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Towards universal social protection for children: Achieving SDG 1.3

ILO-UNICEF Joint Report on Social Protection for Children



ACKNOWLEDGEMENTS

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FOREWORD

The importance of ensuring adequate social protection for children has long been high on the agenda of both the ILO and UNICEF. The right to social protection applies to everyone at every stage of life, and is clearly spelled out in the Universal Declaration of Human Rights, ILO Conventions and Recommendations and the Convention on the Rights of the Child. For children, social protection takes on a special significance, since the negative effects of poverty and deprivation in childhood have ramifications that can last a lifetime.

Over the past several years, and in collaboration with many UN Member States, international organizations, researchers and activists, our organizations have together contributed to making the expansion and universal coverage of social protection a global priority, with specific attention to children as well as other vulnerable groups. The inclusion of social protection in Sustainable Development Goal 1 on poverty is a crucial milestone in establishing that social protection, as a universal human right, is also a critical input to a universally recognized global good – a world free from poverty. The SDGs likewise emphasize universality – building on the understanding that leaving anyone out or behind means falling short of the human rights standards set over 70 years ago. This is yet one more reason to ensure that children are visible in our efforts to reduce poverty and expand social protection.

With the Goals now firmly in place, including the need to ensure that social protection reaches all children and protects them from poverty and deprivation, we need to turn our attention even more to finding the best ways to transform these intentions into reality, and to support countries in these efforts and monitor progress. This new joint report provides an overview of the state of social protection for children, drawing on the ILO's *World Social Protection Report 2017–19* and UNICEF's ongoing work on expanding social protection for children, including current research on universal child grants with the Overseas Development Institute (ODI), to explore the potential of universal child grants to protect all children and develop inclusive societies.

This report comes at a time when discussions about the future of social protection are particularly active, both in the policy and development community and in mainstream media. An important milestone in support of these discussions was the launching of the Global Partnership for Universal Social Protection to Achieve the 2030 Sustainable Development Agenda (USP2030) at the UN in 2016. At the other end of the spectrum, a number of countries often feel pressed by economic downturns to simply cut social protection benefits, with a grave risk of curtailing rights, increasing poverty and thus risking a vicious cycle of underinvestment and underperformance.

By working together to produce this report, UNICEF and ILO hope to shed light on how the move towards universal social protection should, and can, better encompass the rights, concerns and specific issues of children and their families. Their well-being is critical to every country's short- and long-term development, and the approaches and ideas described here are also relevant to the current debates under way about the future shape of social protection as a whole.



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Key messages

- **Social protection systems, and in particular social protection floors, play a crucial role in addressing child poverty and socio-economic vulnerabilities.**

Evidence clearly shows impacts of social protection, and cash transfers in particular, on poverty, food security, health and access to education – thus helping to ensure that children can realize their full potential, breaking the vicious cycle of poverty and vulnerability, and realizing their rights to social security.

- **The impacts of poverty on children are devastating, and yet they are twice as likely to live in poverty as adults.**

One in five children – 385 million – are living in extreme poverty on less than PPP USD 1.90 a day, and almost one in two – 689 million – are living in multidimensionally poor households. Across both measures children are twice as likely to live in poverty as adults. Child poverty is also an urgent concern globally, with a staggering 45 per cent of children living on less than PPP USD 3.10 a day. Moreover, 27 out of 29 OECD countries with data have child poverty rates using relative poverty lines that are above 10 per cent (see Figure a).

- **The vast majority of children still have no effective social protection coverage.**

Effective coverage figures for Sustainable Development Goal (SDG) indicator 1.3.1 show that 35 per cent of children globally receive social protection benefits, with significant regional disparities: while 87 per cent of children in Europe and Central Asia and 66 per cent in the Americas receive benefits, this is the case for only 28 per cent of children in Asia and the Pacific and 16 per cent in Africa (see Figure b).

- **A positive trend is the expansion of cash transfers for children.**

Countries which have made great strides towards universal social protection coverage include Argentina, Brazil, Chile and Mongolia. Yet, in many countries, social protection programmes for children struggle with limited coverage, inadequate benefit levels, fragmentation and weak institutionalization.

Recent years have witnessed a groundswell of interest in universal child grants (UCGs), with a number of countries outside the OECD expressing an interest in adopting UCGs or quasi-UCGs

- **There is significant expenditure and investment in social protection for children, but more is needed.**

Data on social protection expenditure for children aged 0–14 in 139 countries show that, on average, 1.1 per cent of GDP is spent on child benefits; again there are large regional disparities, from 0.1 per cent in North Africa and the Arab States to 2.5 per cent in Europe. To extend social protection for children, more fiscal resources are needed. This is affordable even in the poorest countries (see Figure c).

- **Despite this important progress, some countries are cutting allowances.**

A number of countries undergoing fiscal consolidation policies are reducing family and child benefits and allowances, often narrow-targeting child benefits to the most poor and thus excluding vulnerable children from their legitimate right to social protection. Efforts need to be made to ensure that short-term fiscal adjustment does not undermine progress.

- **Recommendations:** Towards the aim of achieving SDG 1.3 for children, this report makes the following recommendations.

- Rapid expansion of child and family benefits for children, including the progressive realization of universal child grants as a practical means to rapidly increase coverage.
- Ensure that universal approaches to child and family benefits are part of a social protection system that connects to other crucial services beyond cash, and addresses life-cycle risks.
- Institutionalize monitoring and reporting on social protection for children, including establishing a periodic interagency report.



Figure a

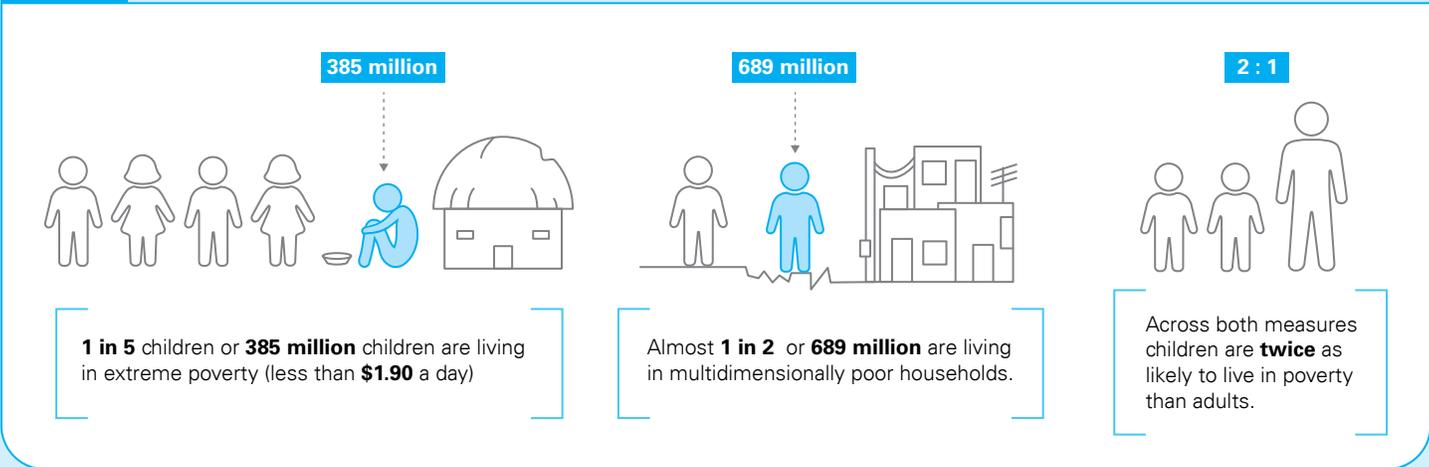


Figure b

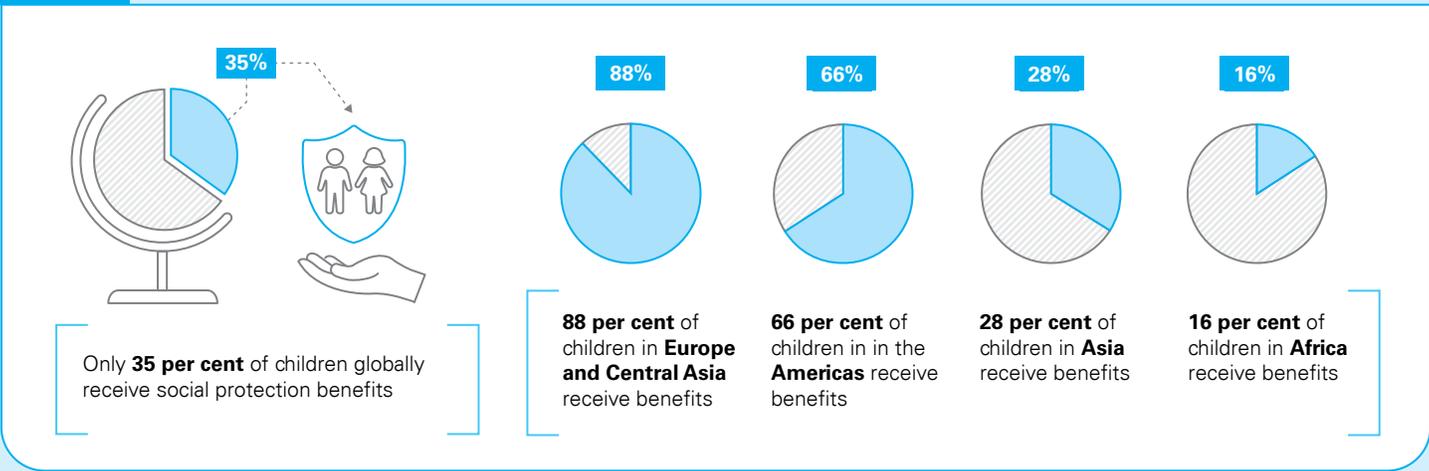
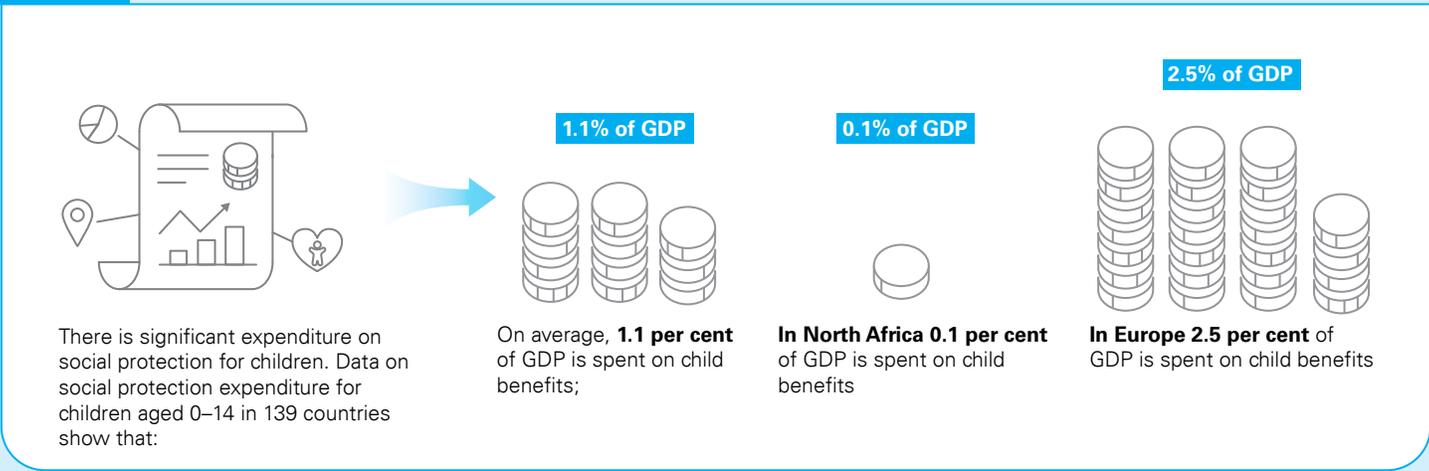


Figure c







The challenge of child poverty

Through Goal 1 of the SDGs, UN Member States have for the first time committed to ending extreme child poverty, and halving the poverty of children according to national definitions by 2030. Further, under Target 1.3, Member States also explicitly commit to increasing social protection coverage, including for children (Box 1).¹

Despite marked progress over recent decades, one in five children (19.7 per cent) are struggling to survive on less than PPP USD 1.90. In other words, 385 million children are living on less than USD 1.90 a day. Further, the data show that it is the youngest children that are most affected, with around 20 per cent of those aged 0 to 9 struggling to survive on less than USD 1.90 a day, compared with 14.6 per cent of children aged 15 to 17 and 9.5 per cent of adults (UNICEF and World Bank, 2016). Overall, children are more than twice as likely as adults to be living in extreme income poverty (see Figure 1).

Geographically, while around a third of children living in extreme poverty are in South Asia, the greatest burden of poverty for children is in Africa, which is home to half the world's children struggling to survive on less than USD 1.90 (Figure 2). Given demographic and growth projections, it is estimated that in 2030, nine out of ten children in extreme poverty will live in sub-Saharan Africa (UNICEF, 2016).

¹ This report is a joint effort by ILO and UNICEF to reflect recent developments in social protection for children and expand on child poverty information by providing data on monetary and multidimensional child poverty. Building on Chapter 2 of the *World Social Protection Report* (ILO, 2017a) and research from UNICEF, this update has a specific focus on recent developments related to universal child grants (UCGs) and has been prepared as an input intended to complement the International Conference on Universal Child Grants, convened by ILO, UNICEF and the Overseas Development Institute (ODI) in February 2019.



1 in 5 children (19.7%) or **385 million** children are living in extreme poverty (less than **\$1.90** a day)

Around **21%** of children **0 to 9** struggling to survive on less than \$1.90 a day



14.6% of children **15 to 17** struggling to survive on less than \$1.90 a day



9.5% of **adults** struggling to survive on less than \$1.90 a day





Box 1:

The Sustainable Development Goals: The first clear global mandate to address child poverty and expand social protection

Goal 1: End poverty in all its forms everywhere

Target 1.1: By 2030, eradicate extreme poverty for all people everywhere, currently measured as those living on less than USD 1.25 a day.

- Indicator: Proportion of population below the international poverty line disaggregated by sex, age group, employment status and geographic location.

Target 1.2: By 2030, reduce at least by half the proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions.

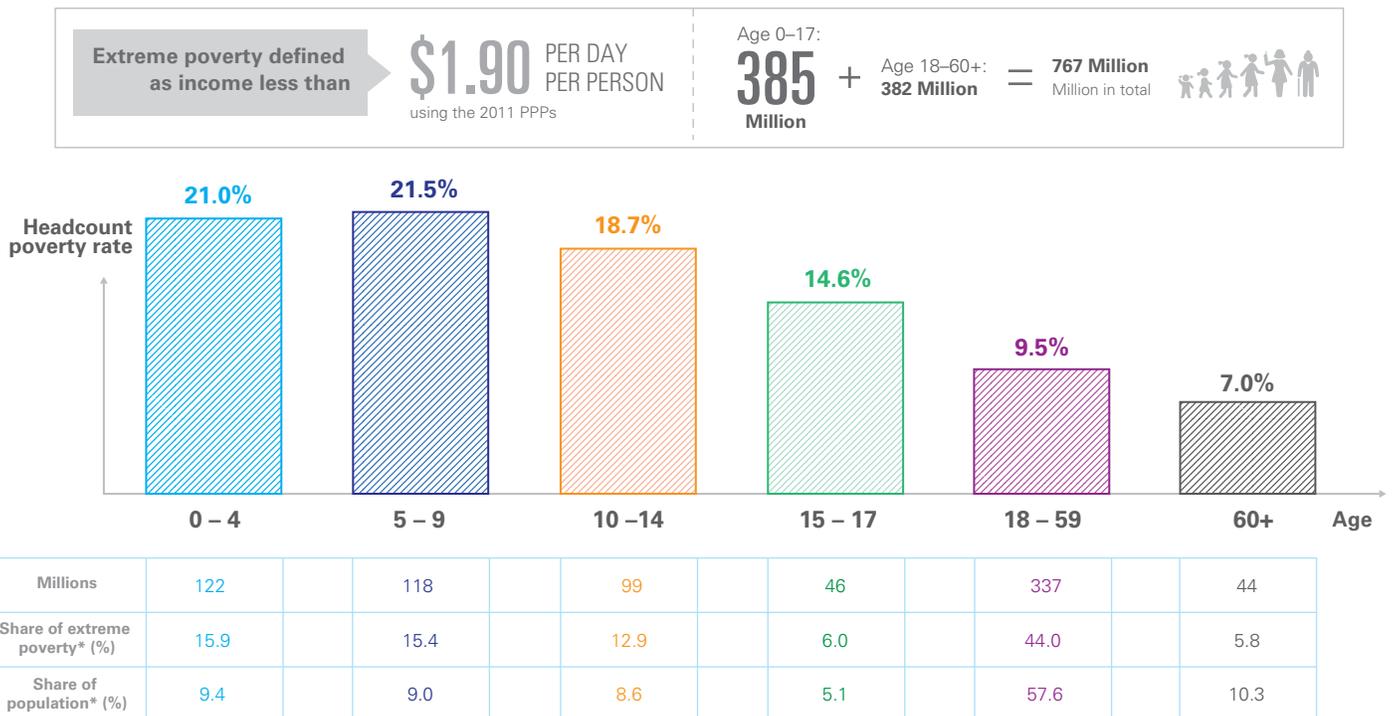
- Indicator 1: Proportion of population living below the national poverty line, disaggregated by sex and age group.

- Indicator 2: Proportion of men, women and children of all ages living in poverty in all its dimensions according to national definitions.

Target 1.3: Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030, achieve substantial coverage of the poor and the vulnerable.

- Indicator 1: Percentage of the population covered by social protection floors/systems, disaggregated by sex, and distinguishing children, unemployed workers, older people, those with disabilities, pregnant women/newborns, work injury victims, the poor and the vulnerable.

Figure 1 Number of children and adults in extreme poverty



Source: GMD, UNDESA, WDI, PovcalNet
 Note: *Reflecting the sample of 89 countries

However, while focusing on the most extreme forms of child poverty is vital, it can obscure the fact that child poverty is a truly global problem. For example, raising the poverty threshold to PPP USD 3.10 per day per person reveals that a staggering 45 per cent of children worldwide subsist in households with income/consumption in “moderate” poverty, compared with nearly 27 per cent of adults (UNICEF and World Bank, 2016). Further, the problem of child poverty extends to high-income countries: 27 OECD countries have child poverty rates above 10 per cent, with only two countries (Denmark and Finland) maintaining them below 5 per cent.² And since the global financial and economic crisis of 2007-08, child poverty has been increasing in a number of European countries, including Belgium, Bulgaria, Czech Republic, Estonia, France, Greece, Hungary, Luxembourg, Malta, Portugal, Romania, Slovakia, Slovenia, Spain and Sweden (UNICEF, 2017a), due to the compounding effects of low employment rates and austerity cuts (Cantillon et al., 2017; ILO, 2014; Ortiz and Cummins, 2012).

Crucially, child poverty is multidimensional, and deprivations are often mutually reinforcing: poor health, malnutrition, low access to or quality of education, and poor housing conditions including a lack of water and sanitation define children’s experience of poverty more accurately than measures of income. Monetary measures of poverty do not fully reflect the complex picture of the multiple deprivations children may face even when living above a certain monetary threshold.

The Oxford Poverty and Human Development Initiative’s Multidimensional Poverty Index (MPI) disaggregates household-based estimates for children and shows that almost two in five are living in multidimensionally poor households – a total of 689 million. Put another way, one in every two people (48 per cent) living in multidimensionally poor households is a child – despite children making up only around a third of the global population. The great majority of these children (87 per cent) are growing up in South Asia or sub-Saharan Africa – roughly equal numbers in each region. For all 103 countries examined, multidimensional poverty is higher for children than for adults (Alkire et al., 2017).

There is also a growing body of information that assesses children’s multidimensional poverty individually rather than as part of a household: in sub-Saharan Africa, for example, it is estimated that two-thirds of children experience two or more deprivations of multidimensional poverty (de Milliano and Plavgo, 2014). Worldwide, an estimated 5.4 million children under the age of 5 died in 2017, most from preventable causes (UNICEF, 2018c). Nearly half of these deaths are attributable to undernutrition. Despite some progress, malnutrition still affects millions of children: 155 million under the age of 5 are stunted and begin their lives at a marked disadvantage (UNICEF, WHO and World Bank Group, 2017).

2. Data refer to percentage of children (aged 0–17) with an equivalized post-tax and -transfer income of less than 50 per cent of the national annual median equivalized post-tax and -transfer income in 2015/16 or nearest available year (Global Coalition to End Child Poverty and OECD, 2018).



Figure 2 Extreme child poverty by country/region



	Children headcount poverty rate	Adults headcount poverty rate (%)	Share of extremely poor children * (%)	Share of children in population* (%)
East Asia/Pacific	5.6	2.9	7.8	27.2
of which China	2.0	1.8	1.8	16.7
South Asia	19.5	12.6	35.7	35.7
of which India	22.1	14.3	30.3	26.8
Sub-Saharan Africa	48.7	37.7	51.7	20.7
Latin America and Caribbean	8.1	4.0	4.4	10.5
Europe and Central Asia	1.4	0.6	0.4	5.6
Total	19.5	9.2	100.0	100.0

Source: GMD, UNDESA, WDI, PovcalNet

Note: * Reflecting the sample of countries in GMD.

Results for Middle East and North Africa are not reportable due to low representation of country level data in that region

That children are routinely more likely than adults to be living in poverty should be among the highest moral and policy concerns. Most immediately, poverty affects children differently than adults owing to the vulnerability of their life stage, with negative effects on nutrition, health, education and many other facets of child well-being that can have long-term consequences for their future development (UNICEF, 2012; Global Coalition against Child Poverty, 2015). These impacts are both physiological and environmental and, given the complexity of child development, they can be hard to pull apart. Evidence does suggest that poverty during early childhood development can have particularly adverse effects, as a young brain develops rapidly during these key years (Cunha et al., 2006; Cunha and Heckman, 2010).

While poverty in childhood is felt most immediately and brutally by children themselves, as they become the next generation of adults that build societies and drive

economies, child poverty has broad and long-term impacts: if potential is curtailed in childhood, productivity in adulthood will be diminished and a nation's pool of talent reduced, resulting in lower incomes and reduced economic growth and prosperity (UNICEF, 2012). According to the World Bank, for example, investment in health and education in childhood reaps significant returns. The Bank's Human Capital Index (HCI) documents the link between health and education investments and the productivity of future workers. If governments invest in good-quality health and education, this can improve a country's HCI and future growth (World Bank, 2018a).



The role of social protection in addressing child poverty and socio-economic vulnerabilities

Social protection for children is essential for reducing and preventing child poverty and achieving the SDGs of ending extreme child poverty and halving child poverty according to national definitions by 2030. The importance of social protection is underscored by its inclusion in Target 1.3, especially as part of nationally defined social protection floors. Furthermore, in order to maximize the impact on children, all social protection interventions should respect the principles anchored in the Joint Statement on Advancing Child-Sensitive Social Protection issued in 2009 by a coalition of UN agencies, bilateral donor agencies and international NGOs (see Box 2). Realizing children's rights to social security and an adequate standard of living, health, education and care, and achieving the 2030 Agenda, will not be possible without a conducive policy framework that prioritizes children's needs and requirements. International standards for child and family benefits (see Box 3) are a significant component of this policy framework. An

important international effort has led to the Global Partnership for Universal Social Protection to Achieve the 2030 Sustainable Development Agenda (USP2030),³ of which both ILO and UNICEF are core members. The fact that hundreds of millions of children are denied access to social protection contradicts democratic values and social justice, damages development efforts, and has high political costs for governments. The Global Partnership for Universal Social Protection demonstrates the international community's determination to rectify this neglect and deepen cooperation.

³ The Global Partnership for Universal Social Protection to Achieve the 2030 Sustainable Development Agenda, co-led by the ILO and the World Bank, was launched in New York during the 71st UN General Assembly in 2016. As of 2017, it had brought together around 15 international organizations and other development partners. See: <http://www.social-protection.org/gimi/gess/NewYork.action?id=34>



Box 2:

Child-sensitive social protection

The Joint Statement on Advancing Child-Sensitive Social Protection (DfID et al., 2009) affirms that the design, implementation and evaluation of child-sensitive social protection programmes should aim to:

- avoid adverse impacts on children, and reduce or mitigate social and economic risks that directly affect children's lives;
- intervene as early as possible where children are at risk, in order to prevent irreversible impairment or harm;
- consider the age and gender-specific risks and vulnerabilities of children throughout the life cycle;
- mitigate the effects of shocks, exclusion and poverty on families, recognizing that families raising children need support to ensure equal opportunity;
- make special provision to reach children who are particularly vulnerable and excluded, including children without parental care, and those who are marginalized within their families or communities due to their gender, disability, ethnicity, HIV and AIDS, or other factors;
- consider the mechanisms and intra-household dynamics that may affect how children are reached, paying particular attention to the balance of power between men and women within the household and broader community; and
- include the voices and opinions of children, their care-givers and youth in the understanding and design of social protection systems and programmes.

The Joint Statement was issued by the UK Department for International Development (DfID), HelpAge International, Hope & Homes for Children, the Institute of Development Studies, the ILO, the Overseas Development Institute (ODI), Save the Children UK, UNDP, UNICEF and the World Bank.

Source: DfID et al., 2009, as summarized in ILO, 2014.



Household-level economic security, including increased food security, has direct implications for child poverty. A recent review and meta-analysis (Hidrobo et al., 2018) of three types of social protection programmes (cash transfers, public works programmes, and food transfers/vouchers) demonstrates that these programmes led to increased asset holdings, including livestock, farm and non-farm productive assets, and savings. The same meta-analysis estimated that the average social protection programme examined increased the value of food consumed or expenditure on it by 13 per cent, and calorific acquisition by 8 per cent. Within social protection programming, cash transfers have been extensively evaluated, with a large number of randomized control trials and quasi-experimental studies assessing their impacts.⁴ A review focusing exclusively on cash transfers found that of nine studies, five showed improvements in poverty headcount, and six a decrease in the poverty gap (Bastagli et al., 2016). In addition, a cross-country review of unconditional government cash transfers in Africa found that programmes generate both household and community-level multipliers, the latter ranging from 1.27 to 2.52 (Handa et al., 2018).

Nevertheless, despite very strong links between the absence of cash transfer programmes and poor dietary diversity and food security – which are key drivers of undernutrition – impacts of cash transfers on nutrition outcomes such as stunting are less clear (Manley et al., 2013), though studies in Mexico, Nicaragua and Colombia have demonstrated that conditional cash transfers (sometimes combined with supplemental feeding) reduced stunting (Ranganathan and Lagarde, 2012). Taken together, this evidence indicates that the determinants of nutrition are complex (de Groot et al., 2017), and that cash alone rarely reduces stunting and chronic malnutrition, suggesting that integrated and complementary services play a role.

In child and maternal health, social protection can reduce cost-related barriers to services, including transport costs, user fees and costs of medicines. Indeed, three reviews (Bastagli et al., 2016; Glassman et al., 2013; Ranganathan and Lagarde, 2012) have shown that cash transfers have successfully increased use of preventive services and immunization coverage generally, and in maternal health specifically, including for prenatal care, skilled birth attendance and facility births. However, there were no measurable impacts on fertility, or maternal or infant mortality. Similarly, impacts on morbidity are less consistent,

potentially reflecting supply-side barriers or additional, complex determinants of health.

There is also significant evidence that cash transfers in various countries have had positive impacts on school enrolment and attendance (Standing and Orton, 2018). A systematic review of 35 studies demonstrated that both conditional and unconditional cash transfers positively affect enrolment (Baird et al., 2014). Cash transfers enable families to overcome the direct and opportunity costs of education, which act as a significant impediment to educational enrolment and completion.

While there are positive impacts of cash on educational attendance, fewer studies have addressed learning outcomes, with those that have done so finding limited impacts, perhaps due to the complex dynamics behind learning outcomes. Nevertheless, increased educational attainment is linked to myriad positive outcomes in adulthood, including improved productive opportunities, enhanced child health, and reduced perpetration and experience of violence. Thus, these positive benefits of existing programmes may yet be fully realized.

4. See for example the Transfer Project of UNICEF, FAO and the University of North Carolina (<https://transfer.cpc.unc.edu/>), Davis et al. (2016) or Bastagli et al. (2016).



The relationship between poverty, cash transfers and child protection issues is complex. Poverty can exacerbate children’s vulnerability to violence, exploitation and neglect; financial stress in a family can push children into illicit work and conflict with the law, and can lead to child marriage. These relationships are not necessarily linear or straightforward, and evidence from impact evaluations of cash transfers reflects this complexity. Cash is no substitute for a society adopting appropriate norms and laws protecting children, such as legislation prohibiting child labour or safeguarding children against abuse or exposure to violence. However, cash transfers can be an important driver behind some child protection issues, and thereby broadly support child protection efforts across multiple domains (Dammert et al., 2018; Peterman et al., 2017).

The potential for cash transfers to improve children’s capacities and potential for healthy, productive futures is also constrained by contextual factors such as environmental shocks, access to markets, and gender norms (see Box 6).

The range of results underlines the wide-ranging impacts of addressing child poverty, and the power of cash transfers in particular as an intervention to achieve this. However, despite the positive impacts of cash transfers on children, cash alone cannot address all the vulnerabilities and exclusion that they face. The impacts on educational and health-related outcomes are thus constrained by the availability and quality of schools and health facilities and providers. Families may also need information and knowledge as well as resources to improve outcomes for children, and in some areas programme design (such as transfer amount and regularity) may be a constraint on the positive impacts of transfers (Davis et al., 2016). Finally, additional attention may need to be paid to social protection programme design in situations where social norms limit access to opportunities (for example, education) for groups of children.

These conclusions provide an opportunity and a warning as we consider expanding cash transfers towards universal provision. On one hand, not only do cash transfer programmes have positive impacts on child outcomes, but they offer a point of contact with children and families living in poverty and vulnerable to it, which – when linked with social care and support – can connect families to knowledge and services to amplify the impacts of cash transfer programmes. On the other hand, expanding cash transfer programmes must not come at the expense of good-quality services, which are essential for families to use transfers to support the success of their children: where budgets need to be increased, funding must come from elsewhere.



**Box 3:****International standards for child and family benefits**

The UN legal framework on human rights contains a number of provisions spelling out various rights of children that form part of their right to social protection. These comprise the right to social security, taking into consideration the resources and circumstances of the child and persons having responsibility for their maintenance;⁵ the right to a standard of living adequate for their health and well-being; and the right to special care and assistance.⁶

The UN Convention on the Rights of the Child (CRC) stipulates that “the States Parties shall recognize for every child the right to benefit from social security, including social insurance, and shall take the necessary measures to achieve the full realization of this right in accordance with their national law” (Article 26). The International Covenant on Economic, Social and Cultural Rights (ICESCR) further requires States to give the widest possible protection and assistance to the family, particularly for the care and education of dependent children.⁷

ILO social security standards complement this framework and provide guidance to countries on how to give effect to the various rights that form part of the right of children to social protection. The ILO Social Security (Minimum Standards) Convention, 1952 (No. 102), Part VII, sets minimum standards for the provision of family (or child) benefits in the form of either a periodic cash benefit or benefits in kind (food, clothing, housing, holidays or domestic help) or a combination of both, allocated for the maintenance of children. The fundamental objective of family benefits should thus be to ensure the welfare of children and the economic stability of their families.

As specified by the ILO’s Committee of Experts on the Application of Conventions and Recommendations, these standards require that family benefits be granted in respect of each child in the family and to all children, for so long as the child is receiving education or vocational training on a full-time basis and is not in receipt of an adequate income determined by national legislation. They

should be set at a level which relates directly to the actual cost of providing for a child and should represent a substantial contribution to this cost. Family allowances at the minimum rate should be granted regardless of means. Benefits above the minimum rate may be subject to a means test. Furthermore, all benefits should be adjusted in order to take into account changes in the cost of providing for children or in the general cost of living (ILO, 2011, paras. 184–186).

ILO Recommendation No. 202 further refines and extends the normative framework, aiming at universal protection. Income security for children is one of the basic social security guarantees constituting a national social protection floor, and should ensure “access to nutrition, education, care and any other necessary goods and services” (Para. 5(b)). Although the guarantee should be nationally defined, the Recommendation provides clear guidance on its appropriate level: the minimum level of income security should allow for life in dignity and should be sufficient to provide for effective access to a set of necessary goods and services, such as may be set out through national poverty lines and other comparable thresholds (Para. 8(b)). Providing for universality of protection, the Recommendation states that the basic social security guarantee should apply to at least all residents, and all children, as defined in national laws and regulations and subject to existing international obligations (Para. 6); that is, to the respective provisions of the CRC, the ICESCR and other relevant instruments. Representing an approach strongly focused on outcomes, Recommendation No. 202 allows for a broad range of policy instruments to achieve income security for children, including child and family benefits (the focus of this chapter).

5. Universal Declaration of Human Rights (UDHR), 1948, Art. 22; International Covenant on Economic, Social and Cultural Rights (ICESCR), 1966, Art. 9; UN Convention on the Rights of the Child (CRC), Art. 26.

6. UDHR, Art. 25(1) and (2).

7. ICESCR, Art. 10(1).



Building social protection systems for children: Towards universal coverage

Achieving the SDGs, in particular SDG 1 on poverty and SDG 2 on hunger, but also those on health and education (SDGs 3 and 4), depends on the extent to which schemes and programmes are able to reach poor and vulnerable households.

Child and family cash benefit programmes anchored in national legislation

As children ultimately rely on their families to guarantee their well-being, the range of policies and policy instruments available to achieve improved income security and social protection for children is very broad. Child and family cash benefit programmes constitute an important element of national social protection

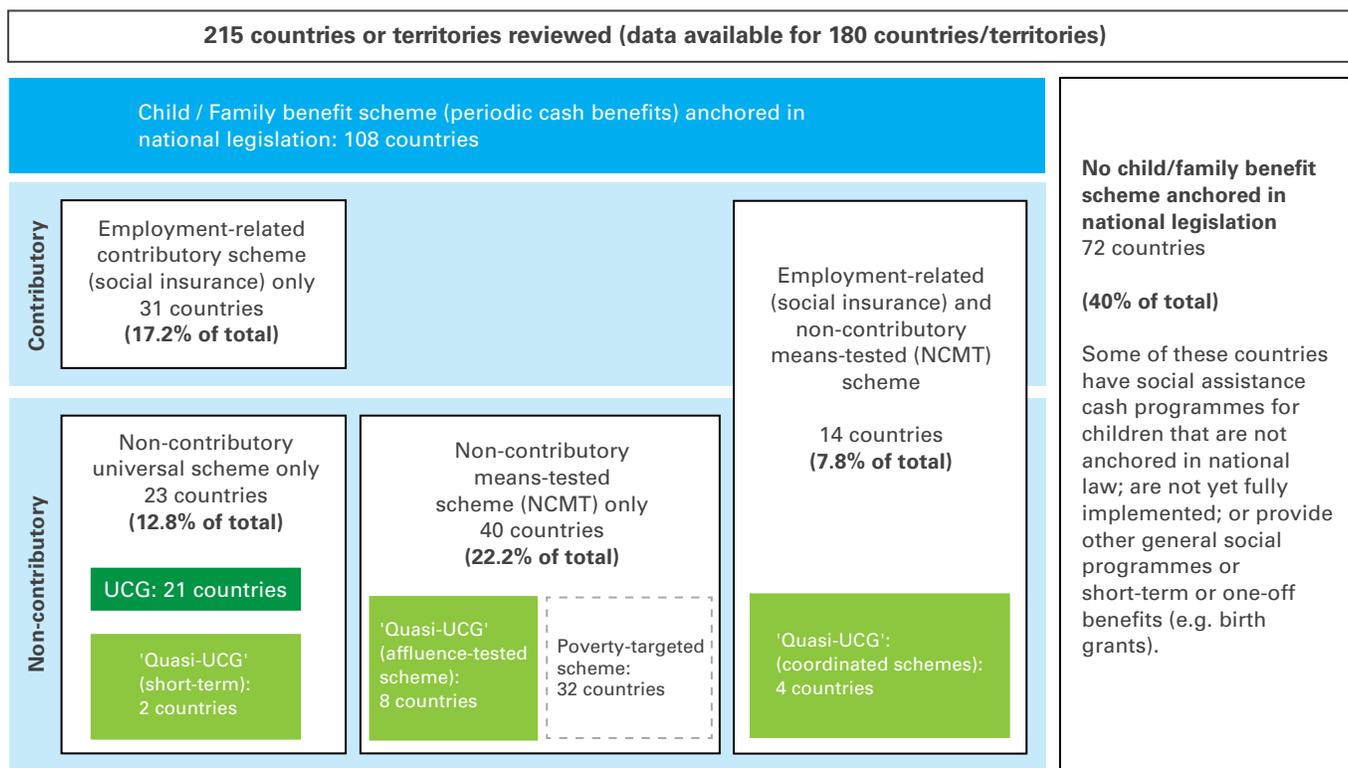
systems and play an essential role in ensuring income security for families. Figure 3 provides an overview of the different types of periodic child and family cash benefit programmes around the world that specifically provide for children. More than one-third (72) of the 180 countries or territories for which data were available do not have any child or family allowance anchored in national legislation (although social assistance programmes without a legal basis, or other programmes contributing to income security for children, or short-term or one-off benefits for birth and parental leave, may still exist in these countries).

Of the 108 countries with a periodic child/family allowance anchored in national legislation, 31 (22 of them in Africa) have statutory provisions only for those who meet social insurance conditions, which are unlikely to reach the most vulnerable children unless combined with significant tax-financing. Forty countries provide non-contributory (means-tested or proxy means-tested) benefits. Many of those schemes cover only a small part of the population, and research has shown that some suffer from large exclusion errors, thereby failing to cover the families that are most in need (Kidd et al., 2017). Historically, the Middle East and North Africa have suffered from a shortage of available data,

but recent work has enabled the region to be included in global analysis (see Box 4).

Just 23 countries (mainly in Europe) provide any form of non-contributory universal child or family cash allowance. This provision, which we refer to as universal child grants (UCGs), is discussed below. UCGs and closely related grants are discussed extensively, as there has been an upsurge of interest in such approaches to ensuring social protection coverage for children. This interest represents an important social policy development.

Figure 3 Overview of child and family benefit schemes (periodic cash benefits), by universal child grant and quasi-universal child grant status, 2018 or latest available year



Note: The schemes are defined based on the attributes of the child/family allowances only, and do not include reference to other family-related benefits, such as birth grants or housing allowances. For a full list of countries, by scheme and reference date, see Annex 6. There are no data for 35 of the countries/territories studied. Criteria used for the classification of countries: quasi-UCG (short-term) – benefits are universal but paid for less than ten years; quasi-UCG (affluence-tested) – means-tested schemes with a maximum income/resource threshold set at more than 200 per cent of the national minimum wage; poverty-targeted scheme – means-tested schemes with a minimum income/resource threshold set at less than 200 per cent of the national minimum wage (more affluent families are excluded). Where data were insufficient to assess quasi-UCG status, countries have not been categorized.

Sources: Based on ILO (2017a), updated with information from ISSA, SSA (2018): <https://www.ssa.gov/policy/docs/progdesc/index.html> (programme summaries), accessed November 2018; and MISSOC (2018): <https://www.missoc.org/missoc-database/comparative-tables>, accessed November 2018.


Box 4:
Emerging information on social protection for children in the Middle East and North Africa

One of the major data gaps in social protection for children has been in the Middle East and North Africa, demonstrated from their previous omission in data on effective coverage by region. However, a recent mapping assessed 74 family-targeted cash transfer programmes in the region, a significant step towards filling this gap (Bilo and Machado, 2018). This mapping suggests that a number of countries have large-scale cash benefit schemes that are yet to be anchored in domestic legislation. According to the mapping, unconditional cash transfers (the most frequent provision in the region) are shown to be the programme type that is most often anchored in law – as more than two-thirds of the schemes mapped are embedded in a legal framework. On the other hand, not even half of school feeding programmes or

conditional cash transfers are anchored in law (Bilo and Machado, 2018).

Notable non-statutory cash benefits include the Programme National *d'Aide aux Familles Nécessiteuses* (PNAFN: National Programme of Assistance to Needy Families) in Tunisia, Shamel (Integrated Programme for Social Support) in Sudan or the Palestinian National Cash Transfer Programme (PNCTP), whose legal status is currently being discussed. As of 2018, Libya is the only country in the region with a statutory universal child grant, which stipulates all children's entitlement to receive a benefit of LYD 100 a month;⁸ the extent of effective coverage is, however, unclear.

The potential of universal child grants and quasi-universal child grants to reach universal coverage for children

Some countries have put in place universal child grants (UCGs) and similar programmes to ensure universal coverage for all children. UCGs are defined as programmes anchored in national legislation⁹ that provide regular cash payments (i.e. monthly, quarterly or yearly)¹⁰ to all families with children. UCGs are paid in cash (or as a tax transfer) to the primary caregiver for dependent children under 18 years of age.¹¹ Usually, these programmes are fully financed from general taxation. Such programmes exist in 21 countries (see Figures 3 and 4).¹² Eighteen of these UCGs are located in high-income countries – with Libya, Panama and Suriname being the exceptions.

Aside from that of Panama,¹³ UCGs do not have behavioural conditions in terms of education or health service take-up. Universal child coverage implies coverage of children of all ages, which the majority of the non-contributory universal systems achieve. Therefore, here we take a minimum of ten years across the life course of a child to be sufficient for a programme to be considered a UCG.¹⁴ UCGs usually cover citizens and legal residents. The extension of such provision

to children with refugee or undocumented status is rarely stipulated in law and far from being a social policy reality in most countries.¹⁵

Good examples of fully fledged UCGs that correspond to these characteristics can be seen in Austria, Denmark and the Netherlands (covering children in the age range 0–18). Several of these countries also have subsidized childcare, birth grants, and maternity/paternity and parental leave policies. Combined, this provision comprises a robust package of social protection for families with children. In these countries, UCGs have long been a staple policy measure. In fact, seven countries introduced their first family

8. ILO. 2014. "Libya (150)"; NATLEX website/database:

9. Having statutory status is important in this delineation of what constitutes a UCG, for reasons of sustainability and national coverage considerations.

10. Suriname is one example of a UCG that is paid on an annual basis, whereby SR \$50 a month is paid once a year (50×12) for each eligible child up to four children.

11. Of the 21 UCGs, 13 are paid on behalf of youth aged 18 and older if enrolled in further education or vocational training, or if an individual has a severe disability

12. Austria, Czech Republic, Denmark, Estonia, Finland, France, Germany, Hungary, Ireland, Israel, Latvia, Libya, Luxembourg, Malta, the Netherlands, Norway, Panama, Romania, Slovakia, Suriname and Sweden. We include France as a UCG as it has no income cap. Furthermore, in the case of Libya, while statutory provision exists, the extent of effective coverage is unclear.

13. Panama places a stringent condition on its UCG, related to school attendance and school performance.

14. Ten years of UCG coverage constitutes a meaningful period and more than half of childhood, representing a significant investment in children and an achievable goal for many countries that aspire to introduce a UCG.

15. The full UCGs of Denmark and Hungary, at least statutorily, extend this provision to refugee children with a certain recognized status.

allowances/UCGs in the aftermath of the Second World War (1945–49), with Estonia (1922), Hungary (1938) and the Netherlands (1939) doing so prior to this (ISSA and SSA, 2018). In these countries, UCGs have shown far-reaching impacts on children's lives, reducing poverty and inequality (Letablier et al., 2009).

Furthermore, there are a number of countries with child benefit programmes that share some of the characteristics of UCGs but do not fulfil all of the above criteria. Consequently, these are considered quasi-universal child grants (qUCGs). We find that 14 countries can be considered as having qUCG status. There are three main types of qUCGs: short-term age-limited; affluence-tested; and coordinated mixed schemes (see Figure 3).

Short-term age-limited qUCGs are paid for a limited period of the life course (e.g. ages 0–2 in Belarus, and 0–3 in the Ukraine). These are considered qUCGs as they leave significant numbers of children in the 0–18 age bracket without access, yet still exhibit an important example of the universality principle, albeit in age-restricted form.

Of the 40 non-contributory means-tested schemes shown in Figure 3, those in eight countries fulfil most UCG conditions but exclude high-income households. We refer to these as *affluence-tested* schemes, which cover the large majority of households including middle-class households, and therefore are classified as qUCGs.¹⁶ These countries are Australia, Canada, Cyprus, Iceland, Mongolia, New Zealand, Portugal and the United Kingdom. Affluence-tested qUCGs can be highly inclusive, covering the majority of children, often 80 per cent or more (as in Iceland¹⁷ and Mongolia), but do not fully cover 100 per cent of children. Mongolia merits special attention, as it is an example of a country in this category that has expressed a preference for universalizing the coverage of its qUCG but has experienced challenges in attaining this goal. The story of the previously universal but now retargeted Child Money Programme in Mongolia – at one time a full UCG – is outlined more thoroughly in Annex 1.¹⁸ However, as illustrated in Figure 3, the large majority of countries with means-tested programmes offer poverty-targeted schemes (32 countries), providing benefits only to a minority of households that are living in poverty.¹⁹

Another approach to achieving universal coverage is to combine social insurance and tax-financed provision. Among the 14 qUCGs, four countries combine social insurance and

non-contributory targeted/means-tested schemes (Belgium, Japan, Liechtenstein and Switzerland) to reach universal coverage through that combination. These countries have schemes that display a high degree of coordination, ensuring that virtually all of those individuals ineligible for a social insurance benefit receive a non-contributory benefit, thereby achieving universal coverage. We refer to this approach as a *coordinated mixed-scheme qUCG* (see Figure 3). Although the composition of the programmes that make up these mixed-scheme approaches can vary, this approach can achieve progressivity and coverage equivalent to that achieved by UCG schemes.

This definitional distinction between UCGs and three categories of qUCGs above is intended to generate a helpful typology and clarify different benefit design approaches that are fully UCGs or aspirational UCGs (i.e. qUCGs). This typology has heuristic and analytical value as it helps promote understanding of social protection provision for children in the world. Moreover, it indicates to specific countries areas of social protection provision for children where there might be possibilities for specific reform or expansion based on cross-national evidence.

Figure 4 below gives a clear overview of where UCGs and qUCGs are located worldwide. Clearly there are significant differences between and within regions and countries with different income levels. None of the lower-income countries have full or what might even be regarded as “near” or quasi-UCGs, and therefore they have only limited coverage of children. This may reflect the particular challenges of expanding coverage of social protection to children in these countries, including high costs relative to national budgets and administrative challenges which themselves may be related to a lack of political focus on investing in children and the vital role of social protection, including cash transfers.

While the challenges to realizing any form of social protection for children remain large in many countries, the discussion on universal basic income (UBI) has attracted

16. To be considered quasi-UCGs, these countries must meet the standards of the other criteria used to determine a UCG (regular cash payments available to all families with children, ten years of payments, statutory status, etc.).

17. Iceland's child benefit tapers away entirely at very high incomes, and so becomes a qUCG (i.e., it loses 4 per cent as it tapers, having a slow taper and therefore achieving 80 per cent coverage).

18. In January 2018, it was deuniversalized to retarget children, and as of April 2018, it covered 80 per cent of them.

19. We distinguish affluence-tested and poverty-tested schemes, depending on whether or not the eligibility threshold is set at a level higher than twice the minimum wage (thereby excluding better-off families).

greater interest in UCGs and broadened the parameters of what is considered plausible. For instance, a recent IMF report has been tentatively positive about universal provision in certain contexts. It suggests that a UCG may be a legitimate policy option, especially in countries that “currently rely heavily on inefficient and regressive universal price subsidies (such as those on food or energy)”. In the spirit of progressive gradualism it is suggested that in such contexts, efforts should focus “first on universal coverage of subgroups of the population, such as children and the elderly” (IMF, 2017). Here the case for investment in children through UCGs or qUCGs, or older people through social pensions, can be inferred. A recent ILO study (Ortiz et al., 2018) also concluded that universal benefits for broad groups of the population, such as social pensions or UCGs, may provide a more realistic and feasible policy option in many countries to achieve universal social protection.

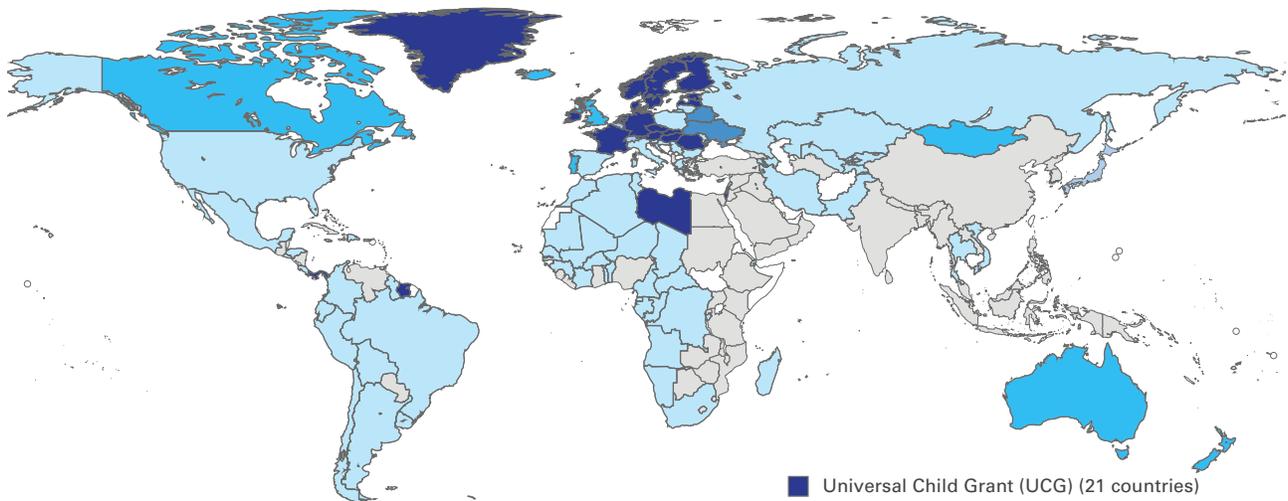
Effective social protection coverage for children

Programmes anchored in national legislation usually provide the most solid form of provision, as they tend to be stable in terms of funding and institutional frameworks and provide legal entitlements to eligible individuals and households. In

addition to these schemes, however, many countries have a variety of programmes providing relief (in cash or in kind) to children in need which are not (yet) anchored in national legislation, including pilot or temporary programmes, often limited to certain regions or districts. Assessments of effective coverage of social protection for children include both types of provision, in order to understand the situation in contexts where children and families are receiving benefits even where programmes are not rooted in national legislation, as well as contexts where legal entitlements may not fully translate into coverage on the ground.

Assessments of effective coverage show an impressive growth in non-contributory cash transfer programmes in low- and middle-income countries over the past two decades (Bastagli et al., 2016). Some 130 countries now have at least one non-contributory unconditional cash transfer programme. However, coverage and benefit levels often remain limited. For example, while 40 out of 48 African countries have adopted such programmes (Cirillo and Tebaldi, 2016), coverage of child cash benefits still remains low in sub-Saharan Africa – only 13.1 per cent of children are covered, substantially lower than the world average at 34.9 per cent (ILO, 2017a, see Figure 5). As the figure

Figure 4 Worldwide incidence of child benefit provision with a focus on UCGs and qUCGs



Note: See notes for Figure 3 and Annex 6.

Sources: Based on ILO, 2017a; updated with information from ISSA, SSA, 2016, 2017a, 2017b, 2018; UNICEF, forthcoming (a); <https://www.ssa.gov/policy/docs/prog-desc/index.html> (programme summaries), accessed November 2018; and MISSOC (2018): <https://www.missoc.org/missoc-database/comparative-tables>, accessed November 2018.

- Universal Child Grant (UCG) (21 countries)
- Quasi-UCG (short-term coverage) (2 countries)
- Quasi-UCG (affluence-tested scheme) (8 countries)
- Quasi-UCG (coordinated schemes) (4 countries)
- Other child grant (73 countries)
- No child/family benefit scheme anchored in national legislation (72 countries)
- No data

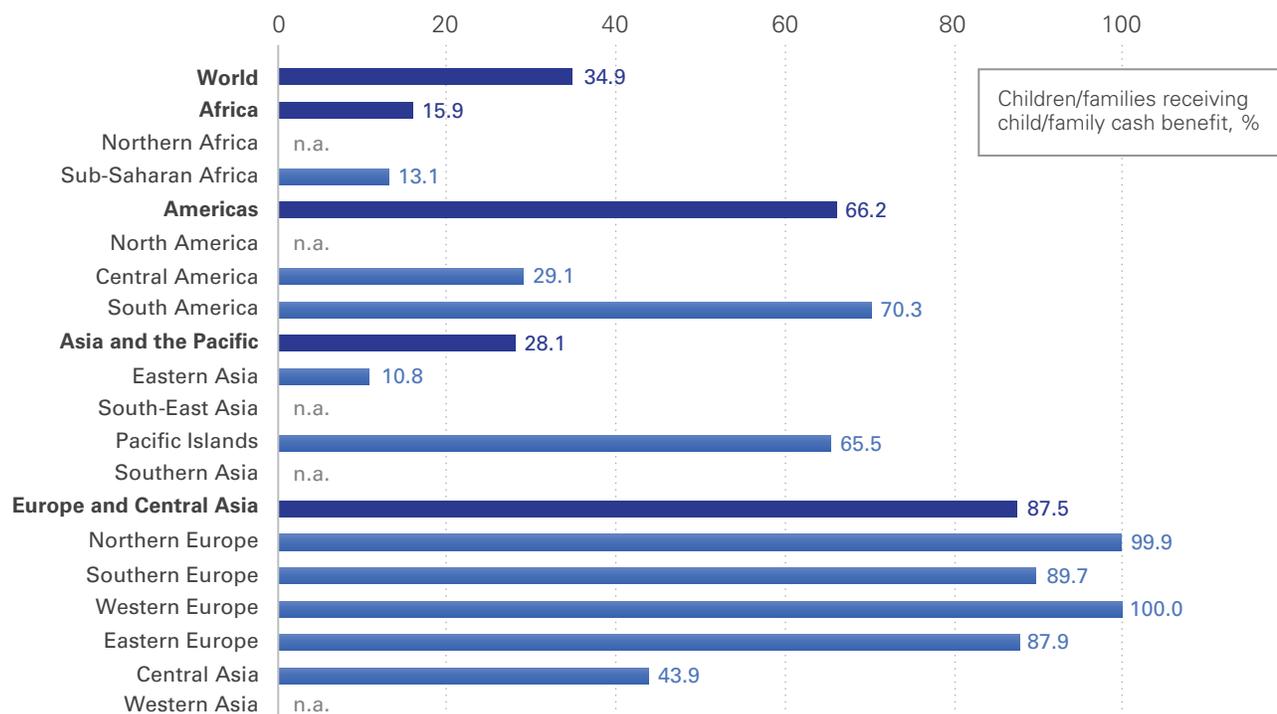
shows, coverage rates vary significantly across regions and subregions: high-income countries such as Australia, Canada and New Zealand, as well as countries in northern and western Europe, achieve high coverage rates (above 95 per cent). Some high- and middle-income countries in eastern and southern Europe cover more than 85 per cent of children, and Latin American countries on average cover more than 70 per cent, whereas this figure is only 29 per cent in Central America. Coverage in Asia varies between 10.8 per cent in eastern Asia and 43.9 per cent in Central Asia. The average coverage rate of 65.5 per cent for Oceania includes Australia and New Zealand, with coverage rates of above 99 per cent, and the remaining countries, which cover only about 14 per cent of children. Scheme design also varies considerably in terms of benefit levels, eligibility criteria, enrolment procedures and overall administrative efficiency.

Beyond the data detailing statutory social protection schemes for children, there is emerging provision that is of a non-statutory nature but nonetheless significant, as can be seen in Box 4.

Recent trends in social protection for children and universality

Changes in social protection coverage can happen more rapidly than can be readily captured in the survey data collection methods used to assess both legal provision and effective coverage. This reflects social protection moving rapidly up national and international agendas, including as part of the SDGs. And while universality is generally a trait of high-income countries, several developing countries such as Argentina, Brazil and Chile have also achieved universal or near-universal social protection coverage for children, and many others are expanding coverage fast, such as Bolivia, South Africa and Uruguay. However, despite this important progress, a number of countries are undergoing fiscal consolidation policies, which can lead to cutting allowances and narrow-targeting child benefits to those in poverty, thus excluding vulnerable children from their legitimate right to social protection (See Table 1). As Box 5 and Figure 5 illustrate, more resources need to be allocated to financing social protection and other services for children to ensure child-related SDGs are met.

Figure 5 SDG indicator 1.3.1 on effective coverage for children and families: Percentage of children and households receiving child and family benefits, by region, latest available year



Sources: Based on ILO (2017a), see also Annex 6.


Table 1: Newly announced child and family social protection measures (selection), 2014–18

Country	Year	Measure (as published in media)
Expansion of social protection		
Fiji	2016	Increased budget allocation for the Ministry of Children in the 2016–17 budget.
Ghana	2016	The Ministry of Gender, Children and Social Protection (MoGCSP) and USAID signed a memorandum of understanding under which USAID will provide USD 3 million to improve child adoption and fosterage in Ghana.
India	2017	Nationwide extension of conditional cash transfer programme for pregnant and lactating women as part of the Maternity Benefit Programme; cash transfer of INR 6,000 paid in three instalments: at the early registration of pregnancy, at the time of institutional delivery, and three months after delivery if the child is registered and has received BCG vaccination as well as OPV and DPT-1 and 2.
New Zealand	2016	Benefit rates for families with children will rise by NZD 25 a week after tax; increase in “Working for Families” payments; increase in Childcare Assistance.
Philippines	2016	Government gets a loan of USD 450 million from the World Bank to sustain the 4Ps Project (<i>Pantawid Pamilyang Pilipino Program</i>).
Sweden	2016	Parents are entitled to 480 days of paid parental leave.
Contraction or adjustment measures		
Australia	2016	Federal Parliament approved an omnibus bill, which contains 20 cost-cutting measures, including cuts to baby bonuses.
India	2017	Government to limit Maternity Benefit Programme to one child only (instead of two, as was previously announced in January 2017).
Ireland	2016	The One-Parent Family Payment introduced changes regarding eligibility and income thresholds, having the impact of cutting or ending payments to some recipients.
Mongolia	2018	Reintroduction of targeting of the Child Money Programme. In January 2018, it was deuniversalized and a means test reintroduced; as of April 2018, it was estimated to cover 80 per cent of children (see Annex 1).
Sweden	2016	Abolition of local authority childcare benefit.
United Kingdom	2016	The Welfare Reform and Work Act 2016 imposes a two-child benefit limit on households with at least two children and claiming Universal Credit, meaning that no extra support goes to children born after April 2017 in families making a new tax credit claim. In addition, it scraps the GBP 545-a-year family element in Universal Credit and cuts the GBP 17.45-a-week housing benefit family premium.

Source: ILO Social Protection Monitor:
<http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=54783>; Bradshaw and Hirose, 2016.

Recent changes in UCGs include shifting fortunes in some high-income countries. For instance, over past years some countries have “deuniversalized” their UCGs by introducing affluence- or means-testing. One such country is the United Kingdom, which had a very long-standing UCG, first paid in 1946, that was deuniversalized by the 2012 Welfare Reform Act (UK Government, 2012), which made it an affluence-tested qUCG. This social policy transformation was widely attributed by many to UK Government austerity policies. France too, notably, has introduced a means test for its family allowance, reducing benefits by 50 or 75 per cent, depending on the recipient’s income. This means test, however, is not capped, and so universal coverage is maintained while payments are reduced for those on higher incomes (European Commission, 2018). A number of countries have reduced the extension of their UCG coverage for young people over age 18 by limiting the length of coverage for those enrolled in full-time higher education or vocational training. Examples include Austria, Germany and Hungary. Furthermore, the uprating of some UCGs (to increase their rates in line with inflation) has been indexed to the consumer price index instead of the retail price index and therefore their real value has diminished slowly over time. In contrast, Slovakia universalized its child grant provision in 2003 and now has a full UCG (ISSA, SSA, 2018).

A number of countries also have universal cash birth grants for all citizens (e.g. Spain and the Russian Federation). Not all birth grants assume the form of cash. In September 2018, Ukraine introduced a universal in-kind benefit for all newborns – a “baby box” that contains a range of essentials, as well as a comprehensive set of educational materials on responsible parenting, vaccination and other early childhood development aspects (with a value of around USD 180). This is distributed to approximately 400,000 families each year (UNICEF, forthcoming (g)). These developments indicate that the principle of universality is alive in modified and truncated forms.

Furthermore, the classifications in the section above detailing UCGs and qUCGs are based on nominally defined family allowances. This means that in some instances, benefits going to families with children outside a family benefit system can be missed. However, there are a number of countries which represent variants of qUCGs that do not necessarily conform to the typologies delineated above

but are nonetheless very important examples of existing or emergent social protection for children that exhibit strong universal tendencies. These examples of “other” qUCGs include Argentina (see Annex 2), with a mixed-system approach combining contributory and non-contributory transfers; and the Islamic Republic of Iran, with a significant cash transfer to families, converted from a fuel subsidy in 2010 (see Annex 3).²⁰ Effective coverage varies significantly throughout these countries. Likewise, plans to introduce an age-restricted qUCG in Kyrgyzstan were recently suspended (see Annex 4). Furthermore, there have also been some interesting regional qUCGs launched by Bihar state, India, and the Papuan provincial government in Indonesia, whose programme is known as *BANGGA Papua* (see Annex 5).

Furthermore, in a number of countries, either UN agencies or governments are actively considering UCGs or qUCGs as a serious social policy instrument. These include Angola, Bangladesh, Kenya, Malaysia, Mozambique and Tunisia. Thailand has also embarked on the progressive road towards a qUCG since 2015. The Thai Government is currently holding discussions on the possibility of fully universalizing the Child Support Grant for all children under age 6. As at January 2019, the grant currently covers around 637,496 children, or 14.76 per cent of children under 6 (UNICEF calculations, based on NESDB, 2013). Thus, there is significant scope for coverage expansion.

Financing social protection: Investing in children

Some of the changes in social protection coverage and benefits described in the earlier section are due to the improved resource allocations (extension of social protection) or to fiscal pressures (contraction). Ensuring adequate social protection requires allocating sufficient resources for children and families. Yet, at present, countries on average spend only 1.1 per cent of GDP on social protection for children (excluding health expenditure), and the amounts vary greatly across countries and regions, as shown in Figure 6. While Europe and Central Asia, as well as Oceania, spend more than 2 per cent of GDP on child benefits, expenditure ratios remain well below 1 per cent of GDP in most other parts of the world. Regional estimates

²⁰ It is important to note, however, that this is not focused on children per se, but rather all individuals, so while it is different in intent/objectives from a focused qUCG, it de facto delivers a qUCG nonetheless.

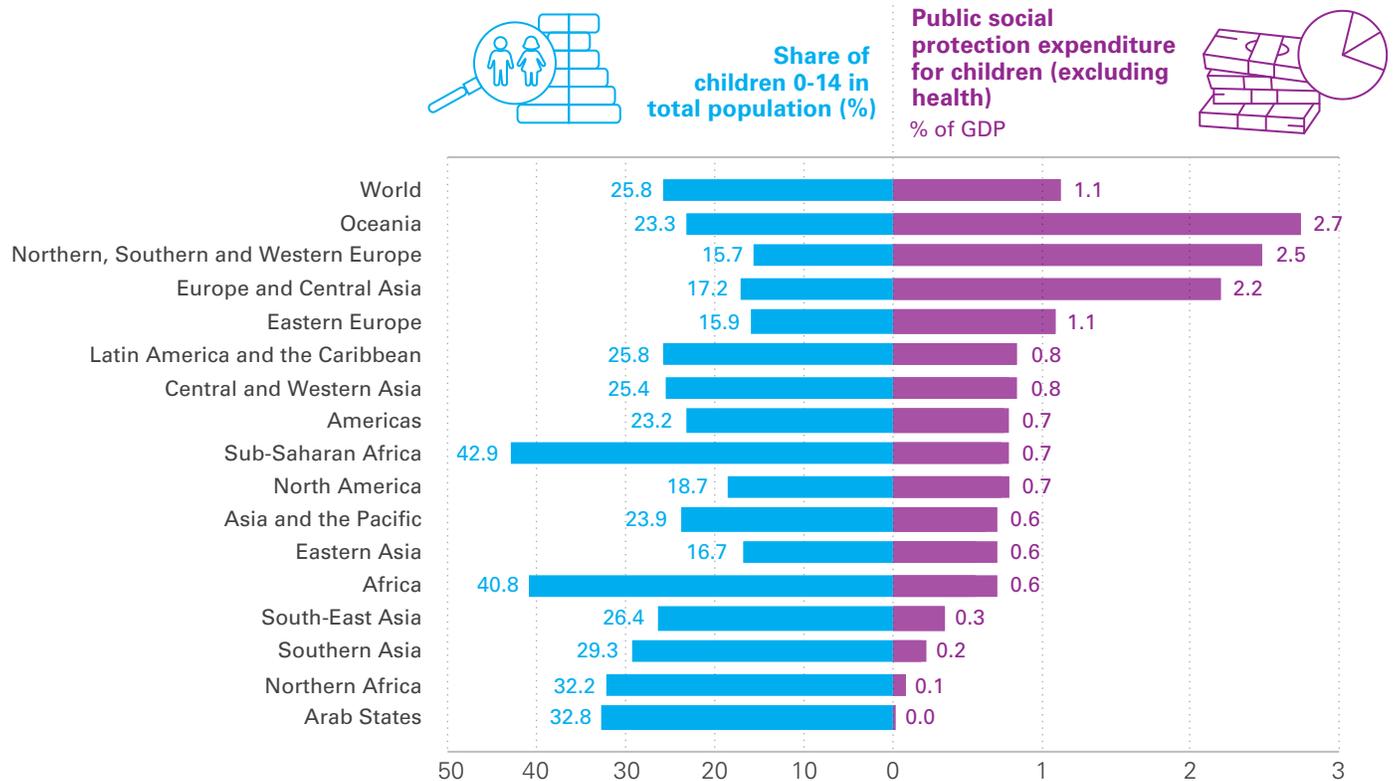
for Africa, the Arab States and southern and South-East Asia show expenditure levels of less than 0.7 per cent of GDP, although children represent a greater share of their populations. Expenditure levels in sub-Saharan Africa seem particularly low when considering that 43 per cent of the population comprises children aged 0–14.

The high levels of child poverty and other negative well-being indicators discussed above, including child mortality as well as undernutrition and malnutrition, clearly indicate that the level of resources allocated to child social protection for children is insufficient. This is true even when considering that other public expenditures on education, health care or social protection measures other than child and family benefits also contribute to improving the situation of children. The low expenditure levels in low-income and lower-middle-income countries, with many countries not providing

any benefits for children, are particularly worrisome as this jeopardizes future development potential. It is unlikely that the child-related SDGs discussed above can be met if the resources invested in the social protection of children are not stepped up.

Recent work by the ILO, UNICEF and UN Women (Ortiz et al. 2017) shows that fiscal space for social protection exists even in the poorest countries. There are a wide variety of options to generate resources for social protection; specifically, there are eight financing options, supported by policy statements of the international financial institutions and the United Nations (Box 5). It is imperative that countries become proactive in exploring all possible financing alternatives to promote the SDGs, realize human rights and invest in women and children.

Figure 6 Public social protection expenditure (excluding health) on children (% of GDP) and share of children aged 0–14 in total population (%), latest available year



Sources: Based on ILO (2017a).

Link: <http://www.social-protection.org/gimi/gess/RessourceDownload.action?ressource.ressourceId=54624>

**Box 5:****UCGs and social protection floors for children are affordable:
Fiscal space exists even in the poorest countries**

While some countries have the fiscal space to extend social protection systems, including floors for children, and UCGs, other countries will have to gradually extend coverage and benefits according to national fiscal capacity, in combination with contributory social insurance. To ensure net redistributive impacts, the financing of social protection must use non-regressive sources of funding, which implies that it should not be financed by taxing households or depriving them of other social benefits.

Joint work by the ILO, UNICEF and UN Women (Ortiz et al., 2017) shows that financing options could include a mix of the following: (i) extending social insurance; (ii) reallocating public expenditures, such as energy subsidies or the gains from lesser administrative costs of UCG as compared with targeted conditional cash transfers; (iii) increasing tax revenues, improving compliance and raising new taxes such as on financial transactions, natural resource extraction or tourism; (iv) eliminating illicit financial flows, including tax evasion, money laundering and corruption, estimated at 5 per cent of global GDP; (v) managing or restructuring existing debt; (vi) using fiscal reserves; (vii) a more accommodative macro-economic framework; and (viii) aid, among other potential sources of fiscal space. Governments around the world have been applying these options for decades, showing a wide variety of revenue choices. Examples abound:

- Argentina, Brazil, Tunisia, Uruguay and many others expanded social security coverage including child and family benefits.
- Indonesia, Ghana and many other developing countries are using fuel subsidies to develop social protection programmes.
- A large number of countries are increasing taxes for social protection – not on consumption (generally regressive) but on income, corporate profit, property or natural resource extraction. Bolivia, Mongolia and Zambia are financing universal old-age pensions, child benefits and other schemes from taxes on mining and gas.
- Brazil used a financial transaction tax to extend social protection coverage; Algeria, Mauritius and Panama among others have complemented social security revenues with high taxes on tobacco.
- A number of lower-income countries are receiving North-South and South-South transfers, while other countries are fighting large, illicit financial flows by cracking down on tax evasion.
- Chile and Norway, among others, are using fiscal reserves to support social protection.
- More than 80 countries have successfully renegotiated and/or restructured debts, using the savings from debt servicing for social programmes that directly benefit children.

Combining cash benefits with in-kind benefits, childcare and other social services

Cash benefits are proven to have significant, wide-ranging, positive impacts on children's lives, and as such are an integral part of the package of social protection and broader social policy for children. However, as the evidence at the beginning of this chapter showed, they are not a magic bullet and must be part of a broader set of policies and programmes for children.

First, this report has focused mainly on cash transfers, although a substantial number of interventions consist of benefits in kind, such as school meals or access to services. School feeding programmes are the most common form of in-kind benefits: they are provided in 131 out of 157 countries for which data were available (World Bank, 2015). According to World Food Programme estimates, at least 368 million children are fed daily at school (WFP, 2013). School feeding programmes have a potential to contribute to several SDGs by improving nutrition (SDG 2), education (SDG 4) and gender equality (SDG 5) and, by purchasing local foodstuffs, contributing to the economy (SDG 8) (WFP, 2017).

Second, while cash transfers can have huge impacts on children's lives, not all barriers families face are financial. Cash transfers can be more effective when combined with appropriate information and knowledge for recipients, while direct outreach to families facing complex needs is essential to assess needs and provide connections to needed services.

Finally, cash benefits and effective access to services are often directly linked and mutually reinforcing, particularly with regard to health care, childcare or education services. Without a foundation of good-quality services for children – that support access to the poorest and most vulnerable – child and family benefits will have limited impacts on the fulfilment of children's rights. These services are critical for overcoming inequalities and fostering social inclusion, particularly considering that children from low-income households are significantly less likely to have access to education and health services (ESCAP, 2015). Other services also play an important role, and their interaction with and the efficacy of cash transfers in conditional and unconditional form continues to be a key policy debate too. For example, birth registration is an essential service, not only in its own

right but also because it is often a prerequisite to realizing other rights and accessing social protection benefits and services. For adolescents, access to reproductive health services is a key factor in determining their opportunities in life. Box 6 looks at the complementarity of cash benefits and access to good-quality childcare services, which play an important role, on one hand in facilitating women's economic activity in high-grade employment, thus contributing to reducing child poverty, and on the other in enabling child development and reducing child labour.



**Box 6:****The complementary role of cash benefits and childcare services in strengthening children's rights and promoting gender equality**

The availability to both women and men of adequate parental and childcare leave benefits (including for children with illnesses and disabilities), childcare services and early childhood education is essential in guaranteeing the income security and well-being of children. Measures adopted by employers to facilitate sharing work and family responsibilities for parents with children also play a key role (ILO, 2016a). This package of measures is particularly important with a view to facilitating the productive economic activity of women and simultaneously promoting equal distribution between women and men of unpaid work caring for children. Both aspects are essential in breaking the cycle of gender inequalities which trap women in informal, low-paid jobs without any social protection for themselves either while working or in old age (Alfers, 2016; Moussié, 2016). Another important factor for children's and women's well-being is maternity benefits. Currently, 134 countries invest public resources in childcare before entry to primary school. Companies have also realized the benefits of providing childcare facilities, reporting reduced absenteeism, staff turnover and work injuries while increasing the daily output of female workers (ILO, 2016a; UN, 2016).

Having to reconcile unpaid care work with the imperative to generate income often pushes women into the most vulnerable forms of non-standard employment and informal work. This is detrimental both for the women themselves and for the children not being adequately cared for – across 53 developing countries, an estimated 35.5 million children under 5 are left without adult supervision for at least one hour a day (Samman, Presler-Marshall and Jones, 2016). It is often the older siblings who take care of younger ones, which means that they are not able to attend school. In other cases, women workers, including street vendors, agricultural workers, waste pickers,

domestic workers or porters, take their children along while working, compromising their own income security and productivity as well as providing unsafe or suboptimal environments for the child. In general, heavy and unequal care responsibilities affect livelihood strategies, employment outcomes, economic growth and sustainable poverty reduction, thus influencing progress on the SDGs related to poverty (SDG 1), inequality (SDG 10), gender equality (SDG 5) and decent work (SDG 8). By contrast, investing in good-quality childcare, early childhood education with feeding programmes, and adequate childcare leave benefits for both women and men increases women's labour force participation, generates jobs, improves child development and educational attainments and enables older siblings to attend school (ILO, 2016a).

To the extent that social protection systems can be designed to be gender-sensitive or even transformative, they have the potential to promote gender equality. This includes reducing the gendered inequalities in the division of unpaid care and household work (SDG target 5.4), which is one of the root causes of gender inequalities in opportunities and outcomes. From a young age, girls perform the majority of unpaid housework and unpaid care work (Muñoz Boudet, Petesch and Turk, 2012). ILO surveys in 33 countries show that girls aged 7–14 are far more likely than boys to engage in household chores, which often include taking care of younger siblings or adult household members in need of care (ILO, 2016a). This early gender division of labour follows women into their adult lives and firmly establishes the unequal division of household and care work (ILO, 2016a). Providing affordable childcare services of good quality would free many girls from the burden of taking care of their younger siblings.



Towards universal child grants in risk-prone, fragile and forced displacement contexts



≈ 160 million
children lived in areas of high or extremely high drought severity in 2015



> 0.5 billion
children lived in zones with extremely high flood occurrence in 2015



≈ 10%
children resided in countries and areas affected by armed conflicts in 2016



= 385 million
children lived in extreme poverty in 2016



≈ 28 million
children in the world were forcibly displaced in 2018



7 million
children were internally displaced due to natural disasters in 2018

An estimated 160 million children lived in areas of high or extremely high drought severity in 2015, with most of them in Africa and Asia, and more than half a billion children living in zones with extremely high flood occurrence, mainly in Asia (UNICEF, 2015).

Apart from natural disasters, including the impacts of climate change, children are exposed to conflicts and forced displacement. Poverty and conflict are among core drivers for children moving from their homes. In 2016, an estimated one in ten children resided in countries and areas affected by armed conflicts, and 385 million lived in extreme poverty. Approximately 28 million or one in 80 children in the world were forcibly displaced – this includes 12 million child refugees and child asylum seekers, and 16 million children living in internal displacement due to conflict and violence. In addition, 7 million children were internally displaced due to natural disasters (UNICEF, 2018a).

The combination of recurrent crises and poverty reduces the ability of poor families to cope and maintain the investments in human capital development of children and other vulnerable family members. Those living in poverty are often the first to use unsafe water sources and food, to skip meals or to pull children out of school. Children of indigenous peoples and those living in ethnic minority households are at even greater risk of suffering from poverty along multiple dimensions: they are less likely to attend school, and among indigenous children there are disproportionate instances of child labour as well as higher levels of income poverty (ILO, 2017b). Similarly, refugee children are five times more likely to be out of school than other children. Only 50 per cent of refugee children are enrolled in primary school, and less than 25 per cent of refugee adolescents are enrolled in secondary school (UNICEF, 2018a).

The impetus to provide effective coverage in such circumstances is brought into even sharper relief by World Bank predictions that by 2030, nearly half the global share of the world's poor people will live in fragile or conflict-affected States (World Bank, 2018c). According to the World Bank, more than 87 million children under the age of 7 have spent their entire lives in conflict-affected areas (World Bank, 2018a, p. 75).

Typically, people affected by crisis are supported through the provision of humanitarian assistance. However, the changing frequency, nature and complexity of crises highlight the need to change the modus operandi and strengthen the humanitarian and development nexus. Social protection is increasingly being seen as an option to this end. In this context, recent years have witnessed a growing emphasis on social protection, with a call by the Social Protection Interagency Committee Board (SPIAC-B) at the 2016 World Humanitarian Summit to strengthen the linkages between humanitarian assistance and social protection, the inclusion of social protection in the 2016 New York Declaration for Refugees and Migrants and the focus of the 2017 International Conference on Social Protection in Contexts of Fragility and Forced Displacement. These efforts have been guided by commitments to “leave no one behind” and to “work towards common outcomes in humanitarian and development programming”, including through social protection (UNICEF, 2017b), referring also to earlier commitments made at the International Labour Conference

as well as in the Sustainable Development Goals and the UN General Assembly's 2016 Political Declaration on HIV and AIDS.

Support for cash-based approaches in the aftermath of disasters has become mainstreamed; for example, of the 12 recommendations on cash programming in humanitarian contexts, the High-Level Panel on Humanitarian Cash Transfers' first recommendation was to give more unconditional cash transfers (ODI, CGD, 2015). And cash transfers are increasingly being used as a humanitarian response (see Box 7). While cash alone is not a panacea in humanitarian contexts, it could be an integral part of stabilization, recovery and building up resilience to future shocks. The scope for child grants in such circumstances is huge. In 2014, approximately USD 1.2–1.5 billion out of a total expenditure of USD 25 billion in humanitarian contexts took the form of cash – 5 to 6 per cent (ODI, CGD, 2015).

While much more research is needed in this area, universal approaches may have important implications in these contexts. A system where every child is reached is automatically primed to reach those affected and scale up transfers – including for forcibly displaced populations. Second, a universal approach in fragile contexts where capacity is generally limited and a very high proportion of children are vulnerable could make practical sense, rather than efforts to effectively target. Universal approaches could lay the foundations for a national system that is ready to go to scale during recovery, forming part of the backbone of a fledgling social protection system and helping build the society-State relationship upon which further development and prosperity could be based.



Box 7:

The Emergency Social Safety Net programme in Turkey

A number of sizeable non-statutory cash transfers are operating in contexts of fragility and forced displacement too. Turkey is a good case in point (UNICEF, 2017c). It is home to the largest refugee population in the world: over 3.1 million displaced Syrians live under temporary protection, almost half of whom (nearly 1.4 million) are children. The Turkish Government has shouldered the bulk of the significant financial burden of responding to the Syria crisis, spending more than USD 30 billion on direct assistance to Syrian refugees in Turkey as at 2017. Refugees in Turkey find themselves in a protracted situation of displacement, leading to economic, physical and emotional vulnerability. Over 82 per cent of refugees in Turkey are below the poverty line, with 24 per cent in extreme poverty. Furthermore, it is estimated that more than 380,000 children remain out of school. In November 2016, as part of the EU-Turkey Facility for Refugees in Turkey, the Emergency Social Safety Net (ESSN) programme was launched. This is a targeted multipurpose

cash assistance scheme for 1.4 million of the most vulnerable refugees in Turkey, funded by ECHO, the European Civil Protection and Humanitarian Aid Operations (ECHO, 2018). The ESSN provides Syrian and non-Syrian asylum seekers and refugees under international or temporary protection access to a social protection scheme to meet basic needs, including food, fuel, rent and utility bills. Given the protracted nature of fragility and displacement in the region and in Turkey as a host country, the ESSN is an example of a large, non-statutory family cash transfer that may evolve into more permanent provision.

The expansion of benefits under the government Conditional Cash Transfer for Education scheme to include Afghan and Syrian refugee children represents a further important step towards perhaps more permanent provision for refugee children. The national roll-out occurred in 2017 (UNICEF, 2018b).



Recommendations

This joint UNICEF-ILO report on social protection for children lays out some stark realities facing children and families living in poverty. Despite the devastating impacts of poverty on children, they are still twice as likely to live in poverty as adults by both monetary and multidimensional measures: one in five children are living in the most extreme forms of monetary poverty (less than USD 1.90 a day), and almost one in two are living in “moderate” poverty (under USD 3.10 a day). Similarly, one in two – 689 million – are living in multidimensionally poor households. And in higher-income parts of the world, 27 out of 29 OECD countries with data have child poverty rates above 10 per cent.

The evidence shows clearly that social protection benefits, and cash transfers in particular, have a positive impact on poverty, food security, health and access to education – thus helping to ensure that children can realize their full potential, breaking the vicious cycle of poverty and vulnerability and realizing children’s rights to social security. However, despite this, the great majority of children still have no effective social protection coverage. Only 35 per cent of children globally are covered by social protection, with significant regional disparities: while 87 per cent of children in Europe and Central Asia and 66 per cent in the Americas receive benefits, this is the case for only 28 per cent of children in Asia-Pacific and 16 per cent in Africa.

There are positive trends in expansion of coverage for children. Countries which have made great strides towards universal social protection coverage include Argentina, Brazil, Chile and Mongolia. And data show that for 139 countries, expenditure on child benefits is not insignificant, with average spending of 1.1 per cent of GDP. However, despite encouraging signs in some areas, in many countries social protection programmes for children struggle with limited coverage, inadequate benefit levels, fragmentation and weak institutionalization, and a number of countries are cutting allowances.

With a view to achieving Sustainable Development Goal 1 for children, including ending extreme child poverty, halving it according to national definitions and expanding coverage of social protection for children and families, this report makes the following recommendations.

- **Rapid expansion of child and family benefits to reach universal social protection for children.** Despite high rates of child poverty with devastating impacts, currently only around one in three children have access to child or family benefits. The rapid expansion of social transfers for children in many countries is not only in line with international obligations, but shows increasing coverage is possible and impactful. Additional efforts are necessary to progressively realize universal coverage, including consideration of universal child grants as a practical means to rapidly increase effective coverage of children.
- **Ensuring universal approaches to child and family cash benefits should be part of a social protection system that connects to other crucial services beyond cash, and addresses life-cycle risks.** Child and family benefits are a crucial foundation in social protection for children and directly address the financial barriers that prevent them realizing their rights and fulfilling their potential. However, they are not a magic bullet and need to be part of – and certainly not replace – broader social policy that ensures access to the high-quality services and social care that children and families require.
- **Institutionalize monitoring and reporting on social protection for children, including establishing a routine interagency report.** The present report builds on the chapter on children in the ILO’s *World Social Protection Report* – which is a leading source on social protection for children. This effort should be built on by further improving social protection data collection concerning children, and creating a periodic interagency publication that reports on social protection for children, bringing together all relevant information, including comprehensive assessments of both statutory and effective coverage.

Annexes. Case studies: The challenges and possibilities of implementing universal child grants in practice

Annex 1. Mongolia: The oscillating fortunes of its universal child grant

In 2005, the Government of Mongolia introduced the Child Money Programme (CMP), a conditional, poverty-targeted cash transfer with the aim of alleviating poverty in the wake of economic and social transition. The conditions included social and health behaviour as well as schooling requirements. Implementation encountered targeting problems of leakage to the non-poor and exclusion of the poor (Hodges et al., 2007). In July 2006 the Government converted the programme into a universal scheme providing a benefit to all children under the age of 18 and at the same time introduced a new benefit for newborn children and increased the amount of the benefit. A study by Hodges et al. (2007) found that the initial targeted CMP reduced the child poverty headcount by almost 4 percentage points (from 42.2 to 38.5 per cent) and lowered the child poverty gap by about 2 percentage points, assuming that the child benefits received had raised actual household expenditure by an equivalent amount. The universal child benefit, and especially the increased amount of the benefit introduced in 2006, reduced the headcount by 10 percentage points (to 27.4 per cent) and cut the poverty gap by 5.5 percentage points (to 7.1 per cent).

The CMP has experienced quite significant changes in recent years. In 2010 it was discontinued following a reform of the social welfare system. In October 2012, the country's new Parliament reintroduced the CMP after the adoption of the Government Action Plan (2012–16), which highlighted the Government's social welfare commitments. The benefit was once more universal and provided for all children up to the age of 18. The 2014 Household Socio-economic Survey (HSES) found that the CMP contributed to a reduction of poverty incidence by 12 per cent and the poverty gap by 21 per cent. It thus significantly reduced monetary poverty – even more so if only children were considered (ILO, 2016b). In addition, analysis of the 2016 HSES (Tserennadmid, 2016) revealed that in the absence of the CMP, the proportion of poor children would rise to 43.5 from 38.5 per cent.

A World Bank review (Onishi and Chuluun, 2015) also notes the programme's pro-poor impact, as a larger share of the CMP benefits went to the lowest-quintile groups.

In August 2016, the newly elected Government announced the reintroduction of targeting using proxy means testing (PMT). Consequently, only 60 per cent of children received the CMP in November 2016. The subsequently approved IMF three-year loan arrangement under the Extended Fund Facility imposed conditions with regard to fiscal consolidation which included "steps to strengthen and better target the social safety net" (IMF, 2017). However, in July 2017, witnessing an improvement in the fiscal indicators, the Government re-established the universal feature of the CMP and integrated the programme into the 2016 Law on Social Welfare. The programme underwent yet another change in January 2018 due to delay in IMF loan disbursement, whereby it targeted the lowest 60 per cent. Owing to the positive economic outlook, in April 2018 the threshold was raised to 80 per cent. While still technically targeted, this latest update essentially made every child in the PMT database eligible to receive the benefit, yet around 105,000 children, or 10 per cent of the total, are still excluded from the CMP. Since 2012, the benefit level has remained at MNT 20,000 per month per child (around USD 7.7 in 2018) and therefore its value has depreciated owing to inflation, costing around 1 per cent of national GDP (USD 108 million) in 2017.

In such a volatile context, the ratification of the Social Security (Minimum Standards) Convention, 1952 (No. 102) would be a valuable step towards sustaining Mongolia's social protection system, including the universal Child Money Programme. Mongolia illustrates the challenges to achieving universal coverage in the national context.

Sources: Based on Global Partnership for Universal Social Protection, 2016b; UNICEF, forthcoming (b).

Annex 2. Argentina: Reaching universal social protection for children through a mixed approach

Argentina is progressing towards universal child grant coverage through a combination of measures. In addition to the existing contributory family allowances (CFA) and tax deductions available for higher-income workers with children, in 2009 it introduced the Universal Child Allowance (UCA) with the aim of consolidating several non-contributory transfer programmes for families with children which were currently in place both at national and provincial level, and created a fragmented programme structure.

Through the UCA, the former national non-contributory transfer programme for children was discontinued and a unique child benefit was extended to families of unemployed workers, informal workers earning less than the minimum wage, domestic workers and self-employed workers participating in the simplified tax and contribution payment regime for small-scale contributors (*monotributo*). The semi-conditional UCA scheme distributes benefits for children up to the age of 18 (no limit for those with disabilities) and up to five children per family, provided that beneficiaries fulfil certain requirements relating to health (such as vaccination for children under the age of 5) and education (school attendance). The benefit amount was set at around USD 50 a month for each child younger than 18, of which 80 per cent was disbursed on a monthly basis, and the rest accumulated and paid annually provided the conditions are fulfilled. Approximately USD 150 a month is paid for a child with a disability. The programme cost 0.6 per cent of GDP as of 2017.

Also as of 2017, the UCA programme covered 3.9 million or 30.3 per cent of all children, and the social protection system as a whole (including contributory and non-contributory allowances and tax deductions for higher incomes) reached 87.4 per cent of children and adolescents under the age of 18, a total of 11.4 million children.

An assessment of the impact on extreme poverty of the family transfers for children concluded that it would be reduced by approximately 65 per cent and overall poverty by 18 per cent (Bertranou and Maurizio, 2012). According to this study, the UCA covers 70 per cent of poor children and adolescents; together with the contributory and non-contributory benefits, approximately 80 per cent of children

are pulled out of poverty. More recently, UNICEF carried out an updated analysis showing that the UCA reduces extreme poverty among children by 31 per cent (Paz et al., 2018).

Yet the programme has faced exclusion issues due to its strict conditionality requirements and barriers in the eligibility criteria. Over 1 million children remain uncovered by any social protection scheme and are currently left behind. Studies show 32 per cent of children in the lowest decile are not covered. The UCA's coverage gaps are mostly due to failure to certify compliance with the strict conditionality of the programme, which results in around 300,000 children dropping out every year. In addition, as a result of its design, the programme misses migrant families, children in families with six children or more, children without parental care and children who lack a birth certificate.

Sources: Based on Global Partnership for Universal Social Protection, 2016a; UNICEF, forthcoming (c).

Annex 3. Iran's quasi-UCG emerging from the 2010 Targeted Subsidies Reform Act

Iran is a major oil-exporting country with a population of over 80 million, of whom some 22 million, or 27 per cent, are children under 18 years of age. It is an Islamic Republic with a complex political system. Long-standing challenges including economic sanctions have disrupted overall development and the well-being of the population, particularly in recent years.

Numerous programmes have long sought to address the needs of specific groups of children with assistance in cash or kind. However, there have been challenges in delivering timely and adequate assistance to vulnerable groups. The "hidden subsidy" of energy products mostly reaches only as far as the most well-off households.

In December 2010, Iran introduced one of the largest cash transfer programmes of its kind in the world – the Targeted Subsidies Reform Act – to compensate for the impacts of its subsidy reform. The cash transfer reached almost universal coverage in 2011, with 73 million Iranians receiving cash benefits, costing the Government IRR 3,300 billion every month. In 2011, transfers amounted to 6.5 per cent of GDP and about 29 per cent of the median household income.

A UCG was introduced, arguably by default, as part of this universal cash transfer programme, since it covered the entire population, regardless of age. The grant therefore entitled every child, alongside every adult, to a fixed sum of IRR 455,000 a month – equivalent at the time to USD 45 per person at the official exchange rate – paid to heads of household. While no impact studies as such exist, various surveys have documented a positive impact on poverty and income distribution, especially in the early years of the grant's existence.

This “cash subsidy” scheme emerged as the most practical means of compensating the population for the reform of price subsidies that saw prices of some basic goods and services (fuel, water and electricity, bread, etc.) rise by several multiples overnight. The universality of transfers, in particular, resulted from a failed attempt at targeting the 70 per cent of the population below the median national income, which was the original intention. The UCG is thus the by-product of a reform effort aimed at rationalizing an inefficient system of price subsidies that was regarded as being regressive.

While some 4 per cent of the population forfeited their right to the transfer voluntarily, or were unwittingly left out from the start (staving off concerns of capture by the elite), and a similar percentage have more recently been excluded for being too well-off to need it, over 90 per cent of the population continue to have the transfer deposited in their bank accounts at midnight once a month throughout the country. Adjustments due to changes in household composition (births, death, marriage, etc.) are automatic and rapid as the relevant national databases are linked.

But the design of the plan did not account for the persistent inflation in Iran. The purchasing power of the cash transfer has thus been steadily diminishing over time, standing at less than USD 10 in mid-2018. While some design issues plagued this innovative programme from its inception, it was put in place smoothly. The timing proved problematic, however, as external pressures (economic sanctions in particular) have had a highly adverse impact and curtailed the ability of the Government to ensure the sustainability of the programme.

A UCG offers many merits to the economy of developing countries such as Iran: (1) it curtails inefficiencies and reduces the risks of corruption, the latter often embodied in

price subsidies, and therefore it reaches all of the population; (2) it connects households to at least a bank account, and therefore facilitates financial inclusion; (3) the consolidated household databases for the programme result in data-driven and -informed governance. The Government used the databases to reform its programmes and found much misappropriation and poor targeting. Reformed programmes saved USD 1 billion in the first year.

Iran has had remarkable success in putting in place a universal cash transfer programme (containing a UCG) in a short period, as well as acquiring useful experience in overcoming significant complications and maintaining it as a meaningful policy. Notwithstanding its large scope and scale, the programme emerged by default as the most rational and practical means of ensuring public support for a fundamental transformation of an outdated system of price subsidies, a need that was widely acknowledged. The roll-out took time (over two years) but was smooth and the political will behind it unparalleled, and the financing method – returning new revenues from higher prices of subsidized goods and services back to the public as compensation – was novel. The programme has suffered nonetheless from miscalculations on funding strategy and, especially, unfortunate timing, coming as it did during a turbulent period in the country's international relations. External pressures (sanctions, etc.) in particular have created significant challenges as they have disrupted the country's finances and increased inflation. The future for the cash transfer programme is uncertain, although it may play a role in softening the economic uncertainty currently besetting the country.

Sources: Based on Guillaume et al., 2011; Machado et al., 2018; UNICEF, forthcoming (*d*).

Annex 4. Kyrgyzstan: The challenges of implementing a quasi-UCG

In June 2017, the Government of Kyrgyzstan legislated the reform of its system of child benefits, bringing in a universal, age-restricted, quasi-UCG. The plan was to implement the following:

- A universal birth grant of around USD 58 for each child.
- A universal categorical monthly grant for all children aged 0–3, worth around USD 10 a month.
- A monthly large family grant for the third and subsequent children in families with three or more children aged 3–16, of around USD 7.50 per child.

The Government had wanted to reform its existing anti-poverty benefit – Kyrgyzstan’s Monthly Benefit for Poor Families – which provides cash support to children in such families. Over recent years, the number of children receiving support had fallen, and 60 per cent of poor children were not receiving any benefit.

Because the majority of households with three or more children are among the poor, the proposed benefit structure responded to child poverty, and was also a simpler method of targeting that would avoid issues relating to fraud and maladministration, another major concern of the Government. Funds were allocated and made available from the Government budget for 2018. The legislation was supported in Parliament and signed by the President in July 2017 for implementation to commence in January 2018.

Prior to implementation, a number of issues arose. First, the effectiveness and fairness of the original design of the Law was publicly debated, due to lack of strategic communication to explain it to the public. Although a communication strategy with evidence-based messages had been prepared, the authorized government agency was not able to clearly explain the purpose and benefits of the novel approach. This opened up space for other vulnerable groups to raise long-standing concerns; for example, mothers of children with severe disabilities demanded a carer’s allowance, and pensioners challenged the method of including pension income in the calculation of eligibility for state social support. These groups were ultimately successful in gaining the ear of Parliament.

Second, this was a time of political volatility, with a new President and changes to the executive and legislature. The general absence of a culture of evidence-based decision-making meant that the notion of “targeting” became a stumbling block. There were a wide variety of assumptions and interpretations of targeting, and policy rhetoric centred on deserving versus undeserving poor (adults), with children as primary beneficiaries not prioritized. Thus, the drafters and supporters of the UCG Law were not able to convince decision-makers of the benefits of the universal approach.

Lastly, the IMF and the World Bank expressed concern about fiscal sustainability and requested that the Government reconsider the Law. Although a number of other areas of the state budget requiring reform were also identified, ultimately the child benefit was a relatively easy target. The IMF instead stressed the importance of “restoring targeted social benefits.”²¹

The Government then asked Parliament for a three-month deferment to amend the Law and reintroduce targeting. A Government working group was established to propose a way forward which considered proposals for a revised Law, including a joint position prepared by UNICEF, the World Bank and the EU in support of restricting the child grant to the age of 18 months while restoring a means test for children above that age and up to 16 years. However, in early February 2018, the Government issued a new draft Law that omits any universal child grant element and reinforces the means test methodology for targeting. The latest version of the Law was under public discussion up until March 2018, then discussed in Parliament. It voted in favour on 29 March, and the President approved the Law on 30 March. It became effective as of 1 April 2018.

UNICEF continues to generate evidence on the performance of the social assistance scheme for children, options for policy reform and analysis of fiscal space, and to engage in policy debates on the way forward to develop the new child benefit scheme such that it is more equitable and inclusive and responds to the multidimensional vulnerabilities that Kyrgyz children and their families face.

Sources: Based on UNICEF, forthcoming (e).

21. ILO. 2014. “Libya (150).” NATLEX website/database http://ilo.org/dyn/natlex/natlex4.detail?p_lang=en&p_isn=96436&p_country=LBY&p_count=150

Annex 5. Regional quasi-UCGs in India and Indonesia

In 2018, the government of Papua province in Indonesia introduced a quasi-universal child grant programme. Papua is the region with the highest level of child poverty in the country – 35.4 per cent of the population live below the national poverty line. Despite economic growth and success in poverty reduction over the past decade, 13.3 per cent of the province's 11.5 million children were living in households below the national poverty line in 2016.

Indonesia has three tax-financed social protection programmes that directly focus on children, which altogether reach 28 per cent of children and youth under 21. The flagship Family Hope Programme (*Programme Keluarga Harapan – PKH*), a conditional cash transfer targeted at poor families with children, reached 10 million households in 2018, but evidence suggests that the poorest and most vulnerable miss out on the benefits, with exclusion errors reaching as high as 84 per cent (Office of the Vice-President of the Republic of Indonesia, 2018). Among children aged 0–6 in the poorest 40 per cent of the population, only 18 per cent are covered (Indonesia Ministry of National Development Planning; UNICEF, 2017).

To address this coverage gap and targeting errors, the regional government in Papua decided to roll out an age-restricted universal child grant for children aged 0–4 in three districts of Papua. Referred to as the *BANGGA Papua* programme, it covers over 20,000 children at present, and the plan is to further roll it out to eight new districts in 2019 and all 27 districts in the province by 2021 (Office of the Vice President of the Republic of Indonesia, 2018). To reach the most vulnerable children, the Indonesian Government is planning several pilot programmes and reforms to existing schemes, including the integration of PKH with the education grant programme, *Programme Indonesia Pintar* (PIP), with the goal of extending social protection to reach 28 million children in the coming years.

Similarly, the state government of Bihar in India (with a population of approximately 100 million) launched a state-wide universal cash transfer programme for girls in August 2018, the *Mukhyamantri Kanya Utthan Yojana* (Chief Minister's Girl Child Upliftment Cash Transfer).

Across India, girls suffer systematic discrimination and this is reflected in high rates of marriage before the age of 18 and school drop out rates. In Bihar, 22.5 per cent of the state population comprises girls aged under 18. Among this population, 9 per cent drop out of school before completing their primary schooling; only 12 per cent of women aged 15–49 have completed 12 or more years of schooling while 42.5 per cent marry before they turn 18 (UNICEF, forthcoming (f)). Furthermore, female literacy stands at just over 50 per cent, the sex ratio at birth stands at 870 females per 1,000 males, and female infant mortality is 15 points higher than for males.

Consequently, UNICEF advocated that the government of Bihar undertake a review of existing social protection programmes for girls, and provided technical support. Following this, a set of health, education and child protection programmes were integrated by the Government to form a multi-stage universal child grant for girls and young women that aims to improve their well-being at specific stages of the life cycle from birth to 21 years of age. The programme seeks to promote the value of girls in society as a whole. It provides a total grant of almost USD 800 disbursed at various stages of life, starting from birth and continuing during primary school through completion of secondary school and college graduation. There is a menstrual hygiene grant incorporated between ages 12 and 18. A maximum of two girls can benefit within a family. This at-scale UCG represents an effort to address extreme gender inequalities in Bihar.

Going forward, the State has allocated 1.26 per cent of its budget to the programme and it aims to potentially benefit 16 million girls in the first year.

Sources: Based on UNICEF, forthcoming (f); Office of the Vice President of the Republic of Indonesia, 2018.

Annex 6. Statistical tables



Child and family benefits: Key features of main social security programmes and effective coverage

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
Africa									
<i>North Africa</i>									
Algeria	•							2017	...
Egypt						•		2017	...
Libya		•						2017	...
Morocco	•							2017	...
Sudan						•		2017	...
Tunisia	•							2017	...
<i>Sub-Saharan Africa</i>									
Angola	•							2017	...
Benin	•							2017	...
Botswana						•		2017	5.5
Burkina Faso	•							2017	...
Burundi	•							2017	...
Cabo Verde	•							2017	31.5
Cameroon	•							2017	...
Central African Republic	•							2017	...
Chad	•							2017	...
Comoros							•		...
Congo, Rep.	•							2017	...
Congo, Dem. Rep.	•							2017	1.3
Côte d'Ivoire	•							2017	...
Djibouti	•							2017	...
Equatorial Guinea	•							2017	...
Eritrea							•		...
Ethiopia						•		2017	...

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
<i>Sub-Saharan Africa</i>									
Gabon	•			•				2017	...
Gambia, The					•			2017	...
Ghana					•			2017	5.6
Guinea	•							2017	...
Guinea-Bissau						•			...
Kenya					•			2017	8.1
Lesotho					•			2017	10.4
Liberia					•			2017	...
Madagascar	•							2017	...
Malawi					•			2017	9.8
Mali	•							2017	5.4
Mauritania	•							2017	...
Mauritius				•				2017	...
Mozambique					•			2017	...
Namibia				•				2017	...
Niger	•							2017	4.2
Nigeria					•			2017	0.0
Rwanda					•			2017	...
Sao Tome and Principe					•			2017	...
Senegal	•							2017	4.0
Seychelles				•				2017	...
Sierra Leone					•			2017	...
Somalia						•			...
South Africa				•				2017	75.1
South Sudan						•			...
Swaziland					•			2017	...
Tanzania, United Rep.					•			2017	...
Togo	•							2017	...
Uganda					•			2017	...
Zambia					•			2017	21.1
Zimbabwe					•			2017	...

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
Americas									
<i>Latin America and the Caribbean</i>									
Antigua and Barbuda						•		2017	...
Argentina	•			•				2017	84.6
Aruba							•		...
Bahamas, The						•		2017	...
Barbados						•		2017	...
Belize						•		2017	...
Bermuda				•				2017	...
Bolivia				•				2017	65.0
Brazil	•			•				2017	96.8
British Virgin Islands						•		2017	...
Cayman Islands							•		...
Chile	•			•				2017	93.1
Colombia	•			•				2017	27.3
Costa Rica				•				2017	17.7
Cuba						•		2017	...
Curaçao							•		...
Dominica						•		2017	...
Dominican Republic				•				2017	...
Ecuador				•				2017	6.7
El Salvador				•				2017	...
Grenada						•		2017	...
Guadeloupe								2017	...
Guatemala						•		2017	...
Guyana				•				2017	...
Haiti						•		2017	...
Honduras				•				2017	...
Jamaica				•				2017	...
Mexico				•				2017	25.0
Nicaragua						•		2017	...
Panama		•						2017	37.3

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
<i>Latin America and the Caribbean</i>									
Paraguay						•		2017	32.8
Puerto Rico							•		...
Peru	•							2017	...
St. Kitts and Nevis						•		2017	...
St. Lucia						•		2017	...
St. Vincent and the Grenadines						•		2017	...
Sint Maarten (Dutch part)							•		...
St. Martin (French part)							•		...
Suriname		•						2017	...
Trinidad and Tobago				•				2017	...
Turks and Caicos Islands							•		...
Uruguay	•			•				2017	66.2
US Virgin Islands							•		...
Venezuela, BR						•		2017	...
<i>North America</i>									
Canada							•	2017	39.7
United States				•				2016	...
Arab States									
Bahrain						•		2016	...
Iraq						•		2016	...
Jordan						•		2016	...
Kuwait						•		2016	...
Lebanon	•							2016	...
Oman						•		2016	...
Qatar						•		2016	...
Saudi Arabia						•		2016	...
Syrian Arab Republic						•		2016	...
United Arab Emirates							•		...
Yemen						•		2016	...

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
Asia and the Pacific									
<i>East Asia</i>									
China						•		2016	2.2
Hong Kong, China				•				2016	...
Japan								2016	...
Korea, Dem. People's Rep.						•		2016	...
Korea, Rep.						•		2016	...
Macao, China							•		...
Mongolia					•			2016	100.0
<i>South-East Asia</i>									
Brunei Darussalam						•		2016	...
Cambodia							•		...
Indonesia						•		2016	...
Lao PDR						•		2016	...
Malaysia						•		2016	...
Myanmar						•		2016	...
Philippines						•		2016	13.6
Singapore						•		2016	...
Thailand	•							2016	18.9
Timor-Leste							•		30.7
Viet Nam				•				2016	...
<i>South Asia</i>									
Afghanistan							•		...
Bangladesh						•		2016	29.4
Bhutan						•		2016	...
India						•		2016	...
Iran, Islamic Rep.	•							2016	...
Maldives							•		...
Nepal						•		2016	...
Pakistan				•				2016	...
Sri Lanka						•		2016	...

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
Oceania									
American Samoa							•		...
Australia					•			2016	100.0
Fiji				•				2016	...
French Polynesia							•		...
Guam							•		...
Kiribati						•		2016	...
Marshall Islands						•		2016	...
Micronesia						•		2016	...
Nauru							•		...
New Caledonia							•		...
New Zealand					•			2016	...
Northern Mariana Islands							•		...
Palau						•		2016	...
Papua New Guinea						•		2016	...
Samoa						•		2016	...
Solomon Islands						•		2016	...
Tonga							•		...
Tuvalu							•		...
Vanuatu						•		2016	...
Europe and Central Asia									
<i>Northern, Southern and Western Europe</i>									
Albania						•		2018	...
Andorra				•				2018	...
Austria		•						2018	100.0
Belgium	•			•				2018	100.0
Bosnia and Herzegovina							•		...
Croatia				•				2018	...
Denmark		•						2018	100.0
Estonia		•						2018	100.0
Finland		•						2018	100.0
Faroe Islands							•		...

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
<i>Northern, Southern and Western Europe</i>									
France		•						2018	100.0
Germany		•						2018	100.0
Gibraltar						•			...
Greece				•				2018	...
Greenland						•			...
Iceland					•			2018	...
Ireland		•						2018	100.0
Italy	•			•				2018	...
Latvia		•						2018	100.0
Liechtenstein	•			•				2018	...
Lithuania				•				2018	...
Luxembourg		•						2018	...
Macedonia, FYR						•			...
Malta		•						2018	...
Monaco	•							2018	...
Montenegro						•			...
Netherlands		•						2018	100.0
Norway		•						2018	100.0
Portugal					•			2018	93.1
San Marino	•							2018	...
Serbia				•				2018	...
Slovenia				•				2018	79.4
Spain				•				2018	100.0
Sweden		•						2018	100.0
Switzerland	•			•				2018	100.0
United Kingdom					•			2018	100.0
<i>Eastern Europe</i>									
Belarus			•					2018	...
Bulgaria				•				2018	48.6
Czech Republic		•						2018	...
Hungary		•						2018	100.0

Country/Territory	Contributory schemes (social insurance)	Non-contributory schemes				No programme anchored in legislation	No data	Latest year available for review	Effective coverage, 2015/2016
		Universal (not means-tested)		Social assistance (means-tested)					
		10+ years	<10 years	Poverty-targeted	Affluence-tested				
<i>Eastern Europe</i>									
Moldova	•			•				2018	...
Poland				•				2018	100.0
Romania		•						2018	100.0
Russian Federation	•							2018	100.0
Slovakia		•						2018	100.0
Ukraine			•					2018	...
<i>Central and Western Asia</i>									
Armenia				•				2016	21.4
Azerbaijan	•			•				2016	...
Cyprus					•			2018	60.3
Georgia						•		2016	...
Israel		•						2016	...
Kazakhstan				•				2016	100
Kyrgyzstan				•				2016	17.8
Tajikistan	•							2016	6.4
Turkey						•		2016	...
Turkmenistan						•		2016	...
Uzbekistan	•			•				2016	...

Note: Effective coverage of children and families: Ratio of children/households receiving child benefits to the total number of children/households with children. The data for the countries with no programmes anchored in legislation come from donor-funded schemes. The schemes are defined based on the attributes of the family allowances only, and do not include reference to family benefits such as birth grants or housing allowances.

Sources: Based on ILO (2017a), updated with information from ISSA, SSA (2018): <https://www.ssa.gov/policy/docs/progdesc/index.html> (programme summaries), accessed November 2018; and MISSOC (2018): <https://www.missoc.org/missoc-database/comparative-tables>, accessed November 2018.

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