strong>To assess the influence of socio-cultural factors in the implementation of cash transfer to orphans and vulnerable children in Kibera slums</strong></td>
<td><strong>No of households selected</strong></td>
<td><strong>To examine how legal framework influence implementation of cash transfer to orphans and vulnerable children in Kibera slums</strong></td>
<td><strong>Legal framework</strong></td>
<td><strong>Enforcement of children’s Act</strong></td>
<td><strong>Level of awareness by caregivers of OVC on policies and laws governing OVC</strong></td>
<td><strong>Official reported cases of violence against OVC which have been heard and sentence given. Number of caregivers with knowledge of policies and laws governing OVC</strong></td>
</tr>
<tr>
<td>--------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------</td>
<td>----------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Socio-Cultural</td>
<td>Early marriage Boy child preference</td>
<td>Belief in marrying off girls at early age Belief in boy child due to inheritance</td>
<td>Nominal</td>
<td>Nominal</td>
<td>Questionnaire</td>
<td>descriptive</td>
<td>Descriptive</td>
</tr>
<tr>
<td><strong>Legal framework</strong></td>
<td>Enforcement of children’s Act Level of awareness by caregivers of OVC on policies and laws governing OVC</td>
<td>Official reported cases of violence against OVC which have been heard and sentence given. Number of caregivers with knowledge of policies and laws governing OVC</td>
<td>Nominal</td>
<td>Nominal</td>
<td>Questionnaire</td>
<td>Descriptive</td>
<td>Descriptive</td>
</tr>
</tbody>
</table>
CHAPTER FOUR
DATA ANALYSIS, PRESENTATION AND INTERPRETATION

4.1 Introduction
This chapter contains the data analysis, presentation and interpretation sections for the data obtained from the study’s participants, using the questionnaire. The chapter provides major findings and results of the study.

4.2 Questionnaire Response Rate
At the start of the study, 113 questionnaires were given out and 103 were filled and returned, corresponding to a 91.15% return rate. The response rate for each stratum is indicated in the table 4.1 below:

Table 4.1: questionnaire return rate

<table>
<thead>
<tr>
<th>Stratum</th>
<th>Target Population</th>
<th>Sample size</th>
<th>Returned Questionnaire</th>
<th>Response rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Officer from implementing agency</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100%</td>
</tr>
<tr>
<td>Caregivers aged between 10-18 years</td>
<td>20</td>
<td>9</td>
<td>5</td>
<td>55.6%</td>
</tr>
<tr>
<td>Caregivers aged between 19-55 years</td>
<td>94</td>
<td>72</td>
<td>71</td>
<td>91.0%</td>
</tr>
<tr>
<td>Caregivers aged years above 56</td>
<td>45</td>
<td>31</td>
<td>26</td>
<td>83.9%</td>
</tr>
<tr>
<td>Total</td>
<td>160</td>
<td>113</td>
<td>103</td>
<td></td>
</tr>
</tbody>
</table>
4.3 Demographic Characteristics of the Respondents

Table 4.2: Participants’ Age

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Over 70 years</td>
<td>16</td>
<td>15.5</td>
<td>15.5</td>
</tr>
<tr>
<td>56-69 years</td>
<td>18</td>
<td>17.5</td>
<td>33.0</td>
</tr>
<tr>
<td>41-55 years</td>
<td>21</td>
<td>20.4</td>
<td>54.4</td>
</tr>
<tr>
<td>31-40 years</td>
<td>31</td>
<td>30.1</td>
<td>85.5</td>
</tr>
<tr>
<td>18-30 years</td>
<td>12</td>
<td>11.7</td>
<td>97.2</td>
</tr>
<tr>
<td>10-17 years</td>
<td>5</td>
<td>2.8</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>103</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.2 shows that 30.1% of the respondents were aged between 31 and 40 years, forming the majority by percentage, concurring with table 4.1, which shows that majority of the respondents were aged between 19 years and 56 years. Those aged above 70 years (15.5%) formed the minority age group. It is worth noting that most of the respondents were middle-aged, albeit in varying levels.

Table 4.3: Respondents’ Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>29</td>
<td>28.1</td>
<td>28.1</td>
</tr>
<tr>
<td>Female</td>
<td>74</td>
<td>71.9</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>103</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.3 shows that female respondents were the majority representing 71.9% while male respondents percentage was 28.1%
Table 4.4: Respondents’ Level of education

<table>
<thead>
<tr>
<th>Level of Education</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td>55</td>
<td>53.9</td>
<td>53.9</td>
</tr>
<tr>
<td>Secondary</td>
<td>15</td>
<td>14.7</td>
<td>68.6</td>
</tr>
<tr>
<td>Vocational training</td>
<td>0</td>
<td>0.0</td>
<td>68.6</td>
</tr>
<tr>
<td>Diploma</td>
<td>1</td>
<td>0.9</td>
<td>69.5</td>
</tr>
<tr>
<td>Degree</td>
<td>2</td>
<td>1.9</td>
<td>71.4</td>
</tr>
<tr>
<td>Masters</td>
<td>0</td>
<td>0.0</td>
<td>71.4</td>
</tr>
<tr>
<td>None</td>
<td>29</td>
<td>28.6</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.4 shows that most respondents have primary level education, representing 53.9% of the respondents. 28.6% of the respondents have no level of education, partly contributing to their vulnerability since they have no tools of trade hence can only do manual jobs which are not well paid.

Table 4.5: OVCs’ Level of education

<table>
<thead>
<tr>
<th>Level of Education</th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary</td>
<td>55</td>
<td>53.9</td>
<td>53.9</td>
</tr>
<tr>
<td>Secondary</td>
<td>15</td>
<td>14.7</td>
<td>68.6</td>
</tr>
<tr>
<td>Pre-school</td>
<td>20</td>
<td>19.6</td>
<td>88.2</td>
</tr>
<tr>
<td>Tertiary</td>
<td>12</td>
<td>11.8</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.5 shows that majority of the orphans and vulnerable children are in primary school, representing 53.9% of the involved OVCs. Only 14.7% of the OVCs have secondary level of education. This shows that the programme is achieving its objective of ensuring OVC attend school.
This study sought to establish the registered caregiver since this is likely to affect the usage and prioritization of the cash at household level. Table 4.6 shows that 17.6% of the registered caregivers in the study are fathers to the OVCs while 61.7% are mothers to the OVCs. 24.6% were grandparents while only 2.9% were child-caregivers. Mothers and grandparents form the bulk of caregivers. It is believed that women are to take care of orphans hence it is also more likely to find female headed households taking care of orphans than male headed household. Research has shown that orphans are more willing and likely to be taken care of by their grandparents than other relatives and this explains why 24.6% of the caregivers are grandparents.

Table 4.7: OVCs with birth certificate

Table 4.7 shows that 66.7% of the OVCs had birth certificates while 33.3% did not have birth certificates. This is an indicator that the programme is meeting its objective of acquiring birth certificates. Birth certificates give a child proof of age, recognized name and nationality. Lack of
a birth certificate may deny a child basic services like school attendance as proof of age is required before enrolment to most schools.

**4.4.1 Financing and its influence on implementation of cash transfer programme for OVC**

The study sought to find out how financial resources allocated to this programme influences its implementation.

**Table 4.8: Regularity of payment**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very regular</td>
<td>20</td>
<td>19.4</td>
</tr>
<tr>
<td>Fairly regular</td>
<td>55</td>
<td>53.4</td>
</tr>
<tr>
<td>Not regular</td>
<td>28</td>
<td>27.2</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

In table 4.8, 53.4% of the respondents reported that the payment modes are fairly regular while 19.4% felt that the modes of payment are very regular. However, 27.2% felt that the payment modes are not regular.

**Table 4.9: Amount of cash given per household**

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>KSH 2000</td>
<td>27</td>
<td>26.5</td>
</tr>
<tr>
<td>KSH 3000</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>KSH 4000</td>
<td>75</td>
<td>73.5</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
</tr>
</tbody>
</table>

Table 4.9 indicates that 26.5% of the respondents receive KSH 2000 payments while 73.5% receive KSH 4000. This programme gives KSH 4000 to each beneficiary household every two months hence the responses for KSH 2000 could be referring to monthly.
Table 4.10: Payment point

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>District treasury</td>
<td>1</td>
<td>0.9</td>
<td>0.9</td>
</tr>
<tr>
<td>Bank</td>
<td>78</td>
<td>76.5</td>
<td>76.5</td>
</tr>
<tr>
<td>Post office</td>
<td>23</td>
<td>22.6</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

As shown in table 4.10, 76.5% of the respondents receive their payments through the bank, which have branches all over Nairobi County, making them the most convenient mode of payment. A sizeable proportion, 22.6%, reportedly relies on the post office to receive their payment.

Table 4.11 Convenience of mode of payment

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very convenient</td>
<td>26</td>
<td>25.5</td>
<td>25.5</td>
</tr>
<tr>
<td>Fairly convenient</td>
<td>55</td>
<td>53.9</td>
<td>79.4</td>
</tr>
<tr>
<td>Not convenient</td>
<td>21</td>
<td>20.6</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

As shown in table 4.11, 53.9% of the respondents felt that the mode of payment to the beneficiaries were fairly convenient while 20.6% felt the modes of payment were not convenient. On the other hand, 25.5% felt the modes of payment were very convenient.

Most respondents indicated that the amount given in this programme was not sufficient indicating high cost of living and some families had more OVCs thus increased costs per child. Most respondents prioritised the money given as follows: buying food, clothing, education, civil registration and lastly health. The government has demonstrated its financial commitment by ensuring that the cash transfer program is integrated into the annual budget as shown in table 4.12.
## Table 4.12: government allocation to the cash transfer programme since 2004/2005

<table>
<thead>
<tr>
<th>MINISTRY OF LABOR, SOCIAL SECURITY AND SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEPARTMENT OF CHILDREN'S SERVICES</td>
</tr>
<tr>
<td>Cast Transfer to Orphans and Vulnerable Children Status</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Year</th>
<th>Total HHs</th>
<th>Total Amount (KSHS) in millions) with Operations</th>
<th>Total Amount (KSHS in millions) for Households only</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>500</td>
<td>3,000</td>
<td>13,280</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>48,000,000</td>
<td>56,000,000</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>30,000,000</td>
<td>48,000,000</td>
</tr>
</tbody>
</table>

HH-Household
Table 4.13: Inferential Statistics on Financing

<table>
<thead>
<tr>
<th>Amount of cash given per household</th>
<th>Payment point</th>
<th>Convenience of mode of payment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>103</td>
<td>103</td>
</tr>
<tr>
<td>Mean</td>
<td>3.65</td>
<td>2.19</td>
</tr>
<tr>
<td>Mode</td>
<td>4</td>
<td>2</td>
</tr>
</tbody>
</table>

Table 4.13 shows a mean of 3.65 for the questionnaire on amount of cash given per household implying that majority of the respondents receive a KSH 4,000 payment. For the questionnaire on payment point mean of 2.19 indicates that majority of the respondents receive their money from the bank. A mean of 1.84 shows that majority of the respondents consider the modes of payment fairly convenient.

Table 4.14: Spearman’s Rho for ‘Financing and Implementation of cash transfer Programme’

<table>
<thead>
<tr>
<th>Spearman’s rho</th>
<th>Financing</th>
<th>Implementation of cash transfer Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spearman's rho</td>
<td>Correlation Coefficient</td>
<td>1.000</td>
</tr>
<tr>
<td>Financing</td>
<td>Sig. (2-tailed)</td>
<td>.</td>
</tr>
<tr>
<td>N</td>
<td>103</td>
<td>103</td>
</tr>
<tr>
<td>Implementation</td>
<td>Correlation Coefficient</td>
<td>.474*</td>
</tr>
<tr>
<td>of Social</td>
<td>Sig. (2-tailed)</td>
<td>.000</td>
</tr>
<tr>
<td>Protection</td>
<td>N</td>
<td>103</td>
</tr>
</tbody>
</table>

* Correlation is significant at the 0.05 level (2-tailed).

Table 4.14 shows a positive correlation between financing and the implementation of cash transfer programme for OVC. The Spearman’s rho value of 0.474 is statistically significant, showing that as more effective and appropriate financing strategies and policies are implemented, the implementation of cash transfer programme for OVC improves.
4.4.2 Targeting and its influence on implementation of cash transfer programme

This study sought to find out how targeting influences implementation of cash transfer programme.

Table 4.15: Identification of beneficiaries into the programme

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children Officer</td>
<td>15</td>
<td>14.7</td>
<td>14.7</td>
</tr>
<tr>
<td>Chief</td>
<td>47</td>
<td>46.1</td>
<td>60.8</td>
</tr>
<tr>
<td>Community Member</td>
<td>25</td>
<td>24.5</td>
<td>85.3</td>
</tr>
<tr>
<td>Religious Leader</td>
<td>15</td>
<td>14.7</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.15 shows that 46.1% of the beneficiaries of the cash transfer programme were identified by the area chief while 24.5% were identified by other members of the community. Only 14.7% were identified by religious leaders and children’s officer each. Participation of community in the targeting process increases local stakeholder engagement over the programme and improves decision making process. Communities determine programme eligibility by identifying poor households who qualify for assistance. This therefore links to researches that have shown that communities know their vulnerable members and they are better placed in identifying them. Communities also have knowledge of community characteristics that define the poor that other forms of targeting may not capture.

4.16: How respondents got to know about the programme

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Barazas</td>
<td>46</td>
<td>45.1</td>
<td>45.1</td>
</tr>
<tr>
<td>Neighbour</td>
<td>37</td>
<td>36.3</td>
<td>81.4</td>
</tr>
<tr>
<td>Local administration</td>
<td>19</td>
<td>18.6</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>
Table 4.16 shows that majority of the respondents knew about the programme from community Barazas or meetings (45.1%) and from their neighbours (36.3%). Only 18.6% learnt about the programme from local administration.

Table 4.17: Exclusion of needy people from the programme

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>44</td>
<td>43.1</td>
<td>43.1</td>
</tr>
<tr>
<td>No</td>
<td>58</td>
<td>56.9</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.17 shows that in spite of the programme, some deserving cases are left out, according to 43.1% of the respondents. 56.9% of the respondents felt that no deserving cases are left out.

Table 4.18: Relationship between targeting and programme efficiency

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highly efficient</td>
<td>25</td>
<td>24.5</td>
<td>24.5</td>
</tr>
<tr>
<td>Fairly efficient</td>
<td>65</td>
<td>63.7</td>
<td>88.2</td>
</tr>
<tr>
<td>No effect on efficiency</td>
<td>12</td>
<td>11.8</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.18 above shows 63.7% of the respondents felt that community targeting makes the programme fairly efficient while 24.5% felt that community targeting makes the programme highly efficient. Only 11.8% did not find any effect of community targeting on the efficiency of the programme.
Table 4.19: Spearman’s Rho for Targeting

<table>
<thead>
<tr>
<th>Spearman’s rho</th>
<th>Correlation Coefficient</th>
<th>Targeting</th>
<th>Implementation of cash transfer programme</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1.000</td>
<td>.437*</td>
</tr>
<tr>
<td></td>
<td>Sig. (2-tailed)</td>
<td>.</td>
<td>.019</td>
</tr>
<tr>
<td>N</td>
<td>103</td>
<td>103</td>
<td></td>
</tr>
</tbody>
</table>

Implementation of Social Protection Programmes

<table>
<thead>
<tr>
<th>Correlation Coefficient</th>
<th>Targeting</th>
<th>Implementation of cash transfer programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>.437*</td>
<td></td>
<td>1.000</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.019</td>
<td>.</td>
</tr>
<tr>
<td>N</td>
<td>103</td>
<td>103</td>
</tr>
</tbody>
</table>

*. Correlation is significant at the 0.05 level (2-tailed).

Table 4.19 shows a positive correlation between beneficiary targeting or identification and the implementation of cash transfer programme for OVC supported by a Spearman’s rho value of 0.437. This finding shows that proper procedures for targeting or identifying programme beneficiaries’ results in more efficient implementation of the programme.

The qualitative items on the variable of targeting elicited diverse responses from the participants. On the issue of how to best identify beneficiaries, the suggested methods were; on the basis of their living standards, interviews, meetings with stakeholders and thorough examination of applicants to identify the most deserving cases. On the question of why some potential beneficiaries are often left out during identification, among the reasons cited are or lack of information about the programme, dishonesty during application and giving false information about the programme to the public. Officer from implementing agency concurs with respondents on challenge of potential beneficiaries giving inaccurate information resulting in inaccurate decision making leading to errors of inclusion and exclusion. The officer also note there were constraints in staffing of the programme since they mostly relied on area chiefs and other volunteers who have other duties beside this programme.
4.4.3 Socio-cultural Factors and its influence on implementation of cash transfer programme
The study sought to find out how socio-cultural factors influence implementation of cash transfer programme for OVC.

**Table 4.20: ‘female OVCs are most affected by negative happenings in society’**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>54</td>
<td>52.9</td>
<td>52.9</td>
</tr>
<tr>
<td>Agree</td>
<td>39</td>
<td>38.2</td>
<td>91.1</td>
</tr>
<tr>
<td>Uncertain</td>
<td>0</td>
<td>0</td>
<td>91.1</td>
</tr>
<tr>
<td>Disagree</td>
<td>7</td>
<td>6.8</td>
<td>97.9</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>2</td>
<td>2.1</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.20 shows that 52.9% of the respondents strongly agreed that female orphans and vulnerable children are most affected by negative happenings in society while 38.2% just agreed. Only 6.8% and 2.1% agreed and strongly disagreed to the statement respectively.

**Table 4.21: ‘OVC school dropout rates are higher for the girl child than boy child’**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>60</td>
<td>58.8</td>
<td>58.8</td>
</tr>
<tr>
<td>Agree</td>
<td>28</td>
<td>27.5</td>
<td>86.3</td>
</tr>
<tr>
<td>Uncertain</td>
<td>2</td>
<td>1.9</td>
<td>88.2</td>
</tr>
<tr>
<td>Disagree</td>
<td>7</td>
<td>6.8</td>
<td>95</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>5</td>
<td>5</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.21 shows that 58.8% of the respondents strongly agreed that OVC school dropout rates are higher for the girl child than for the boy child with 27.5% only agreeing. While
1.9% was uncertain about this issue, 6.8% disagreed with this statement, while 5% strongly disagreed.

**Table 4.22: Incidences of physical and sexual child abuse**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>56</td>
<td>54.9</td>
<td>54.9</td>
</tr>
<tr>
<td>Agree</td>
<td>24</td>
<td>23.5</td>
<td>78.4</td>
</tr>
<tr>
<td>Uncertain</td>
<td>10</td>
<td>9.8</td>
<td>88.2</td>
</tr>
<tr>
<td>Disagree</td>
<td>8</td>
<td>7.8</td>
<td>96</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>4</td>
<td>4</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>102</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 4.22 shows that 54.9% of the respondents strongly agreed and 23.5% agreed that physical and sexual abuse is quite high in their area of residence while only 7.8% disagreed while only 4% strongly disagree.

**Table 4.23 ‘OVCs benefiting from cash transfers are stigmatized’**

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>43</td>
<td>42.2</td>
<td>42.2</td>
</tr>
<tr>
<td>Agree</td>
<td>38</td>
<td>37.3</td>
<td>79.5</td>
</tr>
<tr>
<td>Uncertain</td>
<td>4</td>
<td>3.9</td>
<td>83.4</td>
</tr>
<tr>
<td>Disagree</td>
<td>12</td>
<td>11.8</td>
<td>95.2</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>5</td>
<td>4.8</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>102</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

Table 4.23 shows that 42.2% of the respondents strongly agreed that OVCs benefiting from the cash transfer programme are stigmatized while 37.3% simply agreed with this statement. While 11.8% disagreed, 4.8% strongly disagreed with this statement. Only 3.9% were uncertain about the stigmatization of the beneficiaries of the programme.
Table 4.2: Orphans dropping out of school into early marriage

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Strongly agree</td>
<td>29</td>
<td>28.4</td>
<td>28.4</td>
</tr>
<tr>
<td>Agree</td>
<td>49</td>
<td>48.0</td>
<td>76.4</td>
</tr>
<tr>
<td>Uncertain</td>
<td>12</td>
<td>11.8</td>
<td>88.2</td>
</tr>
<tr>
<td>Disagree</td>
<td>5</td>
<td>4.9</td>
<td>93.1</td>
</tr>
<tr>
<td>Strongly disagree</td>
<td>7</td>
<td>6.9</td>
<td>100</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>102</strong></td>
<td><strong>100.0</strong></td>
<td></td>
</tr>
</tbody>
</table>

Table 4.2 shows that majority of the respondents, 48%, agreed and 28.4% strongly agreed that many orphans are dropping out of school into forced and early marriage. Only 4.9% and 6.9% of the respondents respectively disagreed and strongly disagreed with the statement. Only 11.8% of the respondents were uncertain on the issue of school dropout and the resultant forced and early marriage.

Table 4.25: Spearman’s Rho for Socio-cultural Factors

<table>
<thead>
<tr>
<th>Socio-cultural factors</th>
<th>Implementation of cash transfer Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spearman's rho</td>
<td>1.000</td>
</tr>
<tr>
<td>Socio-cultural factors</td>
<td>.456*</td>
</tr>
<tr>
<td>Correlation</td>
<td>.000</td>
</tr>
<tr>
<td>Coefficient</td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td></td>
</tr>
<tr>
<td>N</td>
<td>103</td>
</tr>
<tr>
<td>Implementation of Social Protection Programmes</td>
<td>.456*</td>
</tr>
<tr>
<td>Correlation</td>
<td>1.000</td>
</tr>
<tr>
<td>Coefficient</td>
<td></td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
</tr>
<tr>
<td>N</td>
<td>103</td>
</tr>
</tbody>
</table>

*. Correlation is significant at the 0.05 level (2-tailed).

As shown in table 4.25, the Spearman’s rho value of 0.456 indicates a positive relationship between socio-cultural factors and the implementation of cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. The obtained Spearman’s
rho value is statistically significant for the relationship between the independent and
dependent variables. Thus, there is a significant relationship between socio-cultural factors
and the implementation of cash transfer programme for orphans and vulnerable children in
Kibera slums, Nairobi County. On socio-cultural factors, the implementing officer concurs
that there are cases of forced and early marriage, especially for girls not absorbed into the
programme.

4.4.4 Legal Framework and Implementation of cash transfer Programme
Social protection is underpinned by the Kenyan constitution. Article 53 addresses children’s
rights. Similarly we have the children act 2001 which articulates rights of children. The study
sought to find out how this legal framework influences implementation of cash transfer
programme for OVC.

Table 4.26: Level of awareness of caregivers of OVC on laws and policies on children

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>54</td>
<td>52.9</td>
<td>52.9</td>
</tr>
<tr>
<td>No</td>
<td>48</td>
<td>47.1</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>102</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

As evidenced by table 4.26, 52.9% of the respondents are aware of the Kenyan government’s
policies and laws governing the rights, protection and welfare of orphaned and vulnerable
children. 47.1% of the respondents are not aware of such laws and policies.

Table 4.27: Knowledge of caregivers on where to report cases of OVC abuses in Kenya

<table>
<thead>
<tr>
<th></th>
<th>Frequency</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>59</td>
<td>57.8</td>
<td>57.8</td>
</tr>
<tr>
<td>No</td>
<td>43</td>
<td>42.2</td>
<td>100</td>
</tr>
<tr>
<td>Total</td>
<td>102</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>
Table 4.27 shows 57.8% of the respondents are aware of where to report cases of OVC sexual and physical abuse and cases of disinheritance. While 42.2% of the respondents are not aware of where to report such cases.

Table 4.28 Spearman’s Rho for Legal Framework

<table>
<thead>
<tr>
<th></th>
<th>Implementation of cash transfer Programme</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Legal framework</td>
</tr>
<tr>
<td>Spearman’s rho Legal Framework Correlation Coefficient</td>
<td>1.000</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.</td>
</tr>
<tr>
<td>N</td>
<td>103</td>
</tr>
<tr>
<td>Implementation of Social Protection Correlation Coefficient</td>
<td>.454*</td>
</tr>
<tr>
<td>Sig. (2-tailed)</td>
<td>.000</td>
</tr>
<tr>
<td>N</td>
<td>103</td>
</tr>
</tbody>
</table>

* Correlation is significant at the 0.05 level (2-tailed).

Table 4.28 shows a Spearman’s Rho value of 0.454, showing a positive correlation between the legal framework and the implementation of social protection cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. The Rho value 0.454, for a sample size of 103 at significance level of 0.05, is statistically significant. Hence, there is a significant relationship between legal framework and the implementation of cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. As people become more aware of the legal policies and channels that might be followed to address the challenges of OVC, it becomes easier to protect their social wellbeing through the implementation of the most appropriate social protection programmes.

Most of the respondents stated the legal system is unfair, starting at the chief’s office all the way to the relevant courts of law where such cases are heard. On child labour and abuse, officer from implementing agency states that although some girls take up house help jobs, the number has dropped significantly because of the free primary education programme. The government has set up child protection centres where the public can seek legal information on children rights.
CHAPTER FIVE
SUMMARY OF THE FINDINGS, DISCUSSIONS, CONCLUSIONS AND RECOMMENDATION

5.1 Introduction
This chapter contains a summary and discussion of the findings, conclusions and recommendations. The findings are summarized and aligned with the independent variables of financing, targeting, socio-cultural factors and legal framework, as studied in relation to the dependent variable; the implementation of social protection programmes.

5.2 Summary of Findings

5.2.1 Findings on Financing and Implementation of cash transfer Programme
The study established that majority of the respondents were in agreement with the fact that financing influences implementation of this programme. They indicated the ksh 4000 they received was not sufficient to cater for the rising cost of living. The budget allocations for this programme have risen over the years and current allocation year 2015/16 is ksh9 billion. However most of the funds go to programme operations hence affecting efficient implementation of the programme. The study established that there exists a significant positive relationship between financing and the implementation of the cash transfer programme in Kibera slums, Nairobi, with a Spearman’s correlation coefficient of 0.474.

5.2.2 Findings on Targeting and Implementation of cash transfer Programme
From the data analysis 63.7% of the respondents felt that community targeting makes the programme fairly efficient while 24.5% felt that community targeting makes the programme highly efficient. Only 11.8% did not find any effect of community targeting on the efficiency of the programme. The study established that there is a significant positive relationship between beneficiary targeting and the implementation of the cash transfer programme in Kibera slums, Nairobi, with Spearman’s correlation coefficient of 0.437.

5.2.3 Findings on Socio-cultural Factors and Implementation of cash transfer Programme
From the data analysis 58.8% of the respondents strongly agreed that OVC school dropout rates are higher for the girl child than for the boy child with 27.5% only agreeing. While 1.9% was uncertain about this issue, 6.8% disagreed with this statement, while 5% strongly
disagreed. Majority of the respondents, 48%, agreed and 28.4% strongly agreed that many orphans are dropping out of school into forced and early marriage. Only 4.9% and 6.9% of the respondents respectively disagreed and strongly disagreed with the statement. Only 11.8% of the respondents were uncertain on the issue of school dropout and the resultant forced and early marriage. The study established that there is a significant positive relationship between socio-cultural factors and the implementation of the cash transfer program in Kibera slums, Nairobi, with Spearman’s rho value of 0.456.

5.2.4 Findings on Legal Framework and Implementation of cash transfer Programme
According to data analysis 52.9% of the respondents are aware of the Kenyan government’s policies and laws governing the rights, protection and welfare of orphaned and vulnerable children. 47.1% of the respondents are not aware of such laws and policies. 57.8% of the respondents are aware of where to report cases of OVC sexual and physical abuse and cases of disinheretance. While 42.2% of the respondents are not aware of where to report such cases. The study established that there is a significant positive relationship between the legal framework and the implementation of the cash transfer programme in Kibera slums, Nairobi, with Spearman’s rank correlation coefficient of 0.454.

5.3 Discussions on findings
This section discusses the findings of the study, comparing them with the findings and conclusions of earlier and current related research.

5.3.1 Financing and Implementation of cash transfer Programme
The cash transfer programme for OVC is one of the programmes designed to eliminate or alleviate the sufferings of vulnerable and orphaned children. From the findings of the study, it is evident that at least, the beneficiaries receive payments bi-monthly ksh 4000. The ones who indicated ksh 2000 could have been referring to monthly. Majority of the respondents are reported that they receive their payments from the banks. For purposes of convenience, some of the beneficiaries receive money through the Post Office, which has wide networks. The highly networked banks and post office makes it quite easy for the beneficiaries to access their money. The ease of access supports the efficient implementation of the cash transfer programme in Kibera slums where most banks in Kenya have established branches. It is the ease of access that made majority of the respondents to consider the modes of payment fairly regular and convenient. The regularity and convenience of the payment methods help in the
efficient implementation of the project. These findings are in tandem with the findings by (Fiszbein 2005) about cash transfer payments, which he concur should be accessible and regular. Late or irregular payments can foster a reliance on informal credit, often at high interest rates which erode benefits and can create debt traps (Samson et al., 2006).

The study revealed that a few caregivers receive funds but do not provide the requisite services for which funds are given. For instance, some caregivers fail to take the benefitting OVCs to school despite receiving funds. The preferred course of action in such cases is to report the suspects to the area chief or to the local justice department. This trend among caregivers jeopardizes the successful implementation of the cash transfer programme since the objectives of educating and improving the lives of OVCs is not achieved as a consequence of this omission by caregivers. Whereas the respondents overwhelmingly believe payment methods, especially banks are convenient; they feel the amount is not sufficient because of the high cost of living. Thus, they recommend the amount disbursed be increased to have greater impact on the lives of the beneficiaries. The government has also steadily increased the amount allocated to this programme in the annual budget. However there is need for the government to reduce operational costs of this programme to ensure its successful implementation.

Summarily, it was established that a positive correlation exists between financing and the implementation of cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. The obtained Spearman’s rho value of 0.474 shows a statistically significant relationship between the dependent and the independent variable. The implication is that more appropriate, regular and convenient financing would translate into an effective implementation of the cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County.

5.3.2. Targeting and Implementation of cash transfer Programme

The process of targeting or identifying the beneficiaries of the project was also studied and found to greatly influence its implementation and success. Important in studying targeting was establishing how the beneficiaries got to know of the programme. Observably, majority of the respondents learnt about the programme from their neighbours and some learning about it from chief’s barazas. Majority of the respondents were identified by chiefs, in the
barazas. Since a sizeable number of the respondents learnt about the programme from their neighbours, they were expectedly identified by members of their community.

The respondents also agreed that community targeting affects the program, ostensibly because people living in the Kibera slums community are best placed to know and identify potential and deserving beneficiaries of the cash transfer programme. This is true since the general consensus is that better targeting can increase the cost-effectiveness of a programme by channelling more benefit towards the poor within a limited fixed programme budget (Coady et al, 2004).

To best identify beneficiaries and pay them the amount they deserve, some respondents suggested other modes of targeting. The suggested methods or approaches are selection based on beneficiaries’ living standards, conducting thorough interviews, consultative meetings with stakeholders and systematic examination of applicants to identify the most deserving cases. The study also showed that some deserving OVCs are often left out during identification. These reasons given are lack of information from the government and its partners, dishonesty among applicants who give false information to the programme officials. Similar findings were obtained by (Byrant 2009).

The study established a positive correlation between beneficiary targeting or identification and the implementation of cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. Thus, the use of the most appropriate procedures for targeting programme beneficiaries is highly likely to result in more efficient implementation of the programme. The targeting mode should incorporate the input and interest of the local community as much as possible. Besides the local administration such as chiefs, assistant chiefs and village elders, the program’s implementers may use the services of clan elders, religious leaders and other respectable members from the local community to identify and select beneficiaries to the programme. There is also need for government to increase administrative capacity of this programme to ensure proper targeting is done since currently the use of chiefs and village elders does not ensure optimum targeting is done since this people have other duties and responsibilities to accomplish.
5.3.3 Socio-cultural Factors and Implementation of cash transfer Programme

There are numerous socio-cultural factors or practices that have been studied in relation to their influence on social protection programmes. In this study, a few of these factors were studied, early marriage, school dropout and unfair opportunities and treatment of the girl child. In the slums, like is the case in other socio-cultural settings, female orphans and vulnerable children are most affected by some of the negative social and cultural practices and perceptions in society, a fact that majority of the respondents in this study agreed to.

The study revealed that the rate of school dropout among OVCs in Kibera slums is higher for the girl child than it is for the boy child. That the cash transfer programme is a welcome gesture to the OVCs of Kibera slums is quite evident. Nonetheless, based on the data obtained from the respondents, the beneficiaries of the programme are stigmatized by others in the community. The stigma most likely results from the fact that the programme is associated with poor and underprivileged in the community. Still, the programme is important since it not only provides food for the OVCs but also prevents or curtails school dropout rates, which are observed to be high among orphans than children whose parents are alive.

These findings are in tandem with the findings by (Ellis 2008) on social protection of vulnerable and orphaned children in Sub-Saharan Africa.

In spite of the programme some orphans and vulnerable children still drop out of school and engage in early marriage, jeopardizing the implementation of the cash transfer programme. Most affected by the problems of school dropout are vulnerable and orphaned girls who then turn to early marriage. Hence, early marriage, dropping out of school, stigmatization and societal abuses and mistreatment are some of the socio-cultural factors that affect the implementation of cash transfer for OVC programme in Kibera slums of Nairobi County.

As was the case with the other variables under study, the obtained Spearman’s rho of 0.456 indicates a positive relationship between socio-cultural factors and the implementation of cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. The use and promotion of favourable social and cultural practices would result in easier implementation of the programme since socio-cultural impediments will have been reduced or eliminated. The findings on this variable are consistent with the findings by (Devereux 2005) on how to make cash count and save vulnerable children using cash transfer programmes in East and Central Africa.
5.3.4 Legal Framework and Implementation of cash transfer Programme

The study sought to establish whether the respondents were aware of the Kenyan government policies and laws governing orphaned and vulnerable children. Some of the respondents reported that they were not aware of such laws and policies. The same problems associated with lack of knowledge on legal policies and laws were discovered by (Barrientos and Hulme 2008) in their work ‘Social Protection for the Poor and the Poorest. Expectedly, this unawareness translates into widespread lack of knowledge on government policies and laws governing orphans and vulnerable children. Consequently, many cases of OVC abuse go unreported simply because witnesses are not aware of the laws regulating such conducts. The consequence is widespread abuse of children’s rights. Luckily, some of the respondents reported that they are aware of the OVC laws and policies in Kenya. With such knowledge, it could be easier to report cases of orphaned and vulnerable children abuses.

In addition to lack of knowledge on the laws and policies on child rights, the study also discovered that some of the respondents do not know where to report physical and sexual abuse of OVCs whereas some knew where to report such cases. Thus, it can be said that the legal framework, especially lack of knowledge on the OVC protection laws and policies and the right legal actions to take in case of disinheritance, sexual, physical and psychological abuse of OVCs greatly influence the implementation of the cash transfer programme in Kibera slum, Nairobi County. According to the officer from implementing agency there has been a considerable reduction in number of children dropping out of school to go and do housework for payment due to free primary education. The government has also set up child protection centres where the public are educated on children rights.

As shown in the data analysis section, there is a positive correlation between the legal framework and the implementation of social protection cash transfer programme for orphans and vulnerable children in Kibera slums, Nairobi County. As people become more aware of the legal policies and channels that might be followed to address the challenges of OVC, it becomes easier to protect their social wellbeing.

The study also revealed that the respondents have different opinions on the fairness of the legal system while handling cases of disinheritance, physical and mental violence against OVC. These findings are indeed similar to the findings by (Amiri and Tostensen 2011) in
their case study about cash transfer programmes in Kenya. (Amir and Tostensen 2011) also discovered that mental and physical violence are the main abuses that OVCs face. Some of the respondents said the system is unfair all the way from the chief’s office to the relevant courts of law. Thus, the respondents recommended increased campaign and sensitization to bring more communities into the programme and educating people about the programme as some of the strategies for improving the implementation of the cash transfer programme for OVCs in Kibera slums, Nairobi County.

5.4 Conclusions

Orphans and vulnerable children face myriad financial, psychological, physical, cultural and social challenges that they cannot address on their own. Orphans and vulnerable children with parents suffering from terminal illnesses were the focus of this study, which sought to establish the factors that influence the implementation of cash transfer programme for OVC. Most of these orphans rely on their ailing parents and guardians for basic needs such as food, cloth, shelter and education. Besides, in some cases such children rely entirely on well-wishers such as non-governmental organizations and religious groups.

The government of Kenya and other donors have come to the aid of OVCs by way of this cash transfer programme. For the successful implementation of the cash transfer programme in Kibera slums, it is advisable that all the factors that might influence its implementation are identified and studied. In this study, financing, targeting, socio-cultural factors and the legal framework were identified as some of the key factors affecting the implementation of the programme. All these factors if managed well have great influence on the successful implementation of the cash transfer programme for OVC in Kibera slums. This assertion calls for proper targeting processes that incorporate the local community in the selection of beneficiaries and the use of easily accessible payment methods that have networks in the local area. The payment should also be regular and convenient enough to sustain the beneficiaries during these hard economic times. The implementation of the programme would also require public knowledge on the legal policies and laws on child rights and where to reach the relevant officials to report cases of OVC abuse. It is important to note that the programme was meeting its set objectives in that the orphans were in school with most of caregivers prioritizing education.
5.5 Recommendations
Based on the findings of the study, the following are recommended:

1. The amount of cash disbursed to beneficiary households should be pegged on number of OVC per household. The government needs to reduce the cost of operations on this programme to ensure its successful implementation.

2. There is need to increase administrative capacity of the programme since targeting is conducted by village chiefs, elders, and specially elected committee members, who are not paid for their work and who have other duties and activities, and targeting suffers because of these low resources.

3. Awareness campaigns should be conducted to inform the public on policies and laws governing OVC so that all cases of OVC are reported in time and appropriate action taken.

4. There is need to increase child protection services. These services include, child protection centres, child friendly courts, legal aid for children and child protection units at police stations. This will lead to increase in number of children accessing legal and psycho-social support.

5.6 Suggestions for Further Research

1. Further research should be done to avail the all-important strategic information required by policy makers and programme leaders to make informed decisions on social protection programmes. To best make social protection policies, laws and regulations, it would be necessary to conduct qualitative research on the underlying causes of vulnerability which will provide guidance for deeper interventions than may currently be available.

2. Further studies should focus on the role of each stakeholder and the impact of integrating all stakeholders in all the stages, processes and activities of social protection programmes.

3. Finally, further research should promote the understanding of the nature, characteristics and magnitude of the OVC problem and its socio-demographic features, thereby providing a good foundation for implementing social protection programmes of appropriate design, size and scope.
REFERENCES


DFID. (2006). Reaching the very poorest team: Tackling chronic poverty, the role of social transfers, DFID policy paper 57.


Sharp, K. (2001). *An overview of targeting approaches for food assisted programming Care USA*.


APPENDICES

APPENDIX I: LETTER OF TRANSMITTAL OF DATA COLLECTION INSTRUMENTS

Loyce Kwamboka Mose
P.O Box 23276-00100
Nairobi,
0711430096
19th October 2015

Dear Respondent,

RE: REQUEST TO PROVIDE RESEARCH INFORMATION

I am a Master’s student at the School of Continuing and Distance Education at the University of Nairobi currently conducting a research study on factors influencing implementation of social protection programmes: A case of cash transfer programme for orphans and vulnerable children in Kibera Laini Saba location, Nairobi County.

You have been selected as one of the respondents to assist in providing the requisite data and information for this undertaking. I kindly request you to spare a few minutes and answer a few questions. The information obtained will be used for academic purposes only, and will be treated with utmost confidentiality. Your identity will be anonymous and your name shall not be recorded.

Kindly respond to all the questions honestly and truthfully.

Yours faithfully,

Loyce Kwamboka Mose
APPENDIX II: RESEARCH QUESTIONNAIRE

a) Demographic characteristics of household heads: Tick where appropriate (✓)

1. What gender is the head of the household?
   a) Male (  )
   b) Female (  )

2. What is the age of the head of household?
   (a) Age:10-17yrs (  ) (b)18-30yrs(  ) (c)31-40yrs(  ) (d)41-55yrs(  ) (e)56-69yrs(  ) (f)Over 70yrs (  )

3. What is the highest level of education that you have attained?
   a) Primary (  )
   b) Secondary (  )
   c) Vocational training (  )
   d) Diploma (  )
   e) Degree (  )
   f) Masters (  )
   g) None (  )

4. What other source of income does the household have?
   a) Farming (  )
   b) Business (  )
   c) Employment (  )
   d) Support from other agencies ( specify) (  )

5. Who is the registered caregiver?
   a) Mother (  )
   b) Father (  )
   c) Grandparent (  )
   d) Child (  )
   e) Other (specify) (  )

6. Who collects the cash from the pay point?
7. What levels of education are the OVC in the household?
   a) Pre-school ( )
   b) Primary school ( )
   c) Secondary school ( )
   d) Tertiary ( )

8. Do the OVC in your household have birth certificates?
   a) Yes ( )
   b) No ( )
   If yes, when were they acquired? ( )
   a) Before joining the programme ( )
   b) After joining the programme ( )
   c) After schools demanded for them ( )

9. Apart from the cash helping you take care of the orphans, what benefits has the programme had on you as a care giver______________________________________
   _______________________________________________________________________
   b) Identification of beneficiaries (targeting)

10. How did you know about this programme?
    a) Through community baraza ( )
    b) Through a neighbour ( )
    c) Through local administration ( )
    d) Other (specify) ( )

11. Did you take part in the identification of the community members that did the targeting?
    a) Yes ( )
    b) No ( )

12. Who identified (targeted) you to the programme?
a) Children officer ( )
b) Chief ( )
c) Community member ( )
d) Religious leader ( )

13. Do you think there are people who are more deserving and were left out?
a) Yes ( )
b) No ( )

If yes why do you think they were left out ____________________________________________
______________________________________________

14. Do you think community targeting affects the programme?
a) Highly affects ( )
b) Moderately affects ( )
c) Does not affect ( )

15. How would you rate targeting in relation to the efficiency of the cash transfer programme?
a) Makes it highly efficient ( )
b) Makes it fairly efficient ( )
c) Has no effect on efficiency ( )

16. In your opinion what would be the best way of identifying beneficiary households for this programme?
________________________________________________________________________
__________________________________________________

17. How much do you receive as payment from this programme?
a) Ksh.2000 ( )
b) Ksh.3000 ( )
c) Ksh. 4000 ( )

---
c. Financing

17. How much do you receive as payment from this programme?
a) Ksh.2000 ( )
b) Ksh.3000 ( )
c) Ksh. 4000 ( )
18. How frequently do you receive the cash transfer?
   a) Monthly ( )
   b) Bi-monthly ( )
   c) 3months or more ( )

19. Where have you been receiving your money from?
   a) District treasury ( )
   b) Bank ( )
   c) Post office ( )
   d) Other (specify) ( )

20. How convenient have these modes of payment been?
   a) Very Convenient ( )
   b) Fairly convenient ( )
   c) Not convenient ( )

21. Of the 3 methods in question 19 above, in your opinion which is the most convenient mode of Payment? ______________________

22. Do you experience any form of inconvenience when collecting your money?
   a) Yes ( )
   b) No ( )
   If yes, what sort of inconvenience? ____________________________________________________________

23. Is the payment regular and predictable?
   a) Very Regular and Predictable ( )
   b) Fairly regular and predictable ( )
   c) Not regular and predictable ( )

24. In order of priority one being highest priority, how is the money in the household spent?
   a) Education ( )
   b) Health ( )
   c) Civil registration ( )
   d) Food ( )
e) Clothing ( )
What other use apart from above is the money used for______________________________

25. Do you think the money given in this programme is sufficient for the needs of the OVC?
   a) Yes ( )
   b) No ( )
If answer is no give reasons________________________________________________________

   d) Socio-Cultural
26. Indicate the degree to which you agree or disagree with the following statements.

   SA-Strongly agree, A- Agree, U- Uncertain, D- Disagree, SD- strongly disagree

   Factor SA A U D SD

   Female OVC are the most affected with negative happenings in the society ( )
   Number of school dropouts among orphans and vulnerable children are higher for girl child
compared to boy child. ( )
   Physical and sexual child abuse is common among the OVC in your area ( )

   OVC benefitting from the cash transfer are highly stigmatized ( )
   High numbers of orphans are dropping out of school and forced to early marriage ( )

27. What is the source of income for most orphans and vulnerable children (OVC) in your
   area?
   Government ( ) Fellow orphans ( ) Cash transfers ( ) Religious Organizations ( )

   e) Legal Framework
28. Are you aware of government policies and laws that govern care of orphans and
   vulnerable children in Kenya?
   a) Yes ( )
   b) No ( )
If no do you know where you can obtain such information

________________________________________________________________________

29. In case an orphaned or vulnerable child is physically or sexually abused do you know where to report to?
   a) Yes ( )
   b) No ( )

30. Do you know where to report in case orphans and vulnerable children are forced to work for a living leading to child labour?
   a) Yes ( )
   b) No ( )

31. Do you know where to report in case orphans and vulnerable children have been disinherited by their extended families?
   a) Yes ( )
   b) No ( )

32. In your opinion is the legal system fair when it comes to execution of cases reported on violence on OVC?
   a) Yes ( )
   b) No ( )

   If answer is no state why_________________________________________________
   _______________________________________________________________________

  f) Implementation of social protection programmes

33) In your opinion is the government effectively executing the cash transfer programme? If so give some example of benefits realized from these programme to you as a beneficiary of the
__________________________________________________________________________________
__________________________________________________________________________________

34) What improvements would you recommend to the government towards implementation of this programme
__________________________________________________________________________________
QUESTIONNAIRE FOR IMPLEMENTING AGENCY
Implementing Agency (OVC secretariat)
Name:
Gender:
Designation:

Targeting
35. To what extent does targeting affect the efficiency of implementing the cash transfer Programme?
   a) Highly affects (  )
   b) Moderately affect (  )
   c) Does not affect (  )

36. Do you think the current selection process of beneficiary household is able to select all deserving cases of OVC?
   a) Yes (  )
   b) No (  )
   If no what else can be done to make it all inclusive to avoid errors of exclusion and inclusion
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

36. What challenges do you encounter during the selection process of beneficiary households?
___________________________________________________________________________
___________________________________________________________________________
___________________________________________________________________________

Financing
37. How much of the national budget is allocated to OVC in current financial year 2015/2016? _________________

38. Is the programme well-staffed with competent personnel?
   a) Yes (  )
   b) No (  )
39. Do you have adequate physical resources i.e., vehicles, computers for the Programme?  
a) Yes ( )  
b) No ( )  
40. In your opinion does the programme experience financial constraints?  
___________________________________________________________________________  
___________________________________________________________________________

**Socio-Cultural**

41. Are there incidences of orphans and vulnerable children being forced to early marriage?  
___________________________________________________________________________  
___________________________________________________________________________

42. Do we have instances of orphaned and vulnerable children dropping out of school due lack of funds?  
a) Yes ( )  
b) No ( )  
43. If yes what are the statistics when you compare girl and boy child_______________________  
___________________________________________________________________________

**Legal Framework**

44. Do we have reported cases of child labour among orphans and vulnerable children?  
___________________________________________________________________________

What legal action has been taken for such cases?  
___________________________________________________________________________

45. Do we have reported cases where orphans and vulnerable children have been disinherited?
What legal action has been taken for such cases?


46. Do we have reported cases of orphans and vulnerable children having been physically or sexually abused?
   a) Yes (  )
   b) No (  )
   If yes what are the statistics and what legal action has been taken?


47. Are child related cases held in normal courtrooms or do we have child friendly courtrooms?


48. Do we have child protection centres where children can be taken into custody in the event they are sexually or physically abused in their homes?
   a) Yes (  )
   b) No (  )
   If yes how wide is there coverage and is the community aware of such centres?


49. In your opinion is the government doing enough in terms of enforcement of children’s Act?


50. Are caregivers of OVC and their extended families aware of government policies and laws that protect orphans and vulnerable children?
51. What measures has the government put in place to ensure that the entire population have knowledge of policies and laws governing protection of orphans and vulnerable children?

______________________________

______________________________

______________________________

______________________________

______________________________

Implementation of social protection programmes

52) In your opinion is the government effectively executing the cash transfer programme?

______________________________

______________________________

______________________________

53) Are there areas in this programme that require immediate improvement?___________________

______________________________
Appendix III: TABLE FOR DETERMINING SAMPLE SIZE FOR A GIVEN POPULATION

Krejcie and Morgan Table

<table>
<thead>
<tr>
<th>N</th>
<th>S</th>
<th>N</th>
<th>S</th>
<th>N</th>
<th>S</th>
<th>N</th>
<th>S</th>
<th>N</th>
<th>S</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>10</td>
<td>100</td>
<td>80</td>
<td>260</td>
<td>162</td>
<td>800</td>
<td>260</td>
<td>2600</td>
<td>338</td>
</tr>
<tr>
<td>15</td>
<td>14</td>
<td>110</td>
<td>86</td>
<td>290</td>
<td>166</td>
<td>860</td>
<td>266</td>
<td>3000</td>
<td>341</td>
</tr>
<tr>
<td>20</td>
<td>19</td>
<td>120</td>
<td>92</td>
<td>300</td>
<td>169</td>
<td>900</td>
<td>269</td>
<td>3500</td>
<td>246</td>
</tr>
<tr>
<td>25</td>
<td>24</td>
<td>130</td>
<td>97</td>
<td>320</td>
<td>175</td>
<td>950</td>
<td>274</td>
<td>4000</td>
<td>351</td>
</tr>
<tr>
<td>30</td>
<td>28</td>
<td>140</td>
<td>103</td>
<td>340</td>
<td>181</td>
<td>1000</td>
<td>278</td>
<td>4500</td>
<td>351</td>
</tr>
<tr>
<td>35</td>
<td>32</td>
<td>150</td>
<td>108</td>
<td>360</td>
<td>186</td>
<td>1100</td>
<td>286</td>
<td>5000</td>
<td>357</td>
</tr>
<tr>
<td>40</td>
<td>36</td>
<td>160</td>
<td>113</td>
<td>380</td>
<td>181</td>
<td>1200</td>
<td>291</td>
<td>6000</td>
<td>361</td>
</tr>
<tr>
<td>45</td>
<td>40</td>
<td>180</td>
<td>118</td>
<td>400</td>
<td>196</td>
<td>1300</td>
<td>297</td>
<td>7000</td>
<td>364</td>
</tr>
<tr>
<td>50</td>
<td>44</td>
<td>190</td>
<td>123</td>
<td>420</td>
<td>201</td>
<td>1400</td>
<td>302</td>
<td>8000</td>
<td>367</td>
</tr>
<tr>
<td>55</td>
<td>48</td>
<td>200</td>
<td>127</td>
<td>440</td>
<td>205</td>
<td>1500</td>
<td>306</td>
<td>9000</td>
<td>368</td>
</tr>
<tr>
<td>60</td>
<td>52</td>
<td>210</td>
<td>132</td>
<td>460</td>
<td>210</td>
<td>1600</td>
<td>310</td>
<td>10000</td>
<td>373</td>
</tr>
<tr>
<td>65</td>
<td>56</td>
<td>220</td>
<td>136</td>
<td>480</td>
<td>214</td>
<td>1700</td>
<td>313</td>
<td>15000</td>
<td>375</td>
</tr>
<tr>
<td>70</td>
<td>59</td>
<td>230</td>
<td>140</td>
<td>500</td>
<td>217</td>
<td>1800</td>
<td>317</td>
<td>20000</td>
<td>377</td>
</tr>
<tr>
<td>75</td>
<td>63</td>
<td>240</td>
<td>144</td>
<td>520</td>
<td>221</td>
<td>1900</td>
<td>320</td>
<td>30000</td>
<td>379</td>
</tr>
<tr>
<td>80</td>
<td>66</td>
<td>250</td>
<td>148</td>
<td>540</td>
<td>225</td>
<td>2000</td>
<td>322</td>
<td>40000</td>
<td>380</td>
</tr>
<tr>
<td>85</td>
<td>70</td>
<td>260</td>
<td>152</td>
<td>560</td>
<td>229</td>
<td>2200</td>
<td>327</td>
<td>50000</td>
<td>381</td>
</tr>
<tr>
<td>90</td>
<td>73</td>
<td>270</td>
<td>156</td>
<td>580</td>
<td>234</td>
<td>2400</td>
<td>331</td>
<td>75000</td>
<td>382</td>
</tr>
<tr>
<td>95</td>
<td>76</td>
<td>270</td>
<td>159</td>
<td>600</td>
<td>238</td>
<td>2600</td>
<td>335</td>
<td>100000</td>
<td>384</td>
</tr>
</tbody>
</table>

Note:  
"N" is population size  
"S" is sample size

Source: Krejcie & Morgan, 1970