



**THE EFFECTIVENESS OF CHILD SUPPORT GRANTS IN SOUTH AFRICA:
A CASE STUDY OF CALEDON DISTRICT, WESTERN CAPE**

MARK FRITZGERALD VOLMINK

8310290

**A MINI-THESIS SUBMITTED IN PARTIAL FULFILMENT OF THE
REQUIREMENTS FOR THE AWARD OF A MASTER'S DEGREE IN
DEVELOPMENT STUDIES**

**AT THE INSTITUTE FOR SOCIAL DEVELOPMENT (ISD)
FACULTY OF ECONOMIC AND MANAGEMENT SCIENCES (EMS)
UNIVERSITY OF THE WESTERN CAPE**

SUPERVISOR: PROFESSOR STEPHEN DEVEREUX

08 May 2020

DECLARATION

I hereby declare that this study, *“The effectiveness of Child Support Grants in South Africa: A Case Study of Caledon District, Western Cape”* is my own work and I have not previously submitted it at any University for a degree or examination. All sources that I have quoted have been indicated and duly acknowledged by means of referencing.

Mark Fitzgerald Volmink

2020



UNIVERSITY *of the*
WESTERN CAPE

Signature

.....

ACKNOWLEDGEMENTS

With a deep sense of gratitude, I acknowledge almighty God - my fortress - for providing me with the wisdom, fortitude, and energy to complete this research study.

Many thanks to my supervisor, Professor Stephen Devereux for your guidance through every stage of this mini-thesis. Your excellence in presenting thought-stretching questions and guiding comments, yet allowing this paper to be my own work, certainly kept me on course to address the objectives of this study successfully.

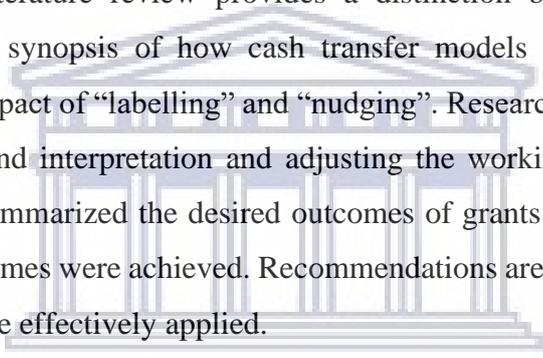
I would like to thank Mr. Dawid Kraukamp, manager of ODEC for his tireless efforts in assisting me with all the arrangements relating to the research interviews during the CSG “case study” in Caledon. In this regard, my appreciation also extends to members of the community in Caledon for their selfless participation and input during the interviews, without which the study would not have been successfully conducted.

It is important for me to also acknowledge and thank 2 members of SASSA’s senior management team, to whom I am indebted for their valuable comments during this study.

Lastly, I must express my profound gratitude to my wife, Melody Volmink, for offering your self-sacrificial support and continuous encouragement through the period of my studies and during the process of researching and writing this mini-thesis. This achievement would not have been possible without you. Thank you so much.

ABSTRACT

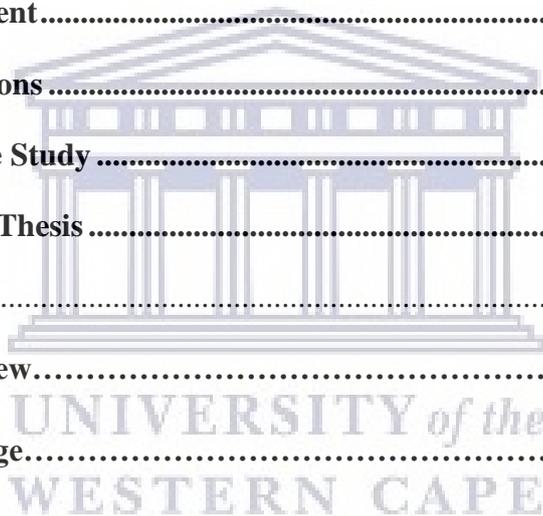
This research study addresses the effectiveness of child support grants in South Africa. It specifically asks the questions, *what do social policy makers in South Africa want to achieve with the Child Support Grant (CSG) and are they achieving it? If not, how can policy makers ensure that social grants achieve the desired impact?* The researcher will establish the effectiveness of the current CSG and how the CSG programme design and implementation might be improved for the CSG system to have its desired effect for children and at the family level. This mini-thesis introduces the topic by explaining the context and providing a deeper understanding of cash transfers and related concepts. In the theoretical framework, emphasis is placed on the circumstances under which cash transfers should work, as well as considerations for conditionality. The literature review provides a distinction between conditional and unconditional transfers, a synopsis of how cash transfer models are applied in different countries, as well as the impact of “labelling” and “nudging”. Research methodology included data gathering, analyses and interpretation and adjusting the working hypotheses. The key findings of the research summarized the desired outcomes of grants in South Africa and the extent to which these outcomes were achieved. Recommendations are made as to how the cash transfer system can be more effectively applied.



UNIVERSITY of the
WESTERN CAPE

Table of Contents

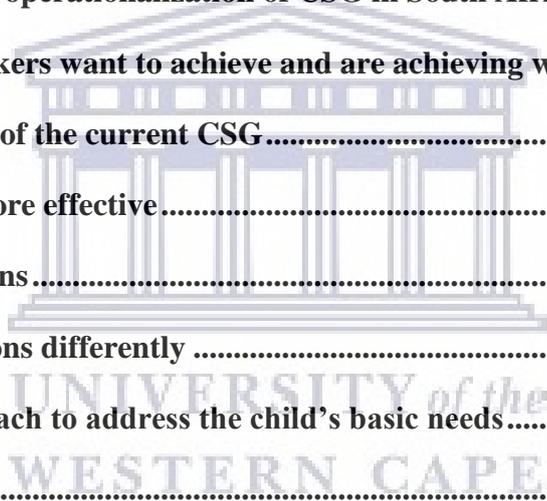
DECLARATION	ii
ACKNOWLEDGEMENTS	iii
ABSTRACT.....	iv
LIST OF ABBREVIATIONS AND ACRONYMS	ix
LIST OF RESPONDENT CODES.....	xi
CHAPTER ONE	1
1.1. Chapter overview	1
1.2. Background.....	1
1.3. Problem Statement.....	2
1.4. Research Questions	3
1.5. Objectives of the Study	3
1.6. Outline of Mini-Thesis	4
CHAPTER TWO	5
2.1. Chapter Overview.....	5
2.2. Theory of Change.....	5
2.3. Social Contract Theory.....	8
2.3.1. What is Social Contract Theory?	8
2.3.2. How Social Contract Theory is applied in South Africa	9
2.3.3. CSG and the Social Contract	10
2.4. Nudge Theory.....	12
2.4.1. What is Nudge Theory?.....	12
2.4.2. The relevance of Nudge Theory to this study.....	12
2.4.3. Criticisms of Nudge Theory.....	13
2.5. Chapter summary.....	13



CHAPTER THREE	14
3.1. Overview	14
3.2. The Context of Social Protection	14
3.3. First Objective: An Analysis of Cash Transfer Models:	
A Global Perspective.....	15
3.3.1. The Case for Unconditional Cash Transfers	156
3.3.2. The Case for Conditional Cash Transfers.	17
3.4. Second Objective: The context of CSG in South Africa	20
3.4.1. The CSG Background.....	20
3.4.2. What policy makers in South Africa want to achieve with CSGs	21
3.5. Operationalizing CSG - how it works	21
3.6. Accomplishments and limitations of the CSG programme	22
3.7. Alternative approaches for a more effective CSG programme	25
3.8. Chapter Summary	27
CHAPTER FOUR.....	28
4.1. Chapter overview	28
4.2. Research approach.....	28
4.3. A Case Study Design	28
4.4. Data Collection Methods:	29
4.4.1. Primary Data: Qualitative Methods.....	29
4.4.2. Secondary Data	33
4.5. Qualitative Data Analysis	333
4.6. Ethical Considerations.....	34
4.7. Challenges of this study	35
4.8. Chapter Summary	36

CHAPTER FIVE	37
5.1. Chapter overview	37
5.2. Application of the Theory of Change to the CSG case study	37
5.3. Demographic information about the participants.....	38
5.4 Third Objective: Determine what policy makers want to achieve with CSG...39	
5.4.1. Purpose of CSG	39
5.4.2. CSG and poverty reduction	39
5.4.3. Well-being of children	40
5.4.4. Recipient of CSG.....	41
5.4.5. Told to use CSG in a certain way	43
5.4.6. Understanding the use of CSG.....	43
5.5. Fourth Objective: Social policy makers’ achievements with CSG.....	44
5.5.1. Application process and SASSA service	45
5.5.2. The child’s basic needs	46
5.5.3 Participants’ usage of CSG	47
5.5.4. Receipt and utilization of CSG monthly	49
5.5.5. Impact on the child and family.....	50
5.5.6. The influence of “loan sharks”	52
5.5.7 Steps to use the CSG more effectively	53
5.6. Chapter summary	54
CHAPTER SIX.....	55
6.1. Chapter Overview	55
6.2. Fifth Objective: Making the CSG more effective.....	555
6.2.1. Shortcomings.....	55
6.2.2. CSG designed differently, more efficiently.....	57

6.2.3. Using CSG for Stokvel (savings scheme)	59
6.2.4. Receiving CSG during pregnancy.....	60
6.2.5. The electronic payment system and frequency of withdrawals.....	61
6.2.6. Interventions to improve the effectiveness of CSG.....	62
6.2.7. State Monitoring.....	67
6.3. Chapter Summary.....	68
CHAPTER SEVEN.....	70
7.1. Chapter overview.....	70
7.2. Conclusion.....	70
7.2.1. The context and operationalization of CSG in South Africa.....	71
7.2.2. What policy makers want to achieve and are achieving with CSG.....	72
7.2.3. The weaknesses of the current CSG.....	73
7.2.4. Making CSG more effective.....	73
7.3. Recommendations.....	74
7.3.1. Enforce conditions differently	74
7.3.2. A holistic approach to address the child's basic needs.....	76
7.3.3. A larger CSG	77
7.3.4. Monitor the use of CSG and child well-being	78
7.3.5. Introduce a multi-purpose pocket system (MPP)	80
7.4. Overall implications for policy and future research	81
8. REFERENCES.....	83
Annexure 1.....	98
Annexure 2.....	104
Annexure 3.....	110



LIST OF ABBREVIATIONS AND ACRONYMS

Adult Basic Education and Training (ABET)

Acquired Immune Deficiency Syndrome (AIDS)

Basic Income Grant (BIG)

Behavioural Change Communication (BCC)

Body Mass Index (BMI)

Bolsa Familia Programme (BFP)

Carers of Left Behind Children (CLBC)

Cash Transfers (CTs)

Centre for Innovation in Research and Teaching (CIRT)

Child Grant Programme (CGP)

Child Support Grant (CSG)

Chile Solidario (CS)

Community Mobilization (CM)

Convention on the Rights of the Child (CRC)

Conditional Cash Transfers (CCTs)

Department of Health (DOH)

Department of Social Development (DSD)

Early Childhood Development (ECD)

Food Poverty Line (FPL)

Food-based dietary guidelines (FBDG)

Human immunodeficiency virus (HIV)



Integrated Community Registration Outreach Programme (ICROP)

Identity Document (ID)

Improvements in infant and young child feeding (IYCF)

India Development Foundation (IDF)

Institute for Poverty Land and Agrarian Studies (PLAAS)

Institute for Social Development (ISD)

Institute of Development Studies (IDS)

Intensive interpersonal counselling (IPC)

Integrated Case Management (ICM)

International Covenant on Economic, Social and Cultural Rights (ICESCR)

Labelled Cash Transfer (LCT)

Left-Behind Children (LBC)

Management Information System (MIS)

Mass Media (MM)

Management Sciences for Health (MHS)

Multiple Category Targeted Programme (MCP)

National Income Dynamic Study (NIDS)

National Development Agency (NDA)

National Institute of Standards and Technology (NIST)

Non-Profit Organizations (NPOs)

National Youth Development Agency (NYDA)

Overberg Development and Empowerment Centre (ODEC)

Payment Association of South Africa (PASA)



Randomized Controlled Trial (RCT)

Republic of South Africa (RSA)

Southern African Labour and Development Research Unit (SALDRU)

South African National Defence Force (SANDF)

South African Social Security Agency (SASSA)

Theory of Change (ToC)

Unconditional Cash Transfers (UCTs)

Unemployment Insurance Fund (UIF)

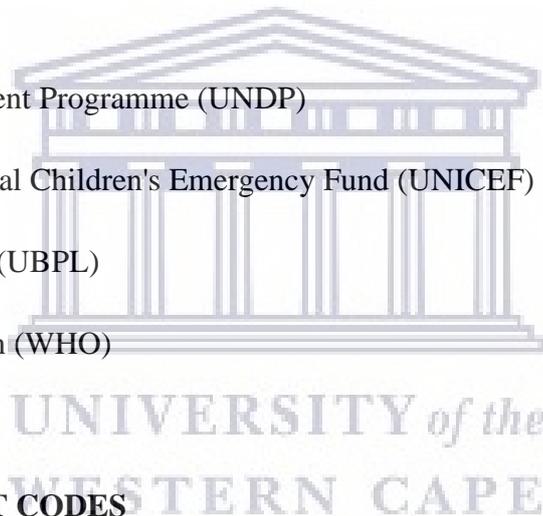
United Nations (UN)

United Nations Development Programme (UNDP)

United Nations International Children's Emergency Fund (UNICEF)

Upper-bound poverty line (UBPL)

World Health Organization (WHO)



LIST OF RESPONDENT CODES

Focus Group 1 (FG1)

Focus Group 2 (FG2)

Focus group discussions (FGD)

Individual Participant 1 (IP1)

Individual Participant 2 (IP2)

Individual Participant 3 (IP3)

Individual Participant 4 (IP4)

Individual Participant 5 (IP5)

Individual Participant 6 (IP6)

Individual Participant 7 (IP7)

Individual Participant 8 (IP8)

Individual Participant 9 (IP9)

Individual Participant 10 (IP10)

Key Informant (KI)

Key Informant 1(KI1)

Key Informant 2(KI2)

Key Informant 3(KI3)

Key Informant 4(KI4)

Key Informant 5(KI5)

Key Informant 6(KI6)



UNIVERSITY *of the*
WESTERN CAPE

CHAPTER ONE

INTRODUCTION

1.1. Chapter overview

This chapter introduces the study. It presents the background and context of the study, the problem statement, research questions, objectives of the study, as well as the relevance and importance of the methodology of the study. The chapter culminates in a summary of other chapters in this mini-thesis.

1.2. Background

Bittar (2020) states that close to 50% of all adults in South Africa, live in poverty. About 62% of children in South Africa experience multidimensional poverty, according Statistics South Africa (Statistics South Africa, 2020). The Department of Social Development (2018) maintains that there are currently close to 18 million South Africans who are recipients of social grants.

To assist poor households with the basic needs of their children, the South African government implemented the CSG. According to Legal Aid South Africa (2015) the CSG is a cash transfer made to primary care-givers, that is meant to assist in meeting the most essential needs of children living in South Africa, whose primary care-givers are not in a position to meet these needs, due to them being unemployed. Many of the working poor also qualify for the CSG, e.g. seasonal farm workers. Webb and Vally (2020) reported that in May 2020, the primary care - givers of 12.5 million children received a CSG. This suggests that many poor children in South Africa are dependent on social grants for their growth and development.

The research was conducted in Caledon, in the Western Cape and the research subjects were confined to recipients of CSGs in lower income households, staff, and management of the SASSA offices in the Western Cape, as well as other key informants such as leaders of relevant Non-Government Organizations. To place the research of this study into perspective, it is important to explain why Caledon was chosen the case study: The manager of ODEC, situated in Caledon, with whom the researcher has a long-standing working relationship, agreed to provide support during the field work of this study. In addition, the poverty rate in the Caledon district is very high, as explained in the next paragraph. This indicates a good justification for selecting this area to conduct a study on CSG.

The Western Cape Government Provincial Treasury (2017) forecasts a population increase for Caledon to 119,052 in 2018 and 125,505 by 2023. 51% of the population is male and 49% female. The Theewaterskloof Municipality (2019) reports that the average annual income per household for Caledon is R29 400 based on 2016 community survey figures. According to the Theewaterskloof Municipality (2019), close to 12% of the population (approximately 14,000 people) of Caledon had no income in 2016 and a further 5.4% had an annual income of less than R1100. When these figures are compared to South Africa's National UBPL of R1183 per person per month, as indicated in Statistics South Africa (2018), the assertion is that approximately 20% of people living in the Caledon district experience high levels of poverty (Theewaterskloof Municipality, 2019).

1.3. Problem Statement

DSD (2012), argue that the results of the South African Child Support Grant Impact Assessment confirmed a positive impact of the CSG on nutritional, educational and health outcomes. Despite these benefits, research informs us that South Africa's social grants are currently not as effective as they should be. Devereux and Waidler (2017) state that objectively measured indicators record only a marginal improvement in children's nutrition status since the early 1990s. Another shortcoming of the current CSG programme is that grants are not being fully utilized for the purpose for which it was intended. Research confirms that the entire CSG grant is not always spent on the child. "This might be explained by the fact that the transfers may be channelled towards the purchase of other goods that are not only to the benefit of children. ... It might also be that when the cash is spread across the entire household, the observable effect on children is small" (Coetzee, 2013). Furthermore, UNICEF (2016) argues that approximately 1.8 million eligible children are still not accessing the CSG. The new electronic payment system has improved efficiency somewhat, but the negative spin-offs of this system include exploitation from credit providers and unauthorised deductions. According to GroundUp (2013) "The Black Sash, which has been running a "Hands off our grants" campaign, has documented hundreds of cases of unauthorised deductions from beneficiaries' accounts, for airtime, loan repayments, electricity and even water."

As reflected in Republic of South Africa (1996), the South African Constitution provides that everyone has the right to have access to social security including, appropriate social assistance for those who unable to support themselves and their dependants. The Department of Welfare (1997) argues that social security refers to policies which ensure that all people have adequate economic and social protection during unemployment, ill health, maternity, child-rearing,

widowhood, disability and old age, by means of contributory and non-contributory schemes for providing for their basic needs. According to this White Paper, social assistance is the non-contributory and means-tested benefit provided by the State to people with disabilities, elderly people, and children. CSG is a form of social assistance. The Constitution also mentions the State's additional obligation to take reasonable legislative and other measures, within its available resources to achieve the progressive realisation of this right. As Devereux (2013) argues, this approach not only recognises the right to social protection, but it holds government (duty-bearers) accountable for effective delivery of citizen-driven social protection, where citizens play a key role in informing policies and demonstrating an awareness of their entitlement to social grants.

The above rationale provides sufficient motivation to investigate and analyse how effective the CSG is in South Africa and explore whether the child's constitutional right to social security is adequately upheld in South Africa, with specific reference to the CSG.

1.4. Research Questions

According to NIST (2013) a research question stems from the problem statement and is established in the literature review. To address the urgent problems encountered with the CSG in South Africa, the researcher intends answering the following critical questions:

- What do social policy makers in South Africa want to achieve with Child Support Grants?
- Are they achieving it?
- If not, how can policy makers ensure that CSG's have the desired impact?

1.5. Objectives of the Study

The researcher has set five objectives, in relation to the research questions:

- (i) Provide an analysis of how different social grant models are applied in different countries.
- (ii) Explain the context and provide a deeper understanding of CSG.
- (iii) Establish what policy makers want to achieve with CSG in South Africa.
- (iv) To assess the current design and implementation of CSG.
- (v) Explore alternative options to make CSG more effective.

1.6. Outline of Mini-Thesis

This mini-thesis consists of seven chapters which are structured as follows:

Chapter One introduces the background of child poverty in South Africa, problems with the current CSG and the research questions that will be answered in this study.

Chapter Two serves to introduce the theoretical basis of this research. The theoretical perspectives of the ToC, as well as the Social Contract Theory on CSG and its application to this study are explained.

Chapter Three provides a review of relevant literature pertaining to how different social grant models are applied globally and how the CSG is implemented in South Africa. The first and second objectives of this study are addressed in this chapter.

Chapter Four presents the research design and methodology used in this research and outlines the procedure that was followed during the empirical fieldwork stage of the investigation. It focuses on the qualitative research design used in this research, and provides a description of the purposive sampling method, data collection and data processing and analysis. It concludes with ethical considerations and limitations of this study.

Chapter Five presents a summary of the impacts of CSG. It illustrates how this study utilises the ToC to ascertain how CSG recipients use the CSG and describes the relevance of the Social Contract Theory to the CSG. In addressing the third objective of this study, this chapter will report on findings aligned with what social policy makers want to achieve with the CSG. In dealing with the fourth objective in this chapter, findings are presented related to current experiences with the CSG and what policy makers are achieving.

Chapter Six provides a few suggestions relating to how CSG could be more effective. Regarding potential limitations of CSG, this chapter addresses the fifth objective of this study, by listing several ideas which could strengthen the programme, with reference to “nudging”, “labelling” and conditionality.

Chapter Seven presents the conclusion of the research and recommendations for further research and considerations for more effective, revised policies on the CSG.

CHAPTER TWO

THEORETICAL FRAMEWORK

2.1. Chapter overview

Chapter Two provides a theoretical basis for this study. The primary aim of this mini-thesis is to investigate the effectiveness of the Child Support Grant (CSG) in South Africa. Research has presented a few theories that have significance for the CSG programme. This chapter will start with a discussion on the relevance of the ToC, in relation to CSG. The researcher will also discuss the Social Contract Theory and present it as the most appropriate theoretical framework for analysing the CSG. The importance of the Nudge Theory in strengthening the effectiveness of CSG, will also be presented.

2.2. Theory of Change

Here the researcher will explain what the ToC is, and how it is aligned to CSG. According to Anheier et al. (2005) the ToC refers to the expression of the fundamental points of view that direct a service delivery plan and is essential for the creation of change and progress. Theories of change should focus on target groups, the plans to achieve specific results, final achievements and forging a clearly understood relationship amongst these 3 focus areas. This is confirmed by Anheier et al. (2005) who describe the two sections of the theory of change. The first section specifies 3 key elements, namely (1) who you are helping (Population), (2) plans and tactical approaches through which desired outcomes will be achieved (Strategies) and (3) final results that you would like to achieve (Outcomes). The second section requires a sound understanding of the relationships among the three key elements and articulating those relationships clearly.

Essential elements of the ToC are presented by Andrea Anderson. Anderson (2005) argues that a theory of change should include: (i) a pathway of change that shows the association between actions and outcomes and indicates how outcomes are connected to one another over the duration of the project or programme (ii) indicators – signs which verify how success will be acknowledged during every stage in the pathway of change (iii). Interventions – activities or programmes that meet pre-conditions for long-term change and (iv) assumptions, that describe

the associations between the pre-conditions and the prospects of how and why suggested interventions will bring them about.

Results that achieves the desired impact, underpin a good ToC. In this regard Rogers (2014:1) argues that a ToC provides clarity as to “how activities are conceptualised to produce a series of results that contribute to achieving the final intended impacts”. Rogers (2014) further argues that during an impact study a ToC must signify what an intervention wants to accomplish and how. It must also explain how change is understood to happen and not merely linking actions to anticipated results. In support of this, Vogel (2012) says that the ToC is a useful tool that can be applied throughout the project cycle from the outset of the research design until the end of the project in order to see the results. The significance of ToC principles influencing results and impacts of social change interventions, is also argued by Johanna Morariu. According to Morariu (2012) ToC could be used by grant-makers as (i) a foundation-wide ToC and/or (ii) a portfolio ToC. A foundation-wide ToC describes the different kinds of investments a foundation has chosen that will result in greater impact. A portfolio ToC refers to the motivation and justification of a strategy for a category of associated grants. For example, a foundation ToC may describe a foundation’s different investments directed at improving education outcomes for children in grades 1 – 12. A portfolio ToC may describe a category of associated investments directed at grade promotion in the middle school years. These lessons, in the view of the researcher, has equal relevance and value for the implementation of the CSG.

Research also informs us that the ToC is central to social change and development. Confirmation of the importance of the ToC for development and social change was illustrated when the ToC was used in an important assessment of the CSG undertaken by the Department of Social Development (DSD), the South African Social Security Agency (SASSA) and the United Nations Children’s Emergency Fund (UNICEF) South Africa. According to DSD (2012), the ToC underpins the universal impact of the CSG in reducing poverty and vulnerability for children, which will result in change and improvement in the quality of life of the child. DSD (2012) present 3 key arguments for the system of cash grants:

- Cash grants are relatively easy to administer.
- Cash grants directly reduce poverty of some of the most vulnerable and in so doing also reduce inequality.

- Cash grants also deal with some of the underlying causes of poverty and in so doing not only provide a safety net (allow people to cope with risk/ provide a minimum income level) but also generate positive dynamics through enabling risks to be mitigated and reduced over time.

As further evidence of the impact of the ToC on the CSG, DSD (2012: 5) states that “previous studies on South Africa’s Child Support Grant as well as global evidence document a typology of pathways – both social and developmental, through which the social grant drives change for children, households, and the society more broadly”. The CSG also has developmental impacts where poverty reduction builds and promotes human capital and assets which protect the poor against risks and shocks and stimulates social cohesion. According to DSD (2012), the ToC is illustrated in the CSG context through activities (e.g. grant administration), outputs (e.g. unconditional monthly payments to care-givers) and outcomes (e.g. expenditure on food for the child) that influence social change.

There has also been a degree of scepticism and some criticism about the ToC approach. According to Mulgan (2016), the ToC is inclined to be far too direct and rigid, where assumptions are made that all inputs result in outputs and outputs lead to outcomes. Although this happens occasionally, those who understand systems thinking will be sceptical of linear explanations, with reference to challenging social occurrences such as homelessness, poverty, or isolation. The problem here is related to complexity and challenges of social life, and to attribute positive outcomes to one intervention is misleading. Another source has listed several disadvantages of the ToC which include ignoring the role of power and politics in an organization and transformational and radical changes, despite its relevance to incremental and isolated changes (Rawat, 2012). Criticisms about the ToC have also been levelled by Wageningen University and Research (no date) who argues that theories of change are too complicated, with too much detail and inflexible plans. These documented shortcomings require further research and scrutiny in the future application of the ToC.

2.3. Social Contract Theory

2.3.1. What is Social Contract Theory?

There are several theories that are aligned to the study undertaken by the researcher. One such is social contract theory to which proponents such as Thomas Hobbes, John Locke, and Jean-Jacques Rousseau, as well as David Gauthier and John Rawls, have all made significant contributions. According to Rouse (2018) "A social contract is an agreement either implicit or explicit, governing the behaviour of individuals and organizations within a certain context such as a workplace, a culture, a nation or a social media site". It is also defined by Business Dictionary (2019) as an unrecorded but implied understanding that exists among members of a group, that informs behaviour and determines rights and responsibilities. A social contract is vital for any structured group behaviour and is recorded in the national constitution of democratically elected countries. What is clear and confirmed from these definitions is that a social contract speaks to an undertaking by different groups, who are formally engaged in the delivery and receipt of social services, to execute their responsibilities in exchange for their constitutionally-protected rights.

"Social Contract Theory, at its most basic level, states that human beings give up certain rights they have in a state of nature in order to obtain the securities and rights provided by civilization" (Weber, n.d.: 3). To fully comprehend the impact that this submission has on individuals' rights, Weber asserts that the following questions be answered: (i) Which rights apply in a state of nature?; (ii) Which rights are communicated through the establishment of civilization? (iii) Which rights are relinquished once the social contract is binding? and (iv) Which rights are kept, in full or in part, when the social contract becomes binding. Thomas Hobbes (cited in Elahi, 2005) also speaks about individuals giving up their rights and freedoms- which they had in a state of nature which they found difficult and unpleasant to live in- to a higher authority and indirectly accept a social contract, where this authority protects and safeguards their lives and assets. Hobbes states that inherent in the social contract, is the State's capability to establish moral rules for effective governance over relationships among citizens. According to Hobbes (cited in Friend, n. d.), taking care of small children gives adults a sense of responsibility to these children, who have been helped to survive. Hobbes says that the Social Contract is the most important basis of everything that is good and those things we depend on to live a good quality life.

John Locke's view of Social Contract theory differs to some extent from that of Hobbes. John Locke (cited in Elahi, 2005) asserts that individuals live in a state of nature which was pleasant and enjoyable but there was no security for their assets due to the absence of laws, absence of the authority to enforce laws and unbiased judgement. For the protection of their property in a law-abiding society - which they did not experience in a state of nature- individuals established a social contract with the State. Locke (cited in Friend, n.d.) further argues that if the sovereign authority becomes an oppressor and does not attend to the interests of its citizens, they are duty-bound to oppose that authority.

Jean Jacques Rousseau (cited in Elahi, 2005) argues that the freedom, equality and liberty that prevailed in society originally, vanished in modern society due to the discovery and recognition of assets and possessions. Through the creation of the social contract, the State was established to guarantee rights and equality for individuals. In exchange for these rights and freedoms, individuals agreed to abide by the "general will" of society, out of which the State and Law were instituted. Rousseau (cited in Friend, n.d.) states that there is reciprocal relationship between the sovereign state and its people. In this relationship the sovereign authority is dedicated to ensuring that the constitutional needs of its citizens are met and in turn, each citizen is committed to conducting themselves in a good, orderly, and law-abiding manner. People can only enjoy the benefits of this relationship through the fulfilment of their obligation and not by choice. This theory asserts for a society to function well, people are obligated to be law-abiding citizens and the state is obligated to meet the basic needs of its most vulnerable, poor citizens.

2.3.2. How Social Contract Theory is applied in South Africa

In South Africa, the right to social protection of its most vulnerable citizens is enshrined in its constitution and various Acts of Parliament have been promulgated to make the social contract real. Earlier in this research study, reference was made to the fact that the Constitution of South Africa (Republic of South Africa, 1996) states that everyone has the right to have access to social security including, appropriate social assistance for those who unable to support themselves and their dependants. With respect to children's rights to social security, the Constitution states that "Children, like adults, have the right of access to social security... every child has the right to basic nutrition, basic health care services and social services" (Republic of South Africa, 1996: 171). The Constitution also compels parents to carry out their main

responsibility of ensuring that their children enjoy and benefit from their (children) economic and social rights.

2.3.3. CSG and the Social Contract

The CSG in South Africa has an implicit social contract attached to it. The White Paper for Social Welfare (1997) says that social security refers to policies which ensure that all people have adequate economic and social protection during unemployment, ill health, maternity, child-rearing, widowhood, disability and old age, by means of contributory and non-contributory schemes for providing for their basic needs. According to this White Paper, social assistance is the non-contributory and means-tested benefit provided by the State to people with disabilities, elderly people, and children. The White Paper also mentions that “the social security system will aim for co-responsibility between employers, employees, citizens and the State”(White Paper For Social Welfare, 1997). This implies that primary-care givers (citizens) have an equal responsibility to ensure that the social security system works well, by using the CSG for the benefit of the children in their care.

Further evidence of social contractual obligations are stipulated in the Social Assistance Act No 13 of 2004’ (Republic of South Africa, 2004). This Act states that the Minister of Social Development must ensure that funds from the National Treasury for social assistance grants- which includes CSG- are channelled to its qualifying citizens. This Act also states that if the Department of Social Development suspects that a grant recipient is not using the grant for the purpose for which it is intended, the Department may investigate the suspected abuse and may suspend the grant if the recipient is convicted of abuse. Again, this Act urges grant recipients to keep their part of the social contract by using the grant responsibly. For example, this would mean that CSG recipients should not give their SASSA cards to money lenders (“loan sharks”), to whom they might be indebted.

According to the United Nations Human Rights Office of the High Commissioner (1990), the CRC, that was ratified in 1995 by South Africa, states that every child has the right to benefit from social security, including social insurance. The State therefore has a responsibility to take the necessary steps to ensure that this right is fully realised in terms of legislation. The CRC further states that all parties to the social contract must acknowledge the responsibilities, rights, and duties of parents, to ensure that the child’s needs are adequately met as his or her

capabilities change, and to provide appropriate direction and guidance. Again, we find that in accordance with South Africa's commitment to this international treaty on protecting the rights of the child, there is an onus on primary care-givers to use the CSG, for the development of the child until he or she is 18 years old. The importance of the primary-care givers to act responsibly by caring for their children and providing for their basic needs and the right of the parent to receive child support from the State as a last resort, are valuable lessons for CSG, that are associated with the social contract theoretical perspectives of Hobbes, Locke and Rousseau. Because many CSG recipients are not using the CSG effectively and for its primary purpose, the social contract theory is a useful way of looking at the CSG and poverty alleviation.

Some consideration should be given to the fact that not all researchers are convinced that the official primary purpose of the CSG is the most effective way of utilizing this grant (the social contract between the CSG recipient and the State) to alleviate poverty. One such researcher is David Neves, Senior Researcher at the Institute for Poverty Land and Agrarian Studies (PLAAS) at the University of Western Cape, who asks pertinent questions relating to the use and purpose of the CSG. Neves (personal communication, 09 July 2019) asks if the official primary purpose of the CSG is too narrowly intended, i.e. consumption purposes for the formally designated recipient. He also asks whether the benefits would be greatest when used within the context of beneficiaries' households, as part of larger household livelihood strategies, e.g. an idea that was raised a while ago to encourage grant recipients to save part of their grant. This idea of saving and investing part of the grant as a popular practice to increase and sustain household livelihoods is also argued by other researchers where, based on the findings of their research, they state that "Although savings behaviour is noted in relation to the larger value grants, savings behaviour is also evident in relation to the lower value CSG. The qualitative case study data suggests the preponderance of informal savings mechanisms, such as Stokvel's, is associated with social grant receipt" (du Toit et al., 2009:64).

The original and official nature of social contracts between the State and its citizens has also been criticised by anthropologist James Ferguson. In his book, *Give a Man a Fish*, Ferguson (2015) criticises a system where millions of poor people are excluded from capitalist production systems but yet have to meet difficult criteria to benefit from the State's social protection schemes. Ferguson suggests that this system is replaced with a political economy, where an emphasis on distribution increasingly influences how individuals negotiate livelihoods, social protection, and other vital aspects of life. He proposes a fundamental move

away from “productionist” tenets towards distribution. According to Ferguson, people insist on their legitimate right to participate in the distribution of wealth, generated from resources in their community. Consequently, they demand and are entitled to their “rightful share” in collectively owned wealth. For Ferguson, “giving a man a fish” could be more beneficial than “teaching him to fish”, which is why he is in favour of the idea of a universal basic income for everyone, as opposed to social grants, where specific criteria must be met. According to Voices360 (2019) the universal basic income is a cash payment made regularly by the State to its citizens, regardless of whether these individuals have a job or earn an income. Ferguson believes that the guaranteed basic income for all, where people can make their own decisions as to how these funds could be utilised to sustain their livelihood, could provide better social security for the poor than existing social grants. Advocates of the BIG, such as Ferguson, campaign for a basic income large enough to secure a decent living wage, thereby nullifying the need to seek employment in the job market or generate additional income through self-employment. This is in stark contrast to prevailing welfare systems that encourage participation in the labour market to enjoy unemployment benefits. If the existing social security system in South Africa is unable to alleviate poverty effectively, policy makers should consider the BIG as proposed by Ferguson.

2.4. Nudge Theory

2.4.1. What is Nudge Theory?

Another theory that has an impact on this study, is the Nudge Theory that was introduced by Richard Thaler and Cass Sunstein. Imperial College London (n.d.) describes Nudge Theory as a concept where circumstantial change encourages an individual to consider another opportunity or alternative without denying him or her the freedom of choice. Similarly, Prichard (2018) presents Nudge Theory as an idea that rewards a certain pattern of behaviour and makes indirect suggestions, that will motivate people to behave in a certain way, without them being aware of this influence on them.

2.4.2. The relevance of Nudge Theory to this study

Having used Nudge Theory to help individuals to stop smoking and pay their taxes on time, the government of Madagascar- where more than 50% of children are malnourished- has also applied this theory to fight malnutrition. Small changes in choices are presented to parents to “nudge” them into making better decisions relating to the care of their children (Rutter, 2016). Nudge Theory and uses of behavioural economics play a significant role in India. A study in

Udaipur, India, found that by making lentils freely available to the community, people would arrive in their droves to ensure that their children are immunised (Dupas, 2011). According to Rahman et al (2018), a nutrition “nudge” and nutrition education are used to improve dietary diversity in Bangladesh. Very good results are achieved when encouraging people to go on a more diverse diet, when the “nudge” is combined with nutrition education. One of the objectives of this study is to present new ways of ensuring that CSG in South Africa, are more effective. The above research findings show what bearing Nudge Theory could have on the CSG. In Chapter 3 of this study, the relevance of “nudging” as another method for improving the effectiveness of CSG, is explored in more detail.

2.4.3. Criticisms of Nudge Theory

Notwithstanding the evidence that verifies the positive impact of Nudge Theory on human behaviour and individual choices, critics have listed several limitations of this theory. The researcher will present three: (i) “Nudges” are not effective when attempting to change strong and long-standing habits of people. These established habits oppose small, subtle suggestions to change them (Grawitch, 2020). (ii) According to Rutter (2016), Nudge Theory exploits people’s vulnerability by convincing them to do things that would not be helpful to them, citing Du Flo (2008) on how advice given to farmers in Kenya on fertiliser increased production but not profits. (iii) Paternalism might be one of the unintended consequences of Nudge Theory (Rutter, 2016).

2.5. Chapter Summary

This chapter has provided the theoretical framework used for this study. The primary aim of this study is to measure the effectiveness of the Child Support Grant (CSG) in South Africa. The researcher started this chapter by discussing the Social Contract Theory and the value that this theory brings to this study. The ToC was then presented as the most suitable theory to operationalize the CSG. The essential elements of the ToC, as well as its influence on the results and impacts on social interventions, were also discussed in this chapter. The significance of the ToC to social change and the CSG were presented, with the chapter culminating in criticisms of the ToC, which require further research. Lastly, the relevance and value of Nudge Theory in respect of this study, was described, while also pointing out potential weaknesses of this theory.

CHAPTER THREE

LITERATURE REVIEW

3.1. Chapter overview

This chapter starts with the context of social protection and then presents an analysis of how different cash transfer models are applied in different countries. What follows is a discussion of the background of CSG in South Africa. This section continues with clarification on what policy makers want to achieve with CSG in South Africa, how the CSG works and examines the strengths and weaknesses of the current design and as well as the implementation of CSG. Finally, the chapter investigates the value that “labelling”, and “nudging”, could add to make CSG in South Africa more effective.

3.2. The Context of Social Protection

UNICEF (n.d.) argues that “Poverty is devastating for children. It denies them their human right to a standard of living adequate for their physical, mental, spiritual, moral, and social development. It also robs them of their right to protection from exploitation, violence, and abuse. Unless the cycle is broken, children living in poverty often become adults who pass poverty onto the next generation”. Social grant programmes and cash transfers (CTs) which have been designed to provide “social protection” for vulnerable groups such as poor children, is a rapidly expanding branch of social policy in the Global South. Devereux and Sabates-wheeler (2004) contend that “social protection” refers to all State and private programmes that offer opportunities for the poor and vulnerable groups to receive income and consume those items that are essential for their livelihood , protect them against any risks that would threaten their livelihood and improve their social status and rights. **The primary aim of “social protection”** is to reduce the susceptibility to economic and social protection risks for these groups. Social protection is also used to address structural poverty. Bruenig (2014) states that structural poverty occurs when state-enforced economic structures allocates income in a manner that gives rise to recurring patterns of destitution. Sarlo (2019) highlights several structural causes of poverty, of which the researcher will mention three: (i) institutional and industry-related gender and racial discrimination;(ii) high profit objectives, with low salaries, resulting in many families to remaining in poverty and (iii) inadequate investment in education, health care, and social insurance. These structural causes, according to Sarlo (2019), diminish income-generating opportunities and intensifies economic insecurity.

Research shows that social protection can be used as an effective mechanism to resolve structural poverty. Kangasniemi *et al* (2020) argue that one of the spin-offs of structural transformation, is the consolidation of human capital accumulation and the provision of investment opportunities that come with a higher degree of uncertainty but with the potential for larger profits. In line with this view, social grants such as CSG, create the platform for the improvement of human capital, leading to even higher benefits, if services in the health and education sectors are efficient. Cash Transfers are described, by UNICEF Evaluation Office (2015), as expected transfers made directly to poor people to safeguard them from the effects of unexpected economic and environmental crises and offer backing for the collection of human and financial assets. According to Statistics South Africa, cited in (The Citizen, 2019), confirmed that cash transfers continue to provide social security in the poorest communities in particular, to the extent that it has become the second largest source of income (45.2%) for poor families, after salaries (64.8%). Further support for cash transfers as a critical component of “social protection”, is presented by researchers at the IDS. Roelen *et al.* (2018) argue that there has been significant growth over the past 10 years in the use of cash transfers for long-term support and as a means of providing short-term relief for the poor and marginalised. As a key element of social protection systems, cash transfers also offer a timely buffer during times of economic crises and shocks.

Two types of cash transfer programmes that perform a pivotal function in addressing “social protection” for the poor and vulnerable, are commonly known as Unconditional Cash Transfers (UCTSs) and Conditional Cash Transfers (CCTs). According to the World Health Organization (2019) conditional cash transfer programmes make cash available to poor families provided that they agree to meet certain health and education related requirements. Handa *et al.* (2018) state that UCTs are typically described as fixed and expected cash transfers aimed at supporting poor and marginalized households and paid without them having to meet any requirements.

3.3. First Objective: An Analysis of Cash Transfer Models: A Global Perspective

3.3.1. The Case for Unconditional Cash Transfers

The philosophy of UCTs is rooted in its non-authoritarian methodology that gives beneficiaries autonomy and the opportunity to invest funds that will address the needs of each household. Gan (2016) argues that UCTs give beneficiaries a sense of independence and

ownership. For Pietzsch (2011) one of the benefits of UCTs is that beneficiaries can decide what is best for them and their families, as opposed to (CCTs) where the funder decides, in paternalistic fashion, what is best for the family. Reviewing UCTs across countries, research not only refutes erroneous and misleading criticisms about UCTs but also highlights the benefits and increasingly popular use of UCTs in several countries. According to Dahir (2018) research, that included UN organizations for children, collected evidence over a period of 10 years from 8 countries in sub-Saharan Africa, that dismissed a number of incorrect perceptions of UCTs in Africa. For example, the evidence revealed that UCTs do not increase alcohol and tobacco consumption. In Lesotho, UCTs led to less spending on alcohol and tobacco, and to a considerable increase in spending on food. Also, research found no evidence to support the opinion that females increase their fertility to receive additional CSGs. On the contrary, research found that women in Kenya, who lived in homes who were recipients of CTs, were more inclined to delay their first pregnancy. Counter arguments to erroneous opinions about UCTs are also presented by Salehi-isfahani and Mostafavi-dehzooei (2017) who state, that a study, that measured the effect of a country-wide UCT programme on labour supply in Iran, found no evidence that UCTs decreased labour supply, while it appears that employees in the services industry worked longer hours, due to some of them using UCTs to grow their businesses.

The CSG programme in South Africa is an example of UCTs. The South African government's position on UCT's is premised on the following argument by Millions Saved, (2015): "Conditional cash transfers may be more politically palatable than what some view as a "handout." However, conditionality can keep the most disadvantaged residents from accessing transfers". Justification for the CSG as an UCT is also presented by Agüero, et al. (2007), who argue that South Africa's unconditional CSG transfers have not only improved early childhood nutrition, but where a commitment to medical checks for the child even in the absence of conditioning, have been found.

3.3.1. (a) A Critique of Unconditional Cash Transfers

Although cognisance is taken of the positive contributions of UCTs, there are several critiques; the researcher will deal with three, namely (i) its long-term impact (ii) effect on calorie intake and (ii) empowerment of women. One of the biggest concerns about UCT programmes is the uncertainty about its long-term impact on poverty alleviation. Gan (2016) argues that while the benefits of UCTs are certainly encouraging in many countries, uneasiness about its long-term

benefits, remain. Several researchers argue that UCT programmes have a positive impact in the short-term only but after a few years, the many positive results observed during the initial years, diminish. For example, the impact of the UCT programme on schoolgirls delaying marriage and pregnancy, was positive while they received the funds. However, 5 years after the programme terminated, the problems relating to early marriage and pregnancy, started again. Shapiro and Haushofer (2016) found that, whilst UCTs have a positive impact on food expenditure and consumption, the possible negative effect of calorie intake must be investigated. The consumption of high calorie, fatty foods could lead to excessive weight gain, which might have a negative effect on the child's health. Thirdly, significant positive effects on female empowerment through UCTs are not clear. This is of serious concern, given that women primarily perform the role of care-giver in poor households.

3.3.2. The Case for Conditional Cash Transfers.

There is also a variation of cash transfers called CCTs, which make cash available to families if they agree to meet certain requirements (WHO, 2009). These include regular visits to a clinic, good school attendance and programme beneficiaries attending educational sessions on nutrition.

An extensive body of evidence demonstrates that CCTs are a very effective mechanism for alleviating poverty. Literature informs us that, "CCTs are programmes that transfer cash, generally to poor households, on the condition that those households make investments in the human capital of their children" (Fiszbein and Schady, 2009). Evidence of the health and educational benefits of CCTs are confirmed in a review of the impact CCTs across several countries.

In Mexico, the evaluation results of CCT revealed a significant improvement in how nutrition and frequency of immunization are monitored. Children between 0 and 5 years experienced a 12% lower incidence of illness, compared with children who were not beneficiaries of CCT. Rawlings and Rubio (2003) also state that in Nicaragua, 60 % of children under 3 years were involved in nutrition monitoring before CCT were introduced and during CCT, 90% of them benefited. Gaarder, Glassman, and Todd (2010), cited in Browne (2013) present a valuable analysis of health CCTs across eleven programmes and four regions in Latin America. An assessment of the assumptions of these programmes were completed, from which social protection and anti-poverty ToC were drawn. Two, of several, assumptions in the ToC are that:

(i) CCTs result in the poor increasing the utilization of preventive health services and (ii) enforcing conditions, are essential for ensuring that the use of the health services was maintained at the preferred level. The Cochrane review, mentioned in Huntington (2010), assessed the impact of 6 CCT programmes on health in Brazil, Colombia, Honduras, Malawi, Mexico, and Nicaragua. According to Chapman (2014), Cochrane reviews are methodical evaluations of primary research in health care and health policy, conducted by health professionals. One of the results of the review revealed a substantial effect on growth of children in the poorest households who were 6 months or younger but no difference for 6-12-month-old children.

Research has also confirmed the benefits of CCT on the child's education. Fiszbein and Schady (2009) claim that high school enrolment among CCT beneficiaries were evident in low-income countries (e.g. Bangladesh) and lower income countries (e.g. Honduras). The positive effect of the CCT on school enrolment is also supported through evidence presented by Rawlings and Rubio (2003), who stated that in Mexico, the impact of CCT at secondary school level was quite significant, with an enrolment rate improvement of between 7.2 to 9.3 % for girls and 3.5% to 5.8 % for boys. These cases have illustrated that conditionality is important to ensure the effectiveness of the CCT in relation to human capital development, which has significance for the CSG. In a review of the impact of CCTs in education and its long-term effects on poverty in 15 sub-Saharan African countries, Kakwani, et al (2005) state that because of CCT programmes, poverty is reduced in poor households, due to them being able to accumulate assets through their investment in human capital. Children have a better chance of getting out of poverty through CCT because access to school and health care is guaranteed.

3.3.2. (a) A Critique of CCTs

Research has identified several critiques about CCTs, which not only brings the social policy considerations for the State and other providers CCT into question but sheds some doubt about its universal value. The researcher will highlight 4 of these critiques, relating to: (i) empowerment of women (ii) health (iii) the right to social protection and (iv) education.

Empowerment of Women: Shei et al.(2014) raise a concern that relates to how the CCT programme reinforces women's time-poverty induced vulnerability, to meet the conditions of the programme. The CCT programme is not assisting beneficiary women who are trapped in chronic poverty, to take care of their responsibilities to their children and empower

them to experience a better quality of life. It is strongly recommended that the programme improves the skills of targeted women, through skills development and aid them to use credit for their own small business enterprises, which will in turn allow them to procure their own assets. Most of all, they need on-going material security, as opposed to a grant that is dependent on good motherhood.

Health: Shei et al. (2014) point out that the Bolsa Familia programme in Brazil, did not have a considerably positive effect on children's health care utilization for illnesses or emergencies, illness rates, or physical health. It was also confirmed that, the CCT programme also seems to have little positive effect on the use of public health institutions and delivery of children in certain countries. Serrate (2017) explains the impact of the CCT programme "Juana Azurduy" on the health-related behaviour of women of childbearing age in Bolivia. This CCT programme was set up in 2009 as a motivation for females to receive medical treatment during pregnancy and for the first 2 years of their child's life. To qualify as a beneficiary for this CCT, women should not have access to private medical aid, be pregnant or have children under twelve months of age, at the time they register for the programme. In 2011, a statistically significant negative effect of 1% was observed in visits to health institutions, which was due to these females not seeing the need for additional medical care once they received the cash transfer.

Right to Social Protection: CCT programmes have also been criticised for being authoritarian and over protective (Freeland, 2007), submitting ambiguous evidence to support the benefits of conditionality (Saavreda, 2016) and being dismissive of the basic rights of the poor (Orton, 2014). Freeland (2007) argues that because of its paternalistic approach, CCTs do not portray a philosophy based on partnership and inclusivity, which are key principles of any good social protection policy. Some may view the CCT programme as morally questionable, if it denies the poor their "right", due to non-compliance with programme conditions.

Education: The influence of CCT has also not had a positive impact on school performance and school registration in certain regions. According to Duman (n.d.), the CCT had no effect on primary school enrolment in Turkey, with the registration of girls being up to 12% less than for boys. It was also discovered that CCT did not result in an improvement of progression from primary to secondary school for boys and girls.

It is evident that views of researchers, about whether conditionality for the CSG will have a significantly positive impact on education and health outcomes on children, are polarised.

Govender (2011) states that the NIDS was conducted in South Africa by SALDRU, to ascertain whether conditionality for the CSG should be considered by policy-makers. The results indicated that the academic achievements and school attendance of children who were beneficiaries of the CSG did not differ much from and those that were not beneficiaries. Very similar results were discovered for the 2 groups regarding visits to health clinics, as well as health outcomes. Govender (2011) argued that placing conditions on CSG would not be an effective solution for poor health and education outcomes, as these outcomes are caused by supply-side weaknesses e.g. low-quality teaching. A similar concern is expressed by Millions Saved (2015), where the argument is that, although CCTs could be viewed as more politically acceptable than what some regard as “handouts”, CSG based on meeting certain conditions could prevent the poor from gaining access to these grants.

3.4. Second Objective: The context of CSG in South Africa

3.4.1. The CSG Background

DSD (2012) state that the South African CSG was implemented in 1998. Since then, South Africa’s CSG have developed into one of the most inclusive social protection grants in the developing world. Changes to the CSG qualification criteria include a raise in the age restriction from 7 to 18 years and close to 13 000 000 children per month in 2019 (SASSA, 2019), with an expected reach of 13 100 000 by 2021 (SAnews.gov.za, 2019). The value of the CSG has also increased to R420 per month, with a further increase to R430 per month in October 2019 (Kelly et al, 2019). It is against this background that the effectiveness of social protection for children in South Africa must be examined.

When one considers the effectiveness of social protection for children, it has to be reviewed in a context where children suffered immensely through inadequate nourishment, and poor health care under the pre-1994 legacy of apartheid, through its racially-divided welfare system. Millions Saved (2015) states that before 1994, children in South Africa were severely neglected, with 25% stunted and 20% under-weight. Patel (2011) also argues that the democratically elected government inherited a racially divided society with more than 50% of female-headed households being poor (May, 1998; UNDP, 1999), 38% of children in the poorest quintile and 27 % in the second-poorest quintile suffering from stunting. The post - 1994 government also took over a racially divided welfare system that mainly assisted a white welfare elite by providing social services and benefits to whites and minimal assistance for blacks (Patel, 2011). Malnourishment and unhygienic living circumstances have, according to

Millions Saved (2015), been experienced by many poor children during the pre-94 period of segregation, racism, poverty and inequality in South Africa. Forty percent of all pregnancies in 1995 were among teenage girls, who were also vulnerable to HIV/AIDS infections.

The ushering in of South Africa's new democracy, saw the introduction of a rights-based approach to social development and the re-design of the social welfare system. Patel (2011) argues that Section 28 of the Constitution and the Bill of Rights protects the right of each child to basic services and social support and to family/parental care, while Section 29 protects the right to basic and further education. The introduction of the new order of post-'94 South Africa also led to the remodelling and implementation of a welfare system in accordance with the Reconstruction and Development Programme (RDP), as outlined in the White Paper for Social Welfare Republic of South Africa (1997). One of the strategic programmes included in the revamped welfare system, were social welfare services for specific target groups such as children, youths, women and families. Patel (2011) also argues that South Africa's new democracy resulted in the employment of pro-poor policies and strategies, where the State has a critical role in development, and social benefits are extended to the least advantaged. While political transformation and important social gains have been made since the advent of South Africa's democracy, the inheritance from its past legacy of race and gender inequality and poverty, remains one of the country's greatest social policy challenges.

3.4.2. What policy makers in South Africa want to achieve with CSGs

To answer the first research question, the researcher presents evidence from research that provides clarity on the actual objective of the CSG for South African policy-makers. According to Lund (2008) the primary purpose of the CSG was to "follow the child"- up to 14 years of age. This implies that government should "keep its eyes on the mobile child" and not the household per se and find ways to support the child through the primary care-giver (the biological parent and if not, then by agreement through kin relationships), based on a qualifying means test. Lund (2008: 74) also argues that "the CSG is aimed at addressing the fundamental problem of poverty i.e. the strong association between rurality, poverty and the absence of development activities and programmes in which people might participate."

Other sources present similar arguments on the objective of the CSG in South Africa. According to Patel et al. (2015), the main aim of the CSG is to provide supplementary income support, in order to improve food security for poor children, subject to a qualifying means test. Lloyd (2000) cited in Triegaardt (2005) states that the CSG is aimed at ensuring poor children's

access to security through daily provision of their basic needs, to prevent them from being left in the care of the State and to keep them off the streets. In the South African context, the CSG is said to be a poverty alleviation strategy targeted at impoverished children which aims to provide the poorest parents/caregivers with monthly cash to cover day-to-day needs of all children under the grant (Mokomo, 2008).

3.5. Operationalizing CSG - how it works

When applying for a CSG, the primary carer must follow an application process and meet certain pre- and post-application requirements. According to Republic of South Africa (2014) only primary carers of a child under the age of 18, who are South African or have permanent residence, and who does not earn more than R4000 per month or if married, have a double income that does not exceed R8000 per month, may apply. The child must also live with the primary carer and not be cared for at an institution. The primary carer will receive R445 per month (Western Cape Government, 2020), which is paid by SASSA either in cash at a specific pay point on a particular day, electronic deposit into your bank or Post bank account or an institution acting as administrator of the grant.

According to Republic of South Africa (2014), the CSG may be suspended if there's a change in the primary carer's circumstances, if the outcome of the review is negative, if he or she fails to co-operate when the child's grant is reviewed or commits fraud when applying, if there's a mistake when the child's grant was approved or if the child is no longer in the care of the primary care-giver. The child's grant will expire if he or she dies, is admitted to an institution, the primary carer does not collect the grant for 3 consecutive months, the child lives in another country or in the same month that the child's 18th birthday.

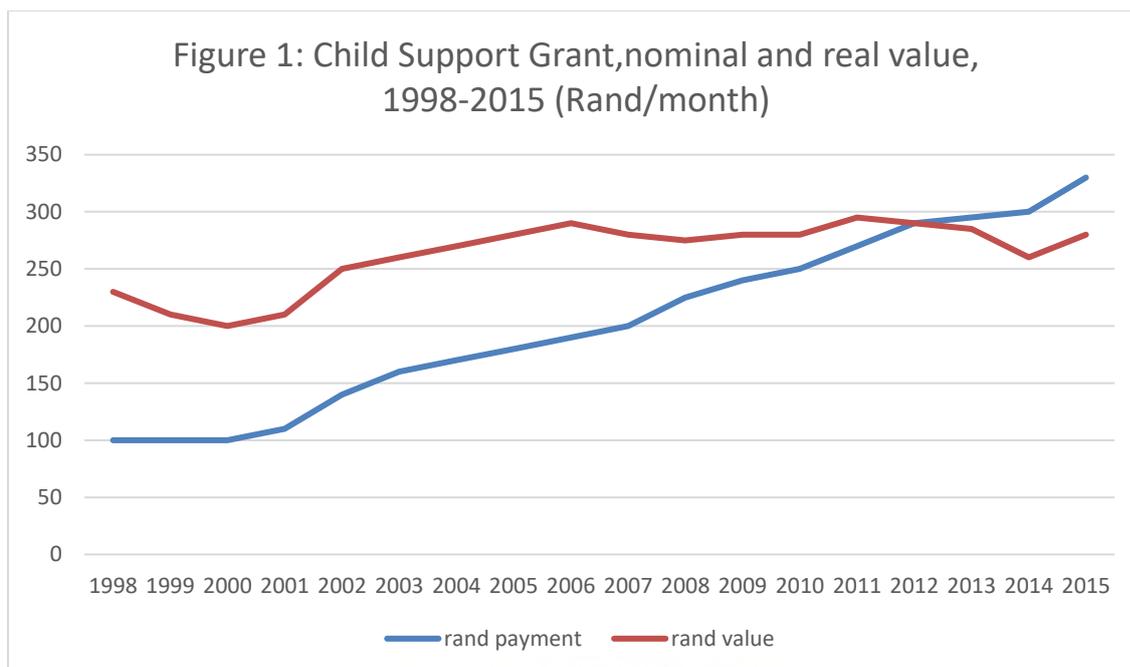
3.6. Accomplishments and limitations of CSG

To answer the second research question, the researcher will review the existing CSG evaluations. According to DSD (2012), the CSG has, since its inception in 1998, made positive contributions in terms of addressing poverty with the poor in largely rural areas. Three of these positive contributions will be discussed in this study. An assessment of the CSG on early life outcomes shows that children who benefit from the CSG within the first 2 years of their lives have a much better chance of their growth being monitored and with improved

height for age scores for those children whose primary care-givers successfully completed grade 9 or beyond. This outcome demonstrates important evidence of the CSG's investment in human capabilities, which is a key contributing factor in poverty reduction. An evaluation of the CSG impact on schooling, reveals that grade achievement for girls registered within the first 2 years improved by 25% of a grade, regarding mathematics and reading, in comparison to those children who were registered at six.

Research also confirms the positive effect of unconditional CSG on nutrition of children in poor families. Aguero, et al (2006) claim that unconditional CSG payments have strengthened early childhood nutrition by child height-for-age. Williams (2007) argues that children between the ages of 7 and 8 who experienced hunger showed a 1.4% reduction in hunger in 2003 compared to children who experienced hunger in the same age category in 2002.

Despite the benefits of the CSG, several shortcomings have also been confirmed through research. The researcher will focus on 4 shortcomings: (i) insufficiency of the monthly CSG amount (ii) unauthorised deductions and fraud (iii) difficulties that CSG recipients experience when they want to apply for the CSG and (iv) misuse of the CSG. Devereux and Waidler (2017) maintain that social grants in South Africa are not sufficient to meet nutritional needs. Because grants, including the CSG, are often shared among household members, their value per capita is much lower. The problem here is not only who the CSG is spent on but also what it is spent on, as the needs of all family members are considered. "Since most people are not working this money cannot be used on the child alone, but it has to be used on the whole family" (DSD, 2011). CSG is also insufficient to meet food requirements of the child because of inflation. In Figure 1 below, Devereux and Waidler (2017) illustrate that, despite an increase in the real value of the CSG during the first few years of the 20th century, for a ten year period between 2005 and 2015, incremental increases were below or equal to inflation, which means that the real value and purchasing power dropped." In another study conducted in a South African town named Alice, Eastern Cape, Mudzingiri et. al (2016) reported that 70% of CSG recipients were dissatisfied with the amount of the CSG.



Source: Beukes et al. (2015:3)

According to Stats SA, as of April 2016 South Africa’s FPL stands at R498 per person per month, and the UBPL stands at R1,077 (cited in City Press, 2016). “The CSG is therefore worth 70% of the FPL and 32% of the UBPL, which sounds ‘meaningful’ but in reality these grants are often ‘diluted’ among several family members, so their effective value per capita is much less” (Devereux and Waidler, 2017:14). This concern relating to the decline in the real value of the CSG, is also confirmed by UNICEF (2016) who states that the CSG has dropped below the 3 poverty lines proposed by Stats SA, including the food poverty line. When one considers South Africa’s National UBPL of R1183 per person per month, as indicated in Bittar (2020), the CSG percentage of the UBPL, improved marginally to 33.81%.

On the problem of unauthorised deductions, in 2014 the Minister of Social Development, said that she had received many complaints from primary care-givers about unauthorised deductions, which negatively affected the food security goal of the CSG. At the minister’s instruction, a task team investigated more than 13000 cases of “unauthorised, unlawful and fraudulent deductions” in 2015, of which 77 percent were resolved (DSD, 2016). Reddy and Sokomani (2008) highlight other challenges relating to grant fraud involving individuals who deliberately misrepresent themselves to apply for grants to which they were not entitled. In order to prevent fraud SASSA has implemented specific control measures eg. pre-numbered application forms and a Management Information System (MIS) that delays the application process when a required document is missing.

Socialprotection.org (2015) states that, because of concerns about the large number of poor people who did not have access to social protection and the minimal improvement in poverty, SASSA established ICROP in 2007 in order to expand the CSG programme. ICROP aims to reach out to poor people in deep rural and rural areas in particular, who have been excluded from social assistance, so that social services and grants can be available and accessible for them. As a result of ICROP, 320 000 CSG applications were completed between 2007 and 2013. Despite the success of this programme, a few difficulties still remain, which include the following: (i) A proper assessment of the physical barriers in certain areas was not done, making it impossible for large vehicles to reach the communities (ii) There's a need for SASSA to provide more training for employees of the mobile ICROP units, who deal directly with grant recipients. (iii) The number of potential grant recipients in urban areas who do not have access to grants, has increased, which suggests that SASSA needs to do more to reach them.

The misuse of the CSG is highlighted as a serious concern. In a study conducted in 4 South African provinces, DSD (2011) reported several complaints from participants about the misuse of the CSG. Primary care-givers in these regions were accused of using the CSG on their own hairdressing, alcohol, gambling, cell phone airtime and payments to "loan sharks". Some CSG recipients are said to abdicate their responsibility of taking care of their child but still enjoy the benefits of the CSG. As one participant claimed: "I know a lot of people who receive the grant but they are not staying with the child – the child is with the grandmother." (Grandmother caring for adolescent grandchild, Merrivale, KwaZulu-Natal).

3.7. Alternative approaches for a more effective CSG

CSG is an Unconditional Cash Transfer (UCT). However, there are other models such as "labelling", that could have a greater impact on the child, for whom the grant is intended. To answer the third research question, the researcher will investigate the value that "labelling", "nudging" and "Behavioural Communication (BCC)", could add to make CSG in South Africa more effective.

"Labelling" is a strategy to potentially improve the effectiveness of the CSG. Heinrich and Knowles (2018) state that in a "labelled" cash transfer, the cash transfer is given to households with a "label" that indicates how it should be used, but the grant recipient still has a choice. For example, Heinrich and Knowles (2018) state that if the CSG recipient is required to spend all the cash on nutritious food, the programme staff would give general advice to the households.

Another example of the benefits of “labelling” was evident at schools in Odisha, India. According to Rath (2015) the India Development Foundation (IDF) implemented an experimental programme in Odisha, India where a cash transfer was offered if school attendance was 70% or higher. Although the condition was not imposed, the results showed that “labelling” resulted in an improvement in attendance of the 4790 school pupils from 74% to 80%.

Further confirmation of the value of “labelling” in improving the impact of cash transfers on children, was presented by Pace et al. (2016). They summarized the results of an impact study of the CGP in Lesotho, with reference to what is referred to as “soft conditionality”. In this programme, the primary care-givers were reminded every time that the cash transfer was made, that the funds were specifically for their children’s most basic and essential needs, with emphasis on education. The oversight role of community groups further strengthened this strategy to ensure that the grant recipients would spend the cash transfers in accordance with the purpose for which it was intended. Findings showed that the CSG programme prompted and convinced primary care-givers to change their behaviour in favour of children.

Another strategy that could enhance the effectiveness of the CSG, in the view of the researcher, is “nudging”. A “nudge” is any aspect of the choice architecture that alters behaviour in a predictable way without forbidding any options or significantly changing their economic incentives” (Businessballs, 2013). Dreibelbis et al. (2016) site an example in Bangladesh, where an inexpensive set of “nudges” were used to encourage hand washing with soap after toilet use in two primary schools. Hand washing with soap among school children was low at baseline (4%), increasing to 68% the day after “nudges” were completed and 74% at both 2 weeks and 6 weeks’ post intervention.

One form of “nudging” that can be used to ensure that primary care-givers use the CSG effectively, is BCC, a strategy that encourages positive behaviour in individuals, households, and communities. According to The Manoff Group (2012), BCC encourages certain activities in the home, community, and society in general, that have a positive effect on the health of individuals. BCC is based on proven theories and models of behaviour change. UNICEF, (2016) describes how BCC has helped mothers in Burundi to effectively deal with malnutrition. In partnership with other organizations, UNICEF ensured that a programme called “positive deviance” was implemented in Burundi, where individuals in the community assist in

encouraging a behaviour change that solve social problems. Volunteer “light mothers” conduct training sessions with other parents in the community, showing them how to prepare nutritious, balanced meals from affordable products such as beans, rice and vegetables. UNICEF (2016) reported that one of the mothers who attended the training said that before the training, her 2-year-old son had a poor appetite but had gained weight since she has been taught to make nutritious meals. UNICEF and their partners further suggest that if “positive deviance” is linked with social protection and food security, it will result in a more comprehensive and sustainable intervention for poverty-alleviation.

Gram et al. (2019) describe the results of a study to improve low birth weight in rural Nepal, India, where 21% of families are regarded as “severely food insecure”, and females experience high degrees of undernutrition. In this study, women's group facilitators, their supervisors and community members persuaded and compelled recipients of UCTs to spend the cash in accordance with criteria set by the group. To encourage, what was perceived to be the correct use of the UCT, group members would informally criticize families who supposedly used the UCT incorrectly. Thus, the grant recipients would feel ashamed if their families and community found out that they spent the UCT differently from its intended purpose. “To describe women's fear of both personal and social feelings of guilt and shame, supervisors cited the Nepali proverb ‘It is not the tiger of the forest that eats you alive, but the tiger of your own mind’” (Gram et al., 2019: 14). This intervention by the group members resulted in significant progress in the purchase and consumption of the necessary nutrients and dairy foods for pregnant women. The researcher believes the success of “light mothers” with primary-carers in Burundi and the achievements of community-based persuasion interventions in Nepal, should encourage social policy-makers in South Africa to invest more resources in nudge initiatives to improve the effectiveness of CSG.

3.8. Chapter Summary

The review of relevant literature in this chapter, commenced with a discussion of different cash transfer models used globally, drawing on important lessons for the CSG. The literature review then presented the context of the CSG in South Africa and how it is operationalized in this country. The next two sections of the literature review included a synopsis of the primary purpose of the CSG in South Africa, where the aim of the CSG to “follow” and benefit the child was emphasized, as well as a description of its achievements and limitations. This chapter culminated in an analysis of strategies such as conditionality, “labelling” and “nudging” that could be used to improve the effectiveness of the CSG.

CHAPTER FOUR

RESEARCH DESIGN AND METHODOLOGY

4.1. Chapter overview

Chapter Four presents the research design and methodology used in this research study and outlines the procedure that was followed during the empirical fieldwork stage of the investigation. It focuses on the qualitative research design that was used in this research, and provides a description of the purposive sampling method, data collection and data processing and analysis. It concludes with ethical considerations and the challenges of this study.

4.2. Research approach

This study utilized a case study research design, using qualitative data derived from both primary and secondary sources. Qualitative research refers to a method that broadly examines social action. This type of research will normally use qualitative approaches to identify the study participants e.g. snowball sampling; to collect data e.g. semi-structured interviews and to analyse data e.g. analytical induction (Babbie and Mouton, 2011). Qualitative research, in the opinion of the researcher, is a suitable research method for gaining a thorough understanding of the experiences and perceptions of CSG recipients and Key Informants of the CSG. By taking a qualitative approach, the researcher tells the everyday experiences of CSG recipients and the explanations offered by policy-makers on the purpose, achievements, and effectiveness of the CSG. Semi-structured interviews and focus group discussions were used during this study.

4.3. A Case Study Design

Several definitions of case study research have been documented. According to the CIRT (2018) case study research is a thorough, exhaustive study of a person or a group of people or a small group of people. This research is normally qualitative in nature, culminating in a detailed account of behaviour or experience. Case study research is also defined by Farquhar (2012:5) as an “empirical enquiry that investigates a contemporary phenomenon in depth and within its real-life context”. Most of the interview and group discussion questions used by the researcher were “what”, “why” and “how” questions. The researcher could not predict how CSG recipients or key informants would respond during the interviews. According to Yin (2018) case study research is most relevant when the main research questions are “why” or

“how” questions, one has little control over behaviour of research subjects or events and the study focus is contemporary. The relevance of the case study research method to conduct an in-depth study of the problem relating to CSG in Caledon is confirmed by Farquhar (2012:5) and Yin (2018). Several challenges and concerns of the case study as a research method are also presented by Yin (2018). These include the need to be extra meticulous to avoid the common tendency during case study research of allowing vague and confusing evidence to influence the findings; the risk in making generalized assertions from one case study, and case studies may take too long. The researcher prevented the above challenges during the study in Caledon by (i) asking probing questions during the interviews and group discussions to get adequate information and clarity (ii) obtaining opinions and views on the study, from individuals of different racial, language and gender groups and (iii) doing thorough preparation for each interview and group discussion.

4.4. Data Collection Methods:

4.4.1. Primary Data: Qualitative Methods

The researcher only used qualitative primary data collection methods. These consisted of (i) individual, in-depth semi-structured interviews (1) with CSG recipients (=household case studies) and (2) with stakeholders (=key informants) and (ii) focus group discussions with CSG recipients.

To answer the second research question, the researcher reviewed the comments made during interviews conducted with policy-makers and other key informants (primary sources). In dealing with the third research question, the researcher used ideas based on a review of comments made during interviews conducted with key informants, individual CSG recipients, as well as focus group discussions with CSG recipients. The researcher considers it important to examine the challenging experiences of CSG recipients as these relate to the CSG and to present new ideas that could eradicate those negative experiences.

(i) *Semi-structured individual interviews with CSG recipients and Key Informants*

For individual interviews with CSG recipients and key informants, a series of semi-structured interview questions were designed for each respondent. According to Doyle (2018), a semi-structured interview is a gathering where the interviewer does not ask questions in a formal, rigid manner but asks open-ended questions and encourages discussion with the interviewer, instead. Case (1990) argues that a semi-structured interview is less invasive as it creates a more

relaxed, informal atmosphere, where the interviewee can also ask questions of the researcher. A list of open-ended and closed questions was also used for individual interviews with CSG recipients and key informants. One of the main reasons for the researcher using these methods was to ensure that answers are reliably aggregated and that comparisons were made with confidence between respondents. All interviews were face to face. Each interview with CSG recipients lasted about 40-50 minutes and 45-60 minutes with key informants. A total of 10 CSG recipients were interviewed, as well as 6 key informants. The researcher conducted interviews with key informants who communicate with CSG recipients on a regular basis and have an in-depth understanding of the South African CSG. ODEC, as well as Badisa, Vriendelike Voeltjies Crèche and Caledon Health Clinic, frequently interact with CSG recipients and their children in Caledon. An interview was also conducted with 1 senior SASSA manager that works with CSG recipients in Caledon and 1 senior manager at the SASSA regional office in Cape Town. Other key informants interviewed were David Neves, Senior Researcher at PLAAS, the University of Western Cape and Michael Ansell, CEO of Intellimali Pty Ltd. Stratifying the sample of CSG recipients by language and ethnicity avoids stereotyping and stigmatizing people and was, therefore, significant for this study.

The primary purpose of the interviews with CSG recipients was to determine how the CSG has impacted their children. The interviews also sought to establish how the CSG could be more effective. CSG recipients were asked to give their opinion on what they think the primary aim of the CSG, what they pay from the CSG that they receive, who should benefit from the CSG and has the CSG improved their child's life. In addition, CSG recipients were asked to give their opinion on how they think the CSG could be better delivered, to have a bigger impact on their and their child's life and what type of support they need from the State to improve their and their children's lives. The researcher recruited individual interview participants through ODEC.

The purpose of the interviews with key informants was to get their perspective of the purpose, strengths, and weaknesses of CSG in South Africa and how these grants can be delivered more effectively. Leaders of NPOs in Caledon who work with grant recipients, were asked if they think the CSG is reducing poverty in Caledon, and what they think the understanding of CSG recipients in Caledon is about how the CSG should be used, how the CSG recipients are using the CSG and what the State could do differently to ensure the CSG programme is more effective. SASSA managers were asked *what social policy makers in South Africa want to achieve with child social grants*, (the first research question) and if they are achieving what

they want to with the CSG. They were also asked about the types of services rendered and guidance and support given to CSG recipients, what their opinion is on interventions that could have a greater impact on CSG in Caledon and on training and support for CSG recipients from government.

(ii) Focus group discussions (FGD) with CSG recipients

Baral *et al.* (2016) defines a focus group as a gathering of individuals from similar backgrounds or experiences to talk about an area of interest that they have in common. In this form of qualitative research, questions are asked about their perceptions, beliefs, opinion, or ideas. According to Humans of Data (2017), a focus group discussion is a semi-structured interview, where the interviewer asks questions to prompt a response and stimulate discussion related to the questions. Discussions were facilitated with 2 focus groups, consisting of 6 and 7 CSG recipients respectively, from different racial (black Africans and Coloureds) identities in each group. The primary purpose of the focus group discussions was to gain insight into the experiences, perceptions, and beliefs of primary care-givers about the CSG. Most of the questions were open-ended and probing, to create an environment where participants felt encouraged to share their opinions, perceptions, and experiences about the study under investigation, freely.

(iii) Sampling and selection of Participants

Purposive Sampling was used in the selection of research subjects. According to Palys (2008), purposive sampling implies that the manner in which sampling is carried out is directly linked to what it wants to achieve and is guided by the context of the research study. Laerd Dissertation (2012) states that the primary aim of purposive sampling is to concentrate on specific features or interests of a population that will allow the researcher to answer his or her research questions. The researcher selected the sample that was studied out of choice and purpose. The research was conducted in the Caledon District, in the Western Cape and the research subjects were confined to recipients of CSG in lower income households, staff, and management of SASSA offices in the Western Cape, as well as other key informants such as leaders of relevant NPOs. The researcher contacted the SASSA office in Caledon, to establish that the total number of recipients of CSG in lower income households in the Caledon District is currently 1758. This not only indicates a strong justification for selecting this area to conduct a study on CSG but also provides a good basis from which to select participants for the research study. A sample of CSG recipients in lower income households was selected based on them having similar

characteristics (all CSG recipients) because such characteristics are of importance to the researcher (Laerd Dissertation, 2012). In the researcher's opinion, 10 individual CSG recipients and 2 focus groups of 6 and 7 CSG recipients, respectively, as well as 6 key informants, would be adequate to gather relevant and reliable data for the purpose of this study. A further criterion for selection was that research subjects must be Afrikaans and English-speaking individuals from different race groups, i.e., coloureds and blacks. The SASSA senior manager responsible for the Caledon District said that white CSG recipients and male recipients in low income households in Caledon constitute less than 1% of the total number of recipients in this category. The researcher's assistant in Caledon could not find male nor white CSG recipients who were available for an interview or to participate in the FGDs.

Given the racially-divided poverty context of South Africa, where African people were affected the most by unemployment and high levels of poverty, it is the researcher's belief that most English-speaking Xhosa CSG recipients from low income households are generally poorer than most Afrikaans-speaking Coloured low-income households. Because of the very real possibility that English-speaking Xhosa CSG recipients of low-income households in Caledon are economically worse off than their Afrikaans-speaking counterparts, it was worth examining whether English-speaking Xhosa people will use the CSG differently from the Afrikaans-speaking Coloured people. The vast majority of people in the Caledon district is Coloured. This explains why Xhosa-speaking CSG recipients in the sample were less than Afrikaans-speaking Coloured people.

The challenges around language were overcome by having the list of interview questions available in Afrikaans and English. As the community in Caledon is predominantly Afrikaans speaking and the researcher can converse in Afrikaans, the interviews and discussions were conducted in Afrikaans, with English translations, where necessary. The researcher is fluent in English and Afrikaans and was therefore able to deal with questions and concerns that were raised during the interviews and discussions. The researcher asked all the questions and took notes during each interview. An audio recording was made of every interview, after permission was requested.

4.4.2. Secondary Data

To answer the first research question, the researcher reviewed relevant documents (secondary sources). For example, the chairperson of the government committee that proposed the CSG in the 1990s, Francie Lund, wrote a book published in 2008 that gave insight into why social policy should consider themes such as universalism and selectivity, varied and changing family structures and a comprehensive, multi-sectoral approach to social development.

To answer the second research question, the researcher conducted a review of the existing CSG evaluations (secondary sources). An evaluation of the uses, implementation and challenges of the CSG was compiled for the DSD, SASSA and UNICEF by the Community Agency for Social Enquiry in 2008. The first qualitative evaluation of the CSG, undertaken by the DSD, SASSA and UNICEF, was completed in 2010. Another CSG evaluation report was prepared by the DSD, SASSA and UNICEF in 2012. This report submits findings of an evaluation of how the availability of the CSG impacts the well-being of children. All these evaluations summarise the research conducted in low-income communities in South Africa, where investigations were done on how the CSG is used in the home of the CSG recipient; how the primary care-giver experienced the application process and payment system; and the reasons for certain primary care-givers not receiving the grant. These evaluations are quite useful for the purpose of this study. To answer the third research question, the researcher investigated the value that “conditional cash transfers”, “labelling”, “nudging” and “BCC”, could add to make CSG in South Africa more effective. Insights into these concepts are provided in Chapter 3 of this study.

4.5. Qualitative Data Analysis

“The first step in qualitative analysis is to develop thorough and comprehensive descriptions of the phenomenon under study. Contexts are important as a means of situating action, and of grasping its wider social and historical import. This can require detailed descriptions of the social setting within which action occurs” (Dey, 2005: 32-33). The researcher started by processing the data. After all the interviews and group discussions were completed, the field notes were typed out and the audio-recordings transcribed. According to Burgess (2005), the second step, which entails classifying the data, is focussed on attaching clarity and meaning to the data. The analyst must interpret and analyse the data and has the responsibility of developing an account that is meaningful and meets requirements. Qualitative data obtained

from semi-structured interviews, focus groups discussions, were transcribed, tagged, and coded by the researcher, who then analysed, described, and classified the data using software Atlas.ti. In describing the data, careful thought was given to the context and social situation. The researcher also translated all the notes and transcribed interviews from Afrikaans to English. The third step in analysing qualitative data is to determine how the different themes and components are connected and relate to each other. Dey (2005) says that once the classification of the data is done, the researcher can check for uniformity, deviations, and singularities in the data.

After the data was analysed and classified, the researcher identified themes and connections by looking for word repetitions, indigenous terms, and key words in the context of CSG. The researcher also compared the data and looked for information that was missing. Lastly, the researcher looked for shifts in responses on the same question or issue and for words and phrases that indicated similarities and connections.

4.6. ETHICAL CONSIDERATIONS

All information received from respondents in this study through interviews will be treated with confidentiality and integrity. Fouka and Mantzourou (2011) argues that anonymity is ensured when the participant's identity cannot be associated with personal responses and confidentiality refers to the manner in which the researcher manages personal information in order to guard the participant's identity. This means that, with the permission of the respondent, only the researcher and those who have official authority to assess the research, will have access to respondent information. The researcher will not reveal the identity of the participants and will safeguard the confidential information obtained during the study.

Informed consent is the major ethical issue in conducting research. "Informed Consent is a voluntary agreement to participate in research. It is not merely a form that is signed but is a process, in which the subject understands the research and its risks" (Shahnazarian et al., no date). An information sheet was given to all respondents in this study and they were required to sign a consent form before partaking in the study, to protect their privacy and confidentiality.

Electronic research material (documents and audio interview recordings) will be stored on a suitable computer in the administration office of the ISD. This research material will be password protected. The hard copies of completed interview questionnaires and focus group responses will also be stored in a secure Safe at the ISD, UWC. Only my supervisor, Dr Stephen Devereux, and I will have access to the research data.

After 5 years, all completed interview questionnaires and responses from focus groups will be shredded and recycled. The documents stored on a computer hard drive will then be permanently deleted.

4.7. Challenges of this study

One of the challenges that the researcher encountered during this study was the difficulty to ensure that his assistant in Caledon, clearly understood and remained fully committed to his pre-field work role. After much persuasion from the researcher, the contact person agreed to change his own work schedule to carry out all his pre-field work functions.

A second challenge was the difficulty in having to find suitable replacements for 3 participants who did not arrive for the interviews, despite having agreed to do so. However, with the support of his assistant, the researcher was able to locate other members of the community who were willing to participate. Also, due to the time poverty experienced by primary care-givers in rural communities, a few participants did not arrive at the time agreed for their interview. A high level of patience was required from the researcher, who eventually completed the interviews when the participants arrived later in the day. A third challenge was the withdrawal of one of the key informants in Caledon on the day that the interview was to be conducted. Fortunately, the researcher was able to find a suitable replacement, with whom an interview was conducted the following day.

A fourth problem arose when a few of participants appeared somewhat insecure about the interview process, resulting in them being hesitant to participate. Also, despite having received the information sheet and consent form, some of them struggled to fully grasp the meaning of certain sentences on these forms because of their limited education. However, once the researcher explained the purpose and consent agreement in simple terms, they had a better understanding and were happy to proceed with the interview.

With the fifth challenge, some of the participants found the interview mentally draining because of their limited education and lack of exposure to lengthy interviews. This made it difficult for them to concentrate for the duration of the interview. Again, the researcher had to simplify the wording of the question, which they then understood much better.

The researcher was confronted with a sixth challenge relating to language barriers during the focus group discussions, as the participants were Afrikaans, Xhosa, and English speaking. In

anticipation of this problem, the researcher prepared the discussion questions in English and Afrikaans and with the assistance of a Xhosa-speaking translator, everyone understood the questions. The language barrier, nevertheless, made discussions difficult and time-consuming, resulting in some participants talking less than others during the discussions. The researcher constantly reassured the whole group that their opinions and comments were important and appreciated.

4.8. Chapter Summary

This chapter confirmed that the research study utilized a case study research design, using qualitative data derived from primary and secondary sources. The research methodology used, including the primary and secondary data collection methods, were also presented. Purposive sampling was used to select participants for the qualitative research and the sample size was specified. The chapter culminated in a description of the ethical requirements, as well the challenges of the study that were met by the researcher.



CHAPTER FIVE

IMPACTS OF CHILD SUPPORT GRANTS

5.1. Chapter overview

This chapter shows how this study utilised the ToC to establish how primary care-givers use the CSG and comprehend their life changing experiences after receiving the CSG. The chapter also describes the relevance of the Social Contract Theory to the CSG, by presenting an analysis of the responses from CSG recipients and other key informants, who see the CSG programme as a social contract between the State and its citizens. The importance of the Nudge Theory to CSG, is also presented. What follows is a presentation of participant views, which are derived from the primary data collected in the study. It needs to be pointed out that these are views of some participants and not hard findings based on conclusive evidence. In addressing the third objective of this study, this chapter will report on these opinions aligned with what social policy makers want to achieve with the CSG. Participant responses relating to the main purpose of the CSG, the reasons primary care-givers believe the CSG is for them, how the CSG affects the child's well-being and poverty, who the recipient of CSG should be and how primary care-givers understand the utilization of the CSG, are summarised. In dealing with the fourth objective in this chapter, participant views are presented relating to current experiences with the CSG and what policy makers are achieving. These statements are centred on participant opinions about SASSA's service offering, the child's basic needs, monthly spending and purchases, the effect on the child and family, the influence of loan sharks, the misuse of the CSG and government's role in creating awareness on the use of the CSG.

5.2. Application of the Theory of Change to the CSG case study

As mentioned earlier in this study, Anheier et al. (2005) list three elements that are aligned to a ToC: (1) who you are helping (Population), (2) plans and tactical approaches through which desired outcomes will be achieved (Strategies) and (3) final results that you would like to achieve (Outcomes). In applying the first element to this CSG "case study", the researcher selected CSG recipients in low income households (Research Design and Methodology-Chapter 4), as the target population. With reference to the second element, the strategy used to achieve the desired outcomes of this study was the application of a case study research design, using qualitative data derived from both primary and secondary sources. This included semi-

structured interviews and focus group discussions with CSG recipients, as well as interviews with key informants. The final results, referred to in the third element, relate to the achievement of three specific outcomes: (i) determine social policy makers' original aim with the CSG (ii) ascertain what they are currently achieving through the CSG and (iii) identify proposals that could ensure a greater impact for CSG. What this study also exhibits is how the CSG "case study" analysis demonstrates a sound understanding of the relationships among the three key elements.

To eliminate the effects of the shortcomings mentioned in Chapter 2, the researcher used the ToC in conjunction with the Social Contract and Nudge Theories, when analysing the context of and implementing a data collection strategy for this study on the effectiveness of CSG. Corlazzoli and White (2013) list a few interventions - of which the researcher will mention two- that could alleviate the effects of ToC limitations. Firstly, by formulating the inter-linkages of the different theories of change and other relevant theories and assumptions, to develop a data collection strategy that will enable one to find accurate results. Secondly, by using the ToC in conjunction with other tools, such as data collection strategy and context analysis.

5.3. Demographic information about the participants

The sampling criteria i.e., low income households, Afrikaans, and English speaking, coloured and black race groups, conformed with the characteristics of the study participants. All 23 CSG recipients who participated in the study were female and primary care-givers to their children. The participants who were CSG recipients differed in marital status, education, employment status and early registration of their children for CSG. Four of them were English-speaking. 2 out of the 23 primary care-givers were married and the rest were single. The children of the participants differed in age from 2 years to 17 years. Most of the CSG recipients registered their child for a CSG when the child was 2 years old or younger. The majority of primary care-givers either had full-time or part-time jobs. What follows in the next section is a record of participant views based on an assessment of the use and impact of the CSG in the Caledon District.

5.4 Third Objective: Determine what policy makers want to achieve with CSG

To address this objective, participants were asked questions relating to the CSG's primary aim, the impact of the CSG on the well-being of the child and on poverty, who the recipient of CSG should be and the recipient's understanding of how the CSG should be used. Literature in Chapter Three of this study (DSD, 2012), confirmed that CSG recipients in South Africa have a positive effect on the child's well-being and on poverty, which is what policy-makers want to achieve. In addition to the views of Key Informants, the opinions of CSG recipients are also important to verify what government wants to achieve. This, in the opinion of the researcher, is premised on the primary care-giver's understanding of local conditions, and regular interaction with SASSA officials in respect of the CSG. This allows the CSG recipients to provide credible inputs on what policy makers want to achieve in terms of the CSG's impact on the child's well-being and on poverty in their communities. In the view of the researcher, it is imperative to place a high premium on contributions of research participants. According to Amanda Gouws, cited in Jansen and Walters (2020), it is important to respect and value the inputs of respondents as 'subject participants' and not as 'research subjects'. Their role in co-constructing knowledge and informing the work of policy makers, must be acknowledged.

5.4.1. Purpose of CSG

Most participants in the interviews said the primary purpose is to help the mother and her children. "To help children and give them a better life." (Participant FG1). This comment was reflective of the group's opinion. A few participants said that the CSG is to reduce poverty:

"It should be to reduce poverty because if you use the money for the right purpose you can buy food, warm clothing for the child", said Participant IP1. This comment corresponds with views in literature by Lund (2008) and Mokomo (2008) that the CSG is specifically aimed at addressing the problem of poverty. Every child has the right to be protected from poverty and given a good quality of life and CSG therefore plays a critical role in this regard.

Most key informants believed the CSG is to benefit the child. Others said that the CSG has a broader purpose that includes agency and reducing poverty. Participant KI2: SASSA said:

"To ensure that no child goes to bed hungry. This is what the purpose should be. We also need to explore the child's future after 18. Help in the form of other government programmes. Maybe NSFAS support, do not pay for health services at clinics, etc.". What this comment by a SASSA official confirms is that getting the child out of poverty should not only involve cash transfers but also include a collaborative approach in meeting the child's development needs. This

extract coincides with findings in literature by Lund (2008) who argues that the primary purpose of the CSG is for the State to “keep its eyes on the mobile child” and find ways to support the child through the primary care-giver.

5.4.2. CSG and poverty reduction

On whether the CSG is reducing poverty, most of participants in the individual interviews did not agree, some were unsure, while a few supported the idea.

“No because it’s not enough. Many children still go hungry to bed, bare feet, destitute, even with the CSG”, said Participant IP1.

Some of the Key Informants believed the CSG is not reducing poverty, although a few said that CSG does contribute to poverty reduction. Participant KI4: NPO said “I will say no. The child gets the CSG, but the circumstances of the child is not improving. The grant is not being used properly by the mother.” These negative comments illustrate the perception that the CSG’s minimal amount, as well as misuse of the grant renders the CSG ineffective in reducing poverty. It therefore suggests that poverty reduction might not be achieved without a collaborative approach referred to earlier.

Other participants had a different perspective and a more positive take on the matter. This is what one participant had to say:

“I think CSG is reducing poverty in SA because some CSG beneficiaries have nothing and with CSG some of the child’s needs are met. I have friends who are unemployed who receive CSG, who say they can’t wait for end of month to pay for school transport, stationery, etc.” (Participant KI2: SASSA). This comment by SASSA is in line with research done by DSD (2012) and Millions Saved (2015) stating that cash grants directly reduce poverty of the most vulnerable people. The comment confirms the value of CSG in reducing poverty and building human capital. It is vital that policy makers are aware of the value of CSG but also take cognisance of shortcomings that need to be addressed to improve its overall effectiveness.

5.4.3. Well-being of children

Most of the participants in the individual interviews, the FGD participants, as well as the key informants said that the CSG is important for the wellbeing of the child. One participant had this to say:

“I think it does. If it is used for the intended purpose then yes, it will benefit the well-being of the child.” (Participant KI1: SASSA). Another participant supported this by saying:

“The CSG does have a great impact on the well-being of child; it’s a solution to help with food and going to school. That is DSD. It is their role.”, said Participant KI2: SASSA. This comment indicates that the CSG contributes to the child’s well-being in respect of his or her food security and education. The participant’s opinion corresponds with findings in literature by Patel et al., (2017) and Coetzee (2013) that CSG is an important social investment in children’s well-being. Nevertheless, it is worth noting that, despite the significant contribution of CSG to the well-being of the child, most children in South Africa are still living in poverty. A greater impact on child well-being therefore requires holistic interventions (Patel et al., 2017).

The social contract referred to in this study, also relates to the well-being of the child. Rouse (2018) describes a social contract as an agreement that governs the behaviour of individuals and organizations within a certain context. The White Paper for Social Welfare (1997) and the Social Assistance Act No 13 of 2004’, speak about the co-responsibility of the State and its citizens to ensure that the social security system is successfully implemented. In relation to CSG, this means that CSG recipients have an equal responsibility to keep their part of the social contract by using the grant responsibly and to ensure that their children benefit from the CSG. A few participants made comments during the interviews, which correspond with the White Paper for Social Welfare (1997) and the Social Assistance Act No 13 of 2004’. This is what some of them had to say:

“Education is a basic right for the child and if you violate that right then surely the Department must step in... Education, Social services, etc.” (Participant KI1: SASSA).

“We also have a customer care charter which outlines the beneficiary’s rights. We also tell them the grant must not be ceded but used for the right purpose...Our mandate as SASSA is to pay the grant. We are 3 partners who are jointly responsible for the child’s development i.e., DSD, SASSA and NDA” (Participant KI2: SASSA).

“She will know if I don’t look after my child’s well-being, I will lose the grant” (Participant KI4). What these comments emphasize is not only the obligation of government and primary care-givers to care for the child but also consequences when these requirements are not met. This social contract provides a sound basis for social security and poverty alleviation.

5.4.4. Recipient of CSG

In response to questions relating to who the CSG should be for and whether the CSG should also be for unemployed people in middle and higher income groups, the majority of primary care-givers in both individual interviews and FGDs, were of the view that it is for the child and for all unemployed people (whether from poor, middle or low income households) who are responsible for taking care of the child. Participant FG1 said “the person where the child stays i.e. parent, guardians that cares for the child”. This comment was reflective of the group’s opinion.

These were comments made about who should receive the CSG:

“Only poor unemployed should receive it.” (Participant FG1). A view that was reflective of the group’s opinion.

Most of the key informants said that the CSG is for the primary care-giver and the child. Most of them also said that it should be for all unemployed people. One participant said:

“The grant must be for the child and the mother or the grandmother who looks after the child. If you are single parent even if you're in middle or high-income group, you should get the Grant because you struggle and there is still a lot to do during the first year after their partner has died”. (Participant KI3: NPO). This statement corresponds with literature by Republic of South Africa (2014) and Agüero, et al (2006) who state that the CSG is for the primary care-giver and the child must also live with the primary carer. The researcher supports the view that the primary care-giver, not necessarily the mother, receives the CSG. However, a “means test” should be used to determine whether the primary care-giver needs the grant and not merely distribute it to all unemployed primary care-givers.

Most participants said that the child alone must benefit. Participant FG1 said “use it on the child; many children go school, so help them with school needs, clothing food and transport to go to crèche”. This comment was reflective of the group’s opinion.

There were a few participants who said that the family could also benefit provided that the child benefits, as expressed by participant KI2: SASSA.

“First take care of the child but that does not exclude buying electricity and a blanket that will warm the mother and child. ... if the mother is sick, she could buy medication for her from the CSG because if the mother is sick who will take care of the child”. The opinion expressed here

indicates that the CSG should be used to benefit of the whole family if the child benefits as well. These views also correspond with researchers such as Neves (personal communication, 09 July 2019), who believe that the primary purpose of the CSG is too narrowly intended, i.e. consumption purposes for the formally designated recipient. He also asks whether the benefits would be greatest when used within the context of beneficiaries' households, as part of larger household livelihood strategies. The participants' comments also coincide with opinions in literature by Ferguson (2015) who believes that people should be allowed to make their own decisions as to how these funds could be utilised to sustain their livelihood. He proposes a guaranteed basic income for all South Africans irrespective of age, employment, and gender, as a more effective poverty alleviating programme than existing social grants. The researcher (Mark Volmink) is of the view that a basic income for all could have merit in addressing poverty effectively. However, this needs further research and sufficient supporting evidence, with specific reference to the child's right to social protection.

5.4.5. Told to use CSG in a certain way

Almost all the participants in the individual interviews and focus group discussions said that nobody advised them to use the CSG in a particular way. Participant IP5 said "Not really, I did it myself". Other comments included:

"Nobody gets advice about this" (Participant FG1). This comment, that was reflective of the group's opinion, raises serious concerns about the apparent lack of guidance for primary care-givers from SASSA about the use of the CSG. However, it should be viewed against statements by a SASSA participant in this study, who claims that SASSA is duty-bound to render high quality service to grant recipients in terms of their service charter. Nevertheless, it is a part of SASSA's service offering that is worth investigating. Although participants in the FG1 blamed SASSA for poor service in respect of guidance on the use of CSG, other participants in FG2 below, shared favourable comments about SASSA'S service to CSG recipients. These divergent views are noteworthy but it, nevertheless, highlights the need for SASSA to evaluate and improve the level of their service to ensure that all CSG recipients receive top quality advice and support, consistently.

5.4.6. Understanding the use of CSG

In response to the question relating to the CSG recipients' understanding of how the CSG should be used, most participants were of the view that most primary care-givers believed that it is meant for them. Participant KI2 said "Because we're dealing with money, some people

feel entitled to that as “my money”. This is the attitude of some recipients. SASSA must leave me to decide how to use the grant” This key informant was referring to what some CSG recipients are saying, which is an indication of what certain recipients think about how the CSG is used. Another participant said:

“There are some cultural groups in Caledon that think that the purpose of the CSG is to go and have a party with the money and to misuse the money. Then there are other cultural groups in Caledon that think the purpose of the Child Support grant is to use that money sparingly”. (Participant KI5: NPO). When pressed on this issue later in the interview, the participant said that he was referring to black Africans, as “some cultural groups”. Being Coloured and offering a very heart-felt response, my sense is that this individual’s comment on “other cultural groups” was with reference to Coloureds. This comment confirms that pejorative attitudes are expressed by certain groups towards others, which suggests that there is no solidarity view around CSG i.e. “we are right, but they are wrong, lazy and wasteful”. It is uncertain whether this participant’s view is based on racism or evidence. However, this remark is indicative of the polarisation of views and the issue of positionality that exist in our communities, from which expressions such as “we” use the money well’ but ‘ “they” use it badly’, often derive. It overlaps with information from sources such as Dictionary.com (2018) and IGI Global (n.d.) who describe positionality in terms of the social background that forms your identity in terms of race, class, gender, sexuality, and how it creates a biased outlook on society? The participant’s opinion also relates to views by novelist Chimamanda Ngozi Adichie, who speaks about the danger of a single story. Adichie (2009) argues that our cultures comprise several corresponding stories and cautions that if we only listen to a “single story” about another individual or nation, we risk a critical misunderstanding. It is important that NGO leaders – designated to support CSG recipients- are aware of the possible negative impact that positionality has on their interaction with primary care-givers. Policy-makers should also be mindful of how positionality influences their decisions on the purpose, qualifying criteria, and management of CSG.

5.5 Fourth Objective: Social policy makers’ achievements with CSG

To determine what policy makers are currently achieving with the CSG, participants were asked several questions aligned to the following issues: Application process and SASSA service; the child’s basic needs; payments from CSG; monthly collections and spending; CSG

for recipient, child or family; impact on child and family; loan sharks; spending CSG well or wasting it; State sensitizing - how CSG should be used.

5.5.1. Application process and SASSA service

In response to questions relating to the application process, most of the participants in the interviews listed the following documents that were required: Primary care-givers ID book, the child's birth certificate; clinic card and proof of address. This corresponds with literature by Western Cape Government (2018) that lists the primary care-giver's identity document, UIF "blue book" and the child's birth certificate, as some of the documents that are required at application.

Almost all of them said that the application is quite easy and does not have to improve. Participant IP 5 said "It can't be easier because it's already easy now. In the past you had to wait 3 months, now you wait a month only".

Very few participants said that the application process was difficult. One participant had this to say:

"Not sure how it works now; maybe make a bit easier e.g. proof of address and certification at police station are difficult to get", said Participant IP4.

Almost all the participants in the individual interviews and FGDs were of the opinion that the service that they received from SASSA when they applied for the CSG was good and that this was also the view of the community, in their opinion. Participant FG2 had this to say: "People feel that SASSA service is good". This comment was reflective of the group's opinion. Another participant supported this by saying:

"For me, we try to stick to the charter when we serve the people. The charter says the right to access, we will strive to serve you in your own language, we are not without fault, but we try to improve". (Participant KI2: SASSA).

These comments are made with reference to the Service Charter of the DSD. This charter outlines the responsibilities of the DSD's staff to render high quality social services to communities, which include child care and social protection services (DSD, 2016). This implies that CSG recipients should expect service of the highest calibre from SASSA staff,

which bodes well for the primary care-giver and the child. CSG recipients should hold SASSA accountable to the charter. It is worth noting that none of the primary care-givers mentioned this during the interviews, which suggests that many primary care-givers are not aware of the charter.

There were a few participants who were not entirely happy with the service that SASSA renders, as expressed by Participant KI6: NPO:

“Sometimes SASSA gives the people incorrect information about our side of the work. e.g. the child stays with the grandmother, who applies for grant. Then SASSA tells the grandmother to get a letter from us that the child is in foster care. But foster care is a different matter altogether. With a different and not an easy process”. The responses above indicate that, while SASSA possibly need to improve certain areas of their services, most CSG recipients seem to be satisfied with the level of service they receive.

5.5.2. The child’s basic needs

In response to being asked if the CSG allowed them to meet their child’s basic needs, most participants in the interviews and FGDs said ‘yes’. Participant IP5 said “Yes; it is very helpful because I can make many changes e.g. their school transport, kimbies and food for children”.

There were a few participants who indicated that they were unable to see to all the child’s basic needs. This participant said:

“Not really because the money is up later, and I can’t buy other needs for my child because the money is too little” (Participant IP7). This extract corresponds with findings in literature by Devereux and Waidler (2017) who argue that CSG are not sufficient to meet the child’s nutritional needs because these grants are often shared among household members. Mudzingiri et. al (2016) also highlight findings from a study conducted in the Eastern Cape where 70% of CSG recipients were dissatisfied with the amount of the CSG. A higher CSG will place an additional financial burden on the State but could have significantly better and far-reaching benefits for children’s health and education, as well as human capital development.

5.5.3 Participants' usage of CSG

(a) Perceived positive usage of CSG

Most participants claimed that CSG recipients used the CSG positively on items such as food and clothing for the child, funeral policies, debt, and the child's school related expenses. These are some of the responses and perceptions relating to perceived positive spending of CSG:

"I pay for the taxi, clothes, food; my funeral policy for my children" (Participant IP6).

"I buy food, pay debt, meat, school fees" (Participant IP3).

Most of the key informants do not believe that the grant recipients are spending the bulk of the CSG on items such as debt, transport, and cigarettes and most of them were opposed to spending it on these items.

"I'm sitting here with 200 children and by the 1st or 2nd of the month when I see the parents pay (school fees and school needs) and I realise they are using the grant well" (Participant KI3: NGO). These comments suggest that many CSG recipients are fully committed to using the CSG to invest in their children's education, as well as taking care of the personal needs of their children. An analysis of the above comments and findings in literature indicate that the CSG is being spent well by a large percentage of recipients.

Almost all the participants said that they spent most of the CSG on food and school expenses. This is what a few of the participants said:

"I spend R600 on food, R250 on school fees, nothing on cigarettes and transport and R400 on debt" (Participant IP9).

"I spend R600 on food, and R250 on school fees" (Participant IP8).

The above comments - made by CSG recipients who receive a CSG for 2 children - suggest that there are primary care-givers who spend about 70% of the CSG on food. This is a very positive indicator of the CSG's contribution to food security and poverty. When asked how much they spend directly on their child, most participants stated that they spent almost all the CSG funds on the child. 2 participants made these comments:

"100% of CSG on my children" (Participant IP1).

“The whole amount on the 2 children, R840” (Participant IP3).

These participant responses correspond with findings in literature by Khosa, and Kaseke (2017) and Hunter and Adato (2007) that the bulk of the CSG is used to purchase food, clothes, school requirements and medication for children. According to Grinspun (2016) a recent study confirmed that the CSG was strongly linked with increased spending on food and a decline in the expenditure on “adult goods” (e.g. alcohol and cigarettes). This evidence was more prevalent the longer the CSG was received. It also validates the role of CSG in reducing child hunger.

(b) Perceived negative usage of CSG

Participants also had concerns about the perceived negative use of CSG by primary care-givers. Most of the key informants said that some of the CSG recipients use the CSG to pay for things other than the child’s needs. These are some of the perceptions that participants have relating to negative spending of CSG:

Participant KI2: SASSA said “We are also aware that there are young mothers who see to their needs first. For them, the grant is used to do their hair, buy alcohol, and electricity for the house”. Another participant added:

“They spend it on alcohol and drugs and go to pubs and entertainment places, while children are standing outside these places...but between 60-70% spend it well” (Participant FG2). This comment was reflective of the view of some group participants, while the rest were unsure.

“In my experience many parents complain that they don’t have money for food and milk but the SASSA grants are wasted at the canteen... I’d say between 30-40% of parents spend their CSG well.” (Participant KI4: NGO). The extracts above are in line with the findings in literature by Coetzee (2013) who argues that cash transfers are used to purchase other goods that are not only to the benefit of children. DSD, (2011) and Williams (2012) also reported several complaints about the misuse of the CSG on hairdressing, alcohol, gambling, etc. Wasteful spending means food insecurity and inadequate development for children.

An analysis of all the comments relating to “positive” and “negative” spending of CSG, confirm that the perceptions of how CSG are spent by primary care-givers are polarised. Whereas there are those that are of the opinion that most (60 – 70%) primary care-givers spend the CSG well, there are others who believe that a smaller percentage (30 – 40%) make good

use of the CSG. It is also noticeable that CSG recipient participants largely mention “positive” spending of CSG, which indicates possible confirmation bias. It is doubtful that any CSG recipient would share negative uses to a direct question on what they pay from the CSG or how they spend it. Key informants on the other hand, present a balanced perspective on the use of CSG. NGOs and SASSA - who are in regular contact with CSG recipients and their families and are informed by “whistle-blowers” about parents misusing the CSG - are more objective in their viewpoint. These perceptions of grant misuse should be of some concern for policy makers in respect of the effective use of CSG in South Africa. That being said, what the responses and literature above firmly indicate is that, while there is a perception that some recipients are spending a portion of the CSG on “negative” uses, the overall view is that the bulk of the CSG is spent positively by many recipients. This again demonstrates the value of CSG as an instrument of social protection. Other key questions for policy-makers to consider are: “Who decides whether the way a primary care-giver spends the CSG is good or bad? If the primary care-giver, for example the mother, uses some of the CSG to beautify her hair and buy new clothes - is that “negative” spending? Some would say YES. But what if she did this to go for a job interview, and she gets the job and as a result, helps her family out of poverty and off the CSG? Others would say NO – that is a rational investment of the CSG. Again, the issue of positionality (Dictionary.com, 2018 and IGI Global, n.d.) – referred to earlier in this chapter – comes into play.

5.5.4. Receipt and utilization of CSG monthly

Participants were asked several questions relating to the monthly CSG received, amounts spent on specific items and on the child and the types of food purchased every month. Depending on the number of children they have who still qualify for the CSG, most participants indicated that they receive a monthly CSG of between R420 and R1200. Participant IP4 said “R420; I’m a seasonal farm worker”. Another participant said: “R840 for my 2 children” (Participant IP8). These responses indicate that recipients are receiving the correct monthly CSG amount and are collecting the grant monthly, which confirms that SASSA is meeting its mandate of grant provision for social protection and poverty reduction.

When asked what type of foods they bought monthly from the CSG, most participants said that they purchased mealie meal, flour, meat, milk, and potatoes. This participant said: “Meat, tin foods, cereal, milk, yoghurt, wipes, soap”. (Participant IP5). It appears that many recipients purchase nutritious food for their children. This comment is supported in literature by

Glassman and Temin (2016) that the quality and quantity of food types purchased from the CSG has improved the child's nutrition and physical development. This bodes well for the effect on the child's growth and cognitive development. However, cognisance should also be taken of findings by Zembe-Mkabile et al. (2018) and Devereux and Waidler (2017) who argue that the CSG in South Africa is not sufficient to meet nutritional needs. This is an aspect of the CSG programme that requires further research and improvement by policy makers.

5.5.5. Impact on the child and family

When asked about their opinions on the CSG and its impact on the child's life and the family's life overall, the majority of participants said that the child's life has become better but not many were of the view that the family's life improved.

(a) Positive Impacts

Participant FG2 said: "a lot of kids are off the streets because they are being looked after in the house". Other participants said: "...the CSG has improved the lives of young children in Caledon. The reason is that, compared to a few years ago, there are less children who are drug addicts". (Participant KI5: NPO).

"One of my children has reached matric and the other grade 8 from the CSG money" (Participant IP10). These 3 comments suggest that CSG has: (i) reduced the incidence of street children; (ii) had a positive social impact on children and (iii) financed investment by parents in child education which builds human capital and could reduce inter-generational poverty. Support for these comments are also found in literature by Hohmann, et al.(2017) and DSD (2012) who found that children who live in households where the CSG is received are generally taller, healthier and better educated. These participant views suggest that the early receipt of CSG will lead to a reduction in poverty and inequality.

Some participants shared a few success stories. This is what one participant said:

"Currently we have 80 interns at SASSA spread over the districts. They have matric certificates and degrees, and they have been employed here for 12 months. One of them said "I was a beneficiary of the CSG. If it were not for the CSG my family would not have survived and I would not have been here. But because of the grant I was able to eat every day, have a uniform

and able to study and I am grateful to SASSA and that is why I am here to give back to SASSA. The CSG helped when there was no other income at home” (Participant KI2: SASSA).

A few of the participants agreed that the CSG improved the family’s life. Participant IP10 said: “Yes the CSG is for my child but it improves the family’s life because sometimes there’s no food for the family then I can take R100 to buy food for the family”. Again, the success story and comments confirm that CSG provides social security, food security and assists with the development of human capital, thereby contributing significantly to poverty alleviation.

(b) Negative Impacts

Another participant said: “About 30% of children’s lives have improved. On SASSA pay day, what is heart-breaking, is that the children go with their parents to the town and while they are in the bar the children wait outside. When the parents return, they are so drunk that it seems that the children must help the parents to get home”. (Participant KI4: NPO).

(c) No Impacts

Several participants expressed doubts about whether the CSG is making a meaningful contribution to the family’s needs. This is what one of them said:

“No because many children are still at home and not in school and smoking despite the CSG” (Participant FG1). This comment was reflective of the group’s opinion. What is evident from the adverse comment above is that CSG does not always achieve positive social impacts. This is possibly due to the fact that CSG recipients in South Africa are not motivated (“nudged”) or compelled to ensure that their children attend school regularly, as a condition for receiving the CSG. Another reason could be that the guaranteed, unconditional CSG, gives irresponsible parents the liberty to use it only on themselves. What can also be inferred from these comments is the concern that the CSG makes a minimal contribution to the family’s needs. The perceived inadequate amount and freedom to misuse it, appears to render the CSG – in respect of its current purpose - ineffective to meaningfully contribute to the family’s needs.

5.5.6. The influence of “loan sharks”

“Loan Sharks” are individuals or business concerns who lend money mostly to poor, vulnerable people and conduct their business operations illegally. According to The Money Advice Service (2019) “Loan sharks are illegal lenders who often target low income and

desperate families.” “Loan sharks” take advantage of the desperation of poor, older people and those with a bad credit record and often set themselves up in areas where they are easily accessible to these groups to entice them with loans (Thibodeaux, n.d.).

When questioned about their views on the influence of “loan sharks” on CSG, most of the participants said that they had a negative influence. Participant PI5, had this to say:

“Not a good idea because after they deduct the repayments, what is left for the child. Then I must make more loans, and this is not good. You will never get where you want to be because the debt increases”.

Another participant said:

“It’s a negative influence because “loan sharks” are not regulated, there is no affordability test, and they know the recipient will have the grant to pay back the loan. It is a very big negative. It is a huge threat to what we want to achieve in the community”. (Participant KI2: SASSA).

Many CSG recipients use “loan sharks” because most of them cannot cover the child’s and family’s needs with the CSG and they are unable to secure loans at recognised financial institutions due to their unfavourable credit worthiness or being unemployed. The concerns about the negative influence of “loan sharks” as expressed in the extracts, correspond with findings in literature by DSD (2011) that reported primary care-givers using the CSG for payments to “loan sharks”, which results in less funds being available to meet the child’s needs. The issue of “loan sharks” being a threat to social protection is presented by Omarjee (2019) who argues that the provision of social protection includes the provision of social assistance. This implies that the State has an obligation to protect the bank accounts of grant recipients from unlawful deductions. It can be done by ensuring that the payment of grants is ring-fenced (a guarantee that funds allocated for a particular purpose will not be spent on anything else) from illegal electronic deductions instituted by “loan sharks”. With due consideration for participant comments and findings in literature, it appears that the influence of “loan sharks” is detrimental to the effective use of CSG and is therefore a serious threat to the social protection of the child and poverty alleviation.

5.5.7 Steps to use the CSG more effectively

To elicit views on improving the effectiveness of the CSG, participants were asked to comment on the State sensitizing people on the use of CSG and who qualifies for the grant. Participants made the following comments:

“SASSA must give the people that information” (Participant KI4: NPO).

“We have ICOPs, such as door to door campaigns, stakeholder engagements, Imbizos and beneficiary education. All these ICO programmes are designed to create awareness for the community on the grant. SASSA questions the community to establish if they qualify for the grant, we educate the community. We also tell them the grant must not be given away but used for the right purpose” (Participant KI2: SASSA).

Most participants also said that the State should tell recipients that they must spend the whole CSG on the child’s essential needs. One participant said:

“The State should also encourage them to spend the grant on the child's education, not only food and clothing. The child's extramural activities and the child's spiritual well-being is also important “(Participant KI3: NPO). These views correspond with findings in literature by International Labour Organization (2016) claiming that the number of children entitled to the CSG increased from 10% in 1998 to 85% in 2015, which was largely due to successful awareness-raising campaigns. The above comments from participants and findings in literature underscore the importance of the State making primary care-givers aware of qualification requirements and using the CSG for the benefit of the child. If parents are frequently made aware of this very important information, the probability of more parents accessing the CSG and recipients using it well, will increase and further strengthen the CSG’s contribution to building human capital and alleviating poverty.

5.6 Chapter summary

This chapter presented the elements of the Theory of Change and indicated how the researcher applied it to the CSG “case study” in Caledon. The chapter then summarised and analysed the opinions of 23 recipients of the CSG, and 6 key informants. Included in this analysis was the

significance of the Social Contract Theory, and the Nudge Theory, to CSG. All the findings and analyses correspond with the first 2 objectives of this study.

What has been established from the findings in literature and data analysis is that the purpose of the CSG was primarily for the benefit and protection of the child and to reduce poverty. For the development of the child to be sustained and poverty to be reduced, requires a collaborative approach. Whilst evidence supports the view that CSG makes a contribution to poverty reduction and the development of human capital, the perceived inadequate amount and misuse of CSG, are areas that have to be addressed by policy-makers, to render the CSG more effective. The opinions of respondents imply that CSG adds value to the well-being of the child but findings in literature also show that child poverty is still too high and therefore necessitates further improvement through holistic interventions.

Further suggestions have been for a portion of a larger CSG to be used as an opportunity to improve and sustain family livelihoods, where the child's needs are prioritized have been made. There are strong views for the State to create other income-generating opportunities for CSG recipients, for economic self-reliance and an earlier exit from the CSG. Good awareness about qualification requirements and proper use of the CSG is acknowledged, but there are perceptions that greater and sustained awareness, with a specific reference to SASSA's services charter, should be considered.

The literature findings and data analysis of this study confirm the positive use of the CSG. Its contribution to food security, reduction of incidence of street children and poverty reduction, as well its social impact, are well documented. It is also noted that food purchased with the CSG is improving the child's cognitive development and growth, although the CSG is not sufficient to meet all nutritional needs. Combating its misuse and the detrimental influence of "loan sharks" remains a challenge, which requires greater capacity and resources for improved monitoring and the implementation of prevention strategies.

CHAPTER SIX

HOW TO MAKE THE CSG PROGRAMME MORE EFFECTIVE

6.1. Chapter Overview

In addressing the fifth objective of this study, participants were asked to suggest what could be done to ensure that CSG could have a greater impact. Having established the problem relating to the effectiveness of CSG, the researcher tested some ideas, including the following: improving the efficiency of CSG, using the CSG for savings, support and training, “nudging”, “labelling”, conditionality and State monitoring.

6.2. Fifth Objective: Making the CSG more effective

To find out how the CSG could have a greater impact, questions were put to participants related to the following: shortcomings; CSG designed differently/more efficiently; use of Stokvel; pregnancy; electronic payment system and frequency of withdrawals; support and training; nudging; labelling; conditionality; State monitoring the use of CSG and the well-being of the child.

6.2.1. Shortcomings

The participants mentioned application difficulties, creating dependency on the State, travelling problems to reach SASSA offices, encouraging young girls to fall pregnant and lack of holistic support, as shortcomings of the current CSG. Participant KI2: SASSA said “the employer does not want to complete the forms. Especially farmers, where once the person has lost the job on the farm, the farmer is no longer interested in helping the person”.

Comments on dependency were also made during the interviews. This is what one participant said: “We cannot deny, the CSG creates some form of dependency, whether it is encouraged or not. Money will come at the end of the month, so what are you going to do? Are you going to stay at home or look for a job”? (Participant KI2: SASSA). The issue of dependency on social grants has been widely debated. Lund (2008) argues that despite male dominated senior officials claiming that giving grants to women will create dependency and encourage pregnancies, several international studies have confirmed that that women use grants most effectively. Leibrandt *et al.* (2010) confirmed that there is minimal evidence available to back assertions that grant recipients refuse to look for employment after they receive the CSG. The CSG is also regarded as an important contributor to the improvement of living standards for

many poor people. Despite concerns by some that the CSG creates dependency, findings in literature do not provide strong support for this argument. Nevertheless, it is important for the State to encourage and support recipients (young mothers in particular) to find other income-generating opportunities and aim for economic independence.

Difficulties in getting to SASSA offices were also mentioned during the interviews. “Farm workers have to hike long distances to SASSA offices to fetch their grant because there is no satellite SASSA office on the farm to assist them” (Participant KI5: NPO). Having to walk very long distances to collect the grant, could discourage many mothers from collecting or even applying for the grant, which has a negative impact on the development of the child. Here is an opportunity for SASSA to expand their service offering by setting up remote centres that are easily accessible to grant recipients or enable existing Post Offices in the vicinity to offer a wide range of services to primary care-givers. Currently, the South African Post Office assists with social grant payments (Maregele, 2018) but a “one-stop” (multi-purpose) accessible service point in these areas - to deal with applications, queries, support, referrals, etc., - might still be necessary. Remote service points will become more important, if SASSA continues to introduce new technology solutions for grant payments and better service delivery.

A few participants mentioned holistic support as an important intervention to improve the effectiveness of the CSG. “So, we are looking into collaboration with the Labour Department, NYDA, NDA and other government structures to address the needs of the young mother, after birth. We want to look at the young mother holistically.” (Participant KI2: SASSA). This comment again, confirms the importance of adopting a holistic, collaborative approach in assisting the primary care-giver towards economic self-reliance, and reducing the financial burden on the State.

There were participants who expressed great concern about young girls being encouraged to fall pregnant just to access the CSG. One participant had this to say, “Some children at the age of 13 and 14 want to have a baby because she feels she's going to get some money with this child support grant” (Participant KI3: NPO).

Other participants had a different opinion, as indicated by this comment: “I don’t think so. Why would a girl deliberately fall pregnant for such a little money? -that’s why education is so important (Participant KI1: SASSA). This comment is supported in literature by Dahir (2018) that found no evidence to support the belief that females increase their fertility to receive additional CSGs. Instead, the findings confirmed that women were more inclined to delay their

first pregnancy. Research by Willan (2013) also confirmed that only 20% of teenage mothers were recipients of the CSG and, only 5% of all CSG recipients were teenage mothers. Naong (2011) argues that, there is no evidence of young girls intentionally falling pregnant to access the CSG. However, there are other findings in literature that provide evidence of young girls falling pregnant to access the CSG. Mbulaheni *et al.* (2014) report on the results of a study conducted in Limpopo, confirming that young girls want to fall pregnant so that they can benefit from the CSG. Views on this matter are clearly polarised, which is quite alarming, when one considers its potential impact on the effectiveness of the CSG.

6.2.2. CSG designed differently, more efficiently

The majority of applicants said that the CSG would be delivered more efficiently if the grant recipient's and child's needs are addressed more holistically, the State secures jobs for CSG beneficiaries, training is provided to farm works and owners, funds are disbursed to the grandmother, by using a voucher system and for the State to increase the CSG.

Key informants had specific views on the need for holistic support, job security and training. One participant said:

“As SASSA we want to look after the child holistically. We are 3 partners who are jointly responsible for the child's development i.e., DSD, SASSA and NDA. We must also work together to address the needs of the mother holistically. ...This social cohesion with other departments is important.” (Participant KI2: SASSA). Another participant had this to say:

“...the State must ask each government department to ring fence a number of posts for CSG beneficiaries. A broader effort to give more jobs to CSG beneficiaries.” (Participant KI1: SASSA). These comments above correspond with findings and analyses in literature on the value of holistic support for the primary care-giver, referred to earlier in this study.

Training for grant recipients was also mentioned as an important intervention. One participant said: “The CSG system is good but the farm owners and farm workers must get training about the CSG system because many of the owners do not know much about the system. ... SASSA with help of NGOs must give foreigners training on the CSG system”. (Participant KI5: NPO).

Participants also made suggestions relating to grandmothers, vouchers and the monthly CSG. Participant KI3: NPO said “what should happen is that the grandmother, who takes care of the child, should be the recipient of the grant and not the young mother. ...and if the young mother

knows that the money won't be paid directly to her but to the older person in the house it could discourage young girls from having babies at the young age just to get the grant". Shifting the CSG to the grandmother (as primary care-giver) could have value in some cases to ensure that the child benefits from the grant.

Others had this to say:

"... I believe that the voucher system is the way that the grant system can be used more efficiently. This will also prevent "loan sharks" from controlling the cash given in the form of the Child Support Grant." (Participant KI5: NPO). This comment resonates with a recommendation in literature by Khosa and Kaseke (2017) and DSD (2011) where grant recipients are encouraged to use vouchers to buy only what is needed for children, which will lower the number of cases of grant misuse. However, there are also counter-arguments reported in DSD (2011) about the inflexibility of the voucher system which does not allow grant recipients to use it for the child's educational and transport needs, as well as the patronizing nature of the voucher system. Nonetheless, if the voucher system ensures a higher probability that the child's most essential needs – food, school and health – are met, it is worth exploring the payment of the CSG in the form of a non-transferable voucher system, with a limited cash portion.

Most participants in the individual interviews said that the State should increase the monthly CSG amount. Participants stated the following:

"Give R600 per child because food, school things and clothing are expensive" (Participant IP3:).

"R820 per child because I need to see to all the child's needs" (Participant IP9).

These extracts corresponded with literature by Shapiro and Haushofer (2016) who argue that larger grants given for a longer period, will produce better results on poverty alleviation, female empowerment, and psychological wellbeing. Research by Patel *et al.* (2017) also confirm that the CSG is often used to see to the overall household needs of and is not enough to meet the multidimensional needs that children have, to ensure their wellbeing. The comments above and findings in literature highlight the importance and potential value of a bigger CSG, which added to the rapidly increasing cost of living, should compel policy makers to consider an increase in the CSG.

All participants were in favour of support for mothers with a little education, during the CSG application process. Participant IP6 said “There are many illiterate mothers who don’t know how to draw the money and how to apply. Another supported this by saying:

“The mother will have more knowledge to understand things better...understand the application better” (Participant IP4). These two comments are reflective of the findings in literature by Twine et. al, (2007) who state that there is a much higher probability that primary care-givers with some education would apply for the CSG than those with no education. This strengthens the notion that the State should assist primary care-givers who have no or very little education, during the application process.

6.2.3. Using CSG for Stokvel (savings scheme)

According to Nasasa (n.d.), a “Stokvel is a type of credit union in which a group of people enter into an agreement to contribute a fixed amount of money to a common pool weekly, fortnightly or monthly. These funds are used to offer each member of the group an equal benefit”. 1Life (2019) says that the group normally consists of at least 12 individuals, each contributing the same amount every month. Each member must adhere to the group’s Constitution, that guides members on how the funds must be collected and invested, when money can be withdrawn, when members do not pay or dies, the process when new members join, etc. A bank account must be opened in the name of the group, with 2 or 3 authorised signatories set up on the account. The Stokvel should be audited annually by an external auditor, with the audit reports available to all members. Stokvels offer several benefits for poor people: It makes it possible to meet their essential needs; helps them to save and invest and accumulate assets and promotes the empowerment of women (Matuku and Maseke, 2014). Because Stokvels are informal or semi-formal - rather than a government programme - it fills a social protection gap.

Most participants did not support using the CSG for Stokvel purposes, certain of them made the following comments:

“If you only get your pool money after 4-6 months, it will take long to see to the needs of the child. Do not take money from the CSG for this”, said Participant IP5.

“Sometimes if it’s your turn to get the money, then some in the group will not pay and I will lose but I already paid my money” (Participant IP4). These negative comments about the use of CSG for Stokvel correspond with literature by Louw (2018) who argues that if the group is

big, members will wait a very long time to receive their pay-outs. Also, literature by Law of Business Enterprises (2018) claim that if members skip payments it could lead to non-payments. These limitations of Stokvel could reduce the availability of the CSG and put the well-being of the child at risk.

A participant who had a different view had the following to say:

“I’m conflicted here because I understand the benefit of Stokvel. We save differently. For me (not SASSA) if it improves the livelihood of the child then I will support it. ...If we say the CSG must benefit the child, then we need to explore that broadly with the savings scheme.” (Participant KI2: SASSA). This positive comment about CSG and Stokvel also coincides with findings by Granlund and Hochfeld (2019) who present evidence of the CSG enabling primary care-givers to utilize Stokvel, to buy in bulk, purchase assets and non-perishable food items which last for a number of months in a household. These findings again underscore the potential value of Stokvel as a contributor to savings and an opportunity to enhance family livelihoods.

6.2.4. Receiving CSG during pregnancy

There’s advocacy around the idea that CSG during pregnancy, is a good idea. To test perceptions about this idea, participants were asked for their comments. A substantial amount of research has been done on the effect and feasibility of starting the CSG during pregnancy, with findings confirming support for the idea. This support corresponds with findings in literature by Global Citizen (n.d.) and Cherisch, and Fonn (2017) that link the contribution of CSG to the reduction of the child’s stunted growth -as it enables the mother to access much needed nutritious foods- as well as access to antenatal services. Almost all the participants said that the CSG should not start during the primary care-giver’s pregnancy. This is what one participant had to say:

“There’s no birth certificate and clinic card. What about still born children and then you received the grant already? The State’s money will then get stolen”.” (Participant IP5).

This negative comment about the CSG starting during pregnancy, highlight a concern from some that the State could incur “wasteful expenditure”.

There were a few participants who were supportive of the idea that care-givers should receive the CSG during pregnancy. This is what one participant said “Yes, because if you’re a single

parent that's pregnant the advantage is that you can purchase the child's necessities before the birth of the child" (Participant IP1). It does appear that the majority are opposed to the idea of CSG during pregnancy. Although the concern about "wasteful expenditure" of CSG during pregnancy could have some merit, it does not seem to be significant due to the lack of research to support these claims. On the contrary, research (Global Citizen, n.d. and Cherisch, and Fonn, 2017) has demonstrated the positive effects that CSG during pregnancy will have on the child's well-being and poverty reduction.

6.2.5. The electronic payment system and frequency of withdrawals

SASSA has introduced alternative payment systems to enable grant recipients to easily access the CSG. The different options to access monthly payments include the use of post offices, banks, or pay-points as options to access their monthly payments (Khumalo, 2009). This is in addition to the new gold SASSA card which grant recipients can use to withdraw money from ATMs, SA Post Office outlets and supermarkets (DPME, 2018). The move to the Post Office system was done to eliminate cash payments. According to Maregele (2018), Raphaahle Ramokgopa, head of strategy and business development at SASSA, the agency eventually wants to eradicate cash payments but would still keep special measures in place for cash payments, for example through the SANDF, for CSG recipients who are unable to access pay points. Ramokgopa also added that the Post Office will set up mobile pay points in regions where it has no offices. Regarding one of the objectives of this study relating to the exploration of alternative options to make CSG more effective, participants were asked to give their opinion on their use of the electronic payment system. The bulk of the participants expressed satisfaction with the electronic payment system for the CSG. Participant IP5 said "It's quite easy for me". Another said:

"No complaints about it" (Participant IP1). Providing primary care-givers with a range of different electronic payment options, will ensure that the mothers from poor households have quick and convenient access to the CSG, which is significant in reducing child poverty.

Using the electronic payment system at supermarkets to draw cash with the SASSA card also received great approval from most participants. One participant said:

"...then I don't have to stay in a long line at all pay machines". (Participant IP1).

Several suggestions were made to prevent unauthorised deductions being made from the participants' bank accounts. One participant said:

“2 years ago, it happened to me and I went to SASSA and they changed my bank details and CSG was paid into new bank account” (Participant IP2). This extract corresponds with the findings in literature by GroundUp (2015) and DSD (2016) that confirm evidence of many cases of unauthorised deductions from beneficiaries’ accounts. This comment and findings confirm the serious challenge that CSG recipients are experiencing with unauthorised deductions and highlight the importance of SASSA making concerted efforts to ensure that more recipients know how to prevent or resolve unauthorized deductions.

6.2.6. Interventions to improve the effectiveness of CSG

Part of the discussion with participants was to get feedback on how the CSG could be improved. In the literature several ideas were identified including the need for CSG recipients to receive training and support, as well as other interventions such as “labelling”, “nudging” and conditionality. During the field work participants were asked for their views on these issues.

6.2.6 (a) Training and support

Research results contained in literature (Twine et. al, 2007 and DSD (2016) confirm that many eligible primary care-givers do not access the CSG or their children do not fully benefit from the grant because of the primary care-giver’s lack of education and knowledge of grants. In view of this concern, participants were asked to share their views on whether CSG recipients should receive training and support from the State and NPOs and the types of support that they should benefit from. All participants said that CSG recipients should receive training and support from the State and from NPOs. They also said that the types of training and support should include financial literacy, budgeting, home visitations and income generation opportunities. One participant said:

“Mothers will manage money better and no need to go to “loan sharks” because they will have money left at end of month”. (Participant FG2). The above comment highlights the importance of financial literacy in alleviating the negative influence of “loan sharks” on CSG recipients “Loan sharks” ‘prey’ on poor, vulnerable mothers who are desperate for money to see to the needs of their children (Mail and Guardian, 2014). If the State and NPOs offer this type of training to primary care-givers, it will provide the mother and child with social protection, which will ultimately have a positive impact on poverty reduction.

Many participants also suggested other types of support for CSG recipients that include literacy training, food hampers, and life skills. Participants said:

“They can do workshops on ABET (literacy) classes to explain to them and help them understand the requirements for the CSG application better” (Participant IP1). This comment corresponds with findings in literature by Twine et. al, (2007) who show that those mothers with little or no education will probably not apply for the CSG. Also, DSD (2016) report that disproportionate education levels, lack of knowledge and access to information are some of the main reasons why many primary care-givers do not apply for the CSG. The limited education and lack of CSG knowledge of primary care- givers, could result in many children being denied their basic right to social protection, which will exacerbate the problem of child poverty.

“Career planning, basic life skills, a lot of young mothers are still children and do not have the skills to take proper care of the child”. (Participant KI1: SASSA).

Most participants said that civil society should also offer support to the CSG recipients. This is what one participant said:

“Civil society has a big role to play because they are at the coal face. ...we cannot work without them. School dropouts, we need them to work with these children and help us.”. (Participant KI2: SASSA). The opinions above confirm that participants see great value in training and support for the primary care-giver. The benefits mentioned, relate to better management of their personal finances, being more knowledgeable to successfully apply for the CSG, and equipped – through new life skills – to guide and support the child need better. The overall development of the child will certainly be enhanced through on-going training and support for grant recipients.

All participants supported the idea of other income –generation opportunities being created for CSG recipients. Participant IP2 said “They must explain how they can help us e.g. garden work for men and domestic cleaning work for women”. This comment coincides with earlier opinions about the importance of a holistic approach to enable the primary care-giver to see to the developmental needs of the child, sustainably.

6.2.6. (b) Nudging

In the literature and in the CSG “case study” findings, several concerns were expressed about the misuse of CSG. The researcher tested participant ideas relating to “nudging”– discussed in the literature review of this study- as possible solutions for alleviating the misuse of grants, thereby making the CSG programme more effective. Almost all participants expressed support for the suggestion that there will be an increase in early registration (within the first 2 years of

life), if CSG recipients are regularly informed of the benefits of early enrolment e.g. better mental development, scholastic performance. They also added that if the State offers gifts such as airtime, food vouchers, it will also lead to early registration. Participants expressed these views:

“More mothers will register early” (Participant FG2). This was reflective of the group’s opinion.

“If the parents can be informed of the early enrolment benefits. Let me give you an example, a young lady who had a premature baby who was very small. Because of the early enrolment of this child within the first 2 years the child, they were able to bring the child to the crèche and now the child has an advantage over other children”, said Participant KI3:NPO. These comments coincide with findings in literature by DSD (2012), who argue that children who benefit from the CSG within the first 2 years of their lives have a much better chance of their growth being monitored, experienced improved height and completed 0.14 more grades of schooling than children who were enrolled at 6 years of age. The benefits of a higher probability of growth monitoring and less sick days, due to early CSG registration, are also confirmed in findings by Grinspun (2016). What these comments and findings confirm are the immediate health and future educational benefits for the child of early CSG registration. This is quite significant and has policy implications for a greater investment of resources and time in “nudging” as a behaviour change strategy with primary care-givers, to make the CSG programme more effective.

6.2.6 (c) Labelling

To explore other possible solutions of significantly reducing (if not eradicating) the misuse of grants- concerns about which were also covered in the literature - the researcher tested participant opinions relating to “labelling”, as defined and discussed in the Literature Review. This was mentioned -in the literature review of this study- as another intervention which could improve the effectiveness of CSG. The bulk of participants said that primary carers will spend most of the CSG on the child, if they are regularly informed by SASSA, of the positive effects of nutritious food on the child. Participant FG1 said “The mother will spend most of the money on her child”, which was indicative of the group’s view.

A few participants supported the idea but said that it was not SASSA’s role. One participant said:

“It is very important but it’s not SASSA’s role. There is the Department of Health (DOH)... they need to play that role.... we are not experts in that field and therefore it is DOH’s role. For example, would they (*SASSA officials*) know that the GI value of sweet potatoes is less than that of potatoes. They wouldn’t know that.” (Participant KI1: SASSA). These extracts correspond with findings in literature by Ahmed *et al.* (2016) who reported on a project in Bangladesh where greater success was achieved when cash transfers were used in conjunction with nutrition training. Whilst nutrition awareness is an effective intervention to improve the proper usage of the CSG, food prices are rapidly increasing, which necessitates a considerably larger CSG, if the desired effect of this “labelling” technique – on severe malnutrition in particular (Devereux and Waidler, 2017)- is to be sustained.

6.2.6. (d) Conditionality

As indicated in the literature review of this study, there is substantial global evidence of the educational and health benefits linked to CCTs, as well as it being an effective means of reducing poverty. In literature and in the CSG “case study” data analysis, the misuse of CSG was highlighted as a concern that requires the necessary attention. In view of this evidence, as well as the disquiet around CSG misuse, the researcher solicited participant views relating to conditionality, as a mechanism to address CSG misuse and strengthen the impact of CSG. Participants were asked to give their opinion on the primary care-giver having to meet certain conditions, before she/he receives a CSG and whether the CSG will have a better impact on the child, if the child attends school and visits the local clinic regularly? They were also asked to comment on whether the recipient should be punished for not meeting conditions, by having the CSG taken from them and appointing another family member as the recipient for the beneficiary child.

Most participants were fully supportive of the suggestion that CSG recipients meet these conditions before receiving the CSG. Participant FG1 said “If parents do not meet these conditions, they do not get the CSG”. This was reflective of the group’s opinion. Another participant added:

“It’s about the child’s development. If we do not look after the child, and he is not eating, the child will become a statistic for the Health Department, and dropping out of school, etc. The conditions will have a positive effect because we will cut out where currently we see children are neglected. Education is a basic right for the child and if you violate that right then surely the Department must step in.” (Participant KI1: SASSA). This comment corresponds with

views in literature by The Bill of rights of the Constitution of the Republic of South Africa (1996: 171) and United Nations Human Rights Office of the High Commissioner (1990), who argue that children have the right to social security, which includes basic nutrition, health and social services. The above extracts also coincide with findings by Huntington (2010) and Fiszbein and Schady (2009), stating that that CCTs have a positive effect on health outcomes and school enrolment. These findings and participant comments send a clear reminder to policy-makers to ensure that the legal right of the child to education, health, and food – made possible through CSG – is protected.

There were participants who did not fully agree with strictly enforcing conditions in every situation. Participant KI2: SASSA said “We should have the conditions, but we do not exclude them from the grant if conditions are not met. A parent dies in the Eastern Cape and the child is moved here (*Cape Town*) to look for a school and for 3 months the child is not in school, so we can’t just exclude the child from the grant because they were not in school. The situation must be looked at from all angles. This comment corresponds with findings by Shei *et al.* (2014), who argue that CCT programmes reinforce women’s time-poverty induced vulnerability, to meet the conditions of the programme.

Although most supported the idea, participants were divided in their views on whether the CSG recipient should be punished for not meeting conditions, by having the CSG taken from them and appointing another family member as the recipient of the beneficiary child. Participants had this to say:

“They must be punished” (Participant FG1). Most participants in the group agreed with this comment.

“To prevent the misuse of State’s budget and to ensure that the CSG is line with the State’s plans” (Participant KI5: NPO).

Another participant had a different view:

“the child will suffer” (Participant FG2).

A review of participant comments and findings above present a case for conditionality and for replacing the primary care care-giver under certain circumstances, where conditions are not met. Notwithstanding these opinions, there are also clear concerns that the narrow, strict application of conditions, could deprive the child of her or his constitutional right to social

protection. What could be more effective is the application of “soft conditions” (e.g. “nudging” and “labelling”) as well as Integrated Case Management. Sowell and Meadows (1994) describe ICM as “an integrated, multisite approach that uses the expertise of social workers, nurses, pastoral counsellors, and therapists to develop client-centred plans of care across the continuum of need”. According to UNICEF (2017), ICM will ensure that grant recipients receive holistic and personalized care and support. In addition, the careful application of hard conditions- by replacing the non-compliant primary care-giver with another relative in fully justifiable cases, thereby upholding the child’s right to benefit from CSG- might also have the desired effect.

6.2.7. State monitoring

Concerns relating to the misuse of CSG are well documented - as indicated earlier in this study- which impacts on the well-being of the child. Literature comments on the responsibility of the State in respect of monitoring the child’s well-being and the value that this could add to the decline in child poverty (Dawes et al., 2007). The importance of monitoring the child’s well-being, is also recorded in literature by the United Nations Human Rights Office of the High Commissioner (1990). The United Nations Convention on the rights of the child (CRC)- of which South Africa is a signatory – states that all member countries are required to monitor progress towards fulfilling children’s rights. This requirement is premised on the view that without reliable data on the well-being of children, policy-makers will not have the correct information for policy development and effective resource allocation. Given this context, participants were asked to give their opinion on whether it is important for the State to monitor how the CSG is being spent and the well-being of the child in the home.

All participants said that the State should monitor: (i) how the CSG is being spent and (ii) the well-being of the child in the home of the primary care-giver. FGs expressed their full support for this. This is what participants had to say:

“It’s very important. So that that they can see if the parent is using the CSG, how it is being used and where the parent needs assistance. Also check if they take children to school regularly; check on the child’s clinic card, check if they have a job” (Participant KI6: NPO).

SASSA key informants said that the monitoring function is very important but were not sure if SASSA or other government departments are doing it. Participant KI1: SASSA said “that should be part of the monitoring. We only do that if there’s complaints about it, but I do not think it is currently done. Check to see if the money is spent well and if the child is cared for

and pick up what is wrong with the child, for example child abuse, or early delinquency, drugs, gangster culture that they're caught up in". These extracts correspond with literature by Dawes *et al.*, (2007) who emphasize the importance of adopting a rights-based approach to monitor the well-being of the child, focussing on its importance in reducing child poverty and for health improvement and early childhood development. Regular monitoring of the child in the home, could result in CSG having an even greater impact on the child's well-being, and its contribution to building human capital.

6.3. Chapter summary

Participant views and literature findings in this chapter, which correspond with objective 5 of this study, have highlighted several shortcomings of the current CSG, and presented ideas to make the CSG more effective. An analysis of this data has revealed that, despite the shortage of strong evidence that CSG create dependency and that young girls intentionally fall pregnant to access the grant, negative perceptions and concerns still exist. The need to create income-generating opportunities for grant recipients to move towards economic self-reliance, were also highlighted. The results of the study have also emphasized the need for the State to address ways of creating easier access to service points for primary care-givers who live far from these collection points.

The influence of Stokvel on CSG, the usefulness of receiving the CSG during pregnancy and the impact of SASSA's electronic payment system, were additional CSG related matters discussed in this chapter. The results have revealed the negative impact that Stokvel could have on the child's well-being but also noted its potential benefit as a contributor to savings and sustaining family livelihoods. While cognisance is taken of the possible "wasteful expenditure" if CSG are paid during pregnancy, the significant benefits for the child's well-being and poverty reduction, are clear. The issue of unauthorised deductions is a challenge that the State will have to address more effectively but the considerable gains that the electronic payment system offers the grant recipient, with the resultant positive impact on the poverty reduction, are well documented.

Particular mention was made, in this chapter, of holistic support for the primary care-giver, sensitizing and supporting the mother to make positive behavioural changes relating to the use of the CSG. Replacing non-compliant mothers ("hard" conditions) with another relative to

ensure consistent care for the child and implementing a non-transferable voucher system, with a limited cash portion, were also suggested. Consideration of training and other new interventions, as well as the importance of regular State monitoring of the well-being of the child in the home, received specific attention in this study. Participant views in this CSG “case study” underscore the positive effect that training and support (e.g. financial literacy) for the primary care-giver, has on the development of the child. The analysis also confirms how interventions such as “nudging” (e.g. promoting the value of early registration) and “labelling” (nutrition awareness) could significantly increase the probability of the child’s right to social protection being upheld. Lastly, the chapter points out the positive impact on the child’s health and development, of a rights-based approach to monitor the well-being of the child.



CHAPTER 7

CONCLUSION AND IMPLICATIONS FOR RESEARCH AND POLICY

7.1. Chapter overview

This chapter presents the conclusions of the study and provides answers to the key questions and objectives of the research study. Furthermore, the chapter offers recommendations to various stakeholders for further research and considerations for more effective policies on the CSG.

7.2. Conclusion

As stated earlier, research informs us that South Africa's CSG is currently not as effective as it should be. The inadequate amount, illegal and unauthorised deductions, application difficulties and concerns relating to the misuse of the grant, were four limitations reviewed in this study. The research in this study also emphasised the constitutional right (The Bill of Rights of the Constitution of the Republic of South Africa, 1996) of the child to social protection through relevant legislation, which holds the State accountable for effective social protection. With this rationale as a basis, this study explored whether the child's constitutional right to social security is adequately upheld in South Africa, with specific reference to the CSG. In this study, three research questions have been answered: (i) *What do social policy makers in South Africa want to achieve with Child Support Grants?* (ii) *Are they achieving it?* (iii) *If not, how can policy makers ensure that CSG's have the desired impact?* What has been established in this study, is that the Constitution compels the State to ensure that every poor child in South Africa has access to social protection. Mpedi (2017) argues that the CSG, which is established on a strong legal premise, directed by the Constitution, is one of the fundamental social protection strategies that have been implemented to reduce child poverty. Several benefits but certain limitations of the existing CSG programme, have also been captured in this study. The 3 research questions are intended to persuade policy makers to critically review the current CSG programme, with the aim of making necessary changes to maximize its impact. The ultimate purpose of grappling with these 3 questions, is to ensure that the constitutional right to the requisite level of social security for children is secured and sustained and child poverty is reduced. These questions also correspond with five specific objectives which have been addressed and are presented below in thematic format.

The study discussed the relevance of the ToC, as well as the Nudge Theory, in relation to CSG and presented the Social Contract Theory as the most appropriate theoretical framework for CSG. Findings in literature- that support the Social Contract Theory- point out that according to the Constitution, every child has the right to social security (basic education, nutritious food, etc.) and parents are obligated to execute their primary responsibility of seeing to the child's well-being and development (The Bill of rights of the Constitution of the Republic of South Africa, 1996). Further findings also highlight the co-responsibility of citizens (e.g. parents) and the State to ensure that the social security system is successfully implemented (White Paper for Social Welfare, 1997). A social contract – like any other legal contract- stipulates rights and responsibilities of all concerned parties. What participant views about the social contact theory (indicated in Chapter 5 of this study) present are not only the rights and responsibilities of both CSG recipients and the State which need to be honoured by the respective parties, but also consequences when agreed contractual obligations are not adhered to. In the opinion of the researcher, policy-makers should have more collaborative engagements with CSG recipients to: (i) create greater awareness for the recipient of the State's contractual responsibility for the child's social protection and (ii) understand the value and importance of the primary care-giver's responsibility in this contract.

A case study research design, using qualitative data derived from primary and secondary sources, were also utilized. The research methodology used, including the primary and secondary data collection methods, were also discussed.

7.2.1. The context and operationalization of CSG in South Africa

When examining the current CSG and exploring ways of increasing its effectiveness, policy makers must take cognisance of the context and operational side of CSG in South Africa, as outlined in this study. The inheritance of the apartheid legacy of immense suffering of children, race and gender inequality and poverty, remain among the country's greatest social policy challenges and continue to influence the effectiveness of the CSG. The continued use of a rights-based approach to social development and the re-design of the social welfare system, are significant for proper and sustained care of close to 13 million poor children.

This study has also presented certain pre- and post-application requirements and specific regulations that the CSG recipient must meet, when applying for a CSG. These requirements include children being under 18, the recipient not earning more than R4000 pm, submitting specific documents, evidence that the recipient is the child's primary care-giver and producing

evidence of income when a review is done. In view of these stringent application regulations, this study has confirmed - through the CSG “case study” - the need for the State to regularly sensitise, train and support primary care-givers on the application process and qualifying requirements, as well as the proper use of CSG.

7.2.2. What policy makers want to achieve and are achieving with CSG

To establish a clear understanding of what policy makers in South Africa want to achieve and are achieving with CSG, this study reviewed relevant literature and summarised opinions solicited during a CSG “case study” in Caledon. Important lessons can be learnt from this information:

Primary purpose of CSG: An examination of the literature confirmed that the CSG in South Africa is essentially a poverty alleviation strategy targeted at impoverished children. It is about the provision of social security for poor children, where the CSG “follows the poor child”, to ensure daily provision of their basic needs and their overall well-being. This understanding of the purpose of the CSG, corresponds with the popular opinion of participants expressed in the CSG “case study”: to help children and give them a better life; to reduce poverty and strengthen agency and to prevent child hunger.

Recipient of CSG: Literature in this study also revealed that the CSG must only be paid to an adult who must be the child’s “primary care giver”. This corresponds with the views of most of the participants in the CSG “case study”, who said that the person where the child stays; the one who takes care of the child, not necessarily the mother, should be the recipient of the CSG. A finding that should be of great interest to policy makers is that most participants were of the view that that many primary care-givers believed that the CSG is meant for them to spend at their discretion.

Positive and negative perceptions of participants: Furthermore, favourable comments about CSG were presented in the review of participant responses in the CSG case study: The majority of them said that the application is quite easy and does not have to improve and the service they received from SASSA when they applied for the CSG, was very good. The bulk of participants also indicated that recipients are spending the CSG well, CSG allowed them to meet their child’s needs and the child’s life has improved. There were also participants who expressed concerns about the misuse of CSG by primary care-givers, who reportedly spend all or most of the CSG on themselves.

7.2.3. The weaknesses of the current CSG

Although the benefits of the CSG are well documented, several shortcomings were also presented in the literature review and data analysis of this study. These include (i) insufficiency of the monthly CSG amount (Devereux and Waidler 2017). There were participants who indicated that they are unable to see to all their children's needs because the CSG is not enough. Most of the interview participants also said that a larger CSG was necessary. (ii) unauthorised deductions and fraud (GroundUp, 2015 and DSD, 2016). During the interviews, a few participants confirmed their experience as victims of unauthorised deductions and what they did in an attempt to prevent a recurrence. (iii) according to socialprotection.org (2015), shortcomings in the social grant programme that still prevent many potential recipients from gaining access to social protection. (iv) misuse of the CSG (Mudzingiri et. al 2016). Many of the participants in the CSG "case study" said that recipients spend the CSG on alcohol, drugs, their clothing, and cell phones. The literature and findings correspond with the research questions of this study and confirm the need for policy-makers to address these weaknesses, to make the CSG programme more effective. Having said this, it is also important for policy-makers to be aware of the pejorative comments about CSG recipients, that are influenced by "positionality". The fact that key informants - such as NPO leaders - could hold judgmental views about CSG recipients is quite significant, as these opinions might impact negatively on the training, support and guidance that primary care-givers should be receiving from civil society.

7.2.4. Making CSG more effective

Research has provided evidence of alternative approaches that could improve the effectiveness of CSG, as indicated in the literature review of this study. One approach called "labelling" - a cash transfer given to households with a "label" about using it in certain way but still giving the recipient a choice - was successfully used in Cash Transfer (CT) programmes in certain countries. An example is given of a CT that was offered during a CT programme in India, if school attendance was 70% or higher. Although the condition was not imposed, the results showed that "labelling" resulted in an improvement in attendance. In another approach referred to as "Nudging", environmental cues are used to encourage unconscious decision-making processes to prompt behaviour change. An example is cited in this study of a programme in Burundi called "positive deviance", where primary care-givers were trained on how to prepare nutritious meals. One mother reported that after training, her son's appetite improved, and he had gained weight, since she was taught how to prepare nutritious meals.

During the CSG “case study” in Caledon, participants made various comments in support of “nudging” and “labelling”. Many participants were convinced that if primary care-givers were sensitized about the developmental benefits of early registration, it will result in more mothers registering for the CSG within the first 2 to 3 years of the child’s life. Most of them were also of the opinion that constant awareness (for mothers) of the benefits of nutritious food, will encourage them to use the CSG on the child. This has important policy implications for the State to be more intentional about using “nudging” and “labelling” for a more successful CSG programme.

Also, participants in the CSG “case study” offered some suggestions to improve the effectiveness of the CSG: The child’s needs must be addressed more holistically; the State should ring fence jobs for CSG beneficiaries; CSG funds are disbursed to the grandmother, the introduction of a voucher system; for the State to increase the CSG; investing some of the CSG funds in a Stokvel scheme to improve the livelihood of the child; CSG recipients should receive training and support from the State and from NPOs ; a considered approach when imposing conditions for access to CSG and for the State to monitor how the CSG is being spent and the well-being of the child in the home of the primary care-giver.

7.3. Recommendations

Based on the findings in this study, the researcher proposes a few recommendations that have implications for policy and further research, for the purpose of enhancing the effectiveness of CSG in South Africa. This study offers specific and suitable solutions to address the weaknesses of programme.

7.3.1. Enforce conditions differently

Social protection is a constitutional right. Findings of this study indicate that many primary care-givers are misusing the CSG, resulting in children’s rights to proper education and good health care, not being upheld. This study also revealed that there is a very good probability of primary care-givers drastically improving the way they take care of their children, through “nudging” and “labelling”. These “soft conditions”, where primary care-givers are frequently sensitized about the developmental benefits of early CSG registration and nutritious food, could minimize the probability of misuse. Thought should also be given to the fact that while these “soft conditions” could encourage the proper use of the CSG, they do not guarantee it. Nevertheless, having considered the benefits and potential drawbacks, it is strongly

recommended that SASSA should learn from other countries, and that their senior management include these alternative approaches (“nudging” and “labelling”) in the administration and allocation of CSG, to encourage positive behaviour. It is the researcher’s opinion that these approaches are empowering, by inspiring the grant recipient and their children to experience the benefits of new and better decisions.

Furthermore, it is the researcher’s view that certain conditions relating to the regular health checks and school attendance for the child, could make the CSG more effective. Research shows that conditional CSG have been used successfully in countries such as Brazil and China. A conditional CSG could be successfully implemented if the State strengthens its administrative capacity, enables easy access to social services and creates more job opportunities for the poor (Freeland, 2007). Also, if conditions are imposed, those young girls who might contemplate exploiting the CSG for their own financial gain through deliberate pregnancies, will be discouraged from doing this. Although conditionality has potential benefits, policy-makers need to be cognisant of its limitations – a few have been mentioned in this study, for example being authoritarian (Freeland, 2007) and reinforcing women’s time-poverty induced vulnerability (Shei et al., 2014). Having said this, it is worth noting arguments by Soares and Silva (2010), who present the results of a study of CCT programmes conducted in Brazil, Chile and Columbia. They show that CCT programmes can be used as a preventative and protective mechanism for women who face vulnerabilities. These include extensive female participation in employment and income-generating initiatives and providing special admission to microcredit programmes. Nonetheless, the strict, narrow application of conditions should be avoided. There are times when children are forced to move to different parts of the country with the primary care-giver and might not be able to attend school regularly for a while. The researcher, therefore, proposes a proviso, that these conditions are lightly imposed by SASSA’s senior management, so that children who have a valid reason for not being able to attend school or the health clinic regularly, are not excluded from the CSG.

Having reviewed conditionality critically, it is recommended nonetheless, that SASSA invests more resources and time in further research on the benefits of applying specific conditions for the CSG, to ensure that the child’s right to education and health is protected. However, these conditions should be reasonably applied, with due consideration for each primary care-giver’s unique circumstances.

7.3.2. A holistic approach to address the child's basic needs

Since the findings in this study confirm concerns that maximum efficiency of the CSG is impeded by being too fragmented, a collaborative approach could make the CSG more effective. In the researcher's opinion, the participation of key role-players, will equip the CSG recipient with the requisite skills and facilitate economic independence, thereby creating an enabling environment where the recipient can flourish, and the child's basic needs are addressed more effectively and sustainably. This view is supported by comments in the CSG "case study", where participants stated that various government departments should be involved in the overall development and holistic support for the primary care-giver. It is highly probable – in the opinion of the researcher- that when a broader, more-inclusive approach is used to improve the efficiency of the CSG, challenges will prevail. This could be in the form of protracted engagements to reach consensus, and a substantial disbursement of additional financial and other resources. That being said, the researcher believes that the value of partnerships in reducing child poverty and strengthening social security – which includes holistic development and economic self-reliance of the primary care-giver and, improving family livelihoods - far outweigh the disadvantages.

Despite the potential difficulties, it is recommended that the State adopts a holistic, socially cohesive approach when implementing CSG. Specific solutions are proposed: (i) Departments such as DSD, SASSA, National Development Agency (NDA) and Health, have a closer working relationship in addressing the child's development, as well as the needs of the primary care-giver. (ii) The Department of Labour to create income-generating and job placement opportunities for the primary care-givers. Government departments could also ring fence jobs for CSG recipients. This will ensure that the primary care-giver becomes self-reliant. (iii) Allow the beneficiary to invest 12% of the CSG monthly amount in a reputable savings scheme. This should increase the primary care-giver's income significantly and strengthen the family's livelihood (iv) Training and support: The State should support the CSG recipient through the provision of ABET, training in financial literacy, life skills and personal budgeting (Department of Education) and job skills training (Department of Labour). SASSA should invest additional resources in information sessions specifically for primary care-givers who have very little or no education, on how to successfully apply for the CSG. Also, many non-profit organizations such as Black Sash, have the capacity and should be employed to assist the State in training and supporting CSG recipients.

7.3.3. A larger CSG

This study revealed - through findings in literature and the CSG “case study”- that the CSG is inadequate to meet all the basic needs of the child. The advantages of a larger CSG are mentioned in literature by Zembe-Mkabile et al. (2018) who argue that a higher CSG will provide a better buffer in an economic climate of rising food prices and will also ensure improved nutrition outcomes and overall well-being for the child. Further arguments for the benefits of a larger CSG is given by The Black Sash Trust, a human rights organisation advocating for social justice in South Africa. Black Sash made submissions to the ICESCR Committee, which included this recommendation: “to design and keep up-to-date a composite Cost of Living index against which grants such as the CSG, which is currently below the poverty line, should be indexed to ensure a decent standard of living” (Hutton, 2018: 39) The CESCR is a UN association of independent experts that reviews reports submitted by UN member states – of which South Africa is one- on meeting the requirements of the ICESCR (Ecoi.net, 2018). Also, during the CSG “case study” interviews, several participants proposed a higher CSG – as indicated earlier in this study- that would enable them to cope with the rising costs of their children’s basic needs. Although the benefits of an increased CSG are documented, it is important to be mindful of potential pitfalls. A higher CSG could place an additional financial burden on the State and it might create dependency.

Notwithstanding the possible disadvantages of a larger CSG, it is recommended that SASSA increases the CSG to R1000 per child per month. This larger amount is recommended based – in the first instance- on findings in literature by Dlamini (2018) who argues that, according to the Pietermaritzburg Agency for Community Social Action (PACSA) Food Price Barometer, February 2018, the CSG is 35% lower than the actual cost of a nutritious food basket for children between 10 to 13 years and the shortfall is even less for older children. Secondly, findings in the CSG “case study” suggest that, while most of the CSG is spent on food, the grant also contributes to the child’s other basic needs, for example school fees (R150 on average), school transport and clothing. Thirdly, it would be unreasonable to expect the primary care-giver to disregard other household needs and sustaining the livelihood of the family when using the CSG, given the extensive and high level of poverty and unemployment that still prevails in South Africa (Zembe-Mkabile et al., 2018). Increasing the CSG by 35% to match the expense of a nutritious food basket for children plus an additional amount to contribute to the ever-increasing costs of the other needs mentioned, makes a CSG amount of R1000 justifiable at present, in the opinion of the researcher. This amount will have to be reviewed

annually and adjusted in line with inflation. However, the proviso is that CSG recipients should be compelled to participate in skills training and job creation programmes facilitated by the State and civil society. Exceptions to this rule should apply to those primary care-givers who are no longer employable due to old age or ill health. The larger CSG should be implemented, in conjunction with the holistic approach referred to in recommendation 7.3.2. The overall aim is to establish self-reliance, where the primary care-giver's receipt of the CSG can be terminated as soon as possible but she or he continues to receive training and support from the State and civil society, as required.

Mudzingiri et. al (2016) also highlight findings from a study conducted in the Eastern Cape where 70% of CSG recipients were dissatisfied with the amount of the CSG. Due to the rising cost of living, the researcher agrees that the CSG is not sufficient and should be increased to adequately cover all the child's -and by implication the family's - basic needs. However, the higher CSG should not be provided in isolation of a broader development context, where regularly monitoring the use of CSG; permission for a portion of the CSG to be invested in family livelihoods; and supporting CSG recipients to secure other income generating opportunities, are paramount. This could promote economic self-reliance and encourage an early exit from the CSG programme.

7.3.4. Monitor the use of CSG and child well-being

During CSG "case study", senior SASSA managers expressed their concern that numerous CSG recipients are spending the funds on themselves instead of the child. They said that they are also aware that many mothers are spending the CSG for the benefit of the child. However, they do not know to what extent the CSG is being properly utilized for the child's benefit because they were not sure whether SASSA is monitoring how the CSG is being spent nationally. This scenario provides enough motivation to explore whether the child's constitutional right to social security is adequately upheld in South Africa. This right, according to the White Paper for Social Welfare (1997), permits the child to receive adequate economic and social protection – through cash or non-cash (or both) transfers from the State to the primary care-giver– during the time when the primary care-giver is unable to generate adequate or any income to meet the child's basic needs. When the primary care-giver fails to use the CSG responsibly, it infringes on the child's right to social security. These concerns are supported in literature from DSD (2011) and also corresponds with findings in the CSG "case study", where several participants stated that some mothers spend the CSG on items such as alcohol, cigarettes and drugs, instead of the child. The implications of this misuse are that the

child is also deprived of her or his right to enjoy nutritious meals daily, proper health care and good education, which are critical for their physical growth and cognitive development. The primary care-giver's violation of this right also means that the CSG's social investment in building human capital is limited. It is important to note that while the State's has a responsibility to deliver social security to children - which it does through a CSG delivered to the child's primary care-giver - the care-giver also has a share in this responsibility, by ensuring that the CSG is used for the benefit of the child.

The importance of monitoring the child's well-being, is recorded in literature by the United Nations Human Rights Office of the High Commissioner (1990). The United Nations Convention on the rights of the child (CRC)- of which South Africa is a signatory – states that all member countries are required to monitor progress towards fulfilling children's rights. This requirement is premised on the view that without reliable data on the well-being of children, policy-makers will not have the correct information for policy development and effective resource allocation. Dawes et al. (2007) also highlight poverty reduction and improvement in the child's health and early childhood development, as positive spin-offs of rights-based monitoring. During the CSG "case study" interviews, participants also mentioned checking whether: the child attends school, is taken to the health clinic and the primary care-giver needs assistance, as reasons why monitoring the well-being of the child is vital.

Efforts to effectively monitor the well-being of poor children, do not come without concerns and challenges. The insufficient capacity of the State to successfully implement a monitoring programme at national level, was pointed out during the CSG "case study". Furthermore, Camfield, et al. (2008) identify disparities in how "well-being" is understood within specific historical and cultural contexts, and unguaranteed well-being - despite the provision of basic essentials- as key factors to be considered during the monitoring process. Other findings in literature showed that because of the divergent educational and social dynamics in poor households, no one single, person, measure or tool can provide a complete assessment of a child's wellbeing (Ryder et al., 2017). In the researcher's own view, the inability to detect possible biased feedback or false information from primary care-givers and their children, could reduce the usefulness of monitoring.

Whilst mindfulness of the potential drawbacks of monitoring is important, safeguarding the constitutional-right to social protection of close to 13 000 000 children in South Africa, simply cannot be left to chance. For one, the future supply of South Africa's human capital is at stake.

In the researcher's view, monitoring will - despite the concerns mentioned - have a significantly positive and widespread impact on children's well-being. It is, therefore, recommended that SASSA and DSD invest a substantial amount of resources into the periodic monitoring of: (i) how the CSG is spent and (ii) the well-being of the child in the home of the CSG recipient. Social workers, using a Case Management approach referred to earlier in this study, could perform a pivotal role in assessing the use of the CSG in the home and the well-being of the child and offering valuable advice to the primary care-giver. When considering this recommendation, policy-makers must be fully cognisant of the potential difficulties associated with the monitoring process.

7.3.5. Introduce a multi-purpose pocket system (MPP)

This study highlighted several concerns relating to how cash transfers for CSG can be manipulated and misused. Findings in the CSG "case study" also suggest that, although many primary care-givers are favourably disposed to the electronic payment system, a number of them still experience problems with unauthorised deductions and debt payments to "loan sharks". An electronic MPP, that promotes the advantages of non-cash payment options, could alleviate the misuse of CSG and the problem of illegal deductions and unauthorised withdrawals. There are service providers in South Africa that have the technology solutions and capacity to administer payments through multi-purpose pockets, within a secure closed loop system. One such company is Intellimali, a PASA registered payment administrator, that provides "pocket" functionality on its closed loop managed solution. The CEO of Intellimali, Michael Ansell, says that the multi-purpose functionality of the system has significant benefits for the tertiary institution students whom they work with. Ansell (personal communication, 31 January 2020), said that the system enables Intellimali to allocate funds to a "pocket" (e.g. food, clothing, books) and then link specific merchants (retailers) to a "pocket". This means that money is "ring-fenced" and can only be spent on the appropriate items at the registered shops. Cash can also be withdrawn from the "pocket" at registered merchants. Intellimali currently uses this system successfully to administer bursaries and study loans for students at tertiary institutions. The MPP system facilitates the proper and responsible usage of the bursaries. Given the positive comments made by participants during the CSG "case study" about the electronic payment system and the successful application of multi-purpose pockets with students, it is the researcher's belief that the MPP system could work for CSG as well.

The potential benefits of the MPP system for CSG include: (i) mitigation of the risks associated with an exclusively cash option, where the misuse of CSG by grant recipients could be

drastically reduced (ii) a much higher probability that the child's basic needs will be regularly met (iii) the negative influence of "loan sharks" will be minimised (iv) providing the CSG recipient with a child-centred payment option – which could foster more responsible usage of CSG - without being completely restrictive and authoritarian. Despite the benefits, it is important to be conscious of the potential constraints of the MPP system for CSG: (i) a substantial financial investment by the State to introduce the new technology country-wide (ii) although a more effective and responsible manner of using the CSG will be promoted, it is not guaranteed (iii) it might not be feasible to set up the required infrastructure for electronic payments at every school, to pay school fees.

Having weighed up the prospective benefits and limitations of the MPP system, it is the researcher's view that the MPP system could substantially improve the effectiveness of CSG. This, in turn, has positive implications for child development and poverty reduction. In view of this it is recommended that SASSA conducts extensive research on the feasibility of disbursing a larger CSG (recommendation 7.3.3.) to recipients through a multi-purpose pocket system – as an option. Funds can be linked to the SASSA card or a dedicated cell phone application according to food, clothing, school "pockets", with access to a limited cash amount. The proviso for this recommendation would be that the exclusively cash option - as currently is the case- would still be available to CSG recipients.

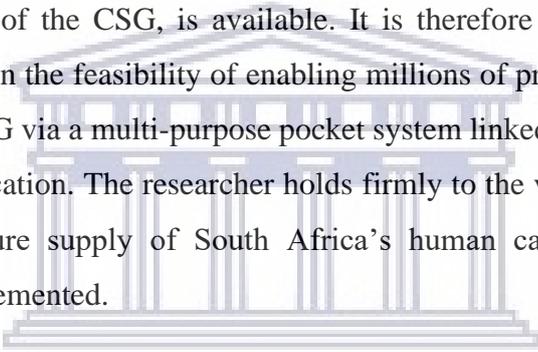
7.4. Overall implications for policy and future research

The chapter (and mini-thesis) culminates with a series of recommendations to improve the effectiveness of CSG in South Africa that, in the opinion of the researcher, are critical for policy-makers to consider. It is highly recommended that senior authorities responsible for the implementation of CSG in South Africa consider:

- Enforcing conditions differently
- Addressing the child's needs holistically
- Increasing the CSG
- Monitoring the use of CSG and child well-being
- Introducing an MPP system

It is the view of the researcher that these recommendations could have far-reaching benefits for CSG at a national level. This study has presented documented global evidence of the benefits

of “nudging” and “labelling”, as well as the light and flexible application of conditions for CSG. Consequently, the possibility of these conditions substantially contributing to the protection of the constitutional right to food security, education, and health of approximately 13 000 000 children in South Africa, justifies and requires further research. What the poor need are sustainable solutions to poverty alleviation. A collaborative, socially cohesive approach to supporting CSG recipients- leading to economic self-reliance - could lift millions of children out of poverty. A significantly higher CSG, where a percentage of the CSG is invested in savings and other income-generating opportunities, and an early exit from CSG is encouraged, will in all probability, strengthen sustainable livelihoods for many poor families. To ensure that the right to social protection of millions of children is upheld - thereby considerably reducing poverty- the South African government must be more intentional about monitoring the well-being of children in the home. This study has also shown that new technology, which could enhance the effectiveness of the CSG, is available. It is therefore imperative that SASSA conducts further research on the feasibility of enabling millions of primary care-givers across South Africa, to utilize CSG via a multi-purpose pocket system linked to the SASSA card or a dedicated cell phone application. The researcher holds firmly to the view that poverty will be reduced and that the future supply of South Africa’s human capital enhanced if these recommendations are implemented.



UNIVERSITY *of the*
WESTERN CAPE

8. REFERENCES

1Life (2019) How to Start a Stokvel. Available at: <https://www.1life.co.za/blog/how-to-start-a-stokvel>. [Accessed 07 February 2020].

Adichie, C. (2009) *'The danger of a single story'*, *Www.Ted.Com*. Available at: https://www.ted.com/talks/chimamanda_adichie_the_danger_of_a_single_story?language=en#%5Cnhttps://www.ted.com/talks/chimamanda_adichie_the_danger_of_a_single_story/transcript?language=en. [Accessed on 03 February 2020].

Aguero, J., Carter, M. and Woolard, I. (2006) *The Impact of Unconditional Cash Transfers on Nutrition: The South African Child Support Grant*. Cape Town.: Southern Africa Labour and Development Research Unit

Anderson, A. A. (2005) *The community builder's approach to theory of change: A practical guide to theory development*, *The Aspen Institute*. New York.

Anheier, H. et al. (2005) *Theory of Change Tool Manual*, *International Network on Strategic Philanthropy*. Washington: International Centre for Not-for-Profit Law.

Babbie, E and Mouton, J. (2011) *The Practice of Social Research*. Cape Town: Oxford University Press Southern Africa Pty Ltd.

Baral, S., Uprety, S. and Lamichane, B. (2016) 'What is a Focus Group Discussion?', *How to Guide FDG*, Nepal:HERD, p. 4.

Benhassine, N., Devoto, F., Duflo, E., Dupas, P., and Pouliquen, V.(no date) *Cash Transfers for Education in Morocco*. Available at: <https://www.povertyactionlab.org/evaluation/cash-transfers-education-morocco> [Accessed: 15 April 2019].

Benhassine, N., Devoto, F., Duflo, E., Dupas, P., and Pouliquen, V.(2013) Turning a Shove into a Nudge? A " Labeled Cash Transfer " for Education, *American Economic Journal: Economic Policy*, *American Economic Association*, vol. 7(3), Cambridge: National Bureau of Economic Research, pages 86-125.

Bittar, A. (2020) *5 Facts about poverty in South Africa*. Available at: <https://borgenproject.org/poverty-in-south-africa/> [Accessed: 12 October 2020].

Bruenig, M. (2014) *Structural poverty, obviously the case*. Available at: <http://mattbruenig.com/2014/07/29/structural-poverty-obviously-the-case/> [Accessed: 02 October 2020].

Burgess, R. (2005) *Field Research: A Sourcebook And Field Manual (contemporary Social Research Series)*. Sixth Edition. New York: Routledge.

Businessballs (2013) *Nudge Theory*. Available at: <https://www.businessballs.com/improving-workplace-performance/nudge-theory/> [Accessed: 14 March 2019].

Business Dictionary (2019) *Social Contract, Business Dictionary*. Available at: <http://www.businessdictionary.com/definition/social-contract.html> [Accessed: 17 August 2019].

Camfield, L., Streuli, N. and Woodhead, M. (2008) Children's Well-being in Contexts of Poverty: Approaches to Research, Monitoring and Participation, Volume 17, *International Journal of Children's Rights*. Oxford: University of Oxford, pp. 65-109.

Case, D. (1990) *The community's toolbox: the idea, methods and tools for participatory assessment, monitoring and evaluation in community forestry*. Rome: Food and Agriculture Organization of the United Nations.

Chapman, S. (2014) 'What are Cochrane Reviews?' *Evidently Cochrane*. Available at: <http://www.evidentlycochrane.net/what-are-cochrane-reviews/> [Accessed: 03 September 2019].

Cherisch, M. and Fonn, S (2017) South Africa's child support grant should start in pregnancy - study. Available at: https://www.parent24.com/Pregnant/Getting_Ready/sas-child-support-grants-should-start-in-pregnancy-20170208 [Accessed: 10 January 2020].

CIRT (2018) *Case Study Method - Center for Innovation in Research and Teaching*. Available at: https://cirt.gcu.edu/research/developmentresources/research_ready/descriptive/case_study [Accessed: 18 April 2019].

Coetzee, M. (2013) Finding the Benefits: Estimating the Impact of the South African Child Support Grant Stellenbosch Economic Working Papers: 16/11. 16/11. Stellenbosch: University of Stellenbosch.

Corlazzoli, V and White, J. (2013) Practical Approaches to Theories of Change in Conflict, Security and Justice Programmes: Part II: Using Theories of Change in Monitoring and Evaluation. London: Department for International Development.

Dahir, A. (2018) *There's new evidence giving cash to the poor is more transformative than we thought*. Available at: <https://qz.com/africa/1473226/unconditional-cash-transfers-help-reduce-poverty-in-africa/> [Accessed: 28 August 2018].

Dawes, A., Bray, R. and Van der Merwe, A (2007) *Monitoring Child Well-Being A South African rights-based approach*. Pretoria: HSRC Press.

Devereux, S. and Sabates-Wheeler, R. (2004) *Transformative social protection for Africa's children*. IDS Working Paper 232. Sussex: Institute of Development Studies.

Devereux, S. (2013) 'Trajectories of social protection in Africa', *Development Southern Africa*, 30(1), pp. 13–23. doi: 10.1080/0376835X.2013.755871.

Devereux, S. and Waidler, J. (2017) 'Why does malnutrition persist in South Africa despite social grants? *Food Security SA Working Paper Series No.001*'. Cape Town: Centre of Excellence in Food Security.

Department of Welfare (1997) 'White Paper For Social Welfare: Principles, guidelines, recommendations, proposed policies and programmes for developmental social welfare in South Africa.', White Paper For Social Welfare, Pretoria: Department of Welfare. (August), pp. 1–101.

Dey, I. (2005) *Qualitative Data Analysis. A User-Friendly Guide for Social Scientists*. Second Edi. New York: Routledge: Taylor and Francis Group.

Dictionary.com (2018) *What Does Positionality Mean?* Available at: <https://www.dictionary.com/e/gender-sexuality/positionality/> [Accessed: 27 January 2020].

Dlamini, P. (2018) *You can't properly feed a child on current social grant_ NGO*. Available at: <https://www.sowetanlive.co.za/news/south-africa/2018-02-28-you-cant-properly-feed-a-child-on-current-social-grant-ngo/> [Accessed: 17 January 2020].

DPME (2018) *SASSA- Update on the new payment system*. Available at: <https://www.dpme.gov.za/news/Pages/SASSA--Update-on-the-new-payment-system.aspx> [Accessed: 12 January 2020].

Doyle, B. (2018) *What Is a Semi-Structured Interview ?* Available at: <https://www.thebalancecareers.com/what-is-a-semi-structured-interview-2061632> [Accessed: 23 April 2019].

Dreibelbis, R., Kroeger, A., Hossain, K., Venkatesh, M. and Ram, P. (2016) 'Behavior change without behavior change communication: Nudging handwashing among primary school students in Bangladesh', *International Journal of Environmental Research and Public Health*. Basel: MDPI.

DSD, SASSA and UNICEF (2011) *Child Support Grant Evaluation 2010: Qualitative Research Report, Qualitative Research*. Pretoria: DSD, SASSA and UNICEF.

DSD, SASSA & UNICEF. (2012) *The South African Child Support Grant Impact Assessment: Evidence from a survey of children, adolescents and their households*. Pretoria: DSD, SASSA & UNICEF.

DSD (2016) *Media Statement by the Minister of Social Development, Ms Bathabile Dlamini, MP, on the occasion of the Media Briefing on Unauthorised Grant Deductions*. Available at: www.sassa.gov.za/index.php/newsroom/199-media-statement-by-the-minister-of-social-development-ms-bathabile-dlamini-mp-on-the-occasion-of-the-media-briefing-on-unauthorised-grant-deduction [Accessed: 5 June 2019].

Duman, A. (no date) *Conditional Cash Transfers in Turkey: Advantages and Disadvantages*. Budapest: Central European University, Budapest.

Dupas, P. (2011) *Health Behavior in Developing Countries*. Prepared for the *Annual Review of Economics*, Vol. 3 (Sep. 2011). California: Department of Economics, University of California, pp. 425-449

Du Toit, A., Hlatshwayo, S. , Neves, D., Samson, M and Van Niekerk, I. (2009) *The use and effectiveness of social grants in South Africa*. Cape Town: EPRI.

Ecoi.net (2018) *UN Committee on Economic, Social and Cultural Rights (CESCR)*. Available at: <https://www.ecoi.net/en/source/11512.html> [Accessed: 18 January 2020].

Elahi, M. (2005) 'What Is Social Contract Theory?', Sophia Project, Long Island, New York: Sophia Omni, pp. 1–7.

Farquhar, J. (2012) *Case Study Research for Business*. London: Sage Publications Ltd.

Ferguson, J. (2015) *Give a Man a Fish. Reflections on the New Politics of Distribution*. California: Duke University Press.

Fiszbein, A. and Schady, N. R. (2009) *Conditional Cash Transfers. Reducing Present and Future Poverty*. Washington: World Bank.

Fouka, G and Mantzorou M. (2011) ‘What are the Major Ethical Issues in Conducting Research? Is there a Conflict between the Research Ethics and the Nature of Nursing?’, *Health Science Journal*, 5(1), London: iMedPub Ltd, pp. 3–14.

Freeland, N. (2007) ‘Superfluous, pernicious, atrocious and abominable? The case against conditional cash transfers’, *IDS Bulletin*, Sussex: Institute of Development Studies.

Friend, C. (no date) *Social Contract Theory*. Available at: <https://www.iep.utm.edu/soc-cont/> [Accessed: 20 May 2019].

Gan, K. (2016) *The Benefits and Drawbacks of Unconditional Cash Transfer*. Available at: <https://nextgenpolitics.org/a-radical-concept-giving-cash-directly/> [Accessed: 2 June 2019].

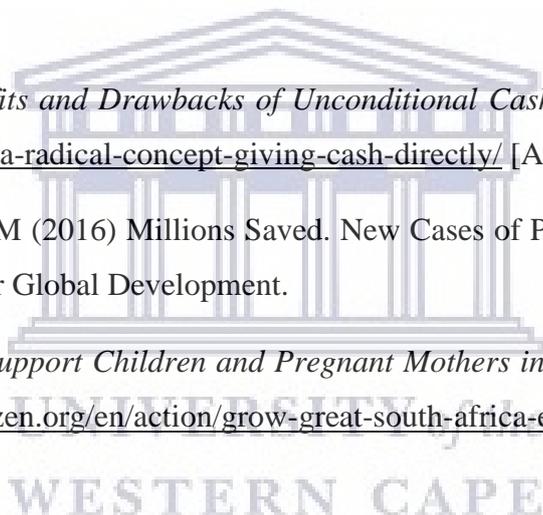
Glassman, A and Teman, M (2016) *Millions Saved. New Cases of Proven Success in Global Health*. London: Centre for Global Development.

Global Citizen (no date) *Support Children and Pregnant Mothers in South Africa!* Available at: <https://www.globalcitizen.org/en/action/grow-great-south-africa-end-stunting/> [Accessed: 10 January 2020].

Govender, M. (2011) *Conditional cash transfers as a means of addressing poverty in South Africa*. Pretoria: University of South Africa.

Gram, L. *et al.* (2019) ‘There is no point giving cash to women who don’t spend it the way they are told to spend it’ – Exploring women’s agency over cash in a combined participatory women’s groups and cash transfer programme to improve low birthweight in rural Nepal’, *Social Science and Medicine*, 221, Washington: Elsevier.

Grawitch, M (2020) *Nudge Theory: Why It Doesn’t “Work” During a Pandemic*. Available at: <https://www.psychologytoday.com/za/blog/hovercraft-full-eels/202005/nudge-theory-why-it-doesn-t-work-during-pandemic> [Accessed: 06 October 2020].



Grunland, S and Hochfeld, T. (2019) 'That Child Support Grant Gives Me Powers' –Exploring Social and Relational Aspects of Cash Transfers in South Africa in Times of Livelihood Change, *The Journal of Development Studies*, Oxfordshire: Taylor and Francis Group.

Grinspun, A. (2016) 'No small change: The multiple impacts of the Child Support Grant on child and adolescent well-being', *South African Child Gauge*, Cape Town: Children's Institute, University of Cape Town, pp. 44–54.

GroundUp (2015) '*Spotlight on social grants: SASSA's bid to stop illegal deductions*'. https://www.groundup.org.za/article/spotlight-social-grants-sassas-bid-stop-illegal-deductions_3372/. [Accessed: 21 April 2019].

Handa, S. *et al.* (2018) 'Can unconditional cash transfers raise long-term living standards? Evidence from Zambia', *Journal of Development Economics*. Washington: Elsevier.

Heinrich, C. J. and Knowles, M. T. (2018) *A Fine Predicament: Conditioning, Compliance and Consequences in a Labelled Cash Transfer Program*. 429. Nashville: Vanderbilt University.

Hohmann, J., Gallegos, L., Samson, M., Mvulane, Z., Pillay, N. and Mavuso, Z (2017) *Studies Show Benefits of Child Support Grants – Capacity4dev*. Available at: <https://europa.eu/capacity4dev/articles/studies-show-benefits-child-support-grants> (Accessed: 23 December 2019).

Humans of Data (2017) *How to Conduct a Successful Focus Group Discussion*. Available at: <https://humansofdata.atlan.com/2017/09/conduct-successful-focus-group-discussion/> [Accessed: 21 May 2019].

Hunter, N. and Adato, M. (2007) *The Child Support Grant in Kwazulu-Natal: Perceptions and Experience Inside the Household Research*, Report 73 October 2007, School of Development Studies- UKZN: Durban.

Huntington, D. (2010) *The impact of conditional cash transfers on health outcomes and use of health services in low and middle-income countries*, *Cochrane Database of Systematic Reviews*. Geneva: WHO.

Hutton, B. (2018) *Social Security Seminar Report. Facing a world without full employment*. Cape Town: Farm Design.

IGI Global (no date) *What is Positionality?* Available at: <https://www.igi-global.com/dictionary/queering-the-marianist-charism/23040> [Accessed: 27 January 2020].

Imperial College London (no date) *What is Nudge Theory?* Available at: <https://www.imperial.ac.uk/nudgeomics/about/what-is-nudge-theory/> [Accessed: 01 October 2020].

International Labour Organization (2016) *Our impact, their voice_ South Africa's Child Support Grant*. Available at: https://www.ilo.org/global/about-the-ilo/newsroom/features/WCMS_468093/lang--en/index.htm [Accessed: 31 December 2019].

Jansen, J and Walters, C. (2020) *A Primer on Race, Science and Society*. Stellenbosch: African Sun Media.

Kakwani, N., Soares, F. V. and Son, H. H. (2005) 'Conditional cash transfers in African countries', *Working Papers*, (9), Brasilia: International Poverty Centre - UNDP.

Kangasniemi, M., Knowles, M. & Karfakis, P. (2020) *The role of social protection in inclusive structural transformation*. Rome: FAO.

Kelly, G and GroundUp Staff (2019) *Everything you need to know about social grants*. Available at: https://www.groundup.org.za/article/everything-you-need-know-about-social-grants_820/ [Accessed: 19 September 2019].

Khosa, P. and Kaseke, E. (2017) 'The Utilisation of the Child Support Grant by Caregivers: The Case of Ba-Phalaborwa Municipality in Limpopo Province', *Social Work/Maatskaplike Werk*, 53(3). Johannesburg: University of Witwatersrand.

Khumalo, G. (2009) *Beneficiaries urged to use alternative payment methods _ SANews*. Available at: <https://www.sanews.gov.za/south-africa/beneficiaries-urged-use-alternative-payment-methods> [Accessed: 11 January 2020].

Laerd Dissertation (2012) *Purposive sampling*, Lund Research Ltd. Available at: <http://dissertation.laerd.com/purposive-sampling.php> [Accessed: 9 February 2019].

Law of Business Enterprises (2018) *Advantages and disadvantages of Stokvel*. Available at: <http://mu haz.org/law-of-business-enterprises-300-onr300.html?page=6> [Accessed: 9 January 2020].

Legal Aid South Africa (2018) *Child Support Grant*. Available at: <https://legal-aid.co.za/2018/09/26/child-support-grant/>. [Accessed: 21 April 2019].

Leibbrandt, M., Woolard, I., Mcewen, H. and & Koep, C. (2010). *Employment and inequality outcomes in South Africa*. Cape Town: SALDRU.

Louw, N. (2018) *Stokvel – The Good and the Bad - Schoeman Law Inc*. Available at: <https://www.schoemanlaw.co.za/stokvels-the-good-and-the-bad/> [Accessed: 9 January 2020].

Lund, F. J. (Francie J. (2008) *Changing social policy: The Child Support Grant in South Africa*. 2nd edn. Cape Town: HSRC Press.

Mail and Guardian (2014) *Loan Sharks ‘eat up’ social grants*. Available at: <https://mg.co.za/article/2014-06-26-loan-sharks-eat-up-social-grants/>. [Accessed: 08 February 2020].

Maregele, B. (2018) *‘Post Office to pay all social grants, including cash’*. Available at: <https://www.groundup.org.za/article/post-office-pay-all-social-grants-including-cash/>. [Accessed on 04 February 2020].

Matuku, S and Kaseke, E. (2014) *The role of Stokvels in improving people's lives: The case in orange farm, Johannesburg, South Africa*. *Social work (Stellenbosch. Online)* vol.50 n.4. Stellenbosch: University of Stellenbosch.

Mbulaheni, V., Kutame, A., Francis, J and Maluleke, M. (2014) *Child support grant and increase of teenage pregnancy in rural dysfunctional secondary schools*. *African Journal for Physical Health Education, Recreation and Dance*. December (Supplement 1:1), 64-74, Gaborone: AFAHPER-SD.

Millions Saved (2015) *South Africa’s Child Support Grant*. Available at: <http://millionsaved.cgdev.org/case-studies/south-africas-child-support-grant>. [Accessed: 03 July 2019].

Mokomo, P. T. (2008) *An analysis of the impact of child support grant on teenage fertility rate in South Africa*. Stellenbosch: Stellenbosch University.

Morariu, J. (2012) *The Grantmaker’s Role in Theory of Change Theory of Change*. Available at: <http://www.scalingwhatworks.org> [Accessed: 20 July 2019].

Mpedi, L. (2017) *‘The Child Support Grant in the Republic of South Africa: Does it comply with the ILO social protection floors recommendation 202 of 2012’*, Johannesburg: University of Johannesburg, pp. 1–23.

Mudzingiri, C., Moyana, E. and Mbengo, F. (2016) 'Caregivers' perspective of the child support grant in South Africa: An exploratory study', *Journal of Psychology in Africa*, 26(2), London: Taylor & Francis Group, pp. 176–179.

Mulgan, G. (2016) *What's wrong with the Theories of Change?* Available at: <http://opening-governance.org/members-corner/2016/9/9/geoff-mulgan-asks-whats-wrong-with-theories-of-change> [Accessed: 9 May 2019].

MSH (2012) 'Strengthening Behaviour Change Communication for Prevention', *Management Sciences for Health*, Massachusetts: MSH, pp. 1–8.

Naong, M. (2011) Learner pregnancy perceptions on its prevalence and the child support grant (CSG) being the possible cause in South African secondary schools. *Journal of Youth Studies*, 14, 901-920. Oxfordshire: Taylor and Francis Group.

NASASA (no date) *The Sharing Economy. An alternative economic system built around sharing.* Available at: <https://nasasa.co.za/>. [Accessed on 07 February 2020].

NIST (2013) 'Glossary of Key Information Security Terms. NISTIR 7298 Rev 2, (May), Gaithersburg:NIST. pp. 58,93.

Omarjee, L. (2019) *SASSA to explain loans which trap grant recipients in 'vicious cycle'*. Available at: <https://www.fin24.com/Money/Debt/sassa-to-explain-loans-which-trap-grant-recipients-in-vicious-cycle-20180215> [Accessed: 8 December 2019].

Orton, I. (2014) *Conditional Cash Transfers and the Human Right to Social Security.* Available at:<https://socialprotection-humanrights.org/expertcom/conditional-cash-transfers-and-the-human-right-to-social-security/> [Accessed: 26 April 2020].

Pace, N, Daidone, S, Daidone, S, and Davis, B (2016) *Does "soft conditionality" increase the impact of cash transfers on desired outcomes? Evidence from a randomized control trial in Lesotho.* Venice: University of Venice.

Palys, T. (2008) 'Purposive sampling. In L. M. Given (Ed.)', *The Sage Encyclopaedia of Qualitative Research Methods*, 2, Los Angeles: SAGE, pp. 697–698.

Patel, L. (2011) 'Child Support Grants', *South Africa Child Support Grants*, 26(1), Cape Town: Oxford University Press, pp. 48–54.

Patel, L., Knijn, T. and Van Wel, F (2015) 'Child Support Grants in South Africa: A Pathway to Women's Empowerment and Child Well-being?', *Journal of Social Policy*, 44(2). Cambridge: Cambridge University Press.

Patel, L. Knijn, T., Hochfeld, T., Isserow, M., Garthe, R., Chiba, J., Moodley, J and Kgaphola, I (2017) Family contexts, Child Support Grants and child well-being in South Africa. Johannesburg: The Centre for Social Development in Africa, University of Johannesburg.

Pietzsch, S. (2011) *Unconditional cash transfers: giving choice to people in need*. Available at: <https://odihpn.org/magazine/unconditional-cash-transfers-giving-choice-to-people-in-need/> [Accessed: 25 May 2019].

Prichard, S. (2018) 10 Examples of Nudge Theory. Available at: <https://www.skipprichard.com/10-examples-of-nudge-theory/> [Accessed: 01 October 2020].

Rahman, W., Mullally, C., Kropp, J and Davidson, K. (2018) Behavioral Nudges and Nutrition Education in Bangladesh: Experimental Evidence Comparing Food Choices in a Lab Setting to Decisions at Home. *Journal of Agricultural & Applied Economics*. Cambridge: Cambridge University Press.

Rath, S. (2015) 'Does Labelling Work as well as Strict Conditionality in Cash Transfers?', *R.A.C.E.*, Delhi: Ipas Development Foundation, pp. 3–7.

Rawat, R. (2012) Change Management Theory of Kurt Lewins. Available at: <https://www.slideshare.net/Rashmi2306/change-management-theory-of-kurt-lewins-13852439> [Accessed: 12 May 2019].

Rawlings, L and Rubio, G. (2003) *Evaluating the Impact of Conditional Cash Transfer Programs: Lessons from Latin America, Human Development*. Washington: World Bank, p.3.

Reddy, T and Sokomani. A (2008) *Corruption and social grants in South Africa, ISS monograph series*, Cape Town: Institute for Security Studies.

Republic of South Africa (1996) 'The bill of rights of the constitution of the Republic of South Africa', *Government Gazette*, No. 17678(38). Pretoria: Republic of South Africa.

Republic of South Africa (1997) *White Paper For Social Welfare: Principles, guidelines, recommendations, proposed policies and programmes for developmental social welfare in South Africa. Government Gazette*. Pretoria: Republic of South Africa.

Republic of South Africa (2004) 'Social Assistance Act No 13 of 2004', *Government Gazette*. 468(714), p. 16. Cape Town: Republic of South Africa.

Republic of South Africa (2014) *Child Support Grant*. Available at: <https://www.gov.za/services/child-care-social-benefits/child-support-grant> [Accessed: 11 June 2019].

Roelen, K., Longhurst, D. and Sabates-Wheeler, R. (2018) *The Role of Cash Transfers in Social Protection, Humanitarian Response and Shock-Responsive Social Protection. IDS Working paper Volume 2018 No 517*, Brighton: Institute of Development Studies.

Rogers, P. (2014) *Theory of Change, Methodological Briefs: Impact Evaluation 2*, Florence: UNICEF.

Rouse, M. (2018) Definition Social Contract, Techtargt. Available at: <https://whatis.techtargt.com/definition/social-contract> [Accessed: 17 August 2019].

Rutter, T. (2016) *How the World Bank is 'nudging' attitudes to health and hygiene*. Available at: <https://www.theguardian.com/global-development-professionals-network/2016/mar/04/world-bank-nudging-attitudes-health-hygiene> [Accessed: 08 October 2020].

Ryder, R., Edwards, A. and Clements, K. (2017) *Measuring the wellbeing of children in care: Views from the frontline and opportunities for change*. National Children's Bureau. London: NCB.

Saavedra, J. (2016) *The effects of conditional cash transfer programs on poverty reduction, human capital accumulation and wellbeing*. Semantic Scholar. California: University of Southern California.

Salehi-isfahani, D. and Mostafavi-dehzooei, M. (2017) *Cash Transfers and Labour Supply: Evidence from a Large-Scale Program in Iran*. Working Paper Series, 1090. Giza: The Economic Research Forum (ERF).

SAnews (2019) *Increased allocations in grants, education and health*. Available at: <https://www.sanews.gov.za/south-africa/increased-allocations-grants-education-and-health> [Accessed: 18 September 2019].

Sarlo, C. (2019). *The Causes of Poverty*. Available at: <https://www.fraserinstitute.org/sites/default/files/causes-of-poverty.pdf> [Accessed: 13 October 2020].

SASSA (2019) *Annual Report 2018/2019*. Available at: <https://www.sassa.gov.za/annual%20reports/Documents/SASSA%20Annual%20Report%202018-2019.pdf>. [Accessed: 26 April 2020].

Serrate, L. (2017) *Does Conditional Cash Transfer incentivize the use of Health Services? The Case of Bolivia*. Lausanne: Lausanne University.

Shahnazarian, D., Hagemann, J., Aburto, M. and Rose, S. . (no date) *Informed Consent in Human Subjects Research*. California: University of Southern California.

Shapiro, J. and Haushofer, J. (2016) 'The Short-term Impact of Unconditional Cash Transfers to the Poor: Experimental evidence from Kenya', *Quarterly Journal of Economics*, Working Paper 131(4), Princeton: Princeton University, pp. 1973–2042.

Shei, A., Costa., F, Reis., M and Ko, A (2014) 'The impact of Brazil's Bolsa Familia conditional cash transfer program on children's health care utilization and health outcomes', *BMC International Health and Human Rights*. London: Bio Med Central, 14(1), pp. 1–9.

Soares, F. and Silva, E. (2010) *Conditional Cash Transfer Programmes and Gender Vulnerabilities: Case Studies of Brazil, Chile and Colombia*. Working Paper number 69. Brasilia: International Policy Centre for Inclusive Growth.

Socialprotection.org (2015) *ICROP: Reaching out to rural poor through mobile service units*. Available at: <https://www.socialprotection.org/discover/publications/icrop-reaching-out-rural-poor-through-mobile-service-units>. [Accessed on: 27 April 2020].

Sowell R and Meadows T. (1994) *An integrated case management model: developing standards, evaluation, and outcome criteria*. PubMed. Maryland: NCBI.

Statistics South Africa (2018) *National Poverty Lines*. Pretoria: Statistics South Africa.

Statistics South Africa (2020) *More than 60% of South African children are poor*. Available at: <http://www.statssa.gov.za/?p=13438>. [Accessed: 12 October 2020].

The Manoff Group (2012) 'Defining social and behavior change communication (SBCC) and other essential health communication terms', *The Portfolio Network*. The Manhoff Group, pp. 1–4. Available at: <http://www.cominit.com/polio/content/defining-social-and-behavior-change-communication-sbcc-and-other-essential-health-commun>. [Accessed: 20 March 2019].

Thibodeaux, W. (no date) *How Loan Sharks Work*. Available at: <https://www.sapling.com/7917976/loan-sharks-work> [Accessed: 7 December 2019].

The Citizen (2019) *Social grants remain a vital safety net – Stats SA*. Available at: <https://citizen.co.za/news/south-africa/society/2136543/social-grants-remain-a-vital-safety-net-stats-sa/> [Accessed: 26 August 2019].

The Manhoff Group (2012) 'Defining social and behaviour change communication (SBCC) and other essential health communication terms', *The Polio Network*. The Manhoff Group, pp. 1–4. Available at: <http://www.cominit.com/polio/content/defining-social-and-behavior-change-communication-sbcc-and-other-essential-health-commun>. [Accessed: 10 August 2019].

The Money Advice Service (2019) *Loan sharks*. Available at: <https://www.moneyadviceservice.org.uk/en/articles/how-to-spot-a-loan-shark> [Accessed: 7 December 2019].

Theewaterskloof Municipality (2019) *Draft 2018/2019 be Development Plan (IDP) Review [First Review of 2017/2021]*. Caledon. Theewaterskloof Municipality.

Triegaardt, J. (2005) 'The Child Support Grant in South Africa: a social policy for poverty alleviation?', *International Journal of Social Welfare*, Volume 14(4), New Jersey: John Wiley & Sons, pp. 249–255.

Twine, R., Collinson, M, Polzer, T. and Khan, K. (2007) 'Evaluating access to a child-oriented poverty alleviation intervention in rural South Africa', *PubMed Central*, 69, Cambridge: Europe PMC Funders Group, pp. 118–127.

UNICEF (2016) *Children and social assistance: Investing in children*. Available at: https://www.unicef.org/southafrica/media_18959.html [Accessed: 13 June 2019].

UNICEF (no date) *Social policy and advocacy - Social protection*. Available at: https://www.unicef.org/southafrica/social_policy_6508.html [Accessed: 26 August 2019].

UNICEF Evaluation Office (2015) Global: Cash Transfer as a Social Protection Intervention: Evidence from UNICEF Evaluations 2010-2014. Available at: http://www.unicef.org/mozambique/pt/hiv_aids_3178.html [Accessed: 26 August 2019].

UNICEF (2017) *Circles of Care. Linking cash, care and protection for children in South Africa*. Pretoria: UNICEF.

United Nations Human Rights Office of the High Commissioner (1990) *Convention on the Rights of the Child*, OHCHR. Available at: <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx> [Accessed: 20 August 2019].

Vogel, I. (2012) Review of the use of 'Theory of Change' in international development, *American Journal of Evaluation*. London: UK Department of International Development.

Voices360 (2019) The universal basic income grant for South Africa would spoil the poor with poverty. Available at: <https://www.voices360.com/community-development/the-universal-basic-income-grant-for-south-africa-would-spoil-the-poor-with-poverty-21421412> [Accessed: 22 August 2019].

Wageningen University and Research (no date) What is the critique on ToC? Available at: <http://www.theoryofchange.nl/resource/question-7-what-critique-toc> [Accessed: 25 June 2019].

Webb, C and Vally, N (2020) *South Africa has raised social grants: why this shouldn't be a stop-gap measure*. Available at: <https://theconversation.com/south-africa-has-raised-social-grants-why-this-shouldnt-be-a-stop-gap-measure-138023> [Accessed: 12 October 2020].

Weber, T.M. (no date) 'Examining Social Contract Theory', *PRAXIS—Alumni for International Human Rights Law Peer Review Journal*, San Francisco: Academia.edu, pp.2–9.

Western Cape Government Provincial Treasury (2017) *Provincial Economic Review and Outlook 2017*. Cape Town. Western Cape Government Provincial Treasury.

Western Cape Government (2020) *SASSA child support grant*. Available at: <https://www.westerncape.gov.za/service/sassa-child-support-grant> [Accessed: 27 April 2020].

Willan, S. (2013) A Review of Teenage Pregnancy in South Africa – Experiences of Schooling, and Knowledge and Access to Sexual & Reproductive Health Services. Cape Town: Partners in Sexual Health.

Williams (2007) The Social and Economic Impacts of South Africa’s Child Support Grant (Extended Version). Available at:

<http://www.mhhe.com/engcs/electrical/papoulis/sppts.mhtml>. [Accessed: 22 August 2019].

Williams, D. (2012) Misuse of social grants is rife. Available at: <https://www.sowetanlive.co.za/news/2012-05-25-misuse-of-social-grants-is-rife/> [Accessed: 22 December 2019].

World Health Organization (2019) Conditional cash transfer programmes and nutritional status. Available at: https://www.who.int/elena/titles/cash_transfer/en/ [Accessed: 10 May 2019].

Yin, R. (2018) Case Study Research and Applications. Design and Methods. 6th edn. California: Sage Publications Ltd.

Zembe-Mkabile, W., Surender, R., Sanders, D., Swart, R., Ramokolo, V., Wright, G. and Doherty, T. (2018) “To be a woman is to make a plan”: A qualitative study exploring mothers’ experiences of the Child Support Grant in supporting children’s diets and nutrition in South Africa’, *BMJ Open*, 8(4). London: BMJ Publishing Group Ltd.



Annexure 1



**THE EFFECTIVENESS OF CHILD SUPPORT GRANTS IN
SOUTH AFRICA**

INTERVIEW WITH CSG RECIPIENTS IN CALEDON

2019

CONDUCTED BY MARK VOLMINK

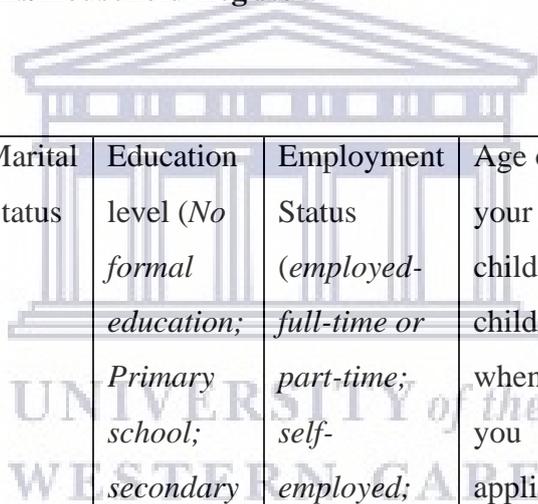
**UNIVERSITY of the
WESTERN CAPE**

Date:

Time:

Questions

1. Biographical Details/Household Register:



Participant	Age	Gender	Marital Status	Education level (<i>No formal education; Primary school; secondary school; tertiary education</i>)	Employment Status (<i>employed-full-time or part-time; self-employed; seasonal farm worker; unemployed</i>)	Age of your child or children when you applied for the CSG for the first time.	For how long have you received the CSG?	Why do you receive the CSG?	Has the CSG been helpful to you? Why?
1.									
2.									

3.										
4.										
5.										
6.										
7.										
8.										
9.										
10.										



2. What do social Policy-makers want to achieve with CSG?

2.1. What do you think the primary aim of the CSG is? (Probing questions: *Why do you think the CSG is for you? Do you think the CSG is reducing poverty in SA? Is this what you think the purpose of the CSG is? Why do you say so? What about the well-being children?*)

2.2. Were you told how to use the CSG in a certain way?

2.3. How do you perceive the CSG should be used for your child and family?

3. What has your experience been with the CSG since you have received the CSG?

3.1. How was the service that you received from SASSA officials when you applied for the grant? Please Explain.

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

3.2. Which documents did you need to apply for the CSG? (Probing: *Did you find them all easily, or were some more difficult to get? How could the process of applying for the CSG be made easier?*)?

3.3. What challenges did you experience when you applied for the grant? (Probing: *Were you treated with dignity and respect by SASSA officials?*)

3.4. Does the child support grant allow you to meet your child's basic needs?

Yes	
No	

3.5. If your answer above is “no”, please explain

3.6. What do you pay from the CSG that you receive? (probing questions: *Why do you feel the CSG should be spent on school fees, cigarettes, transport, paying debt?*)

3.7. How much did you get for the CSG this month? (As a seasonal worker) Do you collect every month or only when you are not working? How much did do you

spend on food, cigarettes, school fees, transport? (Probing questions: *Why spend money on transport, cigarettes, etc.; How much did do you spend on your child? What types of food did you buy this month? Is that the types of food you buy every month?*)

3.8. Do you see the CSG as being for your children, for yourself or for your whole family? (Probing questions: *If you say it is for your child, why do you not spend all the money on your child? If you say it is for your whole family, why do you think it is called the Child Support Grant?*)

3.9. Has the CSG improved your child's life? (Probing questions: *If yes, why do you say so? If no, why?*).

3.10. Has it improved your family's life overall? (Probing questions: *If yes, why do you say so? Why is the CSG not having a better impact on your child's and family's well-being? What about "loan sharks"?*)

3.11. (If you are divorced or separated) Has your ex-husband been giving maintenance money regularly, since you have been receiving the CSG? (Probe: *If not, could the State do anything to assist in this situation?*)

4. How can the CSG be more effective(impact)?

4.1. How do you think the CSG could be designed differently or delivered better, to have a bigger impact on your life? And on your child's life? (Probe: *this is not only about more money. (Probing: How much should the CSG be per month and why? Do you have to travel far every month to withdraw your CSG? Is this very difficult for you? Why is it difficult? Could the Sate assist with this? Should more be done to assist mothers with no or very little educational experience to meet all the requirements to successfully apply for the CSG? Why do you say so?*)

4.2. **Do you think that the CSG should be used for savings schemes such as stokvel, so that the CSG can gave a greater impact?**

4.3. Should the CSG start during pregnancy? (*If yes or no, why do you say so?*)

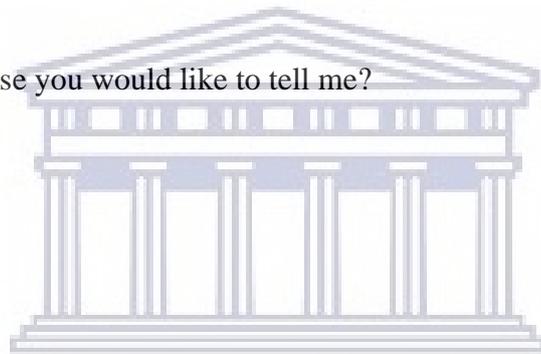
4.4. How do you feel about the electronic payment system? (Probing: *Do you find the electronic banking system easy to operate? What should be done to prevent*

unauthorised deductions from your account? What illegal deductions were made from your account? Do you draw all your money at once from your banking account or do you leave some money in your account? Why? How do feel about the electronic system at supermarkets, where you can use your SASSA card to withdraw cash?)

4.5. What type of support do you need from the state to improve your and your children's lives? (*Probing: What do you think about training for yourself in budgeting, how to save, etc.? Besides the state, who else should offer support and what type of support? What are your thoughts on other income-generation opportunities for yourself?*)

5. Is there anything you would like to ask me?

6. Is there anything else you would like to tell me?



UNIVERSITY *of the*
WESTERN CAPE

Annexure 2



**THE EFFECTIVENESS OF CHILD SUPPORT GRANTS IN
SOUTH AFRICA**

**FOCUS GROUP QUESTIONS
CSG RECIPIENTS IN CALEDON**

2019

CONDUCTED BY MARK VOLMINK

**UNIVERSITY of the
WESTERN CAPE**

Date: ...

Place.....

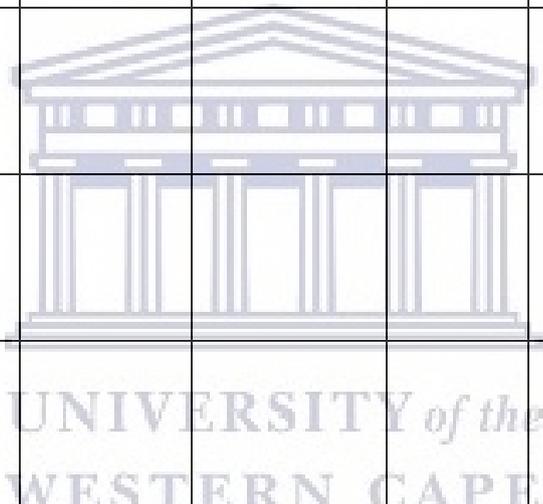
Number of focus group participants:

Questions

1. Biographical Details/Household Register:

Participant	Age	Gender	Marital Status	Education level (<i>No formal education; Primary school; secondary school; tertiary education</i>)	Employment Status (<i>employed- full-time or part-time; self-employed; seasonal farm worker; unemployed</i>)	Age of your child or children when you applied for the CSG for the first time.	For how long have you received the CSG?	Why do you receive the CSG?	Has the CSG been helpful to you? Why?
1.									
2.									
3.									

4.									
5.									
6.									
7.									
8.									
9.									
10.									



2. What do social Policy-makers want to achieve with CSG?

- 2.1. What do you think the primary aim of the CSG is? (Probing questions: *What should the primary aim be? Do you think the CSG is reducing poverty in SA? Is this what you think the purpose of the CSG is? Why do you say so? What about the well-being children?*)
- 2.2. Who should receive the CSG? (Probe: *What are your thoughts on unemployed people in middle- and high-income brackets receiving the CSG?*)
- 2.3. Are CSG recipients told how to use the CSG in a certain way? (Probe: *How should grant recipients use the CSG? What do you think about sensitizing grant recipients on how the CSG should be used?*)

3. Are they achieving what they want to with the CSG?

3.1. How do you perceive the CSG should be used?

3.2. Do you think primary care-givers spend their CSG money well, or do they waste it? (*Probe: Can you think of an example of a community member (CSG recipient) who uses their CSG money well (how do they use it?) Can you describe a case of someone who wastes the CSG money (what do they spend it on?).*)

3.3. What are your comments on the State sensitizing people about how the CSG should be used and about who qualifies for the CSG? (*Probing question: Should the state tell CSG recipients to spend the whole CSG on the child's essential needs (e.g. food, clothing) and on nothing else? Please explain.*)

3.4. How does the community feel about the service that they receive from SASSA officials in respect of efficient and dignified treatment, when they apply for the grant? Please explain. (*Probing: What challenges do CSG recipients experience when they apply for the grant?*)

3.5. Has the CSG improved the lives of young children in your community? (*Probing questions: If yes, why do you say so? If no, why? Would you mind sharing a few examples of success stories?*)

3.6. Has it improved the family's life overall? (*Probing questions: If yes, why do you say so? If no, why? What about the influence of "loan sharks"?*)

4. How can the CSG be more effective(impact)?

4.1. How do you think the following interventions will impact the CSG system in South Africa?

4.1.1. Nudging- an intervention that causes people to change their behaviour, without telling them that they cannot behave in any other way. What can be done to encourage mothers to register their children within the first few weeks of birth? (*Probing: Do you think that there will be an increase in the number of early enrolments, if primary carers are made aware of the benefits for the child if he/she is enrolled within the first 6 weeks of birth? Should the state offer incentives e.g. airtime or food voucher lucky draws, for those who register their child within the first 6 months?*)

- 4.1.2. Labelling- when you point out the positive effects or benefits to someone, of using something for the purpose for which it was intended, causing that person to change his or her behaviour. The person still has a choice (Do you think that the primary carer will spend most of the CSG on the child if the primary carer is regularly made aware, by SASSA officials, of the positive effect that nutritious food has on the child?)
- 4.1.3. Conditionality- when people are told that they will benefit financially if they meet certain requirements but if they do not, they will not receive these benefits. It is their choice. Do you think that the CSG will have a better impact on the child if the child attends school and visits the local clinic regularly? (*Probing: What is your opinion about a primary-care giver meeting certain conditions, before she/he receives a CSG? How do you think those who spend the CSG money incorrectly, should be treated? – Should they be punished by having the money taken away from them and naming someone else as recipient of the money for the beneficiary child (e.g. an aunt or grandmother instead of the mother- (Is this fair on the child?) Should the State put restrictions on how the money can be spent and monitor if the CSG money is spent in this way? Should the primary care-giver be ‘educated’ or sensitized to spend the money better?*)

4.2. Do you think CSG recipients should receive training and support from government? (*Probing: What type of support should they receive? Do you think support in the form of financial literacy, budgeting, home visitations, etc. will benefit CSG recipients? If so why?*)

4.3. Do you think that the CSG should be used for savings schemes such as stokvel, so that the CSG can have a greater impact?

4.4. Is it important for the State to regularly monitor how the CSG is being spent? (*Probing: If so, why? And How? Why is this unnecessary?*)

4.5. Is it important for the State to check on the well-being of the child in the home of the CSG recipient? Why? (*Probe: Why is this unnecessary?*)

5. Is there anything you would like to ask me?

6. Is there anything else you would like to tell me?



UNIVERSITY *of the*
WESTERN CAPE

Annexure 3



**THE EFFECTIVENESS OF CHILD SUPPORT GRANTS IN
SOUTH AFRICA**

**INTERVIEW WITH KEY COMMUNITY INFORMANTS IN
CALEDON**

2019

CONDUCTED BY MARK VOLMINK

**UNIVERSITY of the
WESTERN CAPE**

Date:

Time: ...

Name of Organization:

Purpose of Organization:.....

Designation of Key Informant:

Gender: ...

Job Tasks of Key Informant:.....

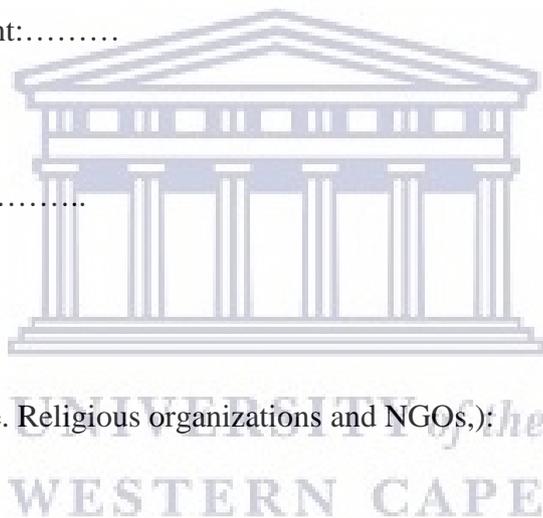
Role in terms of CSG:.....

Type of Key informant (i.e. Religious organizations and NGOs,):

Questions

1. What do social Policy-makers want to achieve with CSG?

- 6.1. What do you think the purpose of the CSG is? (Probing questions: *What should the purpose be? Do you think the CSG is reducing poverty in SA? Is this what you think the purpose of the CSG is? Why do you say so? What about the well-being children?*)
- 6.2. Who should receive the CSG? (Probe: *What are your thoughts on unemployed people in middle- and high-income brackets receiving the CSG?*)



6.3. “Who should benefit from the CSG? (*Probing Questions: Do you think the rest of the family should also benefit from the CSG? If no or yes, why do you say so?*)

6.4. What do you think the understanding of CSG recipients in Caledon is about how the CSG should be used? (*Probe: How should grant recipients use the CSG?*)

2. Are they achieving what they want to with CSG?

2.1. What, in your opinion, do CSG recipients generally pay from the CSG that they receive? (*Probe: How do you perceive the CSG should be used? Do you believe they are spending the bulk or all the CSG on transport, cigarettes, paying debts, etc.; Do you agree with this? Why?*)

2.2. Do you think CSG recipients spend their CSG money well, or do they waste it? (*Probe: If you think they are wasting the CSG, why do you say so? What does “spending CSG money well”, mean to you? What proportion of CSG recipients do you think spend their CSG money well?*)

2.3. What are your comments on the State sensitizing people about how the CSG should be used and about who qualifies for the CSG? (*Probing question: Should the state tell CSG recipients to spend the whole CSG on the child’s essential needs (e.g. food, clothing) and on nothing else? Please explain.*)

2.4. How does the community feel about the service that they receive from SASSA officials in respect of efficient and dignified treatment, when they apply for the grant? Please explain. (*Probing: What challenges do CSG recipients experience when they apply for the grant?*)

2.5. Has the CSG improved the lives of young children in Caledon? (*Probing questions: If yes, why do you say so? If no, why? Would you mind sharing a few examples of success stories?*)

2.6. Has it improved the family’s life overall? (*Probing questions: If yes, why do you say so? If no, why? What about the influence of “loan sharks”?*)

3. How can the CSG be more effective(impact)?

3.1. What, in your opinion, are the shortcomings of the current CSG system?

3.2. What can be done to ensure that the CSG system is delivered more efficiently?

3.3. How do you think the following interventions will impact the CSG system in Caledon?

3.3.1. Nudging?- an intervention that causes people to change their behaviour, without telling them that they can't behave in any other way (*Studies have shown that early enrolment (in the first 2 years of life) has a very positive effect on the child's growth, mental development and scholastic performance. Do you think that there will be an increase in the number of early enrolments, if primary carers are made aware of these facts on a regular basis?*)

3.3.2. Labelling? - when you point out the positive effects or benefits to someone, of using something for the purpose for which it was intended, causing that person to change his or her behaviour. The person still has a choice. (*Do you think that the CSG will have a better impact on the child if the child's primary carer is sensitized regularly by SASSA officials, on the positive effect that nutritious food has on the child?*)

3.3.3. Conditionality- when people are told that they will benefit financially if they meet certain requirements but if they do not, they will not receive these benefits. It is their choice. (*Do you think that the CSG will have a better impact on the child if the child attends school and visits the local clinic regularly?? What is your opinion about a primary-care giver meeting certain conditions, before she/he receives a CSG?*)

3.4. Do you think that the CSG should be used for savings schemes such as stokvel, so that the CSG can give a greater impact?

3.5. Do you think CSG recipients should receive training and support from government or the community? (*Probing: What type of support should they receive? What about the role that civil society should play in providing support? Do you think support in the form of financial literacy, budgeting, home visitations, etc. will benefit CSG recipients? If so why?*)

3.6. Is it important for the State to regularly monitor how the CSG is being spent? (*Probing: If so, why? Why is this unnecessary?*)

3.7. Is it important for the State to check on the well-being of the child in the home of the CSG recipient? (*Probe: Why? Why is this unnecessary?*)

4. Is there anything you would like to ask me?
5. Is there anything else you would like to tell me?
6. Is there anyone else I should talk to about CSG?
7. Do you have any relevant documents you can share?

