



# Old Persons' Cash Transfer Disbursement Procedure on Social Well Being of Elderly Persons in Kiambu County, Kenya

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**Abstract:** Cash transfer programmes are the most common social assistance intervention when it comes to component sub-categories. This study sought to describe the effect of Old Persons' Cash Transfer disbursement procedure on social wellbeing of elderly persons in Kiambu County, Kenya. The research was conducted in Kiambu County focusing on those aged 65 and above who were recipients of non-contributory social safety programmes. This was a concurrent mixed method research utilizing Cochran (1963) formula to determine the sample size of 385. The study adopted probability sampling technique with a focus on proportionate sampling to select cash transfer participants, beneficiaries. In-depth interviews with professionals, and elderly cash transfer beneficiaries served as the primary data source. Two Focus group discussions (FGDs) were utilized to collect qualitative data from beneficiaries. Quantitative data was analyzed using IBM-SPSS Statistics version 25 while qualitative data was analysed using content analysis and thematic analysis. It entailed searching across a data set to identify, analyse and report patterns that emerged. On the question on whether OPCT money was disbursed on time, the study showed that majority of the respondents disagreed 144 (41.1%) while a small number strongly agreed 11 (2.6 %). This means that OPCT money disbursement was not timely and that there were delays and bottlenecks in the disbursement process. In conclusion, the elderly did not believe that the disbursement of cash transfers was made on time. They also felt the targeting was not well done and that there was some injustice in the process. The study recommends that OPCT payments should be made more regular. If the OPCT is disbursed regularly then they will be able to make proper plans for spending money.

**Keywords:** Disbursement, Procedure, Cash, Transfer, Programs, Social, Wellbeing

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## 1. Introduction

In the modern setting, "social protection" has gained widespread acceptance and recognition as a powerful tool that may effectively combat extreme poverty and socioeconomic vulnerability (Osabohien, R., et al, 2022 Carraro & Marzi, 2021; Matthew et al., 2019). "Policies and actions, including legislative measures, which enhance the capacity and opportunities for the poor and vulnerable to improve and sustain their lives, livelihoods, and welfare; enable income-earners and their dependents to maintain a reasonable level of income through decent work; and ensure access to affordable healthcare, social

security, and social assistance" are all considered to fall under the category of social protection (The Kenya Social Protection Policy, 2011). In order to lessen the economic and social vulnerability of the poor, vulnerable, and marginalized groups, social protection has been adopted globally. Social protection refers to all public and private initiatives that provide income and consumption transfers to the poor, protect the vulnerable from risks to their livelihoods, and improve the social status and rights of the marginalized. Pensions, family allowances/child benefits, health/education fee exemptions, health insurance, and food/cash for work programs are a few possible intervention strategies. Social protection interventions

should be transformative, protective, preventative, and promotional, according to the UNICEF's conceptual framework for social protection. They address power disparities that continuously breed vulnerability due to economic disparities by becoming transformative. They ought to be safeguarding in order to lessen shocks and offer relief from economic and social hardships. They should also be proactive to avoid deprivation once a shock has occurred and supportive to improve income generation (via assets) and human capital development, acting as a catalyzing force to lift people out of poverty or any other vulnerability (UNICEF, 2008). Thus, the achievement of the five Millennium Development Goals and other related MDGs as stated in the Millennium Declaration 1, is facilitated by the effective implementation of social protection initiatives. Reduce child mortality, combat HIV/AIDS, malaria, and other diseases; eradicate extreme poverty and hunger; advance gender equality and women's suffrage; and create a global partnership for development, in that order. Social insurance, social assistance, and social transfers are the three primary categories into which social protection policies can be generally divided. While social assistance includes school feeding programs, free health care, or free education, social insurance allows people to draw from a pool when they face permanent change, such as retirement. As part of a social contract with its inhabitants, the state (or occasionally non-state actors) provides regular and predictable transfers, frequently in the form of cash. These transfers are referred to as social transfers. This paper focused on disbursement of cash transfer elderly persons, cash transfers, according to the head of the American institute of research (AIR), are initiatives where the government or donors deliver the money directly to the targeted disadvantaged individuals (AIR, 2013; Handa et al., 2016). According to Handa et al. (2016), cash transfers are programmes that give money directly to low-income households with the goal of enhancing their standard of living. The Mercy Corps Cash Transfer Programming Toolkit, 2016 (MCCTP), adds that Cash transfer programs (CTP) include all initiatives in which participants get cash directly in the form of a meal voucher or cash for job activities. Therefore, cash transfers as a strategy for reducing poverty aid in the development of economies by providing aid to the poor and the vulnerable especially the elderly persons. Transfers of cash or its counterparts, such as tax advantages, as well as vouchers for cash or cash-like in-kind aid are all considered cash transfers (e.g., Supplemental Nutrition Assistance Program benefits, known as food stamps). The focus of the definition is on resource flows intended to support immediate consumption, maintain a quality of living, or create assets for long-term security (e.g., for homeownership or retirement) (Parker & Todd, 2017; Sun, Huang, Hudson & Sherraden, 2021).

Cash Transfer programmes rely heavily on training and communication strategies. Beneficiaries are instructed on their rights and obligations, such as benefit amounts, payment frequency, and co-responsibilities, at the time of

registration, for example. Service providers, local governments, and program personnel are taught in areas including payment administration, co-responsibility monitoring, and complaint resolution (Hanlon, Barrientos, & Hulme, 2010). Payment timeliness affects the management of older persons' cash transfer to a moderate extent (Mbugua & Gachunga, 2015). According to Help-Age International (2006), older people in the developing world generally contribute little to their families and society at large. This includes helping out around the house and taking care of kids and elderly relatives who are ill or disabled so that other family members can work "visible" jobs. According to the National Gender and Equality Commission (2014), Kenya's government has been implementing cash transfer programs through the Ministry of Labour's Social Security Services since the middle of 2000. The OPCT program was first introduced as a pilot before scaling up got under way three years ago. In recent years, there has been an increase in the senior population in Kenya.

## 2. Literature Review

Payment modalities of older persons' cash transfer need to be revised in order to reduce the time expended in accessing them, especially in the sub-Saharan African cases. Research showed that the elderly strain a lot having to wait. If the CT is disbursed regularly then they will be able to make proper plans for spending money (Mbabu, Masiga & Okong'o, 2020).

In practice, a 'mix and match' approach has been adopted by many SCT programmes in sub-Saharan Africa, integrating multiple payment instruments within or through their SCT programmes. While the use of multiple payment instruments and providers adds complexity in terms of program administration and management, in most African economies, the 'patchy' nature of financial infrastructure, network coverage and payment provider operation also demands this approach in order to meet as many beneficiaries as possible (Gronbach, 2020).

Targeted social protection programmes are seen as having the greatest impact in combating extreme poverty in South Africa (le Roux, 2002). However, it is well recognized that programmes aimed at the poor or those in extreme poverty continue to exclude the poorest and most vulnerable (Hadna, 2022; Pouw et al., 2018). Nonetheless, effective targeting tactics are required for the successful implementation of targeted social protection programs, particularly in areas where an individual or household economic inequalities are modest.

In Uganda SCG disbursement procedures, beneficiaries receive cash transfers through an electronic payment system a programme card with a SIM is issued to each beneficiary. Every two months, payments are made at one or two central locations in each sub-county, such as the

sub-county center (Sepúlveda, 2018). Electricity and cell network coverage play a big role in where pay points are located. Each village is given a specific time and day for receiving payments. Some sub-counties attempt to balance the available time by allocating later timeslots to villages that are farther away. If a beneficiary is unable to appear at the scheduled time, they may either appoint another recipient or wait for the next payment period to receive their payment. In most cases, beneficiaries are unable to arrange for an alternate recipient to receive the transfer on their behalf or are simply unable to reach the pay point due to the expense, distance, or impassability of the roads these issues accounts for nearly a third of the problems experienced by beneficiaries who had ever missed a payment Merttens, & Jones, 2014).

Households can incur expenses as a result of receiving the transfer. These costs could include transportation to the pay point or fees charged to alternate recipients who receive the transfer on behalf of beneficiaries who are unable to do so themselves. They often take into account the time spent waiting in lines for payments and traveling to and from the pay point. This means that those who live far away from pay points must pay a substantial premium in order to receive their transfers.

Furthermore, since beneficiaries are often required to pay for transportation on credit, they are vulnerable to price increases. Another form of expense to beneficiaries is the time spent traveling to and from the pay point, as well as the time spent queuing to receive their transfer while at the pay point (Gronbach, 2020). The time it takes to receive the payment reflects lost productivity for those who would otherwise be employed. Furthermore, although younger and healthier recipients can bike or walk long distances, this is not a choice for the disabled, sick, or elderly, who must either appoint an alternate beneficiary (to whom they may pay a fee) or pay for transportation. Some elderly beneficiaries choose to walk to pay points rather than pay for alternative recipients in order to save money Merttens, & Jones, 2014). Long distances walked and time spent queuing impose an additional possible expense to beneficiaries in the form of a negative impact on their wellbeing. Some elderly beneficiaries choose to walk to pay points rather than pay for alternative recipients in order to save money (Hirvonen, & Hoddinott, 2020). Long distances walked and time spent queuing imposes an additional possible expense to beneficiaries in the form of a negative impact on their wellbeing.

The electronic system was thought to have reduced the possibility of corruption. It has also sped up the payment process and resulted in shorter lines at the pay station, with some beneficiaries remarking about how convenient it is that the money stays on the card even though a payment day is missed (Ahmad, Green & Jiang, 2020). Although the majority of beneficiaries are optimistic on electronic system, Poor coverage ensures that beneficiaries must drive farther to meet urban centers with improved

communications networks, incurring higher travel-related costs as a result (Merttens & Jones, 2014).

Beneficiaries in the two study districts perceived the SCG to be a 'dependable source for life and livelihood' and considered it a sign of the government's commitment to meeting their needs. Study participants (both beneficiary and non-beneficiary) also seemed to agree that the SCG targets one of the most vulnerable groups of people – older people. They perceived the targeting process to be fair, with no significant differences in beneficiary experiences of targeting or enrolment based on the different methods used (automated registration in Kaberamaido and community registration in Nebbi). In both districts, the SCG was perceived to be less prone to corruption than other types of programmes, as money is given directly to beneficiaries and the process of accessing the benefits is clear.

A considerable number of study participants (both beneficiaries and other community members) felt that the amount was enough and appropriate for older people. Some, however, felt that the income transfers were insufficient to improve the wellbeing of older people, and furthermore that older people needed not only cash but also systems of care to provide them with sustainable support. Some also perceived the eligibility age (65 years and over) to be too high. The general perception was that poor older people start the ageing process (in reference to the decay of physical vitality) early in life due to persistent vulnerability to malnutrition and ill-health. Beneficiaries reported that if they are not able to go to a designated pay point (for example, due to physical disability), a relative or trusted friend (i.e. alternative recipient) can be sent to receive the cash on their behalf. Isolated cases were, however, reported in which alternative recipients diverted and failed to deliver the full amount to the beneficiaries. Some beneficiaries (especially in Kaberamaido district) complained about having to travel long distances to pay points, which reduces the net benefits of the transfers. This was attributed to the limited number of pay points provided by MTN. Others complained about the frequent breakdown of MTN systems (network failure), which they said leads to delays in accessing the cash transfers and/or long waiting hours. In fact, some suggested the need to use more than one payment service provider.

The goal of the OPCT was to provide a basic income to the most vulnerable and destitute elderly individuals aged 65 and above. It was first tested in three disadvantaged districts in 2006/2007, with 300 people receiving assistance. Following that, it grew significantly, with 343,751 recipients across the country in 2017 (National Social Protection Secretariat, 2017b). Each participant receives a monthly stipend of 2,000 Kenyan shillings (US\$20) dispensed by appointed payment agents. The OPCT's mandate was expanded by the Kenyan government in 2017 to include all older adults aged 70 and above, regardless of their financial level (Derbyshire,

2018; Hunger Safety Net Programme, 2017 Mohamed, et. Al. 2021). Despite this expansion, significant knowledge gaps remain about the effectiveness of the OPCT's recipient targeting and the program's impact at the individual level.

Prior to the enlargement, the National Social Protection Secretariat (2017a) established the following conditions for OPCT eligibility: being 65 years of age or older, being poor and vulnerable based on household consumption and expenditure (as determined by a screening questionnaire), the household in which the older person resides must not be enrolled in any other cash transfer program, a member of the household must not be in receipt of any pension and/or regular income, and a member of the household must not be in any gainful employment. The program ended when a recipient died or became disqualified after providing fraudulent information that met the qualifying criteria.

In order to ensure that the program reaches the most vulnerable elderly individuals, the program developed a hybrid targeting strategy that included Community Based Targeting (CBT) and Proxy Means-Testing (PMT). First, community informants generated a preliminary list of eligible individuals who, to the best of their knowledge, met the five program eligibility criteria. In an environment where there is typically inadequate information on income and expenditure, involving the community in the beneficiary selection process helps to overcome obstacles associated with traditional means testing. It has been argued that the community, rather than the government, is better suited to determine deprivation because of its superior local understanding of who needs help (Caeyers, & Dercon, 2012; Farrington et al., 2007).

Njuguna, (2015) analyzed the status of Kenya's old-age policy and proposed that OPCTP be monitored and evaluated. Njuguna, (2015) claims that the effectiveness of every program is determined by how successfully the activities are funded, implemented, monitored, and evaluated through feedback systems (Gondi, 2005). In order for this to happen, there must be an in-built structure that enables ongoing participation of important stakeholders in monitoring and assessment. This information is used to inform the next stage of planning and resource allocation, ensuring that development resources are used efficiently for both economic growth and poverty reduction.

Mbugua and Gachunga (2015) study in Kakamega County on the OPCT indicated that a major issue was the amount of cash allocated in the scheme. In another study by respondents disagreed that the volume of cash disbursed through older persons cash transfer programme was enough ( $M=2.90$ ;  $SD=1.43$ ). The same study showed through a regression analysis showed that volume of cash had the greatest effect on older person wellbeing in Garissa County. Further, the same study revealed that the

frequency of cash payments to OPCT beneficiaries had the second greatest influence on older person wellbeing in Garissa County and accessibility of cash payments had the least effect on older person on older person wellbeing in Garissa County but this was not significant.

More recent studies indicate that unsuccessful targeting can create a perception of injustice regarding the targeting process, which can have long-term negative consequences in communities and harm social cohesiveness. Universal benefits are often chosen to eliminate this impression of unfairness and to decrease discontent among otherwise reasonably homogeneous populations, as evidenced by Kenya's approach toward the universal InuaJamii 70+ cash transfer for the elderly. In nations with little administrative capacity to operate complex targeting or conditional cash transfer programs, universal programs are also seen as more cost-effective (Chepngeno-Langat, Van Der Wielen, Falkingham&Evandrou, 2021 citing Ellis, 2012; Freeland, 2018&Slater, 2011).

Recent studies show that there are other variables affecting the programme which include, but are not limited to, insufficient cash, which may result in the government's budget failing to meet the program's funding requirements. The programme is also dubious due to the intermittent disbursement of cash. The OPCT cash may be delivered at irregular periods, such as every two months or every six months, making it difficult to forecast when the next payment would be made (Wanyama & Nyambedha, 2017). Because they don't know when the money will be issued, older persons miss payment dates.

The initiative has also been harmed by irregular fund disbursement. The elderly have suffered since some of them have not been paid on time. The majority of them learn that the payment deadline has past when it is too late. The program has also been harmed by errors in the registration procedure. People who did not qualify for the program were registered, and the funds went to the wrong person, negating the aim of the program (Mohamud&Minja, 2020). The program's efficiency has also been harmed by poor management during its execution. When putting the program in place, corrupt vices embezzled the money and used it for their own gain. In addition, the lack of oversight and monitoring of the government's money in the banking system has aided in the misappropriation of cash (Kubai, 2020).

In Summary, despite the expansion and scope of social protection programs in both developed and developing countries, most emerging economies still have nascent systems, with only a tiny percentage of the population getting aid. Older persons in Kenya are a particularly vulnerable demographic. They are confronted with a variety of issues; including financial troubles. There has been a surge in interest in digital 'financially inclusive' payment technology over decade. In contrast, recent CT research has focused on program design, policymaking

processes, affordability, and impact assessments, with little attention paid to the payment side. Despite the significant expansion of CT schemes in the region and extensive financial backing from international organizations and donors, this lack of data and comparative analysis is particularly noticeable in Sub-Saharan Africa. Payment procedures must also be altered in order to reduce the amount of time spent obtaining them, particularly in Sub-Saharan Africa. According to studies, waiting puts a lot of stress on the elderly. They will be able to create suitable financial planning if the CT is distributed on a regular basis.

### 3. Methodology

The study adopted a mixed methods approach, particularly a concurrent research design where both quantitative and qualitative approaches were used in the collection, analysis, and interpretation of data. The research was conducted in Kiambu County focusing on those aged 65 and above who were recipients of non-contributory social safety programmes. In 2009, the total population of the elderly (65 and above) in the county was 59,057 people, 3.64 percent of the total population. The study adopted Cochran (1963) formula to determine the sample size because the population of elderly persons in Kiambu County is infinite. Sample size was determined as follows:

$$n_0 = \frac{Z^2 pq}{e^2} = \frac{0.9604}{0.0025} = 385$$

Where;

$Z^2$  – is the Z value in a table (1.96)

n-sample size

p is the (estimated) proportion of the population which has the attribute in question

q- is 1-p

$e^2$ -is the desired level of precision (i.e. the margin of error 0.05) Sample size will be 385 beneficiaries.

Researchers also conducted 2 focus group discussions, comprising 6 participants and held 25 interview sessions with key informants (1 Senior Social development officer, 12 Social Development officers and 12 health workers). These numbers for qualitative data were determined on the basis of data saturation

### 4. Results and Discussion

This study sought to describe the effect of OPCT disbursement procedure on social wellbeing of elderly persons in Kiambu County, Kenya. This study sought to establish to what extent respondents agreed with the statement relating to the disbursement of OPCT. The statements included: OPCT money is disbursed on time, delays in disbursing money, good customer care from money handlers the at pay point, politely handled during payment, time spent at the pay point is appropriate (since arrival up to when you are served), satisfactory assistance at pay points and a need to review disbursement procedure.

The options given were SD (Strongly disagree), D (Disagree), N (Neutral), A (Agree) and, SA (Strongly Agree). There were seven statement items on this question as shown in table.

**Disbursement of cash**

Statement	SD	D	N	A	SA
OPCT money is disbursed on time	121 (34.6%)	144 (41.1%)	54 (15.4%)	20 (5.7%)	11 (3.1%)
Delays in disbursing money	7 (2%)	5(1.4%)	14 (4%)	164 (46.9%)	160(45.7%)
Good customer care from money handlers the at pay point	122 (34.9%)	130 (37.1%)	66 (18.9%)	27 (7.7%)	5 (1.4%)
Politely handled during payment	196 (56%)	114 (32.6%)	14 (4%)	25 (7.1%)	1 (0.3%)
Time spent at the pay point is appropriate (since arrival up to when you are served)	114 (32.6%)	145 (41.4%)	54 (15.4%)	32 (9.1%)	5 (1.4%)
Satisfactory assistance at pay points	140 (40%)	138 (39.4%)	53 (15.1%)	15 (4.3%)	4 (1.1%)
A need to review disbursement procedure	124 (35.4%)	129 (36.9%)	63 (18%)	25 (7.1%)	9 (2.6%)

**Source: Field data, 2022**

On the question on whether OPCT money was disbursed on time, the study showed that majority of the respondents disagreed 144 (41.1%) while a small number strongly agreed 11 (2.6 %). This means that OPCT money disbursement was not timely and that there were delays and bottlenecks in the disbursement process. This concurs

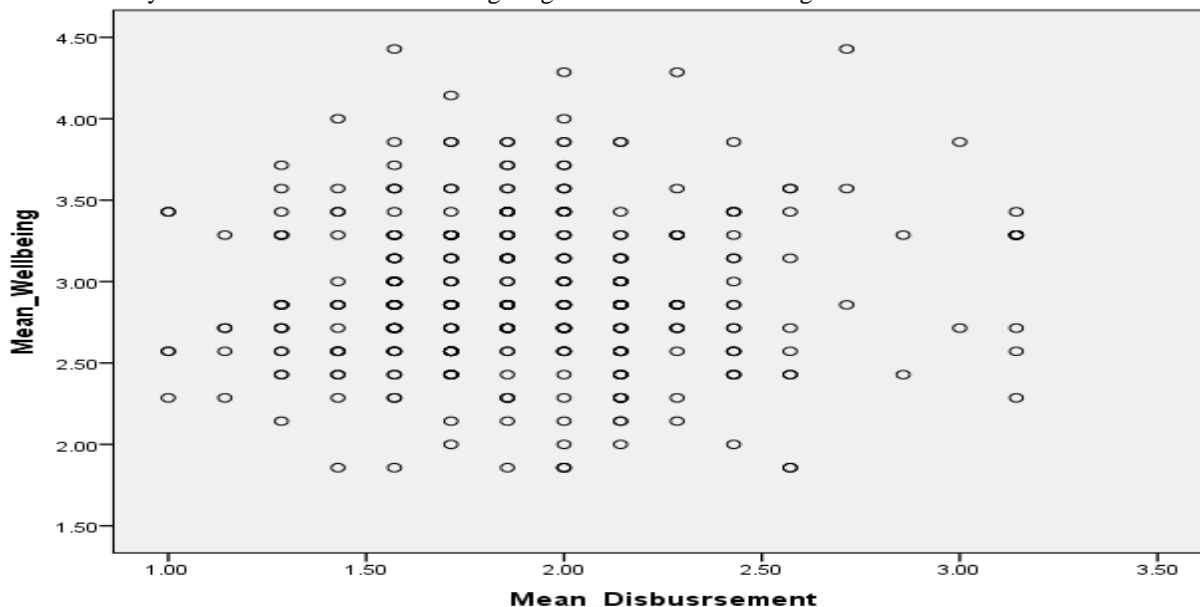
with a study by Hassan and Sakwa (2018) that showed the results on the speed of delivery of OPCT among older persons in Garissa disagreed on the timing of cash payments being appropriate to their needs (M=2.88; SD=1.77). Results on the question about delays in disbursing money showed that majority agreed 164

(46.9%) and strongly agree 160(45.7%) that there were delays in disbursing the money. Further according to the same study in Garissa by Hassan and Sakwa (2018), the results showed that the majority of respondents indicated that approval into the OPCT programme was not on time (M=2.86; SD=1.43). According to this finding, the respondents did not believe that the cash transfer was made on time. They also felt the targeting was not well done and that there was some injustice in the process. This concurs with a study which revealed ineffective targeting

can foster a sense of injustice about the targeting process, which can have long-lasting negative effects on communities and harm social cohesiveness (Ellis, 2012, Freeland, 2018).

### Correlation between wellbeing and disbursement

Testing of a monotonic relationship between variables (Disbursement and Wellbeing) was run giving the results as shown in figure 1.



Source: Field data, 2022

### Spearman Correlation

Since  $p(0.786) > \alpha 0.05$ , we fail to reject the null hypothesis of no relationship and conclude that the relationship is not statistically significant. A two tailed Sig was used since the researcher did not know the direction of the relations earlier. 0.786 shows that the correlation is not significant and two variables well-being and disbursement are not linearly related. This therefore shows that based on the findings that wellbeing is not improved by disbursement alone. This means that disbursement processes alone may not improve wellbeing among the elderly.

### Implication to policy

Scholars and decision-makers are considering OPCT programs as a novel approach to combating severe poverty. A notable example of enhancing the government's ability to redistribute resources is the OPCT programs. It is evident that these programs help a lot of low-income households and that they fulfill essential requirements that would otherwise go unfulfilled. However, it is also obvious that the OPCT programs are not well-organized to achieve the desired results since

there are numerous delays in funding disbursement, which results in subpar services that have a negative influence on the wellbeing of aged people.

## 5. Conclusion and Recommendations

### 5.1 Conclusion

Although the program's goal is to eliminate poverty among senior citizens, it lacks defined strategies for maintaining its advantages. Because of this, the majority of beneficiaries place a greater emphasis on consuming than on mobilizing funds and investing in IGAs to increase and maintain earnings and access to subsistence-level livelihoods. Cash transfer programs that don't have adequate sustainability plans run the risk of disappearing in a world where financing priorities are continuously shifting in both government and development assistance circles. For older people to access basic livelihoods in a sustainable manner, cash transfer programs must have defined policies for enabling beneficiaries to diversify and stabilize their income sources.

## 5.1 Recommendations

The OPCT payments should be made more regular. If the OPCT is disbursed regularly then they will be able to make proper plans for spending money. Improvement of communication channels between the government and the elderly persons would improve the effectiveness of the programs. Creation of awareness so that potential beneficiaries and their relatives know that the OPCT program is everywhere, even in the rural areas to avoid people fleeing from rural areas to urban centers for the same programme. Sensitization to the beneficiaries to ensure they follow the required protocol, so that they can avoid being struck off the register.

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