

**THE EFFECT OF OLDER PERSONS CASH TRANSFER PROGRAMME ON  
THE ELDERLY IN WESTLANDS SUB-COUNTY, NAIROBI CITY COUNTY**

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## DECLARATION

This project paper is my own work and has not been presented for a degree in any other University.

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Priscilla Mueni Mwanzia

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Date

This project paper has been submitted for examination with my approval as the University Supervisor.

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Prof. Simiyu Wandibba

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Date

## **DEDICATION**

This work is dedicated to my family Arnold Muturi and Meyer Zawadi Muturi.

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## **ABSTRACT**

The purpose of the study was to explore the impact of the Older Persons Cash Transfer Programme on the elderly in Westlands Sub-county, Nairobi City County. The case study method was used to conduct the research. The Data were collected using structured interviews, key informant interviews, focus group discussions and direct observation. The study revealed that older persons' cash transfer programme has little impact on the livelihood of the older persons because the money is little and not given on time. The study also revealed that not all deserving elderly persons benefit from the cash transfer since there are many aged people who do not benefit since their children are working yet their children do not support them. The study recommends that implementing agencies for the cash transfer programme need to fully operationalize the principles of equality and inclusion of all the elderly from the age of 65 years and above. They should also roll out an intensive well-coordinated public education programme to sensitize the communities, administrators and all other stakeholders of the objects, value and process of implementation of the cash transfer programme.

## **ABBREVIATIONS AND ACRONYMS**

AIDS	Acquired Immunodeficiency Syndrome
HIV	Human Immunodeficiency Virus
IDPs	Internally Displaced Persons
INGOs	International Non-Governmental Organizations
MOGCSD	Ministry of Gender, Children and Social Development
NGO	Non-Governmental Organization
OVC	Orphans and Vulnerable Children
PWDs	Persons with Disabilities

## CHAPTER ONE

### BACKGROUND TO THE STUDY

#### 1.1 Introduction

There is a growing focus in developing countries on the role of social protection programmes towards reducing poverty and meeting the Millennium Development Goals. Successful implementation of social protection interventions would contribute to the attainment of the five Millennium Development Goals, that is, eradication of extreme poverty and hunger, promoting gender equality and empowering women, reduction of child mortality, combating HIV/AIDS, malaria and other diseases, and developing a global partnership for development. However, despite the growth and extent of social protection programmes in both developed and developing countries, most emerging economies have nascent systems and only a small portion of all such efforts address the specific vulnerabilities and needs of older people (Babu, 2003).

According to Bachelet (2011) social protection refers to policies and actions, including legislative measures, which enhance the capacity and opportunities for the poor and vulnerable to improve and sustain their lives, livelihoods and welfare; enable income earners and their dependents to maintain a reasonable level of income through decent work; and ensure access to affordable healthcare, social security and social assistance. Bachelet adds that National and international policy instruments recognize social protection as key in cushioning vulnerable groups from sinking deeper into poverty or helping those in chronic poverty out of it. It is further cited in Kenya's National Social Protection (Republic of Kenya 2012) the various national, regional and international policy instruments as the foundations upon which Kenya's social protection policies are based on. These instruments include UDHR of 1948 which recognizes SP as a fundamental right for all citizens; the UN/ILO Social Protection Floor Initiative (SPF) which guarantees minimum package that adopts lifestyle approach to social protection (GOK, 2011). The World Summit on Social Development (WSSD) of 2002 recognizes the importance of social aspects of development.

Social protection programmes aim at ensuring that vulnerable population groups receive appropriate and effective public support to ensure their financial security and to safeguard their health. In addition, Devereux (2004) states that social protection describes all public and private initiatives that provide income and consumption transfers to the poor, protect the vulnerable against livelihood risks, and enhance the social status and rights of the marginalized with the overall objective of reducing the economic and social vulnerability of the poor, vulnerable and marginalized groups. Social protection instruments are administered in the form of: cash transfers, feeding programmes, food subsidies, social or health insurance, microfinance, subsidized agricultural inputs, public works programmes, waivers and exceptions and skills development. Some of these instruments do not suit the needs of the elderly due to their reduced ability on hand activities. According to Vincent and Cull (2009), vulnerable groups require social protection to protect their livelihoods and each of these groups require different forms of social protection, ranging from social transfers for example, grants to the elderly and cash transfers; social services including; home based care, education, health insurance; and social transformations, that is, broader policy and legislative changes to ensure rights of vulnerable groups.

Social protection measures also include social insurance such as the National Social Security Fund (NSSF) and National Health Insurance Fund (NHIF), social assistance and social transfers. In social insurance, people draw from the pool when they experience permanent change like retirement. Social assistance includes school feeding programmes, free health care or free education. On the hand, social transfers are regular and predictable transfers, often in the form of cash provided by the state (or sometimes by non-state actors), as part of a social contract with its citizens. They include child support grants, orphan care grants, disability grants, social pensions, and transfers to poor households. In line with this, Bertrand (2003) argues that social transfer programmes have had a great impact in industrializing countries in reducing poverty for over 50 years. The drivers and maintainers of poverty among the elderly include: poor health, frailness, loss of employment, labour constrains, limited information and awareness, lack of support among other requirements reduces the older person's ability to undertake income generating activities, a justification for most social assistance to households headed by

the elderly and caring for OVCs. Time given to caring for grant children makes the elderly less able to engage in income generating activities. In a paper presented in a regional workshop by HelpAge international, previous failure to invest in primary education and nutrition are identified as factors to diminish opportunities for later life (HAI, 2010). This explains why the parallel programmes are being launched in the developing economies such as the Kenyan one.

The World Bank (1995) declares that social protection interventions ought to be transformative, protective and preventive. In being transformative, they address power imbalances that continuously create vulnerability through economic inequalities. They should be protective to mitigate shocks and provide relief from economic and social deprivations. They should also be preventive to avert deprivation once a shock has occurred.

## **1.2 Social protection programmes for the elderly in Kenya**

After the era of single party rule which ended in 1992 and Kenyans ushered in multi-party politics, there was a great interest by the Government and political parties to come up with social protection measures in order to curb unemployment, inequality and prevailing poverty among her people. This was demonstrated by the implementation of a large number of social protection programmes in existence today (Republic of Kenya, 2009). These programmes are being implemented by the Government and nongovernmental organizations in partnership with the private sector in form of cash transfers and non-cash transfer programmes. According to the National Social Protection Policy (Republic of Kenya 2011), the broad goal of social protection is to ensure that all Kenyans live in dignity and exploit their own social and economic development. There are a number of Social Protection legal and policy framework and programme interventions for the elderly in Kenya. These include the following:

### **1.2.1 National Policy and Older Persons and Ageing**

This policy was published in the year 2009. It was prepared in response to the various challenges affecting the elderly in Kenya. Issues of the elderly have been outlined in the

policy to include: Law and human rights, poverty and sustainable livelihoods, poor health and lack of access, harmful cultural practices to the elderly, gender issues, in which older women are cited as more vulnerable, food security and nutrition, housing and physical amenities, access to information and training, employment and income security, social welfare, preparation for retirement, conflicts and disaster situations, institutional arrangements in support of the older persons affairs and negative impact of population migration (MOGCSD 2009).

The policy also provides a broad framework for implementation through strategies that would enable the older person to make meaningful contribution to the development process. The policy recognizes the potential of older persons in terms of skills, knowledge and experience and thus the need to mainstream them in development.

### **1.2.2 The Constitution of Kenya, 2010**

This constitution devotes a whole article to the rights of the elderly. Article 57 particularly declares that the state shall take measures to ensure the rights of the older person:

- a) To fully participate in the affairs of the society.
- b) To pursue their personal development.
- c) To live in dignity and respect and be free from abuse.
- d) To receive reasonable care and assistance from their family and state (Republic of Kenya 2010).

### **1.2.3 Pension schemes**

This is coordinated by the ministry of finance through the pension department. The department coordinates the processing and payment of pensions, death gratuities and other benefits to retired, deceased or terminated civil servants, teachers and military officers in the public service as well as their dependants. Pensions are imperative in a period in which the beneficiary is at a vulnerable state for example in old age, when terminally ill and even to the principal contributor's household in the event of death. Retirement Benefits Authority 2008.

#### **1.2.4 Kenya Vision 2030**

Kenya's development blue print, vision 2030, aims to provide a high quality of life for all citizens by the year 2030. The vision is built on three pillars: Economic, social and political. Vision 2030's Social Pillar aims to achieve a just and cohesive society, enjoying equitable social development in a clean and secure environment. It is based on transformation in eight social sector areas, namely: education and training; health; water and sanitation; environment, housing, and urbanization gender, youth, sports, and culture; and promoting equity and poverty reduction. It makes special provision for those with disabilities, the elderly and those who live in marginalized areas. The consolidated social protection fund is one of the flagship projects of Vision 2030 under which the cash transfer programme for the elderly falls (Republic of Kenya 2008).

#### **1.2.5 National Social Security Fund (NSSF)**

This fund was established in 1965 by an Act of Parliament (CAP 258 of the Laws of Kenya) in order to administer a provident fund scheme for all workers in Kenya. This fund initially operated under the ministry of labour but as operations became complex due to increased membership, an amendment was done to the NSSF Act in 1987 to transform it into an autonomous state corporation (NSSF 2011).

#### **1.2.6 The National Hospital Insurance Fund (NHIF)**

NHIF is a state parastatals that was established in 1966 as a Department under the then Ministry of Health which has since been reviewed to meet the changing health needs of the Kenya population, employment and restructuring in the health sector. Its core function is to collect and manage members' contributions and pay hospital benefits out of the contributions of their declared dependence which are utmost four children and a spouse.

The Parastatal registers members from both formal and informal sectors including retirees. Registration of membership is compulsory for all employees in the formal sector whilst membership is voluntary for those in the informal sector. Members are entitled to



an in-patient cover of up to KES 396,000 for the contributor, spouse and children (NHIF, 2009).

A recent development in the Fund is the increase in the number of years of membership to above 60. This has been a plus on the part of the elderly population in Kenya which is often mired in health complications. Though this measure has been put in place, it is difficult for a poor elderly with irregular income and/ or living in absolute poverty to effect the monthly contributions that would qualify them for the hospital cover.

### **Non-governmental organizations**

These provide services including advocacy for older persons' needs, provision in kind of materials, homes and education among others. These organizations are run by religious organization, NGOs and CBOs. Examples of such organizations are: HelpAge International, Help age Kenya and Cheshire Home for the elderly.

### **The family**

This institution is pivotal in taking care of the elderly though urbanization and modernity have contributed to reducing the effectiveness of this role of the family as young members leave for cities and towns to seek jobs and perceived better living.

### **1.3 Institutionalization of the elderly**

Kenya's national policy and old persons and ageing encourage support of the elderly within the family. As a policy strategy, institutionalization is discouraged and retention of cultural respect for the older person is seen as the best alternative. Emphases are laid on: community -based support systems such as kinship, extended family and neighbourhood in taking care of the elderly.

### **1.3 The population of the elderly in Kenya**

The population of older persons throughout the world is increasing at a rapid rate. It was about 200 million in 1950, rose to 606 million in 2000 and is expected to reach the two billion mark by 2050. The most rapid increase is taking place in the developing world,

with Africa alone projected to have between 205 and 212 million older persons by 2050 (MOGCSD, 2009). Kenya has a total population of 38,610,097 and that of the elderly above 65 years is 1,332,000 (KNBS, 2010). According to Kenya Integrated Household Budget Survey (KIHBS) of 2005/2007, approximately 46 percent of Kenya's population is said to be poor (KNBS, 2007). The poverty rate of older persons of 60 years and above is 56.4% (MOGCSD, 2011). The level of vulnerability of older persons to poverty is high considering the fact their ageing bodies become frail making them less able to work and meet their own needs. Considering the population increase by about 1 million yearly and a declining crude mortality rate from 11/1,000 in 2007 to 8.93/1,000 in 2011, the number of those ageing will increase significantly by 2030. This demographic transition requires planning and central policy making for a social group faced with many social risks at a time of their lifecycle when the average propensity to consume is high. The Kenya government approaches social protection of the elderly mainly through social security limited to formal employment. Yet, the larger labour force in Kenya is in informal employment, meaning that a large proportion of the ageing population was rendered vulnerable.

According to Harris and Maloney (1999) the elderly are more different than alike, physically and psychologically, they age at different rates and what is a true of one 70 year old may not be true of the other. Some may be old at 55 and others young at 80 years. A persons health outlook on life and agility often affects how old or young one feels. Most government policies give certain ages to mark the beginning of old age. Kenya's National Policy of Older Persons and Ageing puts it at 60 years (MOGCSD, 2009). This age is also set by UN and AU as the starting age for the elderly. This is also the age at which formal employment in Kenya is officially terminated. 'In colonial America, old people were expected to remain working until they were physically unable to do so' (Foner, 1986).

#### **1.4 Statement of the problem**

Ageing comes with many challenges. The loss of independence is one potential part of the process, as are diminished physical ability and age discrimination. The ageing process

involves biological, emotional, intellectual, social, and spiritual changes. Many older adults remain highly self-sufficient. However, others require more care. Because the elderly typically no longer hold jobs, finances can be a challenge and due to cultural misconceptions, older people can be targets of ridicule and stereotypes. The elderly face many challenges in later life, but they do not have to enter old age without dignity. Mistreatment and abuse of the elderly is a major social problem and, as expected with the biology of ageing, the elderly sometimes become physically frail. This frailty renders them dependent on others for care, sometimes for small needs like household tasks and basic functions like eating and toileting.

The growing numbers of the elderly in Kenya, particularly in urban areas, has increased social, economic and political pressure, leading to the introduction of various social protection programmes in the country. This is because older people who have suffered a lifetime of poverty enter old age with very little or no resources at all and often in poor health. In addition, older people are seen as a low priority by most humanitarian agencies, and very few develop programmes that consider their specific needs. The 2005/06 Kenya Integrated Household and Budget Survey data highlighted the most vulnerable groups in the country, and identified the relatively high vulnerability of the elderly population to poverty compared to other age groups([KeNADAadmin-datarequest@knbs.or.ke](mailto:KeNADAadmin-datarequest@knbs.or.ke)).

The Government of Kenya (GOK) through the then the Ministry of Gender, Children and Social Development (MOGCSD) started a cash transfer programme for the elderly under the Rapid Results Initiative (RRI) activities of the of the MOGCSD of 2007 in three Districts that is Nyando, Busia and Thika . During the pilot stage, the number of beneficiaries was 300 in the three Districts. Each District was given a quota of 100 older persons. In 2009 the programme was up- scaled to 33,000 in 44 Districts. This shows that there has been a progressive increase in the number of older persons in the cash transfer programme in order to reduce poverty and enhance the capacity of the elderly. In the financial year 2011/2012 the number of older persons in the programme rose up to 36,036 (MOGCSD 2012). This increase in the numbers of the elderly in the cash transfer programme and comparing the poverty level of the elderly in Kenya prompted the

researcher to focus on whether the older persons cash transfer programme has had any positive impact on the welfare of the elderly.

This study therefore sought to answer the following research questions:-

1. How has the Older Persons' Cash Transfer Programme helped to reduce extreme poverty among the elderly in Westlands sub-County?
2. How has this programme enhanced the basic rights of the elderly in the sub-County?
3. How has the programme boosted economic development of the elderly in the sub-County?

## **1.5 Objectives of the study**

### **1.5.1 General Objective**

To explore the impact of Older Persons' Cash Transfer Programme on the elderly in Westlands Sub-County.

### **1.5.2 Specific Objectives**

- i. To investigate the extent to which the Older Persons' Cash Transfer Programme has reduced extreme poverty among the elderly in Westlands sub-County.
- ii. To describe how the programme has enhanced the basic rights of the elderly in the sub-County.
- iii. To explain how the cash transfer has boosted the economic development of older persons in the sub-County.

## **1.6 Assumptions of the study**

1. The Older Persons' Cash Transfer Programme has reduced extreme poverty among the elderly in Westlands sub-County.
2. The programme has enhanced the basic rights of the elderly in the sub-County.
3. Older Persons' in Westlands sub-County have improved their economic status through the Older Persons' Cash Transfer Programme.

### **1.7 Justification of the study**

Ageing persons are an important component of every country's demographic strata, deserving social protection like other age sets. The population of older persons is increasing at a very rapid rate all over the world. This study is timely as the globe is experiencing hard economic times causing social protection to be more difficult for societies. Therefore, the study findings should be useful to the Government of Kenya in creating a data base that can be used to improve on service delivery as well as creating a data base that can be used by other people such as researchers.

### **1.8 Scope of the study**

The study was carried out in Westlands Sub-County, Nairobi City County, and sought to explore the impact of Older Persons' Cash Transfer Programme on the elderly. The study focused on the location of older persons' in the Sub-county, economic facilities, health facilities and educational facilities. The study was guided by the critical theory of ageing.

### **1.9 Limitations of the study**

The study relied on information provided by the respondents in Westlands Sub-County. The study's main data collection instrument was a questionnaire, and thus the data were limited to the respondents' level of honesty and willingness to participate in the study. This could have limited the quantity and quality of data collected thereby affecting the validity and liability of the study findings. Also due to the small number of the sample population the results are unlikely to be generalized to other Sub counties in Kenya.

### **1.10 Definition of key terms**

Social Protection Programme: A plan of activities with designed outcomes, beneficiaries and responsibilities within a defined time frame in response to an agreed social need.

Elderly: Adults above 65 years of age.

Social Protection:	Policies and actions which enhance the capacity and opportunities for the poor and vulnerable to improve and sustain their livelihoods and welfare in a manner that guarantees a minimum level of well-being including access to food, health care, education, housing, water, sanitation and other noneconomic factors like human rights and participation.
SafetyNet Programmes:	Programmes which protect a person and household against two adverse economic conditions and economic outcomes in welfare: chronic incapacity to work and chronic poverty, and a decline in this capacity from marginal situation that provides minimal means for survival with few reserves ,that is, transient poverty (Subbarao et al.,1997: 47)
Older Persons Cash Transfer Programme:	The provision of direct financial support to needy households in order to improve their incomes.
Disability Grant:	Help offered to the elderly due to their functional status. The functional status of a person entails looking at activities of their daily living or functional ranges. In this case, the difficulties of the elderly in functioning was considered merely as being old.
Urban Food Subsidy:	The financial assistance or subsidy given to the elderly to enable them meet their basic needs.

## **CHAPTER TWO**

### **LITERATURE REVIEW**

#### **2.1 Introduction**

This chapter reviews the literature relevant to the research problem. The literature is reviewed using the following subheadings: social assistance programmes in Kenya and the effect of Older Persons' Cash Transfer Programme on the welfare of the elderly. The chapter ends with a discussion of the theory that guided the study.

#### **2.2 Social assistance programmes in Kenya**

The Government in partnership with key development partners, especially the United Nations Children's Fund (UNICEF), the Department for International Development (DFID) and the World Bank, is currently implementing social assistance interventions targeting specific categories of beneficiaries. These interventions include cash transfers, food distribution, public works and grants (Republic of Kenya, 2011). Since this study aimed at exploring the impact of the older persons cash transfer programmes, below is a brief analysis of the cash transfer programmes in Kenya.

Currently there are five cash transfer programmes being implemented in Kenya. The Government is taking an increasingly key role in the implementation and funding of these programmes, with the development partners taking a lead in the provision of technical expertise and financing. The Government's share of the financial resources made available for the implementation of the cash transfer programmes has increased from a low level when the programmes were initiated to a point where its contribution currently is virtually equal to that of the donors (Ikiara, 2009).

According to the Republic of Kenya (2011), these cash transfers include the following. One is the Orphans and Vulnerable Children (OVC) Cash Transfer Programme, which targets orphans and vulnerable children. This programme's objective is to ensure that the children of the poor and vulnerable families enjoy income security at least at the poverty level through family or child transfer aimed at helping them access nutrition, education and health care.

The second one is the Hunger and Safety Net Cash Transfer Programme. Safety nets are targeted at the chronically food deficient communities in the country's arid and semi-arid areas in the northern regions. The goal of this programme is to reduce poverty among the pastoralist people in northern Kenya.

Third, is the Cash Transfer Programme for the Severely Disabled. This programme targets individuals who are severely disabled and depend entirely on the help of a care giver. The objective of this programme is to ensure that people with disability enjoy income security through cash transfer granted at least up to the poverty line level.

The fourth programme is the Urban Food Subsidy Cash Transfer Programme, whose objective is to improve the livelihood security of the most vulnerable residents of urban informal settlements. Its goal is to increase access to food for the most vulnerable households in selected informal settlements.

Finally, the Cash Transfer Programme for the Elderly targets destitute older persons in Kenya. The old persons must be sixty-five years and above who are needy. The main objective of this programme is to promote immediate relief to the vulnerable older persons from extreme poverty while enhancing their basic rights.

### **2.3 Older Persons' Cash Transfer Programme and the welfare of the elderly**

The Older Persons' Cash Transfer Programme involves provision of direct financial support to households with the elderly living in poverty. The transfer aims at improving the conditions of the elderly people. The immediate objective of the programme is to relieve them from extreme poverty and enhance their capacity to participate in development activities (Republic of Kenya, 2011). According to Booysen (2005), in most societies vulnerability rises with age for numerous reasons, including decline in job opportunities (especially in formal employment), reduced pay for those in employment, increased vulnerability to health conditions, limited mobility, discrimination in access to credit and financial markets, restrictions in access to basic services such as education or health, and changes in household composition and status.



Cash transfer programmes for the elderly have as their primary aim the prevention of poverty and vulnerability among these people. Cash transfers to older people promote their status and decision-making powers within the household, with potential benefits in terms of the allocation of income. Seleokane (2008) notes that cash transfers to the elderly can facilitate investment which reduces the incidence of risks and therefore of future poverty. Investment in physical, human, and social capital reduces the intergenerational transmission of poverty, and therefore the persistence of poverty over time. Seleokane adds that social grants actually stimulate entrepreneurial activity, in that the grants are reinvested into other income generating activities. This suggests that in many cases the elderly could in fact be connected with the labour market through grant income despite initial isolation. In so far as cash transfers reach the very poor, and given the restricted access of older people and their households to other sources of investment, cash transfer programmes can have a significant effect on economic activity and the development process.

Cash transfers to the elderly facilitate older people's efforts to cope with their increased vulnerability (Cox, 2006). It is an issue, in this respect, that in most of the countries reviewed, benefit levels are set at a minimum income standard, be it the national poverty line or the minimum wage. In other countries, the benefit level is set at below the poverty line. The vulnerability of older people also influences their status within their households and communities, and pension provision can have an impact on these. Cash transfer programmes to the old may empower older persons, and thus improve agency. In developing countries older people live in multigenerational households, and so their poverty and vulnerability, and the likely impact of pension benefits on these, is as much a household issue as an individual one. Pension provision has the potential to impact on poverty on a wider scale than just older groups. To the extent that co-residence of older and younger people is more common in developing countries, and given the absence of comprehensive 'safety nets', pension benefits can have a wider role in poverty alleviation (Seleokane, 2008:26).

Social pensions have been known to have a multiplier effect beyond older persons themselves. This is because a pension in the hands of an older person has a trickle-down effect to the rest of the members of the household. In Mauritius, for example, the poverty rate among households containing an older person would be 30 per cent compared to the current 6 per cent in the absence of the universal pension (Kaniki, 2007:24).

The government of the Kingdom of Lesotho introduced a non-contributory old age pension schemes for older persons of 70 years of age and above in 2004. This aims to reduce poverty among the elderly. The beneficiaries of the pension should not be receiving the contributory old age pension. The scheme is financed through general taxation (Bellow et al. 2007).

Most of developing countries have a universal means tested scheme which applies to the household. For example, South Africa's social pension is equivalent to one third of per capita income. The scheme beneficiaries are those aged 65 years and above for men and women aged 60 years and above. A study done to assess the impact of the cash transfer programme in South Africa showed that together with promotion of food security, social transfers promote self-esteem, social status and empowerment.

Regarding the effect on labour force participation, past studies have focused on prime age adults (Bertrand, 2003) and persons aged 50 years and older (Ranchhod, 2006). For both age groups significant decreases in labour supply have been found. The authors conclude that the government needs to carefully reconsider the incentives provided by the various welfare programmes. Posel (2006) also analysed the behavioural changes induced by pensions and arrived at a more positive conclusion. They found that in particular labour migration seems to increase among prime age adult household members suggesting that pension money plays a crucial role in overcoming credit constraints.

## **2.4 Theoretical framework**

The rationale of cash transfer is based on the challenges afflicting the elderly. These challenges are related to their needs which are holistic and encompass physiological,

social, psychological and economic needs. Cash transfers are offered to enable older persons meet their basic needs for food, shelter, clothing, and medical care, among others. Research has shown that cash transfers enable poor people to meet basic needs and increase their chances of accessing services which they otherwise could not. Basic needs are also interrelated to psychological needs in that when basic needs are met people are motivated to pursue more things including engaging in income generating- activities, leisure, visiting social places like ceremonies and religious places which in turn enhance a person's self-esteem. The impact of the fund has been conceived on the basis of the Hansell's motivation theory of social welfare.

#### **2.4.1 Motivation theory**

This theory was developed by Hansell. It posits that people must achieve seven basic attachments in order to meet their needs and that if a person does not succeed in achieving each of these attachments these results in a state of crisis of stress. The seven basic attachments and their corresponding signs of failure are:

- a) Food, water and oxygen along with information supplies. Signs of failure: boredom, apathy and physical disorder.
- b) Intimacy, sex, closeness and opportunity to exchange deep feelings: Signs of failure: loneliness, isolation and lack of sexual satisfaction.
- c) Belonging to a social peer group: Signs of failure: not feeling part of any group.
- d) A clear definite self-identity: Signs of failure: feeling doubtful and indecisive.
- e) Social role that carries with it a sense of being a competent member of society. Signs of failure: depression and a sense of failure.
- f) The need to be linked to a cash economy through a job, a spouse with income, social security benefits. Signs of failure: lack of purchasing power leading to inability to purchase essentials.
- g) A comprehensive system of meaning with clear priorities in life. Signs of failure: sense of drifting through life detachment and alienation.

The challenges of old age relate to the signs of failure as indicated in Hansell's theory. The theory therefore gives a perspective of welfare intervention in which GOK devised

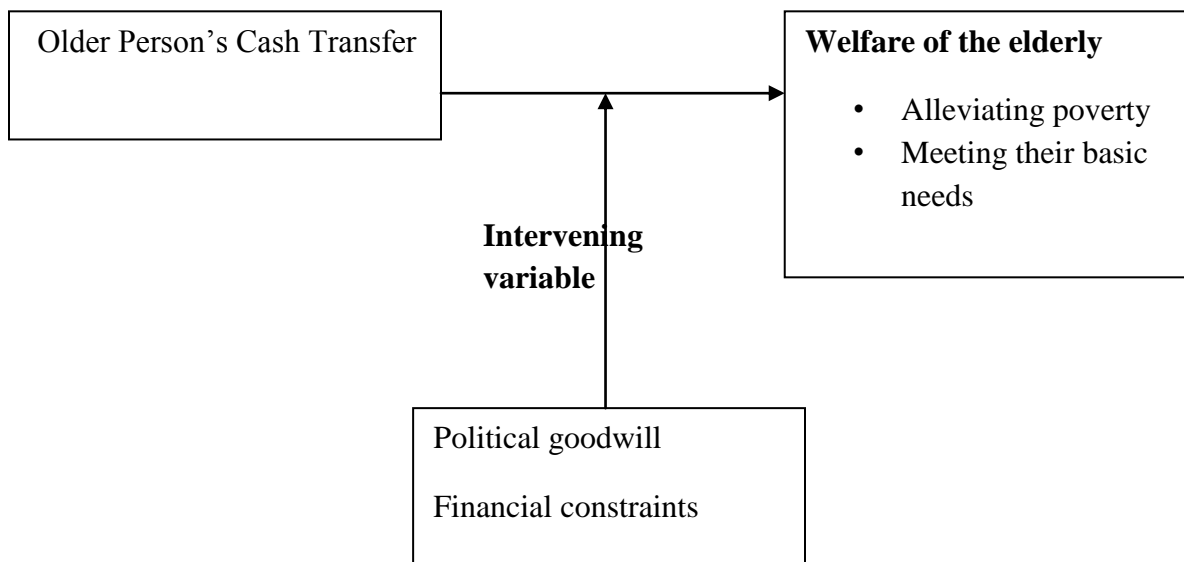
cash transfer to ensure that the challenges are reduced so that older persons meet their minimum basic needs and subsequently psychosocial calmness through receiving a predictable cash stipend of KES 2,000 per month.

#### 2.4.2 Critical theory of ageing

Critical theory has its foundations in social critique tied to consequences rising and the possibility of positive and liberating social change (Lincoln & Guba, 2000). It is useful in promoting a broad understanding of the ways in which the current policies and procedures may impact on the elderly. It may also be used to take a wider focus and look at the effects of societal factors such as ageism, cotemporary views and responses relating to aged care services, human rights and forces of global capitalism. This makes the theory relevant to this study because the study aims at looking into the social protection policies in relation to older persons cash transfer programme in Kenya with a focus on Westlands Sub-County and how this cash transfer programme affects the elderly in that sub county. This can be conceptualized as shown in Figure 2.1. below

#### Independent variable

#### Dependent Variables



**Figure 2.1: Conceptual Framework**

From Figure 2.1 above, hunger and safety net programmes, older persons' cash transfers, disability grants and urban food subsidy define the study's independent variables. On other hand, the welfare of the elderly is the study's dependent variable. The study was therefore built on the premise that the welfare of the elderly depends on how well the independent variables would be implemented.

## **CHAPTER THREE**

### **METHODOLOGY**

#### **3.1 Introduction**

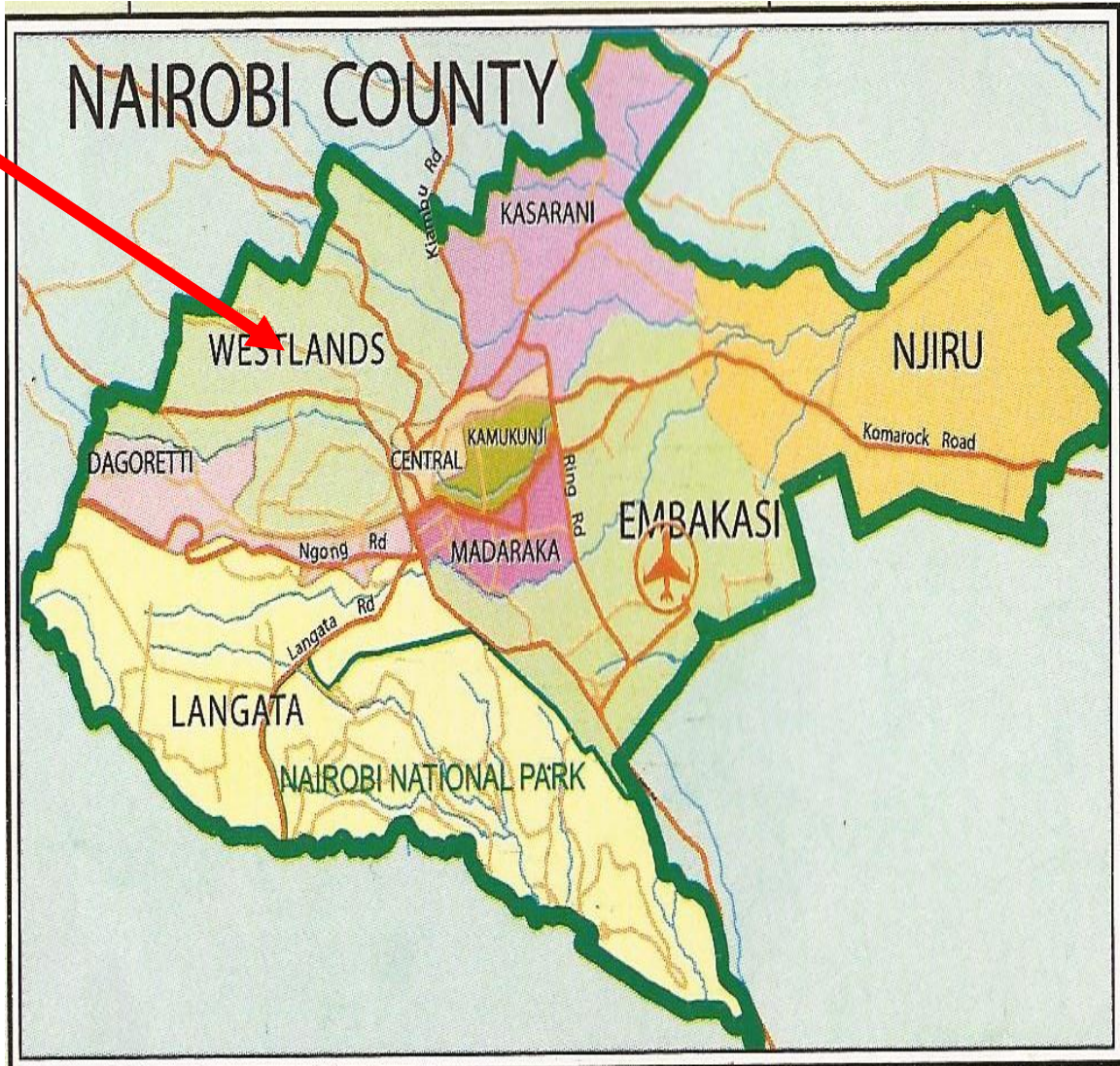
This chapter describes the methodology that was used in this study. It describes the research site, research design, study population, sample population, data collection methods, and data processing and analysis. The chapter ends by discussing ethical considerations.

#### **3.2 Research site**

This study was carried out in Suswa informal settlement in Westlands Sub-County, Nairobi City County. Westland Sub- County is one of the nine sub-Counties in Nairobi City County (Figure 3.1). It is located 3.1 kilometers by road northwest of the Central Business District. It is a sub-county of contrast, that is, it has the rich as well as the poor. The poor live in the informal settlements which include Native Industrial Training Development (NITD), Kibagare, Kaptagat, Waruku, Mji Wa Huruma, Maasai and Suswa. From these informal settlements, Suswa was the focus of this study. Suswa settlement is situated in Highridge location. It was established in 1963 by settlers who came to Nairobi seeking employment. For the most part, the settlement expanded through natural increase instead of in-migration. Current residents were mostly born in Suswa and consider it their home (Info@westlands constituency.co.ke).

##### **3.2.1 Economic Activities**

Most of the residents of Suswa settlement are employed as domestic workers in the surrounding Parklands and Westlands suburbs. A few are small- scale business people selling vegetables, cooked food and herbal medicines along the road while others are casual labourers washing clothes for women and shoe shining and repair, repair of umbrellas for men and a few of them are community leaders (Info@westlands constituency.co.ke).



**Figure 3.2: Position of Westlands Sub- County in Nairobi City County.**

### **3.2.2 Educational Facilities**

Children from Suswa settlement attend a nursery school in the neighboring Deep Sea settlement. Others go to school either at the Highridge City Council primary school or North Highridge School. There is an artisan training workshop in Deep Sea village that is open to the youth in Suswa ([Info@westlandsconstituency.co.ke](mailto:Info@westlandsconstituency.co.ke)).

### **3.2.3 Health Facilities**

Residents of Suswa settlement use the Highridge Nairobi City County clinic and Mbagathi District Hospital as their main health care facilities (Info@westlandsconstutency.co.ke).

### **3.3 Research design**

This study adopted a cross-sectional descriptive case study design. KIM (2009) describes a case study design as one that involves indepth and detailed description of a single entity situation or phenomenon. The design was suitable for the current study because it focused on Westlands Sub-County. The descriptive research design provides an opportunity for the researcher to describe things as they are in their natural context. Both qualitative and quantitative data were collected. Quantitative data were collected using structured interviews while qualitative data were collected through key informants, focus group discussions and observation. Quantitative data were analysed using the Statistical Package for the Social Sciences (SPSS) version 20 and findings presented using tables of frequencies and percentages as well as graphs. Qualitative data were grouped into themes and excerpts used to support findings from quantitative data..

### **3.4 Study population and unit of analysis**

The study population for this study comprised men and women aged 65 years and above within the informal settlements in Westland's Sub-County. Each individual included in the study constituted the unit of analysis.

### **3.5 Sample population and sampling technique**

The sample population consisted of 50 elderly men and women who represented the beneficiaries of the Older Persons Cash Transfer Programme in the Sub-County. The researcher obtained a list of 495 elderly people from the Sub-County Social Development Office who were beneficiaries of the cash transfer programme. This list formed the sampling frame. Then the researcher assigned numbers to all of them ranging from 01 to 0495 within the target population and selected every  $n$ th person where  $n$ th was determined by dividing population with the sample size (that is  $495/50$  Sample size =  $10^{\text{th}}$  number). Thus every  $10^{\text{th}}$  individual in the list was included in the sample.



### **3.6 Data collection methods**

#### **3.6.1 Structured interviews**

The study used a questionnaire to collect data from the respondents. The questionnaire contained open and closed ended questions (Appendix I) which sought views, opinions, and attitudes from the respondents on the older person's cash transfer programme.

#### **3.6.2 Key informant interviews**

The study interviewed community leaders and social development officers from the social development department. These were interviewed as key informants to find out the impact the older persons' cash transfer has on the social welfare of the elderly. The data were collected using a key informant interview guide (Appendix II).

#### **3.6.3 Direct observation**

The researcher visited the elderly in their households and through observing and discussions was able to find out whether the cash transfer has had any positive impact on their social welfare. This was done using an observation check list (Appendix 111).

#### **3.6.4 Focus Group Discussions (FGDs)**

Two focus group discussions were held separately in Suswa informal settlement. One was with men and the other with women. Each group consisted of 9 participants who were beneficiaries of the Older Persons Cash Transfer Programme. The discussants were selected through purposive sampling. The data were collected using FGDs guide (Appendix iv).

#### **3.6.5 Secondary data**

Documentary materials were reviewed to provide background information to the study. Sources of the literature included books, journal publications and the internet, and these were used throughout the study period.

### **3.7 Data processing and analysis**

Quantitative data were analyzed using the Statistical Package for the Social Sciences (SPSS) version 20. This involved use of numeric measures to the scores of various responses while qualitative data collected through FGDs, key informants and

observations were analyzed thematically. The focus was on verbatim statements by informants/discussants. Where the verbatim statements were in a language other than English they were translated into English. The aim was to enable the researcher to provide overall interpretation of the findings.

### **3.8 Ethical considerations**

Protection of the participants' rights and the need for confidentiality and anonymity took centre stage in the research process. Consent of respondents was sought before commencing the interviews. They were informed of the risks and benefits of the study and were guaranteed the right to withdraw from the study. The study ensured a high degree of privacy in the data collection and storage. The researcher adhered to appropriate behaviour in relation to the rights of the respondents.

## CHAPTER FOUR

### THE OLDER PERSONS CASH TRANSFER PROGRAMME AND THE WELFARE OF THE ELDERLY IN WESTLANDS SUB-COUNTY

#### 4.1 Introduction

This chapter presents the study findings. The chapter starts by outlining the demographic characteristics of the respondents. It then moves on to present findings on the disbursement of the cash transfer to the elderly, the utilization of the cash by the elderly, and the impact of the cash transfer programme on the welfare of the elderly in the Sub-County.

#### 4.2 Demographic Information

##### 4.2.1 Gender

Gender was one of the key demographic factors in this study. It enabled the researcher to collect the views of elderly men and women. A total of 50 respondents participated in the study. Table 4.1 shows that 52 per cent of the respondents were males while the remaining 48 percent were females. Thus both genders were well represented in the study.

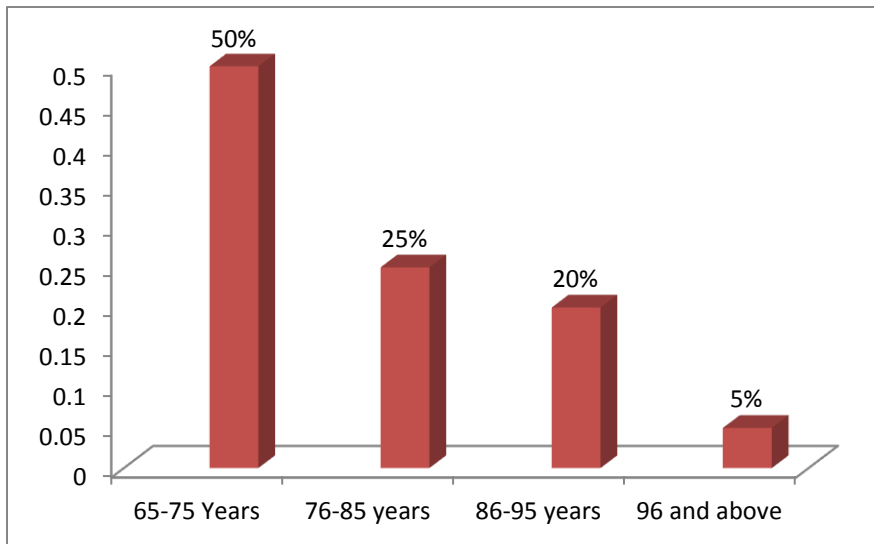
**Table 4.1: Respondents gender**

<b>Respondents</b>	<b>Frequency</b>	<b>Percentage</b>
Male	24	52
Female	22	48
<b>Total</b>	<b>46</b>	<b>100</b>

##### 4.2.2 Age bracket

The researcher sought to find out the age bracket of the respondents and findings are shown in Figure 4.1.

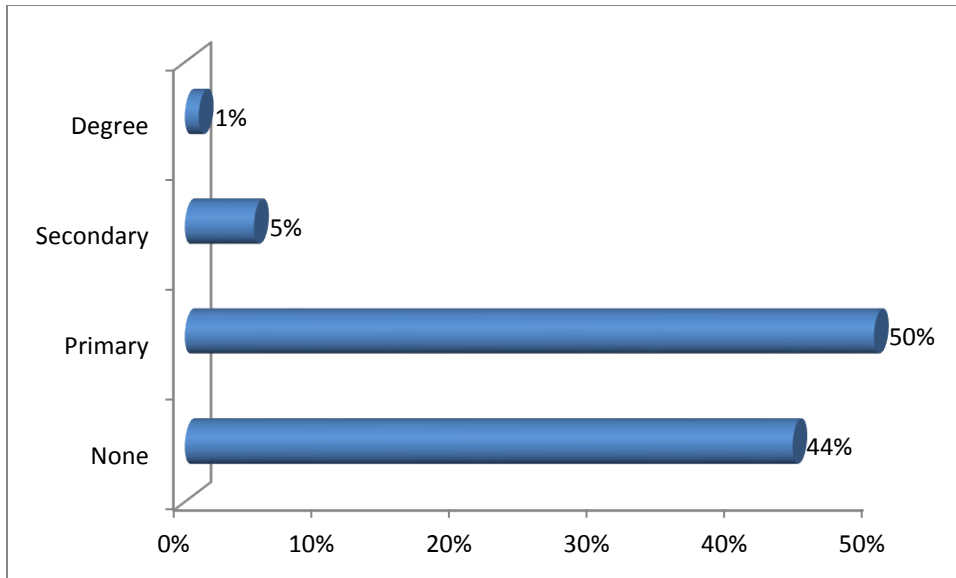
From these findings, it can be seen that half of the respondents were aged 65-75 years, 25% were aged 76-85 years, 20% were aged 86 and 95 years with only 5% being 96 and above years old. This indicates that most of the elderly persons were aged between 65 and 75 years of age.



**Figure 4.1: Respondents' age bracket**

#### **4.2.3 Educational qualification**

Figure 4.2 indicates that 50% of the respondents had attained primary school education, 44% had never attended school at all and 5% had secondary school education level while only 1% had a university education. This suggests that most of these elderly people in the study had not attained basic education with most of those with primary education having dropped out at lower primary classes.



**Figure 4.2: Educational qualification**

#### **4.2.4 Economic activities**

The researcher sought to find out the economic activities the elderly were involved in. The purpose was to investigate the extent to which the cash transfer has boosted their economic growth. The findings show that very few elderly persons are involved in any gainful activity. Most of the residents of Suswa settlement are employed as domestic workers in the surrounding Parklands and Westlands suburbs, a few are small-scale business people or casual labourers such as selling of charcoal, community leaders that is, village elders , selling of vegetables along the road and bead work (Info@westlands constituency.co.ke).

#### **4.3 Disbursement of the cash transfer**

The researcher also sought to find out how the cash transfer is delivered to the beneficiaries. She wanted to find out if the older persons' had any challenges in accessing the money , the frequency of transferring the fund to the older persons' by the government as well as the security of the older persons' and the stipend. The findings revealed that the fund is disbursed by the department of Social Development of the Ministry of Labour Social Security and Services in through the Kenya Commercial Bank

(KCB) which is the sole disbursement agent of the cash transfer. The KCB branches and KCB agents then undertake the payment of the beneficiaries.

Some of the beneficiaries were found to have challenges of distance to the pay points which had implications for the cost of accessing the fund. Older persons were also facing challenges of finger prints. It is a must that all the older persons register biometrics for identification during the collection of the money and also to reduce fraud cases of the money being paid to the wrong person. Some old persons have lost their finger prints due to old age as well as burns especially the women due to holding hot pans and sufurias with bare hands. Sicknesses were also raised as a challenge. This is because the old person is the only person who can be paid by the paying agent. Without their presence, maybe due to hospital admission or bedridden cases, they cannot receive the money. This also has implications for receiving the money.

Hostility from the community and family members was raised as a challenge the beneficiaries of the cash transfer face. Some of the elderly people said their children and the community workers demanded a percentage of the cash and others wanted all of it. Others said that their age mates who were not in the programme were not at peace with them.

A 70- year –old woman from Karura sub location said:

*I did not know where the KCB branch where the elderly were being paid from was. I requested my neighbour who receives cash transfer for the severely disabled for her child to take me to the bank. When I received the money she snatched it from my hands and told me she was confirming how much it was and ran away with the money.*

Another woman from Kangemi location 85years old said:

*My daughter is a drunkard and she has two children who I take care of. When she learnt that the elderly were being taken their biometrics she demanded that I request the bank to register her as my caregiver. When the money comes she goes to the bank and collects it and disappears she only*

*comes home when the money is finished. When I reported to the bank she started biting me, locking me out of the house and denying me food.*

Finally, the researcher sought to know whether the cash was transferred regularly after every two months as per the policy guidelines. The major challenge to this question was that the beneficiaries were not aware of the cycles of payment. The majority of them said that -they receive the money in lumpsum and so do not know how long they were supposed to stay before the next payment but they receive KES 8000-KES 10,000. This indicates that the money was paid after four to five months.

#### **4.3.1 Impact of the cash transfer programme on the older persons' economic development**

The immediate objective of the older persons' cash transfer programme is to relieve the elderly from extreme poverty and enhance their capacity to participate in development activities (Republic of Kenya 2011). The researcher sought to find out how the cash transfer has boosted the economic power of the elderly in the sub County. The study found that through the cash transfer beneficiaries have been able to cater for their basic needs (food, shelter and clothing) and access basic medical care; educate grandchildren; gain respect and improved dignity due to reduced dependency levels on their care givers; improved health standards; improved food security in the households and general economic development. The overall impact of the programme suggest that the cash income has helped protect productive assets and the cash is also being used in productive investments including saving schemes by the elderly. Furthermore, social protection programmes encourage consumption and investment. The Productive Safety Net Programme in Ethiopia has not discouraged investment in trees or livestock (Andersson, 2010). An evaluation of the Kwa Wazee Pension Fund in Tanzania, which provides a pension to older people and a child benefit for orphaned children, finds that the older people receiving the pension were more likely to save, were less likely to sell assets and were more likely to have a more varied diet compared to persons who were not in receipt of the pension (Hofmann, 2008) The cash transfer has also given the elderly the capacity to participate in development activities such putting up food kiosks along the road, selling

of boiled maize and vegetables in Kangemi market and others have started shoe repairing shops.

The findings reveal that the cash received from older persons' cash transfer programme is basically spent on basic needs. According DFID (2005), initial evaluation of the Kenya's OVC-CT programme suggested that the money had been spend on food, clothing, shoes, medical expenses and minor household purchases.

### 4.3.2 Impact of the older person's cash transfer programme on their basic needs

The researcher sought to find out how the cash transfer has affected their basic needs, focusing on food security, health, clothing and shelter. The researcher used the targeting tools used to fill the data of the beneficiaries who qualify for the programme during the targeting period. This is the older person's questionnaire (attached) and then compared the results with their current status.

#### 4.3.2.1 Food security

The researcher focused on the number of meals the household have per day currently compared to before they were enrolled in the programme in 2010. The results were as shown in figures 4.3 and 4.4.

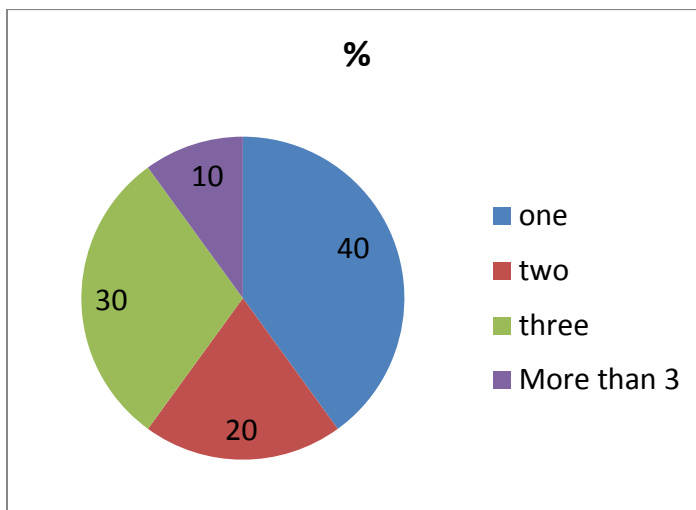


Figure 4. 3: Number of meals per day by beneficiary house hold in 2010



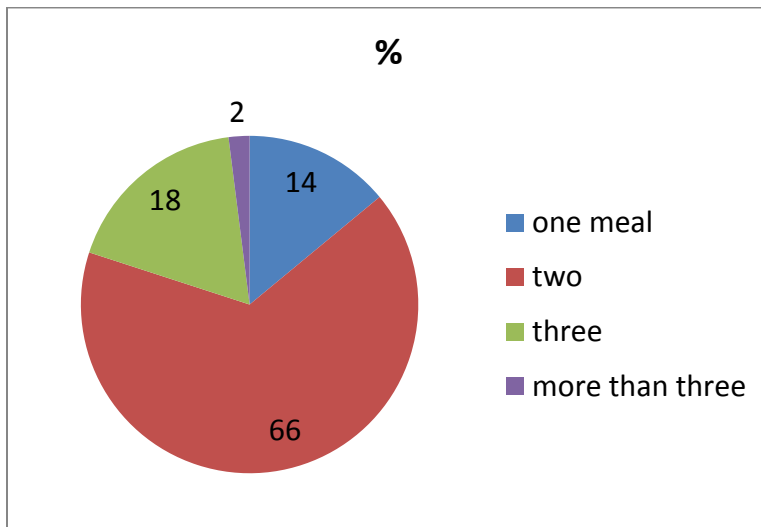


Figure 4. 4: Number of meals per day by beneficiary household in 2015

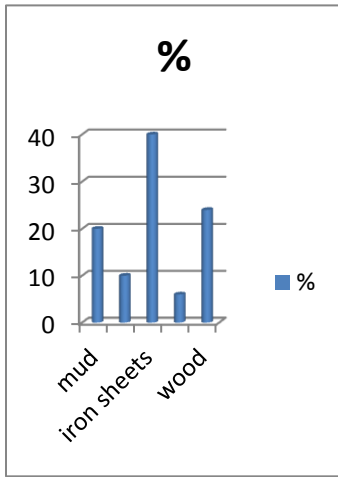
The findings show that the cash transferred to the elderly has increased their ability to have food for themselves as well as the entire household. Comparing the same beneficiaries in 2009 when they were enrolled in the programme and their current status shows that the cash transfer has indeed given them the power to put food on their table.

In 2009 forty per cent of the beneficiaries' household could only afford one meal per day but in 2015 with the same beneficiaries 66% can afford two meals per day and only 14% can afford one meal per day. The reason for the latter is that these families have school going grand children and the same cash transferred to their grandparents is used to pay their school fees. This change in household meals per day can only be associated with the availability of the cash transfer given to the elderly. This brings out a positive impact of the programme on the elderly in relation to food security.

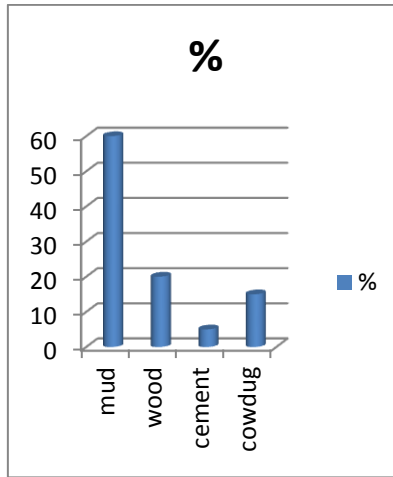
#### 4.3.2.2 Shelter

The researcher focused on the dwelling characteristics of the elderly in relation to the construction materials of the walls, roof and floor of their houses before they were enrolled in the programme. These findings are presented in figures 4.5 and 4.6.

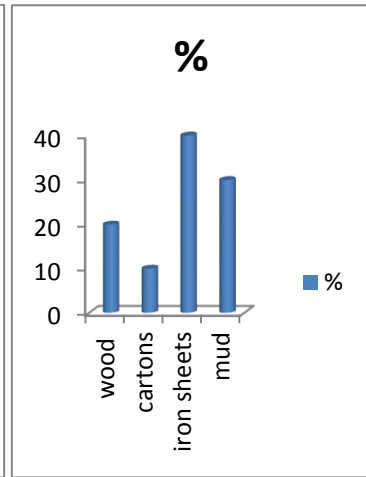
**Walls**



**Floor**

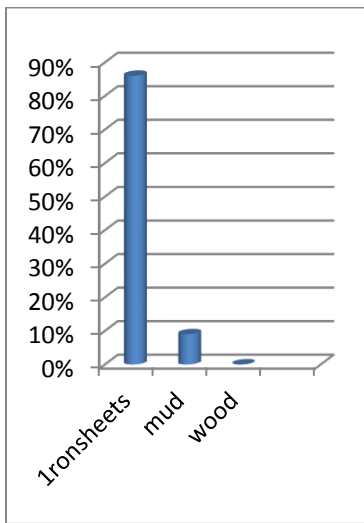


**Roof**

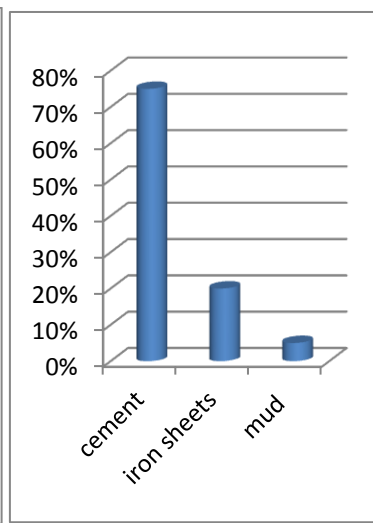


**Figure 4.5 : Construction material of the houses before enrollment in the programme**

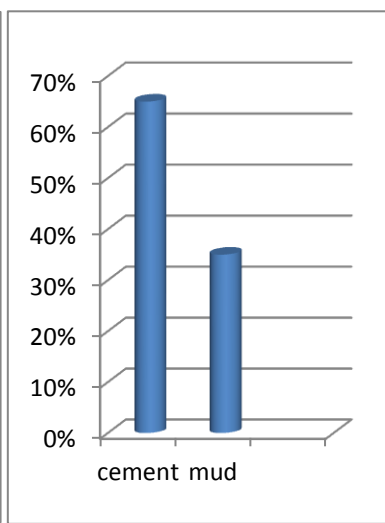
**Roof**



**Walls**



**Floor**



**Figure 4.6: Construction materials of the elderly houses after enrollment in the programme in 2015**

The finding shows that there is much improvement in the living conditions of the elderly in Westlands sub County who are beneficiaries of the cash transfer programme for the elderly. Majority of them lived in houses made of iron sheet walls, mud floors and iron sheet roof but after the enrollment in the programme ninety percent of the beneficiaries live in houses roofed with iron sheets compared to forty percent before receiving the stipend. Seventy six percent live in houses with cemented walls against forty percent before enrollment in the programme. While sixty five percent are living in houses with cement floors compared to sixty percent who lived in houses made of mud floors before. This changes in their dwelling characteristics shows that the fund has a positive impact.

#### **4.3.2.3 Health**

The researcher sought to find out from the beneficiaries whether the cash transfer had any impact on their health in terms of the amount of money they spent for medication and their ability to afford medication since here was no baseline data showing the health condition of the older persons before they were enrolled in the programme. This was done in an open discussion where the beneficiaries aired their views.

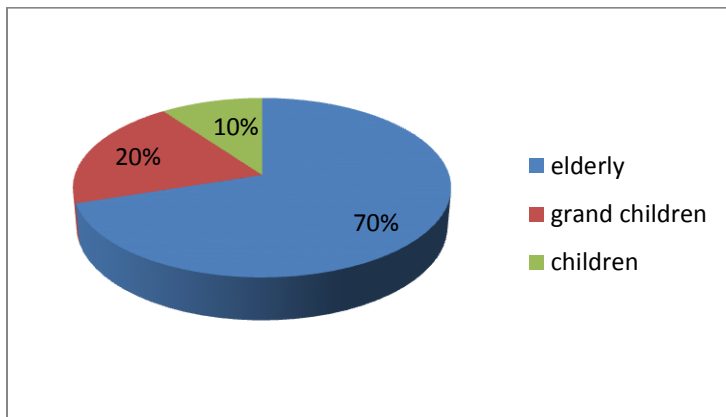
73- year-old man from Kangemi location had this to say:

*I was diagnosed with diabetes before the government enrolled me in this programme. I then lost my sight and my wife and children left me. Well-wishers took care of me until 2013 when I was enrolled in this programme. When I received my first money, it was much since it was paid in arrears of twelve months. I received KES 24,000. I went to kikuyu hospital and started my medication. Though I cannot see I was able to acquire a white cane to help me walk around. I can now walk from Kangemi to town without anybody support.*

#### **4.3.2.4 Clothing**

Clothing is a basic need for every person. The researcher sought to find out whether the elderly used any part of the stipend on clothes and who they highly bought clothes for. The finding shows that, seventy percent of the elderly bought clothes for themselves.

They argued that when one grows old people forget about them. Their clothes especially beddings tear and they have no money to replace them. Therefore they use the money to buy beddings and warm clothes. Twenty percent buy clothes for their grand children especially those living with orphans while ten percent bought clothes for their own children.

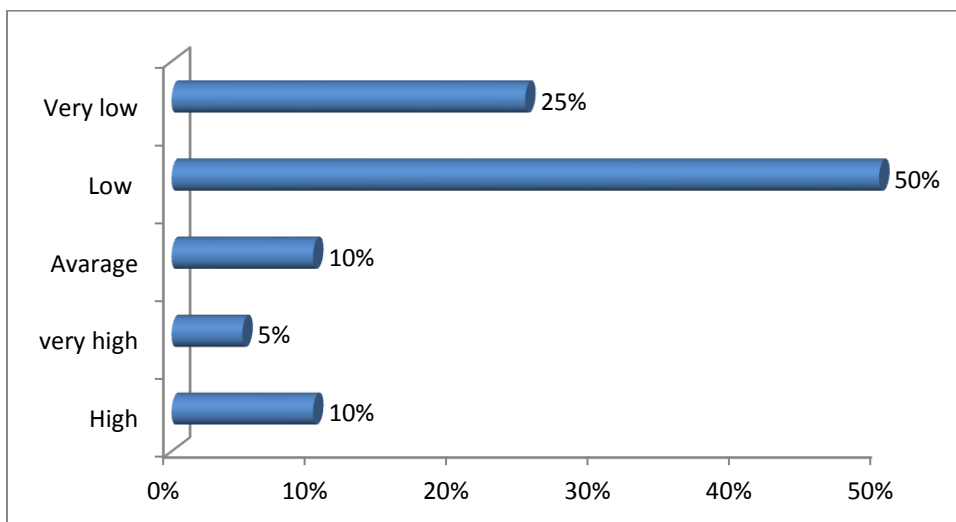


**Figure 4. 7: Clothing**

#### **4.4 Utilization of the cash transferred**

Researcher also sought to find out how else the beneficiaries use their money apart from meeting the household basic needs and whether it is adequate. The reason was to investigate whether the cash transferred to them has relieved them of extreme poverty. .

Figure 4.8 shows the findings.



**Figure 4. 8 Utilization of the cash transferred**

#### **4.5 The effects of older person's cash transfer programme and their economic growth.**

Fifteen percent of the respondents indicated that the money had benefited them in sustaining their lives, given that their condition could not guarantee them any gainful employment. The economic burden on their children could not allow their children to support them sufficiently. These findings concurs with the Booysen (2005), that in most societies vulnerability rises with age for numerous reasons a decline in job opportunities especially in formal employment, reduced pay for those in employment, increased vulnerability to health conditions, limited mobility, discrimination in access to credit and financial markets, restrictions in access to basic services, such as education or health, and changes in household composition and status. Fifty percent of the respondents indicated that the money was not enough to meet their basic needs therefore it had a little impact on their economic growth. Ten percent of the respondents indicated that the impact was average while twenty five percent of the respondents showed very low impact of the cash to their economic boost.

The findings also revealed that the cash transfer was not adequate to meet the basic needs of most of the beneficiaries and allow them to invest in income generating activities especially those taking care of grand children or disabled people in the household. However the 5% who have highly benefited from the cash transferred to them stated that, before they were enrolled in the programme some of them were street families sleeping under the Kangemi bridge but the stipend has enabled them to get a house where they pay a rent of between KES 500-1000. They were also not able to take goods on credit since they had no source of income to settle the bills but currently some have made an agreement with shops where they get foodstuffs on credit and pay when the cash is delivered to them. In most households children have gone back to school. Some of the old women have started curio shops at Sarit Centre shopping mall in Westlands sub-County along Waiyaki way where they make necklaces and bangles.

## **CHAPTER FIVE**

### **DISCUSSION, CONCLUSION AND RECOMMENDATIONS**

#### **5.1 Introduction**

This chapter gives a summary of the study, draws conclusions and makes recommendations and suggestions for further research.

#### **5.2 Discussion**

The objective of the study was to explore the impact of Older Persons Cash Transfer Programme on the elderly in Westlands sub-county, Nairobi City County. Westlands sub-County has an estimated five hundred and twenty three (523) beneficiaries of the Older Persons Cash Transfer Programme (Republic of Kenya Recertification Report 2015). Cash transfer to the elderly has been known to have a multiplier effect beyond older persons themselves. This is because money in the hands of an older person has a trickle-down effect to the rest of the members of the household. In Mauritius, the poverty rate among households containing an older person would be 30 per cent compared to the current 6 per cent in the absence of the universal pension (Kaniki, 2007). The immediate objective of the programme is to relieve them from extreme poverty and enhance their capacity to participate in development activities (Republic of Kenya, 2011). This marks the key parameters to explore whether the cash transfer programme has had positive impact on the elderly.

The research observed that the older persons cash transfer programme has an approximate of 2.5 percent of all the older persons above sixty five (65) years in Kenya. The researcher used secondary data in establishing the baseline status of all the beneficiaries of the older persons cash transfer programme in Westlands sub- County. Primary data was collected through Key informants, interviews and focus group discussion all aiming at;

1. Describing how the programme has enhanced the basic rights of the elderly.
2. Explaining how the cash transfer programme has boosted the economic development of the elderly

3. Investigating the extent to which the older persons cash transfer programme has reduced extreme poverty on the elderly in the sub County.

### **How cash transfer has enhanced the basic rights of the elderly in the programme**

The study found out that the recipient of the cash transfer spend their cash on basic needs including food, shelter, clothing and health. They also spend the money in paying school fees for their school going grand children. Priority was seen to be given to food, shelter, clothing and medication. Cash transfer for the elderly was seen to have high impact on the elderly and their households in meeting their basic needs and giving them the ability to be involved in social economic activities.

These findings concurs with the Booysen (2005), that in most societies vulnerability rises with age for numerous reasons a decline in job opportunities especially in formal employment, reduced pay for those in employment, increased vulnerability to health conditions, limited mobility, discrimination in access to credit and financial markets, restrictions in access to basic services, such as education or health, and changes in household composition and status.

Though the cash transfer has enhanced the basic rights of the elderly they also have concerns with the amount given because it was not enough to meet their basic needs completely; they further indicated that government need to allocate enough resources for the wellbeing of the elderly. They also said the government should come up with a better plan to distribute the sustenance resources with clear cut point on who should get the money.

### **Impact of older persons cash transfer on their economic growth**

The research found out that the cash transfer had enhanced the older person's economic growth in the sub county. Most of the older persons have started social economic activities in their neighborhood. This has given them purchasing power in the community and boosted their self esteem. Cash transfers increase the purchasing powers of families as long as they receive the benefits (Soares et al, 2008). The beneficiaries no longer depend on their children or well-wishers to support them. They are able to pay their house rent and take care of their household needs like paying school fees for their

children and grand children. The elderly are now having a bargaining power in the community. Some of them said they can take goods on credit from the shops and pay when they receive their cash.

The cash transfer benefits the elderly persons in sustaining their lives given their condition could not guarantee them any gainful employment; the economic burden on their children could not allow their children to support them sufficiently so to put food on the table is not easy task at their advanced age. The cash transfer has boosted the economic development of the elderly at their old age. It was found out that the cash transfer has laid a level ground for all the elderly who have been contributing for their retirement and those who have never had an opportunity to work.

### **Impact of the older persons cash transfer programme on the extreme poverty on the elderly**

It was found that the cash transfer has reduced extreme poverty on the recipient of the cash transfer. This was seen through the ability of the beneficiaries to meet their basic needs and those of their households, having a purchasing power and not depending on other people on a daily basis. A policy analysis research project done by Barrientos and Nino-Zarazua (2009) indicated that the focus of social transfer programmes on extreme poverty suggested that they could have important effects in reducing persistent poverty. They also argued that social transfers are emerging as core component within social protection policies aimed at tackling poverty and vulnerability.

### **5.3 Conclusion**

In light of the findings of this study the older persons cash transfer has a positive impact on the welfare of the older persons who are in the programme. They are empowered in relation to meeting their basic needs and that of the family; it has reduced extreme poverty on the elderly and reduced their dependency level to relatives and well wishes. The cash transfer has also given the elderly purchasing power and boosted their economic growth. Hence the older person, beneficiaries of the cash transfer are able to participate in social economic activities hence reducing the income gap between the elderly and the



other age sets. It can be concluded that older person's cash transfer programme has improved the lives of the elderly persons in the programme in Westlands sub County. It has reduced extreme poverty and enhanced their capacity to participate in economic development. Therefore the programme is effective and it has met its objective of reducing extreme poverty on the elderly.

#### **5.4 Recommendation of the study**

The findings of this study leads to the study recommending that:

1. The government of Kenya through the Ministry of Labour Social Security and Services should expand the programme to accommodate all the elderly persons who have attained the age of sixty five years and above so that these benefits are accessed by them all. This will reduce their fear of aging and being left alone. A 64 year old man from Highridge division in Westlands sub County said; *'I stay alone in my house and I am loosing my sight, look for me a house for the elderly and take me there so that I can be able to stay there as I wait to be enrolled in the programme when I turn sixty five years''*. Making it a policy that when one turns sixty five years automatically becomes a beneficiary will give the aged in our society hope and create a society where all the elderly people have a sense of belonging. It will also create harmony among the elderly in the community removing the accusations they encounter from those who are not benefiting that they bribed the community leaders to be enrolled. This is because some of the older persons complained some beneficiaries were not poor.
2. The government through the Ministry of Labour Social Security and Services should devise a safer way to disburse the money to the elderly without exposing them to the risk of loosing the money on the way from bank or being attacked in their homes after receiving the cash. This is because when it is payment time the information is passed to everybody in the community through the chiefs and community leaders. It was also noted that the beneficiaries walk long distances to the pay point and back. Some of them are weak to reach the pay points. The government should use mobile

money transfer services to transfer the money to the elderly as well as issuing the elderly with ATM cards to be withdrawing the money in bits.

3. Though the beneficiaries complained of the money being little KES 4000, after ever two months, this study recommends a similar study to be done in the rural setting to ascertain their concerns.

### **5.5 Recommendations for further research**

1. This study focused on the cash transfer for the elderly and its impact on the welfare of the elderly in Westlands sub County which is an urban setting. This study recommends a similar study in the rural setting to bring out comparative findings.
2. The study revealed that the older persons experience challenges in accessing their stipend and that the disbursement agent Kenya Commercial Bank (KCB) are far away from their residential areas and their biometric machines a times fail to detect their finger prints causing an elderly person to spent more than two days in the bank before they are paid. This study recommends an audit of the KCB biometric machines to offer effective services to the elderly.

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## Appendix I: Questionnaire

### Introduction

### Dear Respondents

This questionnaire is aimed at providing information on the effect of older persons cash transfer program on the elderly in Westlands Sub-County in Nairobi County. You are kindly requested to participate in this study by providing responses to the questions provided. Kindly note that there is no right or wrong answers.

### SECTION 1: BACKGROUND INFORMATION

1. Kindly Indicate your Sex

- a. Male
- b. Female

2. Please tick your age bracket

- a. 65-75
- b. 76-85
- c. 86-95
- d. 96-

3. Please tick your level of education

- a. None
- b. Primary
- c. Secondary
- d. Others.....specify.....

4. Please indicate your area of residence

Location	Sub Location	Village

5. Are you a beneficiary of older person's cash transfer programme from the government?

- a. Yes
- b. No

If yes, how were you identified as a beneficiary?

.....  
.....  
.....  
.....

6. How do you receive the cash from the government?

- a. I collect it myself
- b. I use family members
- c. It is delivered to me by government officials
- d. Others(specify).....

.....  
.....  
.....

7. Are you comfortable with the manner in which you receive cash for the elderly support?

- a. Yes
- b. No
- c. Please explain

.....  
.....  
.....  
.....

8. In what ways have the older person's cash transfer benefited you?

.....  
.....  
.....

9. How would you rate the benefits of older person's cash transfer programme in your economic growth?

- a) High
- b) Very High
- c) Average
- d) Low
- e) Very low

10. What factors in your opinion affect the effectiveness of older persons cash transfer programme on the welfare of the elderly in Westlands Sub-County?

- a) .....
- b) .....
- c) .....
- d) .....

**Thank you**

## **Appendix II: Key Informant Interview Guide**

1. Who qualifies for the older person cash transfer programmes from the Government?
2. How are the older persons targeted to the programme?
3. How much money are the older persons receive?
4. How frequently do they receive?
5. In your opinion do you think the money is enough?
6. How effective is the older persons cash transfer programme on the welfare of the elderly in Westlands Sub-County?
7. Do you think benefits of older person's cash transfer programme boosts their economic growth?

**Appendix III: Focus Group Discussions Guide**

1. Are you aware of the existence of cash transfer programme for the elderly?  
If so explain.....
2. Are you a beneficiary of cash transfer programme?
3. Are you comfortable with the mode of disbursement? Explain your answer.....
4. Is the cash given adequate?
5. In your own views how can the programme be made effective?