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CHAPTER 1

INTRODUCTION TO THE STUDY

1. INTRODUCTION

This study explores the perceptions of the recipients of social welfare assistance in Gutu District, Zimbabwe, about the effectiveness of the Social Welfare Assistance Programme. This chapter introduces the study. It presents the background of the study, the rationale of the study, the aim of the study, research objectives and research questions. It also gives a brief overview of the research methodology employed in the study and the theoretical framework that informs the study. The relevance of the study to social development will be discussed. The last section of the chapter is a brief description of the structure of the report.

1.1. BACKGROUND OF THE STUDY

Many governments use social assistance to respond to the problem of poverty, thus social assistance programmes seeks to reduce or alleviate poverty. Social assistance enables beneficiaries to meet their basic needs and thereby improve the quality of life (Chambers, 2000). Social assistance refers to benefits in cash or in-kind to individuals with no adequate means of supporting themselves (United Nations Research Institute for Social Development, 2010). Social welfare refers to having capabilities to attain a good life, a high level of wellbeing including happiness, economic benefits and a guaranteed minimum income to avoid poverty (Greeve, 2008). Historically, the word welfare has been related to happiness and prosperity, sociological and social policy analysis thus points to happiness, wellbeing and living free from poverty as essential elements of social welfare (Williams 1976).

In Zimbabwe, the major social assistance programme is the Welfare Assistance Programme. The Welfare Assistance Programme is funded by the government and administered by the Department of Social Welfare (Munro, 2003). The operation of the Social Welfare Assistance programme is governed by the Social Welfare Assistance Act {Chapter 17:06}. In terms of this Act, persons eligible for social welfare assistance include persons aged sixty years and above, the mentally or physically handicapped, any person suffering continuous ill health and any individual who is a dependent of a person who is destitute or incapable of looking after himself. This study was undertaken in Gutu District, Zimbabwe. Gutu is a rural district in Masvingo province, South Eastern Zimbabwe with a population of 203 083 people.
1.3. STATEMENT OF THE PROBLEM AND RATIONALE

Since the colonial period, Zimbabwe has been providing social assistance to persons who lack the means to support themselves. One such social assistance programme is the social welfare assistance programme. The social welfare assistance program which is also known as public assistance falls under social assistance. Its main objective is to alleviate poverty through the provision of benefits in cash and/or in kind, which enable the beneficiaries to meet a minimum standard of need. Section 30 of the Constitution of Zimbabwe provides for the provision of social assistance to the selected vulnerable groups. The Constitution touches on issues of empowerment, food security and urges the state to adopt policies and measures that guarantee free basic education and accessibility to adequate health services throughout Zimbabwe. Social welfare assistance in Zimbabwe is provided in terms of the Social Welfare Assistance Act [Chapter 17:06]. In terms of this Act, persons eligible for social welfare assistance include persons aged sixty years and above, the mentally or physically handicapped, any person suffering continuous ill health and any individual who is a dependent of a person who is destitute or incapable of looking after himself. Applicants of social assistance have to meet three important conditions namely political, economic and moral conditions. The political condition requires that social assistance be extended only to citizens who hold a Zimbabwean citizenship. The economic condition seeks to restrict assistance to those who are unable to meet their basic needs, such assistance is only granted after it has been established that the applicant is unable to secure assistance from his family. The moral conditions deny social assistance to people with criminal records and those who voluntarily choose to be unemployed (Kaseke, 1988).

Although the objective of the social welfare assistance program is to alleviate poverty, it is doubtful however, that this objective is being met. This stems from the realisation that the cash benefits given under public assistance are often inadequate to meet basic needs of the recipients. The Zimbabwean government is facing severe financial constraints making it difficult for the state to make adequate provision for social assistance. It is apparent that the state does not have financial capacity to provide adequate social protection. Only few people are benefiting from the programme, and thus many impoverished citizens are excluded. Government is forced to tighten eligibility conditions in order to limit the number of eligible applicants (Kaseke, 1988). Therefore there is reason to believe this economic instability is undermining the objective of welfare assistance. In light of this, it is questionable if the social welfare assistance programme is effective in reducing poverty. The study therefore seeks to
explore the perceptions of beneficiaries about the effectiveness of Zimbabwe’s welfare assistance programme in alleviating poverty.

Although Zimbabwe has been providing social assistance since the colonial era, the researcher is not aware of any studies that have been undertaken to measure the effectiveness of the programme. Specifically, the perceptions of recipients of social welfare assistance about the effectiveness of the Welfare Assistance Programme are not known. This research is expected to contribute to our understanding of welfare assistance and its contribution to poverty reduction. The research findings will also have the potential to inform government policy on social welfare assistance. In addition, the research findings will have the potential to inform the activities of civil society institutions that engage in advocacy work with and on behalf of the poor.

1.4. AIM

To explore the perceptions of the recipients of social welfare assistance in Gutu District, Zimbabwe, about the effectiveness of the Social Welfare Assistance Programme in alleviating poverty.

1.5. RESEARCH OBJECTIVES

1. To explore how the objectives of Zimbabwe’s social welfare assistance programme are understood by recipients.
2. To explore the perceptions of the recipients of social welfare assistance about the outcomes and strengths of the social welfare assistance programme.
3. To elicit the views of the recipients of social welfare assistance on the challenges associated with the provision of social welfare assistance in Gutu District, Zimbabwe.

1.6. RESEARCH QUESTIONS

1. How do the recipients of social welfare assistance program understand the objectives of Zimbabwe’s social welfare assistance programme?
2. What are the positive outcomes of social welfare assistance?
3. What are the views of the recipients of social welfare assistance on challenges associated with the provision of social welfare assistance in Zimbabwe?

1.7. BRIEF OVERVIEW OF THE RESEARCH METHODOLOGY
This study adopted a qualitative research approach. A qualitative research approach enabled the researcher to have close contact with the research participants, and thus making it possible to collect rich data. The qualitative research approach enabled the researcher to produce in depth information that generated greater understanding of the perceptions of the recipients of social welfare assistance about the effectiveness of Zimbabwe’s Welfare Assistance Programme. A case study design was employed in this study. A case study was more suitable and appropriate for this study because it is the most effective strategy to determine whether particular government programmes are efficient or whether the objectives of a particular programme are being met (Zainal, 2007). Recipients of social welfare assistance were selected using purposive sampling and data were collected using in-depth interviews.

1.8. THEORATICAL FRAMEWORK

The study was informed by the neo-liberal theory. Neoliberalism is based on unchangeable facts of modern economics. The foundations of neoliberalism are closely linked to Adam Smith and his work *The Wealthy of Nations* (Clarke, 2005). The neoclassical or neoliberal perspective represents a further elaboration of the modernization theory. Neoliberalism is based on the promotion of general wellbeing by following the principles of a market economy based on supply and demand with limited state intervention (King, 1987; Toye 1999). The assumptions of neoliberalism are linked with the principles of neo classical economics, except that neoliberalism place less emphasis to market failures (Clouclough, 1991).

Neoliberalism gave rise to the residual approach to social welfare. The residual approach to welfare is based on the notion that individuals are responsible for their wellbeing and the state only intervenes in terms of emergence and crisis (Sowers & Dulmus, 2008). Eligibility for welfare assistance requires that individuals exhaust their own private incomes, which may include assistance from family members, employers and the church before they can receive state assistance and requires individuals to prove their financial inability to provide for their families (Sowers & Dulmus, 2008). A residual approach identifies two systems through which people’s needs are met, namely individuals or/and their families and the capitalist market economy (Zastrow, 2009). Social welfare only comes into play when these systems break down or fail to adequately meet people’s needs, once the needs have been addressed the individual and the family ought to resume the responsibility for meeting their needs.
Residual welfare views social welfare in narrow terms, thus it only includes public assistance or policies related to the chronically poor, residual services are time limited, means tested and emergency-based and are generally provided when all other forms of assistance prove to be inadequate (Sowers & Dulmus, 2008).

The provision of welfare assistance in most African countries is informed by neoliberal theory. In various instances, provisions for healthcare and education for the poor have been cut back (Martin, 1993). In Sub-Saharan Africa, governmental expenditures for health have declined in most countries, and the expenditure for primary schools has fallen in 21 out of 23 countries (Walton & Seddon, 1994). Between 1980-1985, governmental spending on social welfare declined by 26%, there have been cut backs in education and health expenditure in countries including Swaziland, Zimbabwe, Lesotho and Uganda (Tevera, 1995). Kaseke (2012; p.2) argues that “because of scarcity of resources in developing countries, not every destitute person can receive assistance, and therefore, those receiving social assistance become the privileged poor.” In Zimbabwe, the state’s involvement in the provision of social assistance is justified only on the grounds that intervention is meant to protect human life, the state’s involvement is temporary (Kaseke, 2012). The assumption is that it is not the state’s responsibility to provide long-term assistance. The state is reluctant to provide social assistance as a legitimate function of the state, this stems from the fear that it would create a dependency syndrome (Kaseke, 2012).

This theory is relevant for this study because of the following. Firstly the social welfare assistance programme is seen as a derivative of neoliberal thinking in that the recipients are considered as the poorest of the poor who are unable to help themselves. Secondly the assistance provided is minimal as a way of minimizing the potential for the development of a dependency syndrome. Thirdly, welfare assistance is seen as an end in itself rather than a means to an end.

1.9. RELEVANCE OF THE STUDY TO SOCIAL DEVELOPMENT

This study is relevant to social development in the sense that social development seeks to improve the quality of life and this is done by, among other things, reducing poverty levels. Social development improves the quality of life by also enabling individuals to access basic services such as health and education. The objective of social welfare assistance to alleviate poverty and therefore it seeks to achieve the objectives of social development. The aim of this
study is to explore the perceptions of the recipients of social welfare assistance in Gutu District, Zimbabwe about the effectiveness of the Social Welfare Assistance Programme in alleviating poverty. It is thus assumed that an effective social welfare assistance programme is one that reduces or alleviates poverty and enables recipients to meet their basic needs and thereby contribute to an improvement in the quality of life of recipients and their families. In so doing the programme will be realising the ideals of social development.

1. ORGANISATION OF THE REPORT

This report is presented as follows. In chapter 1, the researcher introduces the topic and the background of the study. The researcher also states the aim of the study, research objectives and the research questions. The last section is a brief description of the research methodology that the researcher employed in the study.

Chapter 2 reviews existing literature on poverty, social security and social assistance in general and specifically in Zimbabwe. The chapter begins with a broad definition of poverty and a presentation of poverty trends in the world, in Africa and Zimbabwe. The chapter then moves on to discuss social assistance as a one of the major instruments used by several governments to address the problem of poverty. In discussing social assistance in Zimbabwe, the researcher puts much emphasis on the Social Welfare Assistance Programme which is the country’s major social assistance programme.

Chapter 3 provides a discussion of the research methodology used in this study. This includes the research approach, research design, study population and sampling technique employed in the study. The researcher presents how credibility, dependability and transferability were used to establish trustworthiness of the study. The researcher also illustrates the steps followed in analysing data. The final part of the chapter is a presentation of the research ethics that guided the study.

In Chapter 4, the researcher presents and discusses the findings of the study. The researcher provides a detailed description of the study findings. This chapter focuses on discussing the themes that emerged from data analyses. The themes are presented under each of the three objectives of the study.

Chapter 5 provides a summary of the findings of this study. The chapter concludes by giving recommendations that can inform policy and practice as well as informing the activities of civil society institutions that engage in advocacy work with and on behalf of the poor.
CHAPTER 2
POVERTY AND SOCIAL ASSISTANCE

2.1. INTRODUCTION

This chapter reviews existing literature on poverty, social security and social assistance in general and specifically in Zimbabwe. In the discussion of social assistance in Zimbabwe emphasis will be put on the Welfare Assistance Programme which is the country’s major social assistance programme. The discussion on social assistance is anchored on the understanding that social assistance is one of the major instruments for addressing the problem of poverty.

2.2. DEFINING POVERTY

Garcia (2011) defined poverty as a condition in which individuals lack basic services which are essential for survival. Poverty is a denial of opportunities, it means inability to effectively participate in society. Poverty means lack of enough income to provide for one’s family, not having schools or clinics to go to, not having the land on which to cultivate crops or a job to earn a living (UN, 2008). Poverty is insecurity, exclusion and powerlessness of individuals, it means being vulnerable to violence, and it also implies living without access to sanitation and safe water (UN, 2008). There are two major types of poverty, namely absolute and relative poverty. The United Nations (1995, p. 57) defined absolute poverty as “a condition characterized by severe deprivation of basic human needs including food, safe drinking water, sanitation facilities, health, shelter, education and information. It depends not only on income but also on access to services.” Relative poverty refers to a situation where individuals are unable to attain a standard of living considered to be socially acceptable (Moore, 2001).

Overall, poverty has numerous forms including lack of adequate income, malnutrition, hunger and lack of access to basic health and education services. Poverty occurs in both developed and developing countries, it also involves loss of self-sustainability as a result of a crisis or conflict, and the impoverishment of individuals who are deprived of support systems including the family, safety schemes and social institutions (United Nations, 1995).

2.3. POVERTY TRENDS IN THE WORLD
According the Food and Agriculture Organization of the United Nations, globally there are 805 million people living in poverty, which is 11 % of the estimated world population of 7.3 billion, and this represents an increase of 42 million people between 1990 and 1992 (Food and Agriculture Organization, 2014). The Food and Agriculture Organization (2010) estimated that 925 million individuals were hungry worldwide in 2010, and 239 million people in Sub-Saharan Africa were malnourished in 2010. The principal cause of malnutrition is poverty (United Nations, 2009). The World Bank (2001) states that 45 % of the world’s population is living on less than US$ 1 a day. The major causes of global poverty include unstable economic systems, drought, climate change and rapid population growth (World Hunger Education Service, 2012). The most impoverished continents in the world are Africa and Asia. In South Asia, the levels of real GDP per capita which were much lower than those in Sub-Saharan Africa in 1970 increased by 2.3 % per annum between 1982 and 1992 and raised the purchasing power in the whole region above that of Sub-Saharan Africa (Boom, 2004). In 1998, all developing countries accounted for 1.2 billion destitute persons, which was 23.4 % of the total population in Africa (Boom, 2004).

Unemployment is also a major contributory factor to poverty. The International Labor Organization (2009) estimates that global unemployment rate increased from 5.7 % to 6 % in 2008. The number of unemployed individuals increased by 10.7 million, reaching almost 190 million by the end of 2008. In China, 20 million workers had lost their jobs by the end of 2008 (United Nations, 2009). Additionally, years of drought and climate change continue to threaten development efforts (United Nations, 2009). The United Nations (2002, p. 3) states that “the adverse effects of climate change are already evident, natural disasters are more frequent and more devastating and developing countries more vulnerable.” Climate change has become a global crisis, its severe impacts are felt mostly by poor countries because they have limited financial capacity to respond to overwhelming effects of climate change (United Nations, 2009).

Around 1 billion people entered the 21st century illiterate, unable to write their names (United Nations Children’s Fund, 1999). In recognition of the costs of poverty, leaders participating in the 2000 Millennium Summit adopted the United Nations Millennium Declaration, which was the basis for putting in place the Millennium Development Goals (United Nations, 2009). It is estimated that high inflation increased the number of people living in chronic poverty by 115 million by 2007 and 155 million by 2008 (FAO, 2009). In this regard, FAO (2009, p. 6) noted that “The impact is most severe in Africa, where many
countries are highly dependent on imported cereals (in some cases 80% of their dietary energy supplies) and undernourishment is already life.” The persistence of poverty and other development challenges has led to the development and adoption of Sustainable Development Goals by the United Nations.

2.4. POVERTY TRENDS IN AFRICA

According to the Food and Agriculture Organization (2014) an estimated 791 million people which is 13.5% of the African population were undernourished. Two thirds of the African populations live in underdeveloped rural areas, 80% of the chronically poor stay in rural areas (World Bank, 2001). One in every four people or 1.2 billion people in Africa live in extreme poverty. In Sub Saharan Africa, 40% of the population lives below the poverty line as both human and income poverty continue to increase (Boom, 2004). About 26 million people in Africa do not have access to basic sanitation services, while 1.1 billion do not have access to clean water (United Nations Development Programme, 2006).

The HIV/AIDS pandemic continues to spread, erasing development gains and resulting in numerous costs on all African countries (Organization for Economic and Cooperation and Development, 2001). The prevalence of HIV/AIDS and high rates of poverty have led to family disintegration, altered demographic patterns and millions of orphaned children (UNICEF, 2006). The unemployment rates in Africa are higher in countries with high prevalence of HIV/AIDS and large numbers of orphaned children (General Intelligence Agency, 2006). Most caregivers are struggling to meet the needs of orphaned children who are left with few adults to take care of them (Miller, Gruskin, Rajaraman, Subramanian & Helmann, 2006; UNICEF, 2006). One in every three children in the developing world is unable to complete five years of primary education, one in every twelve children dies of malnutrition or ill-health before reaching the age of five (Boom, 2004). According to Black et al (2013) an estimation of 3.1 million children die per year due to poverty. The school enrollment data of 2005 concluded that an estimated 72 million children in Africa did not manage to attain primary education, and 57% of these were girls (United Nations 2007). An estimated 28% of children in developing countries are underweight (United Nations, 2009). Most children are unable to access education and health due to poverty.

During the late 1980’s and early 1990’s, Structural Adjustment Programmes stalled economic progress in most African countries and resulted in social tensions. Structural Adjustment Programmes triggered poverty and worsened the living conditions of a larger section of the
African population (OECD, 2001). Stagnation of economic and social indicators was widespread in the African continent, the negative impacts of poverty became more visible as the need for safety nets became more intense. (Boom, 2004).

2.5. POVERTY TRENDS IN ZIMBABWE

Over the past three decades, Zimbabwe has undergone an era of political and economic disruptions with diverse consequences on the livelihoods of Zimbabweans. Levels of poverty remain high with four out of every five persons classified as being poor (Chimhou, Manjengwa, & Feresu. 2010). Zimbabwe’s economic decline in the early 1990’s was mainly caused by the introduction of Economic Structural Adjustment Programme (ESAP) which called for a reduction in government social spending (Kaseke, 2012). The reduction in social spending also meant spending less on social assistance, and as a result social assistance became so selective that only extremely poor households had a chance of benefiting from government support (Kaseke, 2012). This economic decline led to a socio-economic crisis which began in 2000, mainly characterized by a decline in productivity and disposable incomes, hyperinflation and employment (Chimhowu et al, 2010). By March 2009 unemployment was estimated at 80%, a major result of this economic crisis was the massive migration of highly skilled workers to neighbouring countries in Southern Africa (Makina, 2007).

A major factor affecting livelihoods in Zimbabwe is the recurrence of droughts, and between 1991-1992, Zimbabwe witnessed the worst drought in the country’s history with rainfall 77% below normal (Unganai, 2011). The drought years of 1993-1995 worsened the economic problems (Unganai, 2011). Chronic poverty increased, this was evidenced by large numbers of homeless individuals and illegal shanty towns (Munro, 2003). Most of the homeless individuals had lost contact with their families in rural areas, therefore they were unable to draw on traditional social safety nets based on kinship ties (Munro, 2003). The 2001 drought occurred in the first year that farmers had been allocated land under the fast track land reform, making it difficult for new farmers to become fully established (Dore, Hawkins, Kanyenze, Makena, Ndlela, 2008). As a result of the fast track land reforms and subsequent collapse of large scale commercial agriculture, Zimbabwe registered one of the highest inflation rates recorded in history, with hyperinflation peaking at 500 billion percent in December 2008 (Chimhou et al, 2010). The Zimbabwe dollar which had been exchanging at the rate of Z$ 19 to US$ in 1997 fell to Z$ 2,100 trillion by the end of 2008 (Makina, 2007).
For over a decade, Zimbabwe has been under economic sanctions which were imposed by the European Union (EU), Australia and United States of America (USA) in response to the fast-track land distribution programme. The sanctions led to the collapse of education, health and water services (Fowell, 2010). Hyperinflation in Zimbabwe was as a result of shortage of basic commodities caused by sanctions, additionally economic sanctions impaired the government’s capability to acquire foreign currency, making it more difficult to produce essential commodities like petroleum and pharmaceuticals (Fowell, 2010). Kinsey (2010) argues that high rates of poverty have been attributed to the overwhelming effects of HIV/AIDS. The spread of HIV/AIDS in both rural and urban areas continues to impoverish most households, resulting in a cycle of poverty (Kinsey, 2010).

2.6. SOCIAL ASSISTANCE AS A RESPONSE TO POVERTY

In order to respond to poverty, many governments use social assistance as an instrument to reduce or alleviate poverty. Social assistance enables beneficiaries to meet their basic needs and thereby improve the quality of life (Chambers, 2000). Social assistance refers to benefits in cash or in-kind to individuals with no adequate means of supporting themselves (United Nations Research Institute for Social Development, 2010). Social security consists of two major forms namely social insurance and social assistance. Social assistance is one of the two major forms of social security, the other one being social insurance. Social insurance protects workers and their families against loss of income as a result of exposure to risks (ILO, 2000; Kaseke, 2013). Social insurance is contributory from social security whilst social assistance is non-contributory and is thus funded by the government.

Social assistance emerged in Europe in order to alleviate poverty, particularly among vulnerable individuals (Palacious & Slunchynsky 2006). In Africa, social assistance programmes were developed during the colonial era as a safety scheme for white employees (Dixon, 1987). In developed countries, the focus of social protection has shifted from social welfare to workfare (United Nations, 2009). Hence, welfare payments have been cut to encourage beneficiaries to join the labor force (United Nations, 2009). The provision of social assistance in developing countries is informed by neoliberal theory. Neoliberalism promotes human wellbeing through the adoption of the principles of a market economy based on supply and demand with limited state intervention (Toye 1999). Eligibility for welfare assistance requires that people exhaust their own incomes, which include assistance from family members or the church before they can receive state assistance (Sowers & Dulmus,
2008). The state only intervenes when the family and the market fail to provide the assistance needed by the poor (United Nations, 2007). Social assistance is targeted at individuals and families who have limited means to support themselves (Kaseke, 2010). The benefits are means tested and are usually provided when other forms of assistance prove to be insufficient (Sowers & Dulmus, 2008).

2.7. SOCIAL ASSISTANCE PROGRAMMES AROUND THE GLOBE

For the past four decades, the global economy has experienced a series of financial and economic crisis, including two oil price shocks during the 1970’s, the debt crisis in Latin America in the 1980’s, the Ruble crisis in the Russian Federation during 1997-1998 and the financial crisis in East Asia (United Nations, 2009). These crises increased global poverty, to minimize the negative consequences of these crisis, various countries have adopted different programmes that provide immediate relief for vulnerable individuals (United Nations, 2009). Social assistance programmes are means tested and time-bound that is they are designed to provide support in times of emergence or crisis until the beneficiaries recover from destitution (United Nations, 2009). The following benefits are covered under social assistance:

*Family allowances*

Family allowances refer to cash transfers provided to families living in poverty (UNICEF, 2006). Family allowance schemes are effective in enhancing the nutritional status of children, more so they lead to increased access to education and health services (Gliszczynski, 2015). Eligibility for family allowances is usually related to the size of the family and its income (United Nations, 2007). In Latin America, family allowances are provided in countries including Brazil, Argentina, Uruguay and Chile. All European countries provide family allowances for low income families (Russell, 2015). In Finland, more that 85% of all costs of raising children in low income households are funded through family allowances, the benefits are paid for children up to the age of 17 (Russell, 2015).

African countries that offer family allowance benefits to vulnerable families include Cote d'Ivoire, Central African Republic, Botswana and Congo Kinshasa. Botswana offers family allowance benefits to all orphans. In most countries, families are only eligible if the remaining spouse is unemployed or has at least three children (United Nations, 2007). Family allowances provide support for families affected by HIV/AIDS, in Botswana, families that
receive support in caring for orphans are less likely to report financial problems in meeting their basic needs (Miller, Gruskin, Rajaraman, Subramanian & Heymann, 2006). Family allowances are paid for children up to the age of 12 or 15 in most African countries, however 48% of orphans in sub-Saharan Africa are between the age of 12 to 17 (UNICEF, 2006). In South Africa, family allowances are paid to children under the age of 18 (Government of South Africa, 2014).

**Conditional cash transfers**

Conditional cash transfers are increasingly becoming a widely used approach in addressing high rates of poverty in developing countries, the programmes were first adopted in Asia and Latin America (United Nations, 2009). These are grants in the form of cash, provided to disadvantaged members of society to enable them to afford a basic standard of living (United Nations, 2009). In Mexico Progresa has had a magnificent impact on educational outcomes, the cash transfer scheme was introduced in 1997, covering 300,000 households (de Bauw & Hoddinott, 2008). In Brazil the programme was established in the mid 1990’s, and presently covers 11 million households. The initial goal of conditional cash transfer programme in Columbia was to cover 400 households, by 2007 the programme had expanded to cover 1.5 million families (World Bank, 2009).

Conditional cash transfers have improved health and education outcomes around the globe (United Nations, 2009). The Red de Protection Social in Nicaragua improved school enrollment and reduced restrictions by 5% in all communities in which the programme operates in (Maluccio & Flores, 2005). In Ethiopia, the cash-for-relief programme enabled beneficiaries to address recurring crop failures and to re-establish productivity in agricultural sectors (Standing, 2007). However targeting has been more inefficient in Bangladesh where 40% of the beneficiaries were not living in poverty, more so in Nicaragua, 20% of the beneficiaries of conditional cash transfers were not poor (Coady, Grosh & Hoddinott, 2004; Standing, 2008). Conditional cash transfers are often based on the notion that poverty is a result of irrational behaviours of the poor, coupled with their incapacity to fully understand their best interests. In this regard, the victims of poverty are blamed for their condition (Standing, 2008). The responsibility for destitution is placed on the poor rather than on structural causes of poverty (Handa & Davis, 2006; Schubert & Slater, 2006).

**Unconditional cash transfers**
Given the challenges associated with targeting in conditional cash transfers, the question whether cash transfers to the poor should be conditional or universal has become an issue of concern in several countries (United Nations, 2009). Most countries are increasingly shifting to offering unconditional cash transfers to reduce poverty and enhance livelihoods in crisis situations. The programmes are usually implemented together with in kind assistance such as food packages (United Nations, 2009). For example, the cash-for-relief programme in Ethiopia provided cash grants to the vulnerable families in response to shortage of rainfall from 2002 to 2003. The grants were effective in enhancing livelihoods and improve crop production in communities that had been affected (Bandstetter, 2004).

The emergence cash relief programme in Somalia during the period of 2003 and 2004 facilitated economic recovery for poor households (Standing, 2007). The Kalomo social cash transfer scheme in Zambia provided unconditional cash transfer which enabled the beneficiaries to attain sustainable livelihoods (United Nations 2009). In the developing world, basic income grants have been found to increase health and education outcomes, they have also become more successful in enhancing long-term income for poor households. Within this framework “targeting within universalism” enables the poor to receive benefits without being stigmatized (United Nations, 2009 p 160). However critics of such schemes contend that grants reduces labour supply and promotes laziness (United Nations, 2009).

**Food for work schemes**

Food for work schemes are referred to as remedial programs which help to address the negative impacts of poverty and natural disasters (United Nations, 2009). The schemes have been used by various governments to enhance employment opportunities and to respond to a crisis or an emergency (United Nations, 2007). The Ethiopian government has devoted 80 % of its food assistance to food for work schemes so as to target the poor of the poorest and the vulnerable, particularly women (United Nations, 2007). Food for work schemes promote agricultural production and economic stability, the programme provided assistance for poverty stricken individuals in India during the late 1980’s, agricultural inputs of the beneficiaries increased from 39 % to 70 % (United Nations, 2009).

The main disadvantage of food for work schemes is that participants are often engaged in strenuous labour that may be harmful to their health (Quismbung, 2003: Osmani, 1997). Moreover the projects are less effective in promoting long term livelihoods since it discourages recipients from making use of other strategies to get food. However in communities that are
overwhelmed by natural disasters, the programme is effective in reconstructing roads, rebuilding infrastructure and ensure the provision of food packages (United Nations, 2007)

**Cash for work schemes**

Cash for work schemes combine employment opportunities and relief from poverty or crisis. The programmes often involve projects that provide immediate sources of income through providing cash instead of food packages (United Nations, 2009). In doing so the programme enables participants to have autonomy regarding how they choose to spend their incomes. Cash for work schemes involve the implementation of projects in areas that are affected by natural disasters and ongoing conflicts, these projects include road construction, clearing fields, and building water and sanitation facilities (United Nations, 2007). The programme assisted displaced populations to rebuild communities after the Tsunami in Indonesia (United Nations, 2007). The United Nations coordinated a cash-for- work scheme in Haiti, the programme enabled individuals to rebuild their communities after the 2010 earth quake, and priority was given to female headed households and deceased families who had lost their homes (United Nations, 2010). In Ethiopia, cash for work schemes initiated by the Ethiopian Road Cross Society in 2000 enabled impoverished households to meet a basic standard of living (United Nations, 2010).

**Old Age pensions**

Old age pensions under social assistance are non-contributory and they are financed by the state (Holzmann & Hinz, 2005). Non-contributory old age pensions are targeted at older persons who have no access to employment-based retirement benefits (United Nations, 2007). Non-contributory old age pensions can either be means-tested or universal. Means tested old age pensions are awarded to older persons without the means to support themselves. Universal old age pensions, on the other hand, are awarded to all older persons who have reached the age threshold for older persons regardless of their socio-economic status. (Johnson & Williamson, 2006). Old age pensions reduce poverty and enhance social inclusion of old aged individuals (United Nations, 2007). Non-employment linked old age pensions are common in many countries including Namibia, Mauritius and Nepal (Johnson & Williamson, 2006). In Southern Africa, Mauritius and Namibia are examples of countries providing universal old age pensions whilst South Africa is an example of a country providing means-tested old age pension. Universal old age pensions are well established in the Nordic countries as part of the entitlements that come with citizenship.
2.8. SOCIAL ASSISTANCE PROGRAMMES IN ZIMBABWE

The introduction of social assistance in Zimbabwe can be traced back to the colonial era when Zimbabwe was colonized by Britain from 1890 to 1980 (Kaseke, 2011). The colonial government established the Department of Social Welfare in 1948. Initially social assistance was aimed at providing support for white settlers, and the benefits were later extended to Africans in response to the negative effects of industrialization and urbanization on all racial groups (Kaseke, 2011). However the benefits of social assistance varied according to population groups, old age pensions excluded black old aged persons (Kaseke, 2011). Blacks received lower benefits because of the policy of racial discrimination pursued by the colonial governments. In 1980, the Zimbabwean government eliminated all discriminatory practices and decentralized social welfare services to ensure improved accessibility to benefits (Kaseke et al. 1998).

Since the late 1980’s and early 1990’s, the Government of Zimbabwe (GOZ) has through the Ministry of Public Service and Social Welfare created several social safety nets to cushion deprived or poor members of society. The new Constitution of Zimbabwe of 22 May 2013 reinforced the commitment of the state to make adequate provision of social security in order to improve the standard of living in society. Chapter 2 section 30 of the Constitution states that the state is required to take all measures necessary to provide social security to those who lack means to provide for themselves (Constitution of Zimbabwe, 2013). This provision is in tandem with article 25 of Universal Declaration of Human Rights which states that “everyone has a right to a standard of living which is adequate for health and wellbeing of himself and his family, including food, clothing, housing and medical care.” This right is also restated in the International Covenant on Economic, Social and Cultural Rights and the International Covenant on Civil and Political Rights (United Nations, 2009). These human rights instruments recognize the inherent dignity of a human being (United Nations, 2009). The social assistance schemes administered by the Government of Zimbabwe are as follows:

**Social Welfare Assistance/ Public Assistance**

In Zimbabwe, the most common social assistance programme dating back to the colonial period is the Social Welfare Assistance Programme, (also commonly known as public assistance programme). The Public assistance programme is administered by the Department of Social Welfare (Munro, 2003). The programme is run through the Department of Social Welfare hierarchy, from the Director who operates at the head office to Social Welfare
Assistants and Clerks operating in district offices (Munro, 2003). It provides financial assistance to destitute members of society (Kaseke 1988; Gandure, 2009). The underlying principle for public assistance is that, no matter how well the economy is performing, some individuals still fall into destitution and are unable to meet their needs (Munro, 2003). However, it is also argued that social welfare assistance disempowers beneficiaries thereby promoting laziness and dependence (Chambers, 2000). Slater et al (2008) argues that questions about feasibility, effectiveness and appropriateness need to be addressed when using cash transfers. Smith (2001) argues that social safety nets should enhance production, they should be in form of cash for work schemes or public works rather than providing pure transfers. This would enhance income growth and reduce dependency among the poor (Smith, 2001).

According to the Social Welfare Assistance Act (Chapter 17:06), those eligible for assistance are destitute members who are sixty years of age, mentally or physically handicapped, individuals suffering from continuous ill-health, dependants of a person who is unable to look after himself or otherwise has need for social assistance. Social welfare assistance is designed for destitute individuals who have lost contact with their families and have no one to provide for them (Munro, 2003). Public assistance is provided to individuals who have a Zimbabwean citizenship and those who have been residing in Zimbabwe for a year or more. Temporary assistance is usually given to non-citizens pending returning to their countries (Kaseke, 1988).

The primary objective of the programme is to ensure that all eligible individuals receive public assistance, however given the economic constrains faced by the government of Zimbabwe, means testing for public assistance is relatively tough, there is very little incentive to apply for the benefits, unless the individual is chronically poor and cannot provide for himself (Munro, 2003). The benefits of public assistance were set low, the challenges involved in receiving the benefits are high, such that poorly paid labourers are more likely to have no incentives to apply for public assistance (England, 1998). The reason behind this requirement is to discourage claimants from being dependent. Those who are unable to secure employment in urban areas are encouraged to resettle in rural areas where they can engage in projects that generate continued income (Kaseke, 1988).

In identifying eligible clients, public assistance is selective in targeting and passive in its approach (Munro, 2003). The selection process is designed to exclude individuals who do not
deserve to benefit from public assistance. Generally, prospective clients are expected to present themselves to their local Department of Social Development offices to apply for public assistance (Munro, 2003). The potential client is then interviewed by a Social Welfare Assistant or Social Welfare Officer who is required to conduct a home visit to verify the information on presented on the application form. The home visits also assist the officer in assessing the extent to which the individual is living in poverty (Kaseke, 1988). If the individual qualifies for public assistance, and if there are available funds, the District Social Welfare Officer may grant public assistance to the applicant (Munro, 2003).

The effect of a selective approach in identifying eligible clients is that very few individuals apply for public assistance (Munro, 2003). However, most individuals who meet the selection criteria do not get to apply for Public Assistance (Kaseke, Gumbo & Dembo, 1997). The reasons for failure to apply for the benefits include being unaware of the existence of the programme, living far from the nearest Department of Social Welfare office and suffering from infirmities which prevents individuals from travelling long distances (Munro, 2003). A single application may require several trips to the local Department of Social Welfare office, most eligible individuals do not apply for public assistance because of the travelling costs (Munro, 2003).

The lengthy application procedures force the poor to withdraw since they do not have the financial capacity to meet the costs of travelling (Kaseke, 1988). Mpedziswa (1995) states that one of the main challenges associated with public assistance is that it employs the residual approach which is based on the assumption that individual needs are met by the family and the market system and the state only intervenes in terms of a crisis or an emergency. Many old aged individual have been denied assistance due to the invalid assumption that the extended family is effective in meeting the needs of the elderly (Dhembia, 2013).

Field trips by the Department of Social Welfare of identifying potential clients increasingly became rare during the course of the 1990’s economic recession, more so the fiscal problems experienced by the government of Zimbabwe led to a reduction in Department of Social Welfare budget (Munro, 2003). Consequently, the coverage of public assistance was reduced from 69 000 in 1994 to 20 500 in 1998 (Munro, 2005). In 2007, the Social Welfare Assistance Programme covered 14 246 old aged individuals, 5 724 disabled people and 6,027
households. The beneficiaries received Z$19,018 the whole year, which was inadequate in meeting the basic needs of the poor (Munro, 2005).

**Assisted Medical Treatment Orders**

Assisted Medical Treatment Orders (AMTOs) are fee waivers granted to destitute persons to facilitate easy accessibility to health services such as national and provincial hospitals (Gandure, 2009). This benefit has been in existence since 1980 when the country gained its independence. The scheme covers vulnerable members of society including the old aged, handicapped individuals, dependants of a destitute person and orphans (Gandure, 2009). In 2011 the scheme covered more than 25 000 individuals (Chikova, 2013). Chikova cited in Gandure (2009) argues that Assisted Medical Treatment Orders cover treatment and check-up costs in clinics and hospitals, for varying periods depending on the severity of the illness. The Ministry of Labor and Social Services provides block grants to the referral clinics and hospitals to cover all claims for Assisted Medical Treatment Orders (Chikova, 2013).

For the past decade, the scheme has been facing challenges due to insufficient funding from the government, there is severe shortage of drugs and medical personnel in local and provincial hospitals (Gandure, 2009). Kasere (1992, p. 59) states that “there is almost a total absence of a health care delivery system specifically for the health needs of the elderly. The elderly have to make do with an existing general care system which is not only inadequate for their specific needs but is also not easily accessible to them.” Moreover there has been a rise in the number of undeserving individuals, this indicates that the system is subject to manipulation (Gandure, 2009).

**Harmonized Social Cash Transfers**

The Harmonised Social Cash Transfer Programme was established under the second phase of the National Action Plan for Orphans and Vulnerable children (UNICEF, 2013). The programme was implemented by the Government of Zimbabwe through the Ministry of Public Service, Labour and Social Welfare, with financial assistance from United Nations Children’s Fund (American Institutes for Research, 2013). Harmonised Social Cash Transfers target households that are both labor constrained and food poor (American Institute for Research, 2013). Recipients receive US$ 10 to US$ 25 per month depending on the size of the household. The first cash transfer programme was rolled out 2012. The programme seeks to enable beneficiaries to meet their basic needs and thereby lessen the number of
impoverished households and to prevent families from adopting risky coping mechanisms which include early marriages, child labour and withdrawing children from school (UNICEF, 2013).

The Harmonised Social Cash Transfer programme is funded by the government of Zimbabwe and donors, through the Child Protection Fund managed by United Nations Children’s Fund. The programme seeks to empower poor households, increase enrollment in primary schools and to reduce child labour (American Institute for Research, 2013). The Harmonised Social Cash Transfer Programme is anticipated to become Zimbabwe’s major social protection programme, providing cash to the most impoverished households of across the country (American Institutes for Research, 2013). More so the Harmonised Social Cash Transfer Programme also seeks to reduce the prevalence of HIV/AIDS, increase access to social services, reduce mortality rates, reduce violence against children and adolescence and to improve the nutritional status of beneficiaries (Thome, Taylor, Davis, Seidenfeld, & Handa, 2014).

**Heroes Dependents Assistance Fund**

According to the National Heroes Dependency Act {Chapter 10:06}, the state is required to provide social assistance in form of a once off payment or monthly allowances to heroes’ dependents (Gandure, 2009). The benefits are drawn from the Heroes Dependency Fund administered by the Department of Social Services (RHVP, 2007).

**The Basic Education Assistance Module**

The Basic Education Assistance Module is a major component of the Enhanced Social Protection Project, which forms part of a broader social protection strategy facilitated by the Government of Zimbabwe (Government of Zimbabwe, 2010). The Basic Education Assistance Module (BEAM) is a national programme which is being implemented in all districts of the country, the programme targets 25 % of enrollments in primary, secondary and special schools (Gandure, 2009). The programme was established in 2001, by 2005 BEAM had assisted 969 962 students, representing 27 % of the total enrolment (RHVP, 2006). The Basic Education Assistance Module is currently the biggest social protection intervention and consumes about 60 % of the department of social services’ budget for social protection (Kaseke, 2012).
The Basic Education Assistance Module targets children who have never attended school, who have dropped out of school or are likely to drop due to lack of funds, this social safety net extends basic education services to the chronically poor and those in unbearable circumstances that include cases of neglect and abuse (Gandure, 2009). The primary objective of the Basic Education Assistance Module is to prevent the poor from taking on extreme measures like withdrawing their children from school in response to chronic poverty (Gandure, 2009). The assistance covers exam fees, school fees and levies for a full year, eligible children receive continued support provided that they continue to attend school (Mtupuri, 2012).

At least 50 percent of children who benefit from the programme in secondary schools should be girls, this is done to bring about gender equity (Government of Zimbabwe, 2010). The United Nations Children’s Fund and the Government of Zimbabwe (2010) noted that the scheme excludes other categories of orphans and vulnerable children, these include children with learning difficulties and those who stay far from schools. These factors compromises the sustainability of the programme. The Basic Education Assistance Module was incorporated in the National Action Plan Phase 11, it is anticipated that this will lead to improved performance of this social protection programme (Masuka, et al, 2012).

**Institutional care**

Institutional care facilities are designed to protect disabled persons, delinquent children, homeless individuals and old aged persons (Gandure, 2009). The Government of Zimbabwe administers three Rehabilitation Centers for persons with disabilities, eight institutions for children and a Repatriation Center for the needy (Gandure, 2009). In 2004, the government of Zimbabwe established 56 residential institutions for orphans and vulnerable children (Powell, 2006). The institutional grant is currently US$15 to each child per month (Ministry of Labour and Social Services, 2008). The government provides financial support for children residing in institutional care facilities through the Department of Social Services (Masuka, et al, 2012).

However, the scheme has been facing several challenges. The shortage of staff in the Department of Social Services has compromised the effectiveness of this social assistance scheme, there are few social workers to supervise the services that are being offered for orphans and vulnerable children (Masuka, et al, 2012). According to the Sunday Mail (2011), orphans who reside at the Mariele Children’s Home in Mhondoro were involved in
delinquent behaviors due to lack of adequate supervision following the dismissal of their caregivers. Institutional care facilities have been found to be unsustainable and inefficient as they are serving 50,000 children where as there are more than 1 million orphans and vulnerable children in Zimbabwe (UNICEF, 2001). More so, institutionalization undermines the traditional role of the extended family by alienating children from their families and communities (UNICEF, CASS & GoZ, 2010).

2.9. CONCLUSION

Globally, various governments have used social security as an instrument of addressing chronic poverty. However due to the economic constrains experienced in most countries, particularly in Sub-Saharan Africa, most safety nets have been found to be inadequate in enhancing the livelihoods of the poor. Poor households continue to face challenges in accessing basic health, education and social services; as a result they get trapped in a cycle of poverty that is difficult to escape. In Zimbabwe, the social welfare assistance programme which is a social assistance programme provides support to destitute individuals. However due to the financial challenges the country has been facing for more than a decade now, the effectiveness of the social welfare assistance programme has been compromised.
CHAPTER 3
RESEARCH METHODOLOGY

3.1. INTRODUCTION
This chapter provides a discussion of the research methodology used in this study. This includes the research approach, research design, study population and sampling technique employed in the study. This chapter discusses how trustworthiness of the study was established. The steps followed in analysing data will be explained. The final part of the chapter is a presentation of the research ethics that guided the study.

3.2. RESEARCH APPROACH
This study adopted a qualitative research approach. Denzin and Lincoln, (2011, p.3) define qualitative research as “a situated activity that locates the observer in the world, it consists of a set of interpretive material practices that makes the world visible.” Qualitative researchers are concerned about understanding how people make sense of their world and their experiences (Merriam, 2009). The advantage of using qualitative research is that it involves close contact between the researcher and the research participants, thereby providing the researcher with an in-depth understanding of circumstances and experiences of research participants (Green & Thorogood 2004). Qualitative research involves in-depth exploration of human experiences, perceptions and attitudes, this enables the researcher to acquire detailed information from the research participants (Dahlberg & McCaig, 2010). The exploratory nature of qualitative research made it suitable for this study which sought to explore the perceptions of the recipients of social welfare assistance about the effectiveness of Zimbabwe’s Welfare Assistance Programme.

3.3. RESEARCH STRATEGY / DESIGN
According to Burns and Grove (2003, p. 195) a research design is “a blueprint for conducting a study with maximum control over factors that may interfere with the validity of the findings”. A research design is a strategy of integrating various elements of the study in a logical manner, to ensure that the research problem is effectively addressed (De Vaus, 2006). A case study design was employed in this study. A case study is a research approach which is focused on acquiring in-depth understanding of a particular unit of analyses (Willig, 2008). Zainal (2007) states that a case study is more suitable and appropriate when a study is
conducted to determine whether particular government programs are efficient or whether the objectives of a particular program are being met. A case study allows the researcher to thoroughly examine the data within a specific context, investigate and explore real life experiences through a comprehensive contextual analysis of a limited number of events and their relationships (Zainal, 2007). The case study assisted the researcher to better understand and determine the effectiveness of Zimbabwe’s Welfare Assistance Program from the beneficiary’s viewpoint.

3.4. STUDY POPULATION AND SAMPLING

The population for this study consisted of beneficiaries of social welfare assistance in Gutu District, Zimbabwe and key informants drawn from officials responsible for overseeing the Social Welfare Assistance Programme. Gutu District is a rural district in Masvingo province, with a population of 203,083 people. The majority of individuals residing in Gutu are subsistence farmers. A sample of 20 recipients of social welfare assistance was selected using purposive sampling. The recipients had been receiving social welfare assistance for a minimum of two years. Participants were selected based on their availability and willingness to participate in the study. The purposive sampling method enabled the researcher to select participants who have an adequate understanding of social welfare assistance programme. This enabled the researcher to explore their perceptions of effectiveness of Zimbabwe’s Welfare Assistance Programme. Two key informants were selected to participate in the study using purposive sampling. The key informants were the Head of the Department of Social Welfare in Gutu and the Administrator of Gutu District. These two were well informed about social welfare assistance programme in Gutu.

3.5. RESEARCH INSTRUMENT

The researcher used a semi-structured interview schedule as an instrument for collecting data. A semi-structured interview is a set of pre-determined questions that relates to an area of interest (Schensul & LeCompte, 2013). The advantage of using a semi-structured interview is that it enables the researcher to obtain different perceptions regarding the same issue. It also allows respondents to raise important issues that the researcher may not anticipate (Currie, 2005). There were separate semi-structured interview schedules for participants and key informants. The semi-structured interview schedule had mainly open-ended questions. Janice (2008) argues that open ended questions enable the researcher to acquire more complete, accuracy and factual information from the research participants. The use of open ended
questions enabled the researcher to obtain detained information regarding the perceptions of
the recipients of social welfare assistance about the effectiveness of Zimbabwe’s Welfare
Assistance Programme. The semi-structured interview schedules were designed in a way that
addressed the objectives of the study.

3.6. PRETESTING OF THE RESEARCH TOOL

The researcher pre-tested the research tool using two recipients of social welfare assistance
who were not part of the study. This was done to adjust the research questions where
necessary. Babbie and Mouton (2004) argue that despite care being taken in designing a
research tool, there is always a possibility of flaws in the design of the tool. They suggest pre-
testing the instruments as a possible way of reducing the flaws. Conducting a pilot study
increases the likelihood of a successful study, it alerts the researcher to potential problems
that may hinder the effectiveness of the study (Teijlingen et al. 2001).

3.7. DATA COLLECTION

The researcher collected data using face to face interviews. The interviews took place at the
Gutu District Office of the Department of Social Welfare. The interviews took approximately
one hour. The interview is the most common source of data collection in qualitative studies.
The main advantage of using face to face interviews is that the researcher can clarify doubt
and ensure that questions are properly understood by repeating or rephrasing questions
(Meriam, 2009). Face to face interviews involve the use of open ended questions, and this
enables the researcher to provide additional explanation to ensure that the respondents have
adequate understanding of the questions (David & Sutto, 2004). The researcher tape recorded
the interviews with the consent of the research participants.

3.8. DATA ANALYSIS

Data were analysed using thematic content analysis. Thematic analyses is a method of
identifying, analysing and reporting themes within data, it involves organising data in rich
detail and interpretation of various aspects of a research topic (Boyatzis, 1998). The
researcher followed the six steps for thematic content analysis identified by Braun and Clarke

Familiarising yourself with data
The first step of data analyses required the researcher to familiarize herself with data collected. As Braun & Clarke (2006) have indicated, it is important that researchers immerse themselves in data to the extent that they are familiar with the breadth and depth of the content. Immersion includes repeated reading of data, searching for meanings and patterns (Braun & Clarke, 2006). Qualitative researchers are required to transcribe the recorded interviews verbatim; this is the first step of familiarizing oneself with the collected data (Bryman, 2008; Braun & Clarke, 2006). The researcher familiarized herself with data through recording the interviews and noting down more interesting ideas after the interview.

**Generating initial codes**

During this phase the researcher produced initial codes from that data. The process of coding assists the researcher in identifying the most basic sections of data that can be generated in meaningful ways (Tuckett, 2005). Coding was done based on the most basic and interesting features that could be assessed in a meaningful way in relation to measuring the effectiveness of Zimbabwe’s Welfare Assistance Programme. Coding assisted the researcher in developing themes in the next phase.

**Searching for themes**

After organizing the data into meaningful sections, the researcher searched for themes in the various sections of data. The researcher also managed to figure out the relationships that exist between themes. Gibson and Brown (2009, p. 129) noted that the process of searching for themes involves “working out relationships between code categories, and the significance of such relationships for the development of theoretical conceptions and statements.”

**Reviewing themes**

At this stage, the researcher refined the themes that were identified. The researcher also established the relevance of identified themes in terms of the purpose of the study. This process involves reviewing existing records to assess whether the themes are making a correct representation of the data (Braun and Clark, 2006).

**Defining and naming themes**

At this point, the researcher defined themes presented for data analyses. Braun and Clark (2006) state that the names given to each theme must be brief and should give the reader a clear picture of what the theme entails. In defining and naming themes, the researcher should
ensure that the themes are linked to the objectives of the study (Braun & Clark, 2006). The researcher named the themes relating to what the themes represent.

**Producing the report**

At this stage, the researcher did a final analysis and write up of an in-depth report. The researcher made use of Braun and Clark (2006) recommendations and produced the report that provides adequate evidence of the themes within data, thereby convincing the reader of the merit and validity of the analysis.

3.9. **TRUSTWORTHINESS**

According to Williams and Morrow (2009) trustworthiness in qualitative research refers to ways in which the researcher works to ensure credibility, validity and believability of the research as assessed by participants, the community and the academy. To establish trustworthiness of the research study, the researcher employed four approaches namely credibility, dependability, confirmability and transferability (Lincoln & Guba, 1986).

**Dependability**

Dependability refers to the extent to which the research can be repeated with the same methods and obtain similar results (Shenton, 2004). Dependability can be assured by reporting all processes within the study in detail (Lincoln & Guba, 1986). The researcher provided a detailed account of the research methodology and design employed in the study, quotations from participants have been presented in verbatim to ensure dependability of the study.

**Transferability**

Transferability is “the extent to which findings of one study can be applied in other situations” (Shenton, 2004, p. 69). This includes a thick description of the phenomenon under study, number of participants, the inclusion criteria for participants and the methods of collecting data (Shenton, 2004). To ensure transferability the researcher provided a detailed description of the specific situation and context to which the study is confined.

**Credibility**

Credibility is concerned with the extent to which findings are corresponding with reality (Shenton, 2004). To enhance credibility of the study, the researcher adopted research methods that are well established in qualitative research. Opportunities for review by the
researcher’s supervisor were also afforded, this enabled the researcher to develop a greater explanation of the research findings.

**Conformability**

Conformability refers to the extent to which the findings of a study are shaped by the respondents and not the researchers’ motivation or self-interest (Shenton, 2004). To ensure conformability, the researcher documented all the research procedures for checking and rechecking the data throughout the study. After the study, the researcher conducted a data audit to examine the data collection and analyses procedures and to make judgements about potential bias or distortion.

3.10. **ETHICAL CONSIDERATIONS**

Bogdan and Biklen (1992) define ethics as a set of values that are accepted by a specific group of individuals. Ethical considerations are very important when research is being conducted in the field of human activities (Welman, Kruger & Mitchell 2005). This study adhered to the following research ethics;

**Voluntary Participation**

Voluntary participation informs prospective participants that their participation is voluntary and that they may withdraw from the research at any time (Babbie & Mouton 2004). The researcher informed participants that participation was voluntary and that refusal to participate in the study would not result in negative consequences. The researcher distributed the participant information sheet which also explained that participation was voluntary.

**Informed consent**

Informed consent involves a collaborative process in which individuals voluntarily agree to participate in a research study after the purpose, benefits and risks of participation have been described and understood (Patton, 2002). The researcher explained the purpose and procedures of the research to the participants and ensured that they understood what the research entailed. The researcher informed the participants that they were free to refuse to answer questions that they felt uncomfortable to answer. Participants were asked to sign consent forms for participating in the study and for the recording of the interview as evidence of their consent.
**Anonymity and confidentiality**

King and Horrock (2010) argued that researchers ought to respect the privacy and anonymity of research participants’ personal information, and that research records of research participants should be kept confidential. The researcher ensured confidentiality and anonymity of research participants by using pseudonyms. The researcher also informed the research participants that the data would be kept in a secure place and will only be accessible to the researcher and her supervisor. The data is kept in a password locked computer.

**Avoidance of harm/ non-maleficence**

Avoidance of harm entails that researchers have a duty to ensure that research participants remain free from psychological or physical harm (Rose, Spinks, & Canhoto, 2015). The researcher ensured that research participants were free from harm by conducting research at a site that was safe and not isolated. The researcher also informed participants that referrals for counselling to be done by the social worker at Gutu District Social Welfare Office were to be arranged for participants who may be negatively affected by any issues that are related to the research. However, there were no participants who were referred for counselling.

**Submission and Approval of proposal to ethics review boards**

The researcher obtained clearance from the Wits ethics non-medical committee prior to undertaking the research. Letters of request to the District Administrator of Gutu, Zimbabwe, and the Director of Social Services were sent out and positive responses were received.

**3.11. LIMITATIONS OF THE RESEARCH DESIGN AND METHODOLOGY**

The researcher was the primary researcher and therefore decided on how data were collected and analyzed. This left the possibility of bias in the collection as well as the analyses of data. Amandeep (2014) states that it is unavoidable for bias to occur in research because researchers inevitably interpret participants’ views from their personal viewpoints and this may compromise the credibility of the findings. Data were interpreted based on the researcher’s knowledge and understanding of the topic under study. Therefore, this was a possible limitation in the study.

**3.12. SUMMARY OF THE CHAPTER**
This chapter provided a discussion of the research methodology used in this study. This included the research approach, research design, study population and sampling technique employed in the study. The chapter also presented how credibility, dependability and transferability were used to establish trustworthiness of the study. The steps followed in analysing data and the research ethics that guided the study have been explained.
CHAPTER 4
PRESENTATION AND DISCUSSION OF RESEARCH FINDINGS

4.1. INTRODUCTION

The aim of the study was to explore the perceptions of the recipients of social welfare assistance in Gutu District, Zimbabwe about the effectiveness of Zimbabwe’s Social Welfare Assistance Programme in alleviating poverty. This chapter focuses on the presentation and discussion of the findings of the study. Themes emerging from data are presented and discussed under the objectives of the study. The chapter begins by giving the democratic profile of the participants.

4.2. TABLE 1: DEMOGRAPHIC PROFILE OF PARTICIPANTS

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The population for this study consisted of 20 beneficiaries of social welfare assistance who had been receiving the benefits for more than two years. Participants consisted of 13 females and 7 males. Most of the participants were widowed and above the age of 60 years, this is because the Social Welfare Assistance Programme targets vulnerable members of society. Most of the participants were females, suggesting that they were heads of households.
4.3. PARTICIPANTS’ UNDERSTANDING OF THE OBJECTIVES OF ZIMBABWE’S SOCIAL WELFARE ASSISTANCE PROGRAMME

The first objective of the study was to investigate how the objectives of Zimbabwe’s Welfare Assistance Programme are understood by recipients. This objective is significant in that it provided the researcher with an insight into the different views recipients had about the objectives of Zimbabwe’s Social Welfare Assistance Programme. The following themes emerged from the data analysis;

**Poverty alleviation**

In discussing participants’ understanding of the objectives of the social welfare assistance programme in Zimbabwe, poverty alleviation emerged as one of the themes. Participants understood the objective of social welfare assistance as that of alleviating poverty. It was their view that the social welfare assistance programme enables individuals to meet their basic needs. One participant explained the objective of the social welfare assistance programme as follows;

“My understanding of the objective of the social welfare assistance programme is that it is a programme provided by the government to assist various groups of individuals who are living in poverty.”

Another participant noted that;

“The objective of social welfare assistance programme is to assist poor individuals.”

Similarly, another participant said;

“The social welfare assistance programme is aimed at providing assistance to individuals who are not able to meet their basic needs due to poverty.”

This was echoed by another participant who noted that:

“Public assistance is aimed at removing people out of poverty and to enable them to have dignity within the communities they live.”

The participants regarded the social welfare assistance programme as an instrument used by the government to alleviate poverty and to enhance the quality of life of individuals who are living in poverty. Chambers (2000) noted that social assistance is used by many governments
to reduce or alleviate poverty. Social assistance also enables recipients to meet their basic needs and thereby improve the quality of life (Chambers, 2000). Social assistance provides financial assistance to destitute members of society (Kaseke 1988; Gandure, 2009). The social welfare assistance programme reduces poverty through the provision of support in cash and/or in kind to destitute members of society. Hence it enables the recipients to attain a minimum standard of need.

**Assistance to vulnerable members of society**

Some participants noted that the social welfare assistance programme is targeted at vulnerable members of society. In the context of this study, vulnerable individuals are those members of society who are at risk of falling into chronic poverty. These include old aged persons, orphaned children, individuals with mental or physical disabilities, widows and the chronically ill. In explaining the objective of the Welfare Assistance Programme, one participant noted that:

> “The social welfare assistance programme is aimed at assisting old aged persons who are no longer able to provide basic needs for themselves and their dependants.”

Another participant echoed the same opinion:

> “The objective of social welfare assistance is to assist old aged persons who are living in poverty, the programme offers assistance to old aged persons because they are no longer strong enough to support themselves.”

From the above responses, it can be noted that the recipients of social welfare assistance regard the Social Welfare Assistance Programme as a programme that provides assistance to older persons. This assistance enables older persons who are living in poverty to meet a minimum standard of living. According to the Social Welfare Assistance Act (Chapter 17:06), persons eligible for social welfare assistance include persons aged sixty years and over. Older persons are vulnerable to poverty because they have disengaged from the labour market. The objective of supporting vulnerable groups was also confirmed by a key informant who noted that:

> “The objective of public assistance is to fulfil Zim Asset cluster number1 of social welfare, which is to assist vulnerable members of the community to meet their basic needs.”
Participants also noted that the objective of the social welfare assistance programme is to assist orphans, widowed individuals and disabled persons. One participant noted that:

“The objective of this programme is to offer assistance to orphans who are living in poverty. I am receiving this assistance because I am taking care of my late daughter’s seven children.”

Another participant said:

“The main objective of social welfare assistance is to assist the disabled, widowed individuals, and orphans in accessing basic needs.”

One of the participants also noted that:

“The objective of public assistance is to provide financial assistance and food to individuals with disabilities.”

Some of the responses of the participants reflect an understanding of the target groups for social welfare assistance as spelt out in the Social Welfare Assistance Act {Chapter 17:06}. However orphans and widows are not specified as individuals who are eligible for social welfare assistance. The Act states though that an individual who is a dependent of an indigent person is eligible for social welfare assistance. From this viewpoint orphans who are dependants of a person who is not able to provide for them are also eligible for social welfare assistance. One participant said that:

“Social welfare assistance provides support for individuals who have no capacity to meet their basic needs and individuals who have no families to support them like myself. I lost my husband and I came back home to stay with my parents who died a few months after my husband’s death. I once suffered cervical cancer a few years back, since that time I have not recovered enough to seek employment because I am continuously ill. I am currently staying alone, I have no parents, brothers or sisters. This programme provides me with financial assistance and food because I cannot seek employment due to health related problems.”

Another participant echoed the same sentiment stating that:

“From my own understanding, the objective of social welfare assistance is to offer assistance to individuals who suffer from chronic illnesses like epilepsy, most of
individuals who suffer from this disease cannot afford the medication needed for epilepsy, this programme ensures that such people are able to get free medication and financial assistance.”

Some participants noted that the programme provides assistance to individuals in times of emergency. One participant noted that:

“The purpose of this programme is to assist individuals who are in a crisis, I am receiving this assistance because my house got struck by lightning and I lost all the property that I had.”

From the above view, it can be noted that the recipients of the Welfare Assistance Programme regard social welfare assistance as a crisis intervention strategy. The social welfare assistance programme assists individuals to recover from a crisis. The United Nations (2009) states that social assistance programmes are means tested and time-bound that is they are designed to provide support in times of emergence or crisis until the beneficiaries recover from destitution. One key informant noted that:

“The objective of the Welfare Assistance Programme is to assist vulnerable members of society. Our actions are guided by the Welfare Assistance Act, it provides us with guidelines on the groups of individuals which the programme ought to assist. We target the indigent, labour constraint, vulnerable groups of society like the disabled, the chronically ill and the elderly. The programme provide assistance for individuals who experience sudden shocks, like in the event that an individual’s house is destroyed by fire. The programme also assists the mentally handicapped through rehabilitation services.”

The findings of the study showed that views of the research participants on the objective of social welfare assistance were shared by key informants. The responses reflect that the objective of the social welfare assistance programme is to provide assistance to vulnerable members of society who include older persons, orphaned children, widows, individuals who suffer from continuous ill health, disabled individuals.

4.4. PERCEPTIONS OF THE PARTICIPANTS ABOUT THE STRENGTHS AND OUTCOMES OF THE SOCIAL WELFARE ASSISTANCE PROGRAMME
The second objective of the study was to explore the perceptions of the recipients of social welfare assistance about the outcomes and strengths of the programme. This objective is important in that it provided the researcher with an understanding of the outcomes and strengths of the Welfare Assistance Programme from the recipients’ viewpoint. The themes that emerged from the data analysis were as follows;

**Alleviating Poverty**

One theme that emerged from the findings of the study was that participants understood the major strength of the social welfare assistance programme as its capacity to reduce or alleviate poverty. Some of the participants argued that the social welfare assistance programme plays an important role in alleviating poverty, especially during this period when the country is facing economic hardships. From the participants’ viewpoint, the social welfare assistance programme alleviates poverty through enabling vulnerable members of society to meet their basic needs. One participant explained the major strength of the social welfare assistance programme as follows;

“The major strength of this programme is that it alleviates poverty. The Welfare Assistance Programme assists recipients in attaining a better life which is free from poverty. Before I started receiving this assistance, I could not meet my basic needs, I was living under unbearable circumstances. I am glad that I am now in a better position to provide basic needs for my family. I have been receiving maize grain, maize seed, food packages and clothes through social welfare assistance. I am very thankful for this assistance, the money has been assisting me in buying groceries. Without this assistance I would not be able to provide enough food for my family. I am very happy to be a recipient of public assistance and I am grateful that the government is doing its best to assist individuals who are living in poverty. ”

Another participant noted;

“What I like most about the Welfare Assistance Programme is that it enables individuals who are living in poverty to attain an acceptable standard of living and to live free from poverty. The assistance that I have been receiving enabled me to meet basic needs, I am grateful that in such a period when the state is financially constrained, the government is considering the needs of individuals who are unable to provide for themselves. Surely, this programme has been so helpful to me and my
family. Because of ill-health and old age, I am no longer able to engage in strenuous work, my life would have been unbearable if it wasn’t for public assistance. I am widowed, my husband died many years ago, I am currently staying with my two orphaned grandchildren who are both in primary school, I would not have been able to provide food for my grandchildren if it was not for public assistance.”

These views were shared by another participant who had this to say;

“I am really happy and grateful for the assistance that we are receiving. I have managed to survive on the little amount that I receive from public assistance. What I like most about this programme is that the assistance is not only in monetary terms, at times we get assistance in-kind; we also get food stuffs to complement the money that we get. If it had not been for public assistance, who knows, we would have starved to death. I am grateful and I am happy with the fact the government is responsive to the needs of vulnerable members of society.”

The views of the participants were shared by key informants. One key informant noted that;

“The major strength of Public assistance is that it alleviates poverty through providing money, clothes and food for the poor. Public assistance also provides assistive devices for the disabled; these include artificial limbs, crutches and wheel chairs, the devices enables disabled individuals to carry tasks that they would not be able to do without them. The fact that this programme is focused on poverty alleviation is strength in itself. The programme also provides maize grain to the recipients and inputs like fertilizer and maize seeds, this enables beneficiaries of social welfare assistance to have dignity in their communities because with this assistance they are able to compete at the same level with other members of the community. The recipients are not totally destitute, they have somewhere to start from, so this money is very helpful in assisting them to meet their basic needs.”

The other key informant said;

“The major strength of public assistance is that it is effective in alleviating poverty, the programme enables the recipients to meet their basic needs. Public assistance is aimed at enhancing the lives of vulnerable members of society. The programme addresses the negative effects of poverty through providing assistance in cash or in-kind to individuals who are vulnerable to poverty. Besides the money that the
beneficiaries are receiving on a monthly basis, we also provide food, clothes, maize grain and fertilizer.”

The views of the participants and key informants were in line with the stated objective of social assistance which is to alleviate or reduce poverty (United Nations, 2009). Social cash transfer programmes seek to alleviate poverty through enhancing food security (Barca et al, 2014). The development of social cash transfer programmes in developing countries reflects a shift towards a broader approach to managing risks and vulnerability, this approach promotes the provision of cash transfers within a range of other transformative measures which contribute to poverty reduction (Barrientos & Niño-Zarazúa, 2010). Greeve (2008) noted that social welfare refers to having capabilities to attain a good life, a higher level of wellbeing, economic benefits and a guaranteed income to avoid living in poverty.

However, some of the recipients of social welfare assistance felt that the money they were receiving was not adequate in meeting their basic needs. The participants noted that the benefits of public assistance are inadequate and unreliable. Dhemba (2013) noted that the Welfare Assistance Programme is unreliable because the payments cannot be guaranteed on a monthly basis. Dhemba further observes that, the monthly allowance for public assistance is not adequate because it is below the United Nations’ poverty line of US $ 1, 25 per day. Participants reported that the objective of social assistance, which is to alleviate poverty is not being realised due to the fact that the benefits of public assistance are inconsistent and inadequate. One participant said;

“Public assistance is not reliable, it is not something that you can be assured to receive on a monthly basis, the main challenge is that the money is not adequate, the difficulties that we experience as disabled persons are expensive to solve, with the US $ 20 that I am receiving from public assistance is has been difficult for me to provide enough food for my family.”

Another participant said;

“The money that I have been receiving is not enough for meeting my needs, to make matters worse; I have not received the money for the past eight months. For me to travel from my home to the Post Office where we collect the money, I need money for transport, at times I am forced to borrow some money so as to meet transport costs to
go to the post office, only to find out that there is no money, after having met all these travelling expenses.”

These views were shared by a key informant who said:

“The major weakness of the programme is that the money is inadequate, some recipients use more than half of the money they receive on transport costs.”

However one key informant had a different opinion, he noted that;

“I think the money is adequate because besides that US$ 20, we also provide other services like health and educational benefits.”

The findings of the study revealed that the recipients of public assistance had different views regarding the extent to which the Welfare Assistance Programme is alleviating poverty.

**Improved access to social services**

Another major strength or outcome of the social welfare assistance programme identified by participants was that programme helps to improve access to social services and health care. In this regard, one participant noted that;

“I am happy with this programme and I am very grateful for the assistance that I am receiving, apart from the money that I am receiving, my children’s school fees were also paid through social welfare assistance. If it wasn’t for public assistance, my children would not be attending school because I cannot afford to pay their school fees. I am very grateful with this assistance, I hope the government will continue to assist us.”

Another participant said:

“The money has been assisting me a lot, I am taking care of my seven grandchildren, and I would have been unable to send them to school without this assistance, it is fortunate that their schools fees is also being paid through social welfare assistance.”

On a similar note, one participant noted that;

“Apart from the money, I have been receiving free medication for epilepsy from the local hospitals.”
Another participant said;

“I have been receiving medical benefits for many years, my two grandchildren have also been receiving educational benefits from the Welfare Assistance Programme.”

The views of the participants were shared by key informants. One key informant said that;

“The Welfare Assistance Programme is an enhanced social protection programme; it is not a faceted programme. Apart from the US $20 that recipients receive on monthly basis, educational and health assistance is also factored in.”

Another key informant said;

“Besides the money that the beneficiaries are getting, we also provide health and educational benefits. Recipients who suffer from chronic illness like epilepsy receive free medication from the local hospitals, we also offer educational assistance for some of the dependants of the recipients of social welfare assistance.”

The recipients of public assistance receive medical benefits through Assisted Medical Treatment Orders, educational benefits are offered through the Basic Education Assistance Module. The Basic Education Assistance Module provide assistance for children who have never attended school, who have dropped out of school or are likely to drop due to lack of funds. This social safety net extends basic education services to the chronically poor and those in unbearable circumstances that include cases of neglect and abuse (Gandure, 2009).

The assistance covers exam fees, school fees and levies for a full year, eligible children receive continued support provided that they continue to attend school (Mtapuri, 2012). Assisted Medical Treatment Orders (AMTOs) are fee waivers distributed to destitute persons to facilitate easy accessibility to health services such as national and provincial hospitals (Gandure, 2009). The scheme covers vulnerable members of society including the old aged, handicapped individuals, dependents of a destitute person and orphans (Gandure, 2009).

**Empowerment / self-reliance**

Another theme that emerged was that of empowerment of the recipients of social welfare assistance or promoting self-reliance. One participant explained the major strength or outcome of the social welfare assistance programme as follows;
“We are also encouraged to be self-reliant and not to depend on the assistance. In this District we have got a sewing machine which we received from social welfare assistance, the sewing machine has been very helpful because it has enabled us to generate our own income. I am happy with this programme, we do not only receive assistance but we also have opportunities to acquire skills which enable us to be self-sufficient.”

Another participant noted that;

“Social welfare assistance is effective in that the government also encourage us to work for ourselves; the Head office provided a sewing machine which has helped us to generate income to support our families. This programme encourages us to be hard working and not to depend on the assistance that we receive from the Welfare Assistance Programme, the fact that we receive maize grain is a clear indication that the government expects us to play our part by engaging in subsistence farming so as to be in a better position to produce enough food for our families”

Similarly, another participant noted;

“This programme is effective in that we are also encouraged to work for ourselves and provide for our families that is why we receive maize seeds and fertilizer. This shows that the government expects us to take responsibility of providing for our families. I think this is good because it discourages us from being dependant on social welfare assistance. This is what I regard as the major strength of the Welfare Assistance Programme.”

These views were shared by key informants. A key informant noted;

“The recipients of social welfare assistance are expected to be self-sufficient, the programme encourages beneficiaries to seek for other means of generating income, they are expected to make use of the maize seed and fertilizer through engaging in subsistence farming. We always encourage beneficiaries to be hard working and not to be dependent on the assistance they receive from the Welfare Assistance Programme.”

The other key informant said;
“The programme provides assistance to vulnerable individuals but at the same time we encourage them to be self-reliant. Human beings being human beings, some individuals end up being over dependant on the aid, rather than working for themselves, if individuals get used to receiving assistance, at times it prevents them from being mature or to progress in life, they become stagnant, they stop being ambitious because they start assuming that it is the responsibility of the government to provide for them. We always encourage recipients of social welfare assistance to devise other means of generating income like engaging in subsistence farming and taking part in community projects. As much as we provide assistance for the recipients of public assistance, we always encourage them to play their part in taking responsibility for their wellbeing.”

From the above views, it can be noted that the social welfare assistance programme encourages the recipients of social welfare assistance to take responsibility for their wellbeing through engaging in activities that enable them to generate income. The social welfare assistance programme has enabled some of the recipients to increase food security through the agricultural inputs that they are receiving. This is done to make the recipients self-reliant and to discourage them from being solely dependent on the assistance that they get from the programme. The role of social assistance in empowering recipients has been established in Zambia. There is evidence from Zambia that cash transfers not only alleviate poverty but also enhance livelihoods among vulnerable individuals (Barca et al, 2014).

4.5. VIEWS OF PARTICIPANTS ON THE CHALLENGES ASSOCIATED WITH THE PROVISION OF SOCIAL WELFARE ASSISTANCE.

The third objective of the study was to elicit views of recipients of social welfare assistance on the challenges associated with the provision of social welfare assistance. Participants pointed out various challenges that they faced when they were applying for social welfare assistance and the challenges that they were facing in accessing their benefits. The themes that emerged with respect to this objective were as follows.

Lengthy Application process

Participants noted that one main challenge that they faced was that the long and costly application process. The participants noted that they had to travel to the Department of Social Welfare in Gutu District for several times to complete the application process. Participants
also noted that they had to travel to Masvingo (the provincial capital) several times to resolve problems associated with the application process. One participant explained this challenge and said;

“I faced a lot of challenges when I was applying for social welfare assistance. I first applied for assistance in 2012, I was told that I should come back in three months because my papers were supposed to be sent to Harare for approval. I came back after four months and I was informed that my file went missing. I had to start the whole process again, my papers finally got approved three months after my second application. The fact that I had to come back and apply for the second time was very expensive for me, I had to borrow money from my neighbours so as to meet the travelling expenses of coming to the Department of Social Welfare.”

Another participant said;

“The application process for public assistance is long and costly. When I was applying for public assistance, I was forced to spend the last resource that I had so as to come and complete the application process. I also had to travel to Masvingo on several occasions to create a public assistance account. It is not safe for me to travel alone because I have Epilepsy, however I was forced to do so because I could not afford to pay transport costs for my grandchild whom I usually travel with.”

Another participant said

“One of the challenges that I faced in applying for social welfare assistance was mainly difficulties in travelling, the application process is very long. I had to travel more than five times to the Department of Social Welfare for my application to be processed. My being disabled complicated the whole process, the distance between the office and my home is very long so it is not easy for me to walk for a long distance. After having my application processed I was instructed to go to Masvingo to open up an account so that I could start to receive the money. I did not have the money to go there but I had to borrow the money, considering how much I was in a dire need of the money for public assistance.”

Similarly, another participant said that;
“The main challenge I faced in applying for social welfare assistance is that I had to travel to Masvingo many times to complete the application process. I had no money to meet the expenses. I am disabled and also old so it was not easy for me to travel alone, but I had no option because I needed the assistance, so I had to finish the application process even though it was expensive for me.”

The participants noted that the application process was too costly for them as they were not always able to meet the travelling expenses. Munro (2003) states that a single application for public assistance may require several trips to the local Department of Social Welfare office, most eligible individuals do not apply for public assistance because of the travelling costs that are associated with the application process. A possible reason why the application process for public assistance is lengthy is that the selection process has a lot of procedures that have to be followed before the applicant qualifies as a beneficiary of public assistance. The application process is designed to exclude individuals who do not deserve to benefit from public assistance. Means testing is relatively time consuming. This is done to give individuals little incentive to apply for public assistance and to discourage them from being dependant

Another possible reason for the lengthy application process is the bureaucratic nature of the system. One key informant said that;

“The application process can be long because we have a centralised system, the application forms are first processed at this office then we take them to the provincial office, from there they are taken to the Head office for approval. This process can take up to three months.”

Irregular benefits

Participants indicated that the payment of social welfare assistance benefits was irregular. Some participants noted that they were supposed to receive US $ 20 per month but at times they only received the money up to four times a year. One participant explained this challenge and said;

“The main challenge that I am facing is that I am not receiving the money on a monthly basis. I have been coming to this office several times to inquire about why I have not been receiving the money. I came to this office this year in August to inquire if I had received the money in my account and I was told that I had not received it, I came again in October and I was told that I had not received the money, it is difficult
for me to meet all these travelling expenses only to come here and be informed that the money is not available. I hope that this situation will change and I will start receiving the money on a monthly basis. However I am grateful that today I am going to receive US $40 from the post office.”

Another participant said;

“I became a beneficiary of public assistance in 2010 but I did not receive assistance for that whole year. I only started to receive the money in October 2011, and after that I spent many months without receiving the money. Since 2011, I have been receiving the money for three to four times a year. As of this year I received the money from January to March only, the other months I did not receive the money. For this month I am going to receive US$ 40 which I am going to collect today from the Post Office. I think this money is for this month and last month, that’s why its US $40 instead of US $ 20.”

This was supported by another participant who observed that;

“I became a recipient of public assistance in 2012 but I did not receive the money for two years. I only started receiving the money in March 2014, of which I only received the money three times the whole year. As of this year I received the money in February and in May, sometimes I do not get the money in full, the other time I received US $10 and the last time I received the money it was US $14.”

Some participants reported that besides the fact that the benefits of public assistance are irregular; the financial assistance is usually back dated when they receive it. This enables them to meet some of the expenses that they would be facing when they receive the money. One participant noted that;

“We do not receive the money on a monthly basis but the good thing is most of the time when the money comes it would be US $ 40. Today I am going to receive US $ 40 from the post office. This money will assist me in buying basic needs.”

Another participant said;

“The fortunate thing is we usually receive US $ 40 when the money comes. At least with that amount I can fill in a lot of gaps.”
From the above views, it can be noted that despite the fact that the benefits of public assistance are irregular, participants were happy with the fact that when they receive the money, it is usually back dated. The key informants noted that the challenge of irregular benefits is as a result of the economic hardships that are being faced by the government. One key informant said;

“The challenges that are being faced within the Welfare Assistance Programme are related to resource contains, especially financial constraints. At times we fail to provide beneficiaries with the money and food on regular basis.”

From the above views, it can be noted that the challenges that are being faced regarding the provision of social welfare assistance are as a result of the economic hardships that the country has been facing. The macro economic conditions in Zimbabwe have been declining since the crash of the stock market in 1997. This resulted in unfavourable socio-economic conditions that led to the migration of citizens to neighbouring countries including South Africa, Zambia and Botswana (International Organisation for Migration, 2008; Makina, 2007). Kaseke (2012) states that Zimbabwe’s economic decline during the early 1990’s was mainly caused by the introduction of Economic Structural Adjustment Programme (ESAP) which called for a reduction on government social spending. Kaseke further observes that the reduction in social spending also meant spending less on social assistance. Social assistance became so selective that only extremely poor households had a chance of benefiting from government support (Kaseke, 2012).

Between 2004 and 2009, Zimbabwe experienced severe hyperinflations, which led to the abandonment of the Zimbabwean dollar as the government adopted multi-currencies, notably the South African rand, Botswana pula and the US dollar (Muponda, 2009). Zimbabwe has been under economic sanctions that were imposed by the European Union (EU), Australia and United States of America (USA) in response to fast-track land distribution programme. These sanctions negatively impacted on the economy as they led to the collapse of health, education and water services (Fowel, 2010).

**High Transport costs to access the benefits**

Participants indicated that one of the challenges that they had been facing regarding the provision of public assistance is that they find it difficult to meet the travelling expenses that are associated with accessing the benefits. One participant explained this challenge and said;
“It has been difficulty for me to travel from my village to the post office to collect the money, it’s not every month that I afford to pay for my transport costs, sometimes I use the little money that I have for transport, only to come here and to be informed that there is no money in my account.”

Another participant said;

“The main challenge in accessing this assistance is that every time I come to get the money I have to pay for transport, after paying for the transport I wouldn’t be having much money to spend on my other needs.”

From the above views, it can be noted that the participants view the high transport costs as one of the challenges they face in accessing their benefits. Participants who stay far from the Department of Social Welfare reported that they had on several occasions, travelled to collect their money, only to be informed that payments had not been processed.

4.6. CONCLUSION

This chapter focused on the presentation and discussion of the findings of the study. The themes that emerged from the data were presented and discussed under the objectives of the study. The collected data indicated that the Welfare Assistance Programme plays an important role in alleviating poverty, assisting individuals in a crisis or emergency, and in providing support to vulnerable members of society. The social welfare assistance programme has enabled the beneficiaries to access education and health care services. The programme has also empowered some of the beneficiaries through the provision of in kind assistance that enables them to generate income and to be self-sufficient. The findings of the study also provided an insight of the challenges that are being faced regarding the provision of social welfare assistance, these include the lengthy application process, irregular benefits and high transport costs that are associated with accessing the benefits.
CHAPTER 5

SUMMARY OF FINDINGS, CONCLUSIONS AND RECOMMENDATIONS

5.1. INTRODUCTION

This chapter provides a summary of the findings of the study and draws conclusions from the findings of the study. The summary of the findings is presented according to the objectives of the study. Recommendations based on the findings of the study are given.

5.2. SUMMARY OF FINDINGS

The first objective of the study was to explore how the objectives of Zimbabwe’s social welfare assistance programme are understood by recipients. Participants indicated that they understood the objective of social welfare assistance as that of alleviating poverty. Participants regarded the welfare assistance programme as an instrument used by the government to enhance the quality of life of individuals living in chronic poverty. The participants also noted that the welfare assistance programme enables the recipients of social welfare assistance to meet their basic needs through the provision of support in cash and/or in kind. The views of the participants were shared by key informants who reported that the main objective of the social welfare assistance programme is to alleviate poverty. Some participants reported that the programme is aimed at providing assistance to individuals in times of emergency. Thus, the social welfare assistance programme is regarded as a crisis intervention strategy which is aimed at assisting individuals to recover from the negative impacts of a crisis.

The second objective was to explore the perceptions of the recipients of social welfare assistance about the strengths and outcomes of the programme. Participants understood the major strength of the social welfare assistance programme as that of reducing poverty and thereby enabling them to meet their basic needs. The programme was seen as addressing the negative impacts of poverty through providing support in cash or in kind to vulnerable members of society. Participants reported that they are thankful for the assistance that they have been receiving as it has enabled them to live free from poverty. Participants were grateful that despite the economic challenges, the government was trying its best to address the needs of vulnerable members of society.
The views of the research participants were shared by key informants, these views are in line with the objective of social assistance which is to reduce poverty. However, not all participants felt that the benefits of public assistance are effective in alleviating poverty. Some participants noted that the benefits are inadequate.

Participants also indicated that the social welfare assistance programme helps to improve access to social services and health care. Apart from the financial assistance, recipients of public assistance receive educational benefits through the Basic Education Assistance Module and medical benefits through Assisted Medical Treatment Orders. Free education is provided for children who have never been to school, who dropped out of school and those who are likely to drop out of school due to financial difficulties. Medical benefits facilitate easy access to health services in national and provincial hospitals.

Participants also felt that another outcome was that the social welfare assistance programme had empowered them to become self-reliant. The participants noted that the programme encourages them to work hard and generate their own income rather than depending on aid. Benefits of public assistance includes inputs such as maize seed and fertilizer, these have enabled recipients to enhance food security through engaging in productive substance farming.

The third objective of the study was to elicit views of recipients of social welfare assistance on the challenges associated with the provision of social welfare assistance in Gutu District, Zimbabwe. One of the main challenges identified by participants was that the application process was lengthy and costly. The application process required participants to travel to the Department of Social Welfare several times before finalisation of their applications. This makes the application process too costly and participants indicated that they struggled to meet the transport costs.

Another challenge identified by participants was the irregular nature of the benefits. Participants noted that they were supposed to be receiving US $ 20 on a monthly basis, but at times can go for two months without having received their benefits. However some participants noted that the financial assistance is usually back dated when they receive. The challenge of irregular benefits is as a result of the economic challenges that are being faced within the country.
Another challenge faced by participants regarding the provision of social welfare assistance was that they are struggling to meet the transport costs that are associated with accessing the benefits. Participants who stay far from the offices of the Department of Social Welfare stated that the transport costs were too high and in some cases when they get to the offices they are informed that the payments had not been processed.

5.3. CONCLUSIONS DRAWN FROM THE STUDY

Social welfare assistance is targeted at the poor and vulnerable groups in society. Whilst the findings reveal that social welfare assistance is contributing to poverty alleviation, its effectiveness could be enhanced by an adequate budgetary support which make recipients to receive regular benefits. Although government has decentralised social welfare assistance to District offices, it is clear that there are communities that are located far from the District offices and these people find it financially burdensome to make frequent visits to the District office. Since the programme is meant for the poor, the poor find it financially burdensome to apply for social welfare assistance and to access the benefits.

Generally, participants were positive about the capacity of the social welfare assistance programme to alleviate poverty. However, US $ 20 is less than United Nations’ poverty line of US $ 1, 25 per day. The impact of the programme could be greater if the amount was increased. Thus, the social welfare assistance programme cannot be said to be effective in alleviating poverty.

5.4. RECOMMENDATIONS

The researcher wishes to make the following recommendations:

- There is need to rationalise the application process with a view to reducing the time it takes to process an application.
- It was noted that one of the reasons behind the lengthy application process is that officials lose or misplace the completed application forms, forcing the applicants to reapply. Therefore there is need for the Gutu District Social Welfare Office to improve its filing system so that files are not lost, thereby averting the need for repeated submissions of the application forms.
- There is need to decentralize the application process by using mobile offices that would go to the communities where the beneficiaries are.
• The government needs to prioritise support to the poor by ensuring adequate budgetary support for the Social Welfare Assistance Programme. This would ensure regular payment of social welfare assistance benefits to the recipients. Whilst this recommendation is not something that cannot be done in the short term, it should be considered for the medium to long term as the economy picks up.

• In order to enhance empowerment, there is need for the government to develop exit strategies for the social welfare assistance programme.

5.5. SUGGESTIONS FOR FUTURE RESEARCH

There is need to conduct a nation-wide study on the effectiveness of Zimbabwe’s Social Welfare Assistance Programme.
REFERENCES


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Monasch, R. (2004). The role of older people as carers of orphans in sub-Saharan Africa - - a quantitative analysis. Summary findings of a review of national household surveys from 27 countries with a special focus on orphans. Draft 0.1, March 28, 2004.


Williams, R. (1976). Keywords: A Vocabulary of Culture and Society. Glasgow: Fontana.


APPENDIX A

PARTICIPANT INFORMATION SHEET

Good day sir/madam

My name is Joice Kanengoni, and I am a postgraduate student registered for the degree MA in Social Development at the University of the Witwatersrand. As part of the requirements for the degree, I am conducting research on perceptions of the recipients of social welfare assistance about the effectiveness of Zimbabwe’s Welfare Assistance Programme. It is hoped that this information may enhance social workers’ understanding of the nature of Zimbabwe’s Welfare Assistance Programme and help to improve support services for poor and vulnerable members of society.

I therefore wish to invite you to participate in my study. Your participation is entirely voluntary and refusal to participate will not be held against you in any way. If you agree to take part, I shall arrange to interview you at a time and place that is suitable for you. The interview will last approximately an hour. You may withdraw from the study at any time and you may refuse to answer any questions that you feel uncomfortable with answering.

With your permission, the interview will be tape-recorded. No one other than my supervisor will have access to the tapes. The tapes and interview schedules will be kept in a locked cabinet for two years following any publications or for six years if no publications emanate from the study. Please be assured that your name and personal details will be kept confidential and no identifying information will be included in the final research report.

Please contact me on 0748914634 / 1231971@students.wits.ac.za or my supervisor, Professor Kaseke on Edwell.Kaseke@wits.ac.za / 0765430061 if you have any questions regarding the study. We shall answer them to the best of our ability. Should you wish to receive a summary of the results of the study, an abstract will be made available on request.

Thank you for taking the time to consider participating in the study

Yours sincerely

Joice Kanengoni
APPENDIX B

INTERVIEW SCHEDULE

INTRODUCTION

• Welcoming participant and introduction
• Explain the purpose of the interview

<table>
<thead>
<tr>
<th>Age</th>
<th>Gender</th>
<th>Marital status</th>
</tr>
</thead>
</table>

1. For how long have you been receiving social welfare assistance?
2. What were your reasons for applying for social welfare assistance?
3. What is your understanding of social welfare assistance? (Probe understanding of the objectives of welfare assistance programme)
4. Do you consider the Social Welfare Assistance benefits adequate for meeting your basic needs? Explain
5. What have been the positive outcomes of social welfare assistance?
6. What particularly do you like about the Social Welfare Assistance Programme?
7. What is it that you do not like about the Social Welfare Assistance Programme?
8. Are you likely to graduate from the Social Welfare Assistance Programme? Explain
9. What are the challenges that you experienced in applying for social welfare assistance?
10. What are the challenges that you have experienced in accessing social welfare assistance benefits?
11. What do you think should be done to address these challenges?
APPENDIX C

INTERVIEW SCHEDULE FOR KEY INFORMANTS

1. What is your understanding of the objectives of the Social Welfare Assistance Programme?
2. Who is eligible for social welfare assistance in Gutu District?
3. What is coverage of social welfare assistance in Gutu?
4. Do you think social welfare assistance is alleviating poverty in Gutu District? Explain
5. Are there any graduation or exit strategies that have been developed for the programme?
6. What do you consider to be the major strengths of social welfare assistance programme?
7. What do you consider to be the major weaknesses of social welfare assistance programme?
8. What are the major challenges associated with the provision of social welfare assistance?
9. How can these challenges be addressed with a view to enhancing the effectiveness of the social welfare assistance programme?
APPENDIX D

DECLARATION BY THE RESEARCHER

I have explained the purpose and procedures of the study as well as the participant’s rights. I agree with the conditions mentioned in the information sheet and consent forms.

Name of Researcher:…………………………………………………………

Date:…………………………………………………………………………

Signature:……………………………………………………………………
APPENDIX E

CONSENT FORM FOR PARTICIPATION IN THE STUDY

DECLARATION BY THE PARTICIPANT

I hereby consent to participate in the research project. The purpose and procedures of the study have been explained to me. I understand that my participation is voluntary and that I may refuse to answer any particular items or withdraw from the study at any time without negative consequences. I understand that my response will be kept confidential.

Name of participant:…………………………………………………

Date:………………………………………………………………

Signature:…………………………………………………………
APPENDIX F

CONSENT FORM FOR AUDIO-TAPING OF THE INTERVIEW

I hereby consent to tape-recording of the interview. I understand that my confidentiality will be maintained at all times and that the tapes will be destroyed two years after any publication arising from the study or six years after completion of the study if there are no publications.

Name of participant:.................................................................

Date:...........................................................................................

Signature: .....................................................................................
APPENDIX G

HUMAN RESEARCH ETHICS COMMITTEE (NON-MEDICAL)
R14/49 Kanengoni

CLEARANCE CERTIFICATE

PROJECT TITLE
What are the perceptions of the recipients of social welfare assistance about the effectiveness of Zimbabwe's welfare assistance programme: The case of Gutu District in Zimbabwe

INVESTIGATOR(S)
Ms J Kanengoni

SCHOOL/DEPARTMENT
Human and Community Development/

DATE CONSIDERED
24 July 2015

DECISION OF THE COMMITTEE
Approved unconditionally

EXPIRY DATE
13 August 2018

DATE
14 August 2015

CHAIRPERSON
(Professor J Knight)

cc: Supervisor: Professor E Kaseke

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and ONE COPY returned to the Secretary at Room 10005, 10th Floor, Senate House, University.

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. I agree to completion of a yearly progress report.

Signature

Date

PLEASE QUOTE THE PROTOCOL NUMBER ON ALL ENQUIRIES