

Multidimensional Poverty and Social Protection

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June 2024

Tabita, Kenya

Rabiya, India

Stéphanie, Madagascar

Agathe, Madagascar

Dalma, Kenya

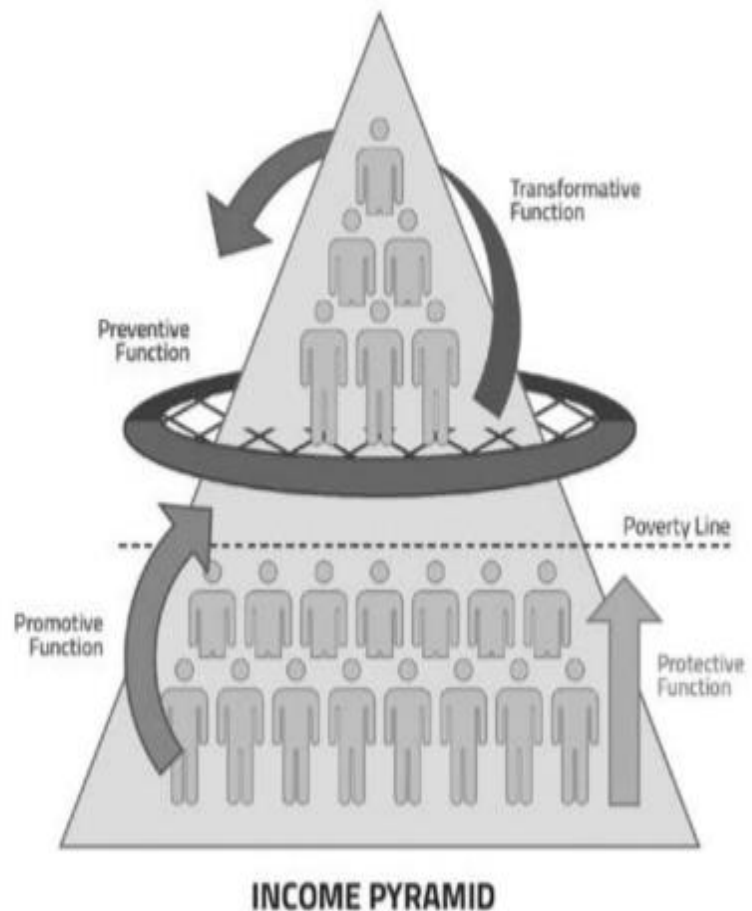
Ann-Sophie, Kenya

Valérie, Madagascar

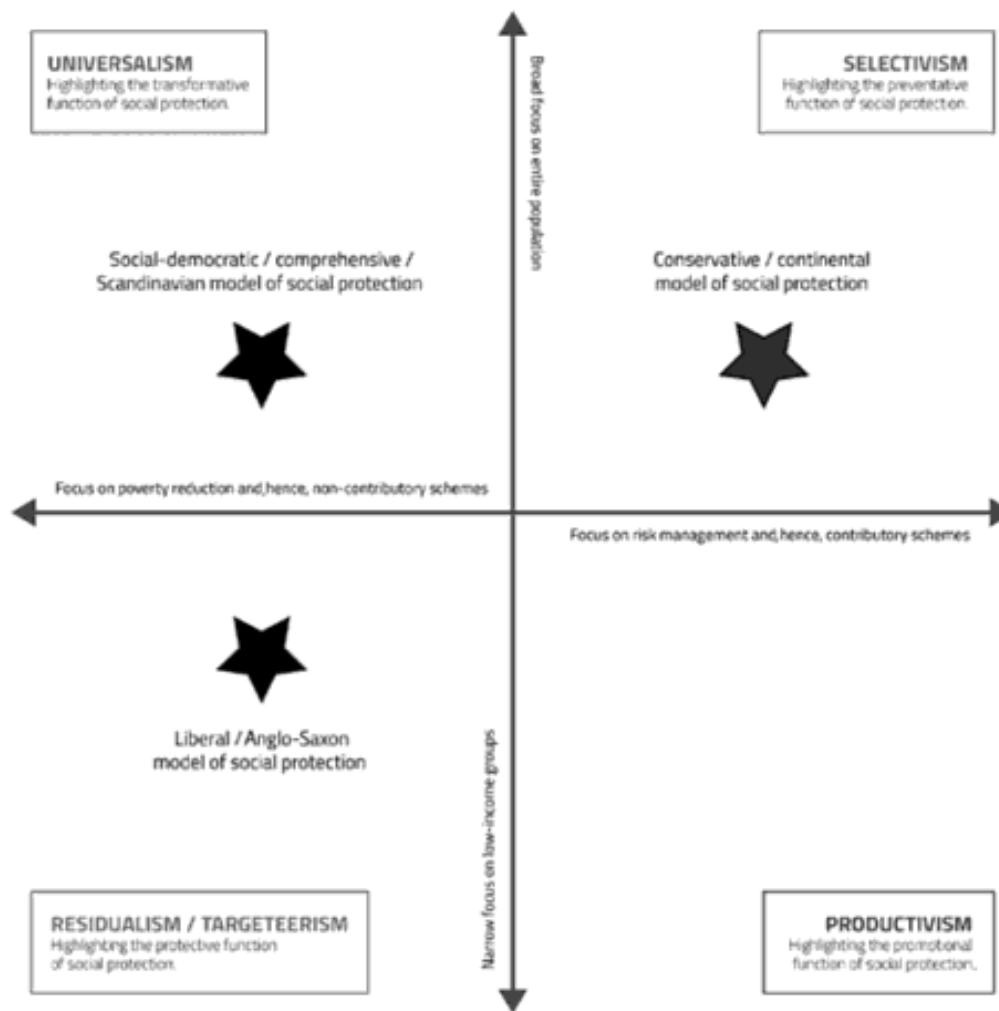


Social Protection Systems

- **SOCIAL PROTECTION** is the set of all initiatives, both formal and informal, that provide: social assistance to extremely poor individuals and households; social services to groups who need special care or would otherwise be denied access to basic services; social insurance to protect people against the risks and consequences of livelihood shocks; and social equity to protect people against social risks such as discrimination or abuse. (Devereux and Sabates-Wheeler 2004)



Social Protection Systems



Social Protection Systems

- The purpose of social protection systems is to support individuals and households living in poverty or that are vulnerable to poverty.
- Risk

SOCIAL TRANSFERS

...are regular, reliable, state-provided, non-contributory transfers that redistribute income between citizens. Social transfers encompass social assistance, categorical transfers such as child benefits or social benefits as well as allowances that are paid as compensation. They therefore aim at protecting people against poverty but also supporting them in coping with risks.

CHAPTER 2

SOCIAL INSURANCE

...is financed by its own members' contributions and generates benefits to them in predefined cases (contingencies) such as old age, death, job loss, bad health, pregnancy or parenthood. Social insurance is a means to mitigate risks. Typically, it is initiated, and often also administered, by the state, which can make membership for all or certain groups of people.

CHAPTER 3

LABOUR MARKET POLICIES (LMPs)

...include the rules governing the labour market, support given to unemployed people to find new jobs and assistance to those who cannot find new employment despite any support given to them.

CHAPTER 4

SOCIAL SERVICES

...are services such as psychological therapy, mentoring or drugs rehabilitation provided to people with special needs, such as people with handicaps, with low level of education or from disadvantaged societal groups (e.g. ethnic minorities).

CHAPTER 5

MICRO-INSURANCE

...is insurance for low-income and informally employed people. It can be run by public, commercial societal and third-sector actors. Membership is voluntary but funding comes predominantly from members' contributions – the reason why benefits tend to be limited.

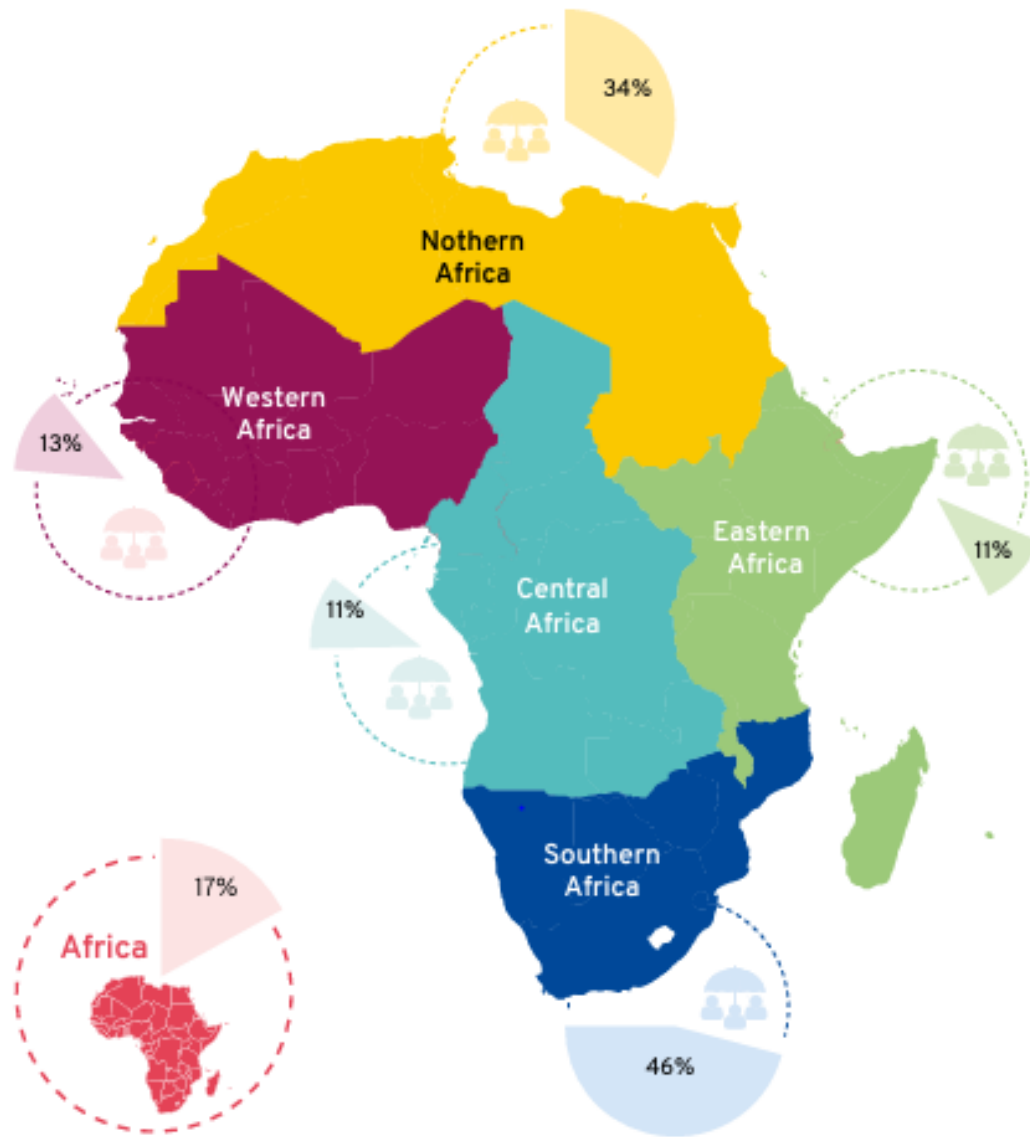
CHAPTER 6



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



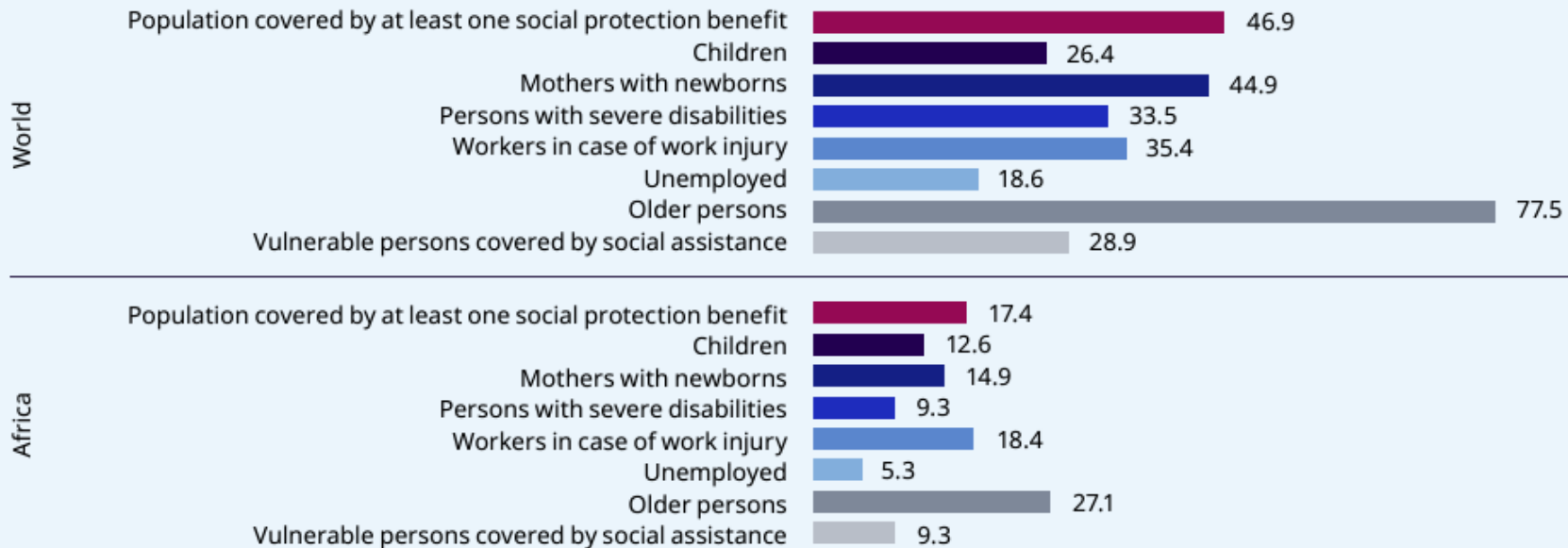
Figure 5: SDG 1.3.1: Population receiving at least one social protection cash benefit, 2020



Source: ILO World Social Protection Database, based on the SSI and the ILO Social Protection Platform.

Social Protection SDG 1.3.1

► **Figure 1. SDG indicator 1.3.1: Effective social protection coverage, global and regional estimates, by population group, 2020 or latest available year**

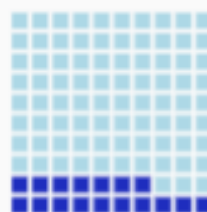


Social Protection SDG 1.3.1

Background information

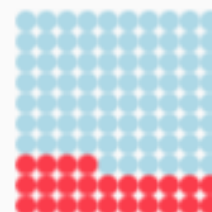
Indicator	Value
Total population (0+)	1,308,064,176
Children (0-14)	530,494,696
Old-age population (65+)	45,526,214
Female labour force part. rate (%)	54.3
Self-employed in total employment (%)	71.0

Effective coverage (%)



17.4

Population covered by at least one social protection benefit

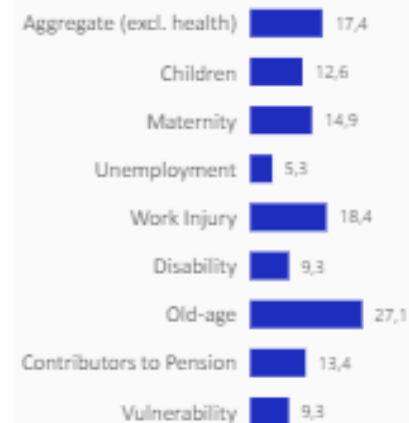


23.7

Population affiliated to a social health protection scheme

SDG 1.3.1: Effective coverage

by function of social protection (%)

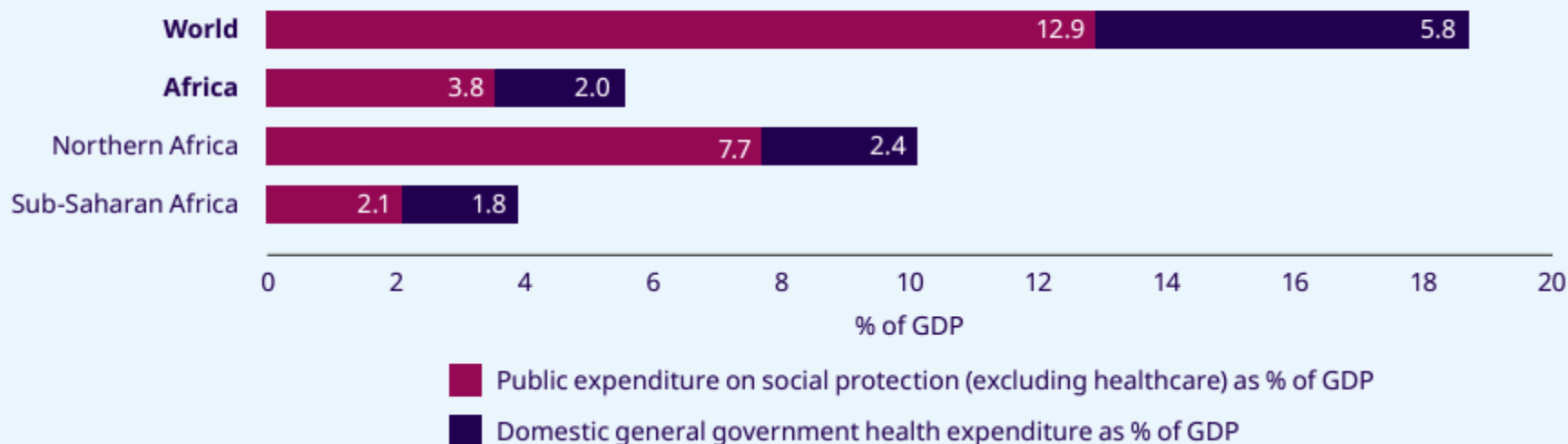


0

50

Social Protection SDG 1.3.1

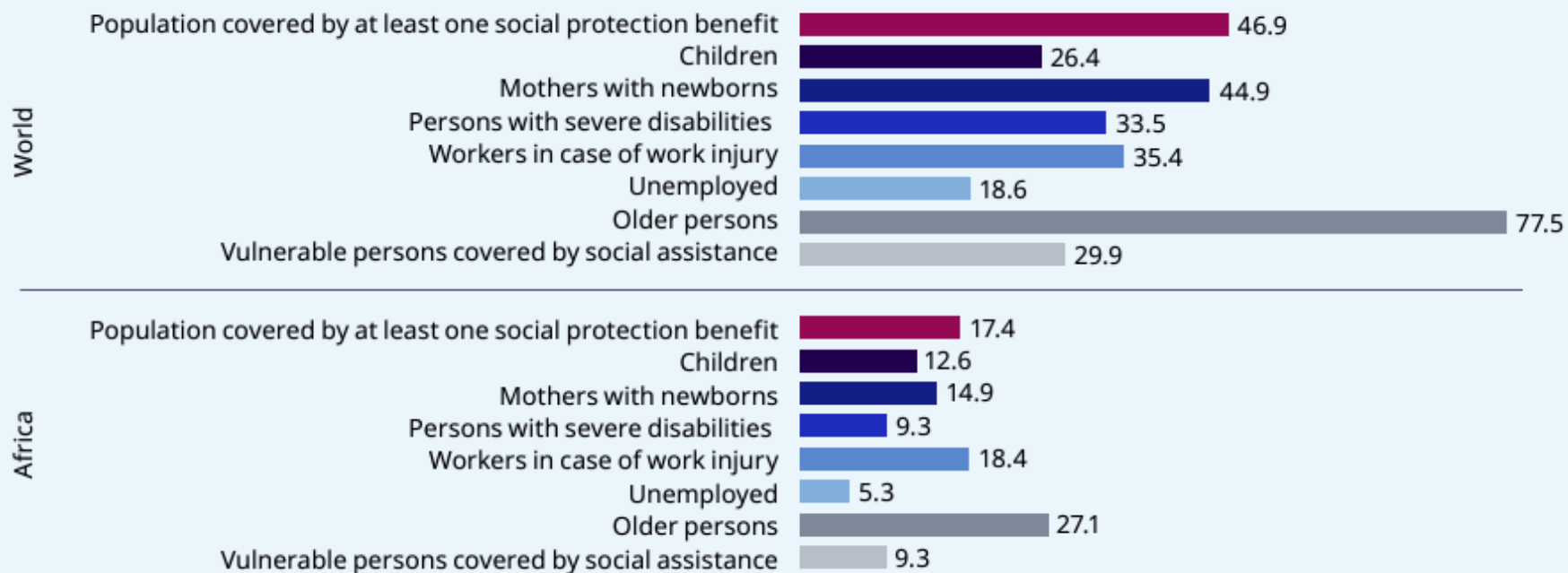
► **Figure 2. Public social protection expenditure (excluding health), percentage of GDP, 2020 or latest available year, and domestic general government health expenditure, percentage of GDP, 2018, by region and subregion**



Activa

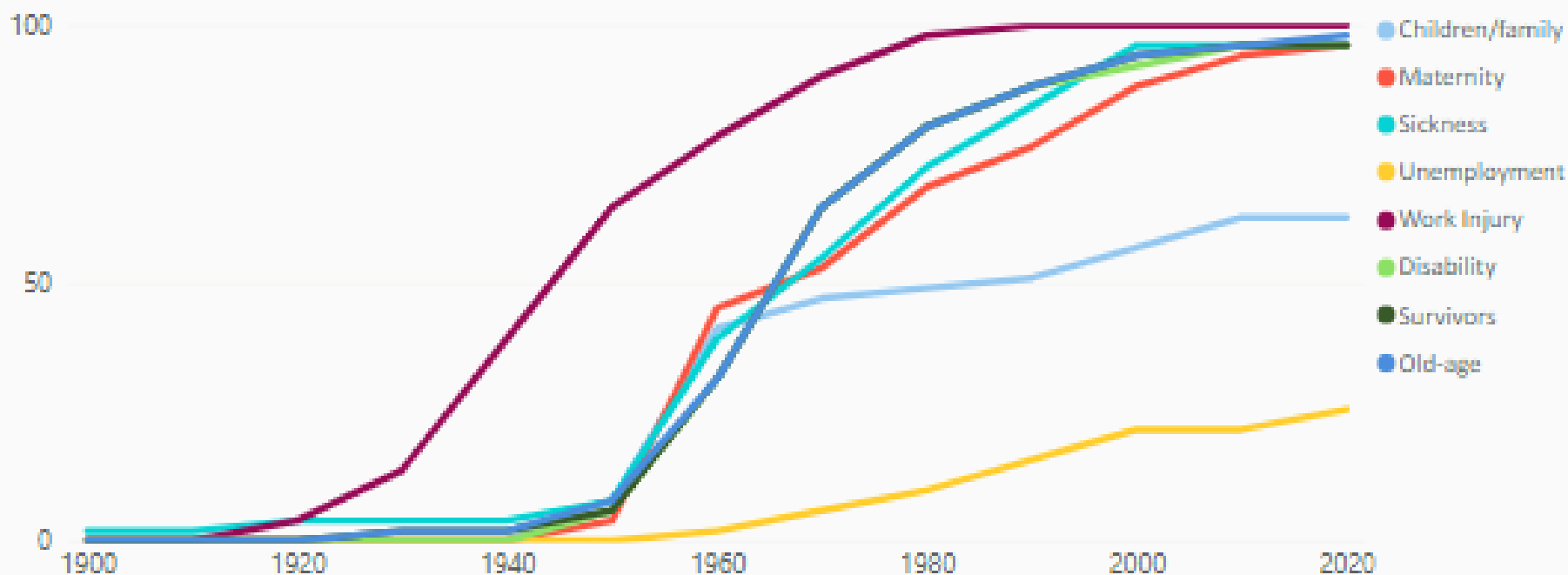
Social Protection SDG 1.3.1

► **Figure 3. SDG indicator 1.3.1: Effective social protection coverage, global, regional and subregional estimates, by population group, 2020 or latest available year**



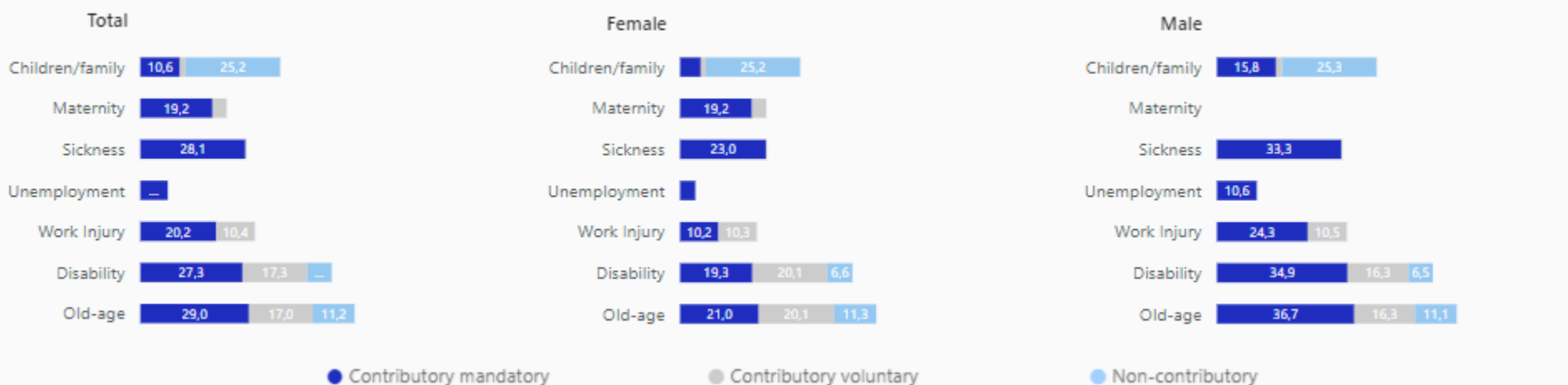
Social Protection SDG 1.3.1

Development of social protection programmes by policy area (% of countries)



Social Protection SDG 1.3.1

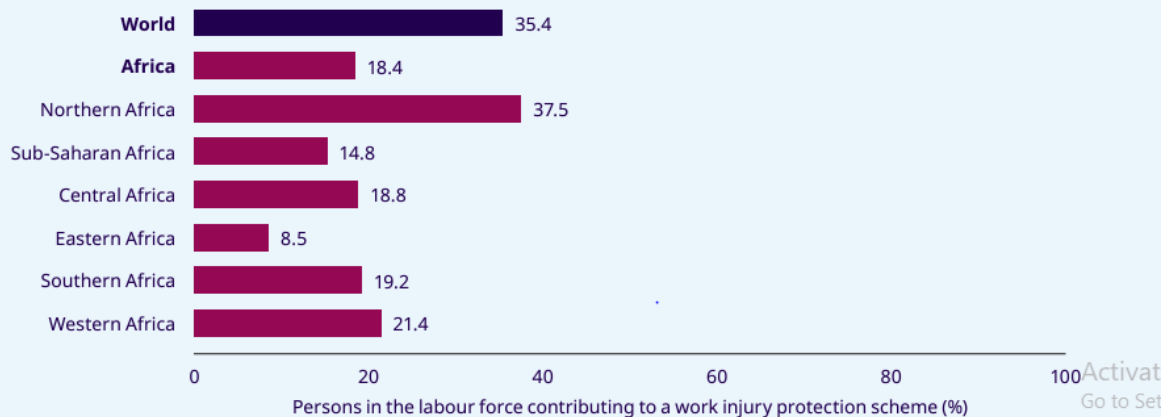
Legal coverage by function and by sex (%)



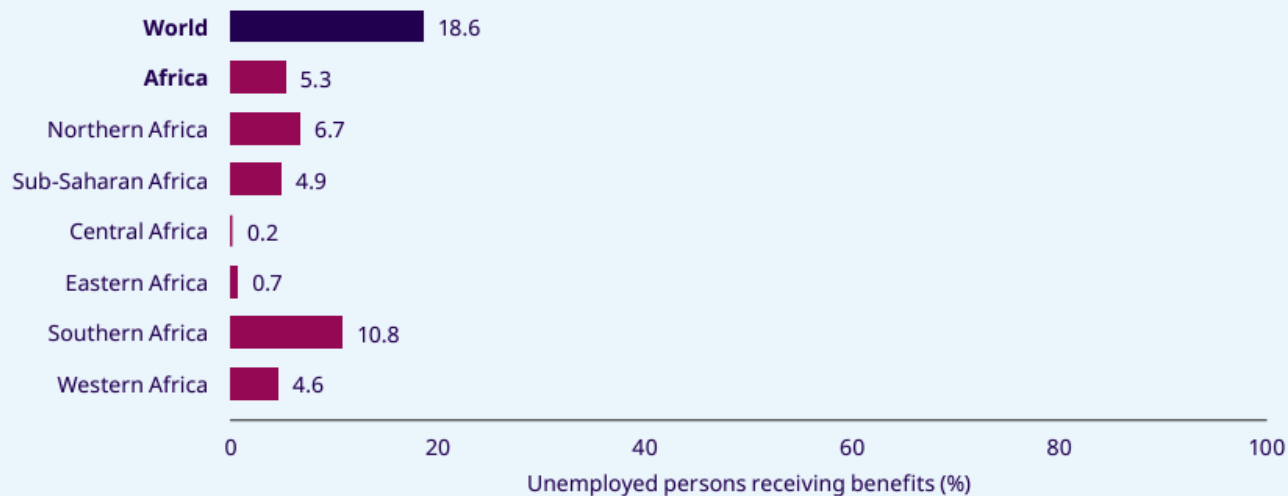
Social Insurance

- Project those who can contribute
- The benefits depend on the type and amount of the contribution
- In most countries, beneficiaries are the ones who work on the formal labour market
- However, most poor and vulnerable groups do not work or participate in the labour market






► **Figure 8. SDG indicator 1.3.1 on effective coverage for employment injury protection: Percentage of labour force aged 15+ years covered by cash benefits in case of employment injury (active contributors), by region, subregion and income level, 2020 or latest available year**



► **Figure 10. SDG indicator 1.3.1 on effective coverage for unemployment protection: Percentage of unemployed persons receiving cash benefits, by region and subregion, 2020 or latest available year**



Social Assistant

	Intended population groups	Types of programs (examples)
	<p>Demographic groups</p> <ul style="list-style-type: none"> • Children • Elderly 	<p>Categorical programs</p> <ul style="list-style-type: none"> • Birth/child allowances • Old-age pensions
	<p>Socioeconomic status</p> <ul style="list-style-type: none"> • Low-income families • Poor families 	<p>Poverty-targeted programs</p> <ul style="list-style-type: none"> • Unconditional cash transfers such as guaranteed minimum income or other forms of cash assistance • Conditional cash transfers • Public works programs • Beyond social protection programs: health insurance subsidies, scholarships, housing benefits
	<p>Labor force status</p> <ul style="list-style-type: none"> • Unemployed • Discouraged/inactive • Job-seekers 	<p>Labor benefits and services</p> <ul style="list-style-type: none"> • Unemployment insurance and assistance benefits • Employment services to help people find jobs: self-service, job search assistance, and so on • Active labor market programs to help people improve employability: training, start-up support, and so on
	<p>Persons with disabilities</p> <ul style="list-style-type: none"> • Disabled persons (moderate versus severe, short-term versus long-term, medical impairments versus functional limitations) 	<p>Disability benefits and services</p> <ul style="list-style-type: none"> • Disability insurance and assistance benefits • Disability services, such as casework services, care services, specialized services
	<p>Individuals facing social risks</p> <ul style="list-style-type: none"> • Children • Youth • Adults • Elderly 	<p>Social services</p> <ul style="list-style-type: none"> • Social work services: information and awareness; assessment and referrals; counseling and mediation • Social care services: home-based, community-based, institutional • Specialized and preventive services

Social Assistant

COVERAGE OF SOCIAL PROTECTION AND LABOR IN TOTAL POPULATION (%)



Weighted average of country's most recent value between 2010 and 2020.

■ More than one SPL benefit
 ■ Only social insurance programs
 ■ Only social assistance programs
 ■ No transfer

Activate Windo
Go to Settings to act

Social Protection Floors

Four social security guarantees, as defined at the national level:
access to essential health care, including maternity care;

- **basic income security for children**, providing access to nutrition, education, care and any other necessary goods and services;
- **basic income security** for persons in active age who are unable to earn sufficient income, in particular in cases of **sickness, unemployment, maternity and disability**;
- **basic income security for older persons**.

Such guarantees should be provided to all residents and all children, as defined in national laws and regulations, and subject to existing international obligations.

The effects of social protection

- Social protection has direct effects on health, education, employment and in living standards.
- Systematic reviews have identified that only cash transfers do not have the effect that is expected (e.g., nutrition).
- The expected long-term effect will depend on the availability of services and the provision of additional support to individuals and households.
- In most economic evaluations it has been found that cash transferances have an effect on education, health, empowerment and living standard indicators, and in some cases on poverty reduction.

The effects of social protection

<i>Outcome</i>	<i>Indicator</i>	Fatchamps et al. (2014)	Filmer & Schady (2014)	Hahn et al. (2018)	Ham & Michelson (2018)	Haushofer & Shapiro (2018)	Kugler & Rojas (2018)	Macours et al. (2012a)	Macours et al. (2012b)	Molina Millán et al. (2020)	Neidhofer & Niño-Zarazúa (2019)	Oliveira & Chagas (2020)	Özler et al. (2020)	Parker & Vogl (2018)	Price & Song (2016)	Rodriguez-Oreggia & Freije (2012)	Roy et al. (2019)	Sabates et al. (2019)	Sabates-Wheeler et al. (2018)	Sedlmayr et al. (2020)	Stoeffler et al. (2020)	
Education	Cognitive and test scores		Δ						▲	▲ ₂											▽	
	School attainment and literacy		Δ ₃	▲ ₄	▲ ₂	Δ	▲ ₂			▲ ₁₀	▲	▲ ₄	Δ	▲ ₆					▽ ₂		Δ ₂	
	Tertiary education						▲			▲ ₂				Δ ₂								
Health and nutrition	Health status					▽ ₂																Δ ₂
	Life expectancy														▽							
	Food security and nutrition					▽		▲ ₃	▲											▲		Δ ₂
	Child health		▼	Δ ₅					▲ ₄				Δ ₂									
Employment	Work status, labour supply and employment			Δ ₅	Δ ₃		▲ ₄			▽ ₁₀		▲ ₄		Δ ₆		Δ ₆	◁▷ ₂					Δ ₄
	Income and earnings	Δ				Δ	▲	◁▷ ₁₄		◁▷ ₂	▲	▼ ₄		Δ ₄	▽ ₄	▽ ₃						◁▷ ₂
	Child labour		◁▷ ₆																			Δ
	Migration and geographic mobility									▽ ₂				◁▷ ₆		◁▷ ₃						
Poverty	Expenditures and consumption					Δ		Δ ₆											▲			◁▷ ₂
	Living standards		Δ ₂											▲ ₂								Δ
Savings, investment and production	Savings			▲ ₂																		Δ
	Investment																					▽
	Assets					▲		◁▷ ₆						Δ ₂						▲ ₂	▲ ₂	Δ ₃
Empowerment	Early pregnancy and marriage		Δ ₂	▼ ₆						Δ ₄												
	Decision-making power			◁▷ ₆									▲ ₂				Δ ₂					
	Abuse (physical and non-physical)					▼							▽				◁▷ ₆					
Social capital and agency														Δ								◁▷ ₂

Tabita, Kenya

Rabiya, India

Stephanie, Madagascar

Agatha, Madagascar

Dalima, Kenya

Ann-Sophie, Kenya

Valerie, Madagascar



Alkire-Foster Method

Practical Steps

- **Select**

- Purpose of the index (monitoring, targeting, etc.)
- Unit of analysis (people, households, countries)
- Dimensions
- Specific indicators for each dimension
- Cutoff for each indicator
- Weight for each indicator
- Poverty cutoff
- **Identification: who is poor?**
- **Aggregation: how much poverty is there?**

How to Compute the MPI

The MPI is the product of two components:

$$\text{MPI} = H \times A$$

- 1) *Incidence* (H) ~ the percentage of people who are poor.
- 2) *Intensity* (A) ~ the percentage of indicators in which poor people are deprived, on average.

The MPI is can be decomposed by **groups** & broken down by **indicators**

Alkire and Foster *Journal of Public Economics* 2011

Alkire-Foster Method

(to simplify we assume equal weights in this example)

Matrix of deprivation scores for 4 persons in 4 dimensions

Who is deprived in what?

	Health	Years of Education	Housing Index	Mal-nourished	
$y =$	ND	ND	ND	ND	Sabina
	D	ND	ND	D	Emma
	D	D	D	D	John
	ND	D	ND	ND	Mauro

Alkire-Foster Method

(to simplify we assume equal weights in this example)

Matrix of deprivation scores for 4 persons in 4 dimensions

How much?

	Health	Years of Education	Housing Index	Mal-nourished	<i>c</i>
$y =$	ND	ND	ND	ND	0
	D	ND	ND	D	2
	D	D	D	D	4
	ND	D	ND	ND	1

Alkire-Foster Method

(to simplify we assume equal weights in this example)

Who is poor?

Fix poverty cut-off k , identify as poor if $c_i \geq 2$

	Health	Years of Education	Housing Index	Mal-nourished	c
	ND	ND	ND	ND	0
$y =$	D	ND	ND	D	2
	D	D	D	D	4
	ND	D	ND	ND	1

→ Multidimensional Poverty Headcount (H) = $2/4$

[50% of the population are poor]

Alkire-Foster Method

(to simplify we assume equal weights in this example)

Who is poor?

Fix poverty cut-off k , identify as poor if $c_i \geq 2$

	Health	Years of Education	Housing Index	Mal-nourished	c	
$y =$	ND	ND	ND	ND	0	
	D	ND	ND	D	2	2/4
	D	D	D	D	4	4/4
	ND	D	ND	ND	1	

→ Intensity of deprivation among the poor $(A) = (2/4 + 4/4) / 2 = 3/4$

[on average, the poor are deprived in 75% of the dimensions]

The MD Poverty Index

Health	Years of Education	Housing Index	Mal-nourished	<i>c</i>	Av. dep
ND	ND	ND	ND	0	
D	ND	ND	D	2	2/4
D	D	D	D	4	4/4
ND	D	ND	ND	1	

→ Multidimensional Poverty Headcount (H) = $2/4 = 50\%$

→ Intensity of deprivation among the poor (A) = $(2/4 + 4/4) / 2 = 3/4 = 75\%$

$$\text{MPI} = H \times A = (2/4) \times (3/4) = 6/16 = 0.375$$

The MD Poverty Index

INTERVENTION

	Health	Years of Education	Housing Index	Mal-nourished	<i>c</i>	Av. dep
	ND	ND	ND	ND	0	
	D	ND	ND	D	2	2/4
→	√D	D	D	D	4	4/4
	ND	D	ND	ND	1	

→ Multidimensional Poverty Headcount (H) = $2/4 = 50\%$

→ Intensity of deprivation among the poor (A) = $(2/4 + 4/4) / 2 = 3/4 = 75\%$

$$\text{MPI} = H \times A = (2/4) \times (3/4) = 6/16 = 0.375$$

The MD Poverty Index

INTERVENTION

	Health	Years of Education	Housing Index	Mal-nourished	<i>c</i>	Av. dep
	ND	ND	ND	ND	0	
	D	ND	ND	D	2	2/4
	ND	D	D	D	3	3/4
	ND	D	ND	ND	1	

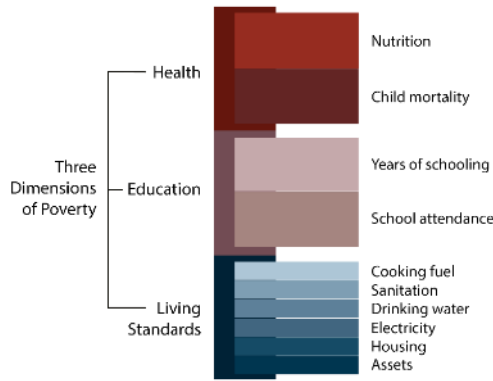
→ Multidimensional Poverty Headcount (H) = 2/4

→ Intensity of deprivation among the poor (A) = $(2/4 + 3/4) / 2 = 5/8 = 62.5\%$

$$\text{MPI} = H \times A = (2/4) \times (5/8) = 10/32 = 0.3125$$

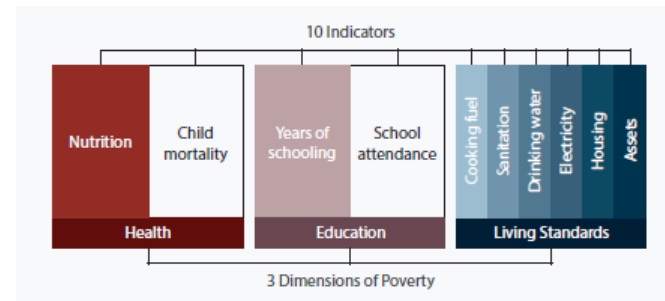
Computing any MPI

1. Consider the indicators



2. Build a Deprivation Profile for each person

This deprivation score is $1/6 + 1/6 + 6(1/18) = 2/3$



3. Identify Who is Poor Using Poverty Cutoff (1/3):

If deprivation score \geq poverty cutoff, person is poor. Here, $2/3 \geq 1/3$, so the person is identified as poor.

4. Compute MPI

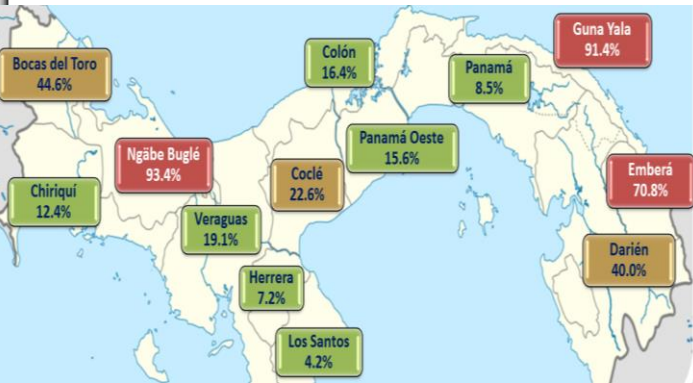
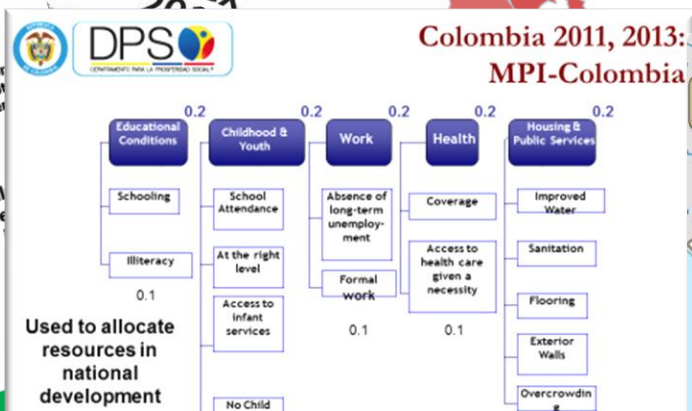
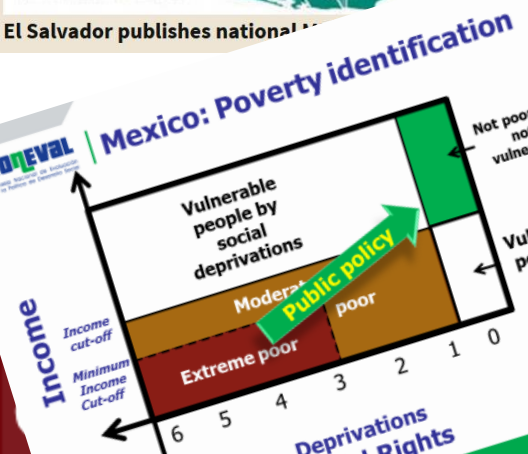
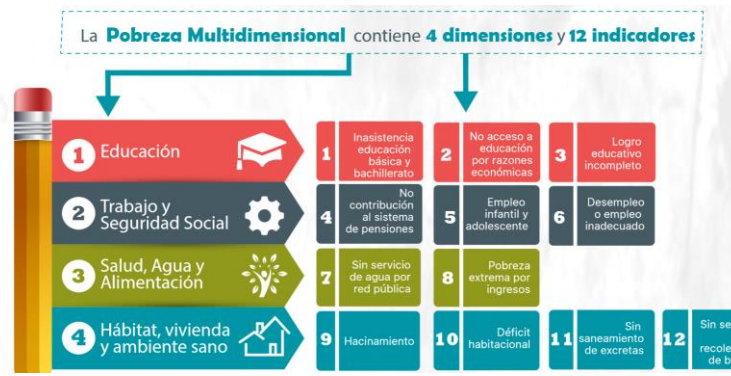
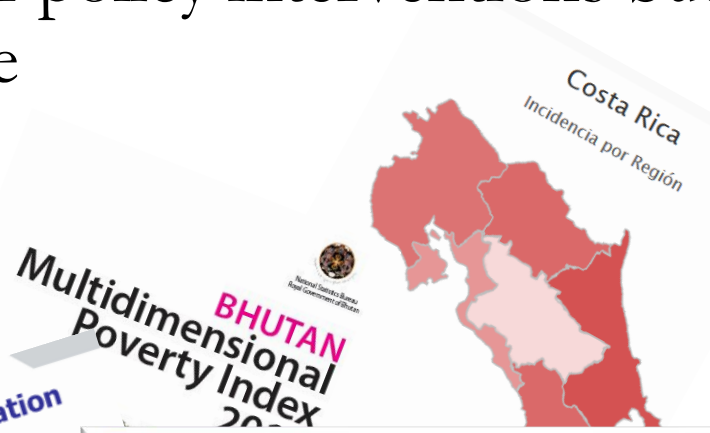
$$\text{MPI} = H \times A$$

H “**Incidence**”= Headcount ratio of those identified as poor

A “**Intensity**”= Average deprivation score of all poor people

National MPIs: Tailor made for policy

- Reflects the national context and priorities
- Guides national policies – focalization, monitoring, coordination
- Useful for policy interventions but not internationally comparable



Tabita, Kenya

Rabiya, India

Stephanie, Madagascar

Agatha, Madagascar

Dalima, Kenya

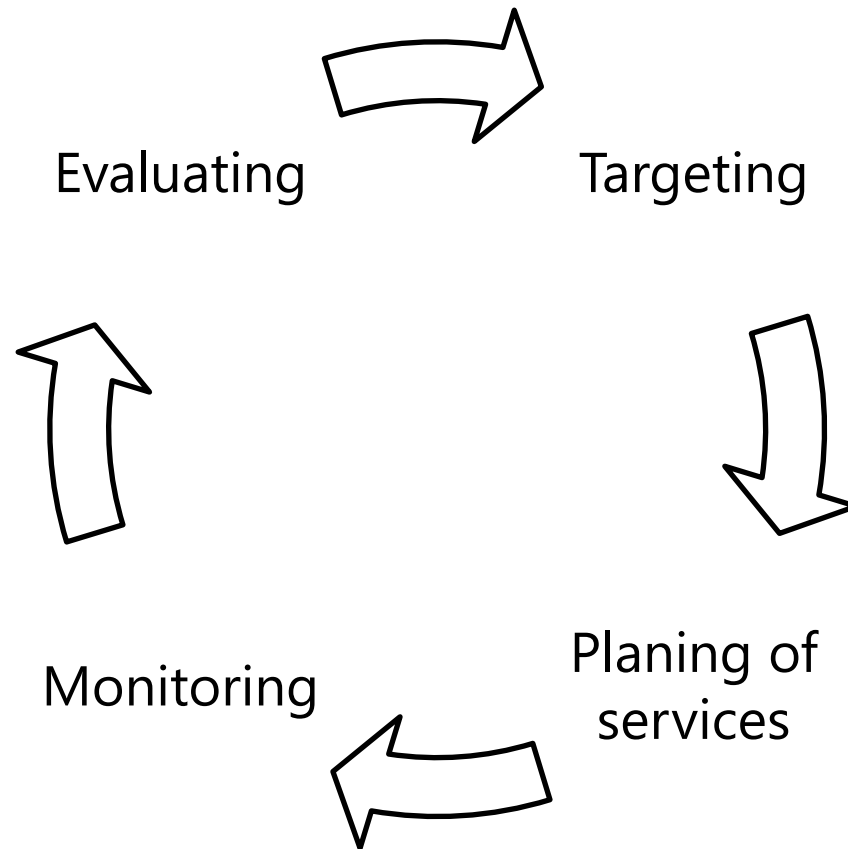
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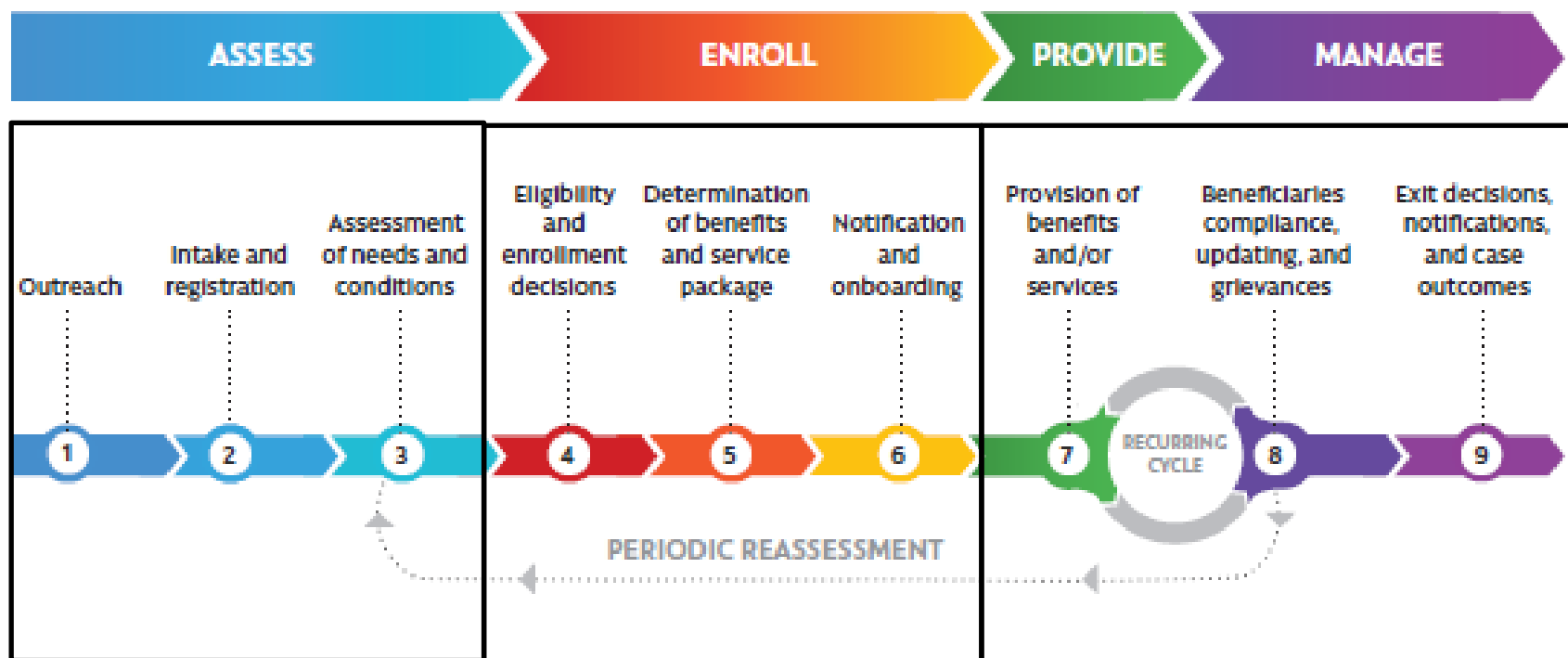
Social Protection & MPI

Uses of the MPI in a SPS

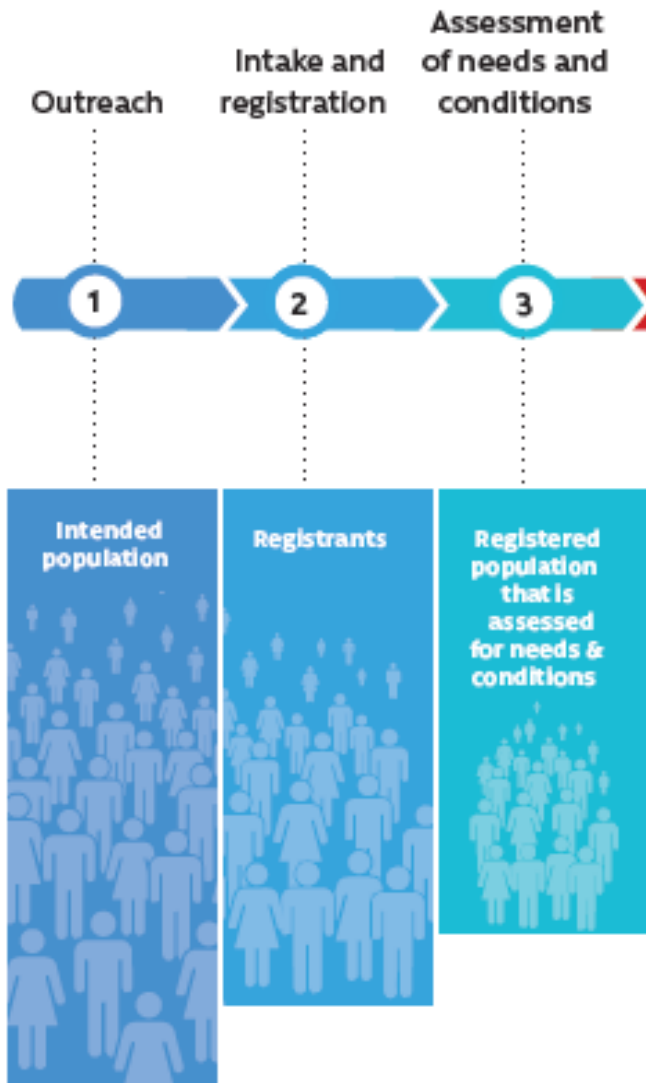


How we use the MPI in SP?

Figure 2.1 The Social Protection Delivery Chain



Assess



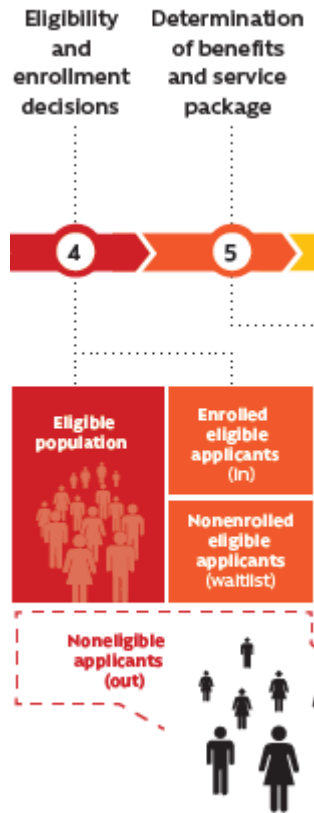
- The MPI is a tool that can assess the needs of persons and households who need to be identified as poor.
- Depending on the objective of the benefit, different MPI structures can be tested.
- Countries such as Honduras have designed MVIs to identify beneficiaries.
- Important to consider the objective of the measure, and what is the purpose of the benefit.

Assessing socioeconomic status (assess for families and households)




- People living below the poverty line
 - Homeless
 - People living in isolated and remote areas
 - Pastoralist, nomadic, and semi-nomadic groups
 - Indigenous groups
 - Refugees, stateless, immigrants, internally displaced populations (IDPs), and/or people living in areas affected by fragility, conflict, and violence
 - Ethnic, religious, linguistic, and visible minorities
- Means testing (MT), including income tests and/or asset tests
 - Proxy means testing (PMT)
 - Hybrid means testing (HMT)
 - Multidimensional indicators of poverty (MDIP)
 - Community-based targeting (CBT)



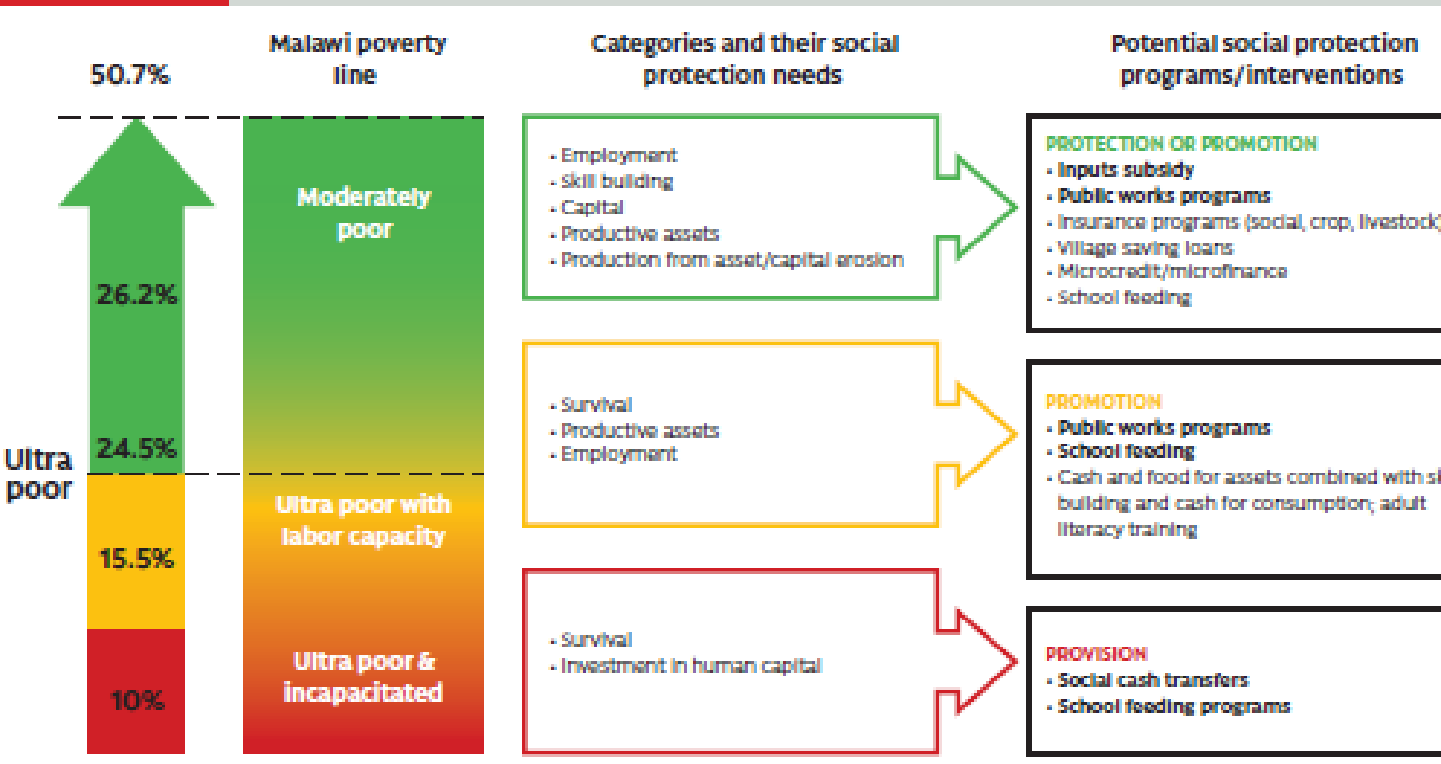
Enroll



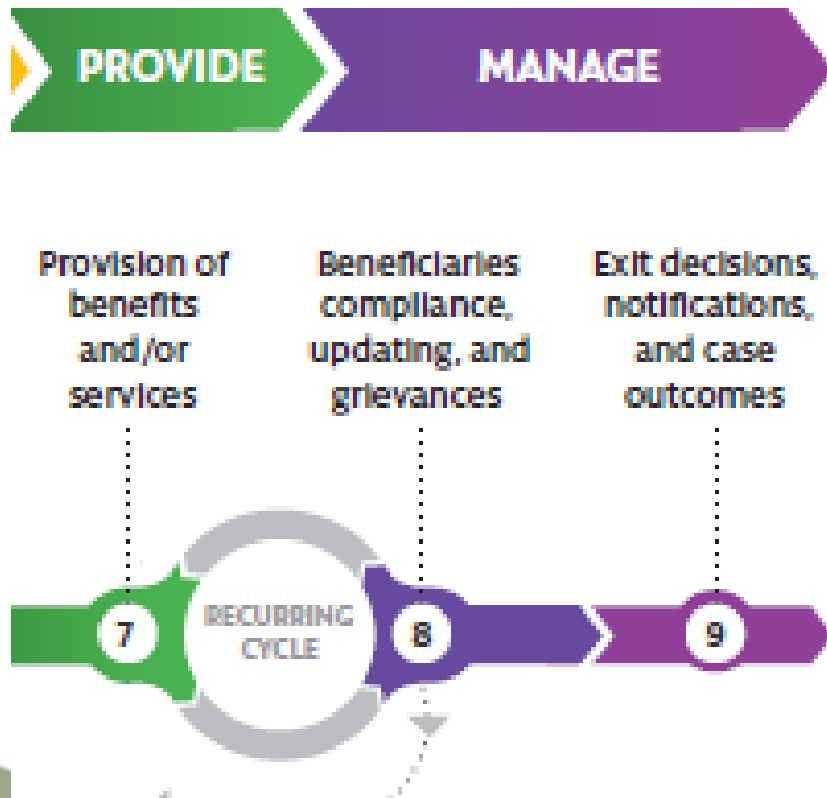
- The MPI is a tool that can identify those who are facing a larger number of deprivations.
- It can provide information regarding the deprivations that people are facing and how those deprivations interact.
- Beneficiaries can be classified in different groups according to the severity of their deprivation and groups can be prioritised
- Important to consider the objective of the measure, and what is the purpose of the benefit.

	Eligibility criteria (many programs use combination)	Assessed profile and assistance unit
Demographic-categorical programs 	Demographic rules, such as children under 5, elderly persons over 65 (gender may also be a program eligibility criteria) Citizenship and/or residence requirements Employment and contributions history for social insurance pensions Socioeconomic criteria also often used to determine eligibility for social pensions and various types of child/family allowances	Assessed profile: verified information on demographic status Assistance unit: individual; designated recipient may differ from beneficiary in dependency situations (parent, caregiver, guardian, etc.) Base for assessment would be family or household with socioeconomic criteria
Poverty-targeted programs 	Absolute thresholds Relative thresholds Exclusionary filters (yes-no) Various other types of criteria	Assessed profile: MT, PMT, HMT Assistance unit: usually family or household
Programs for the unemployed (UI, UA, services) 	Unemployment status Duration of unemployment Employment history Minimum contributions history Socioeconomic thresholds all determine eligibility for UA	Assessed profile: labor profile from caseworker assessment and/or statistical profiling Assistance unit: individual

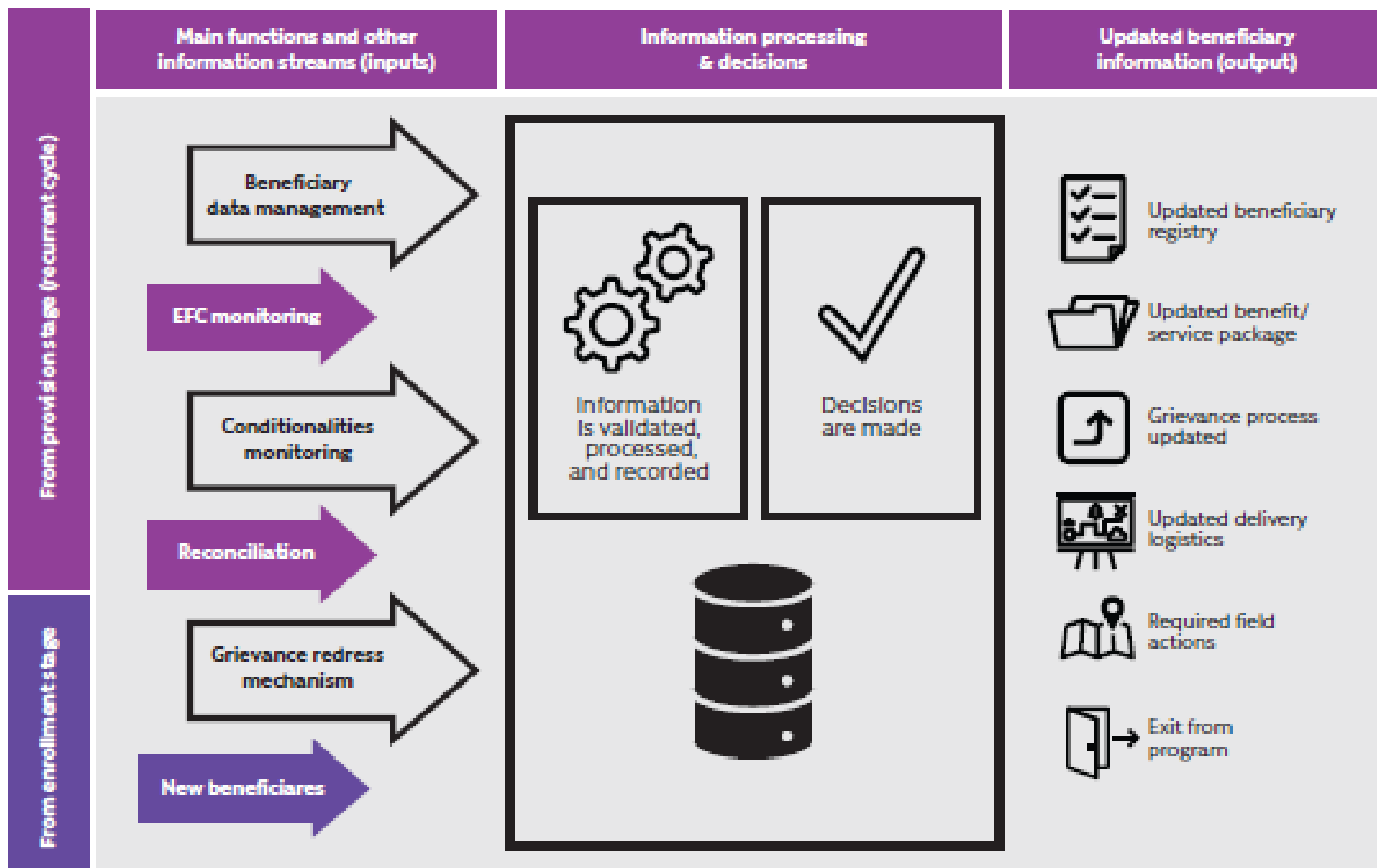
Disability programs (DI, DA, services) 	Thresholds or categories based on duration of disability Percent functional loss in work Unemployment status and history for DI Socioeconomic thresholds all determine eligibility for UA
-----------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------



Provide and Management



- The provision of services can be based on the deprivations that the person/household faces.
- The monitoring of beneficiary's conditions can be done using multidimensional measures.
- Exit decisions can be made based on the achievements that individuals/households have.



Dimensiones y Logros Básicos

Los Logros Básicos están agrupados en nueve (9) dimensiones:

1	IDENTIFICACION	6	HABITABILIDAD
2	INGRESOS Y TRABAJO	7	DINAMICA FAMILIAR
3	EDUCACION	8	BANCARIZACION Y AHORRO
4	SALUD	9	APOYO PARA GARANTIZAR EL ACCESO A LA JUSTICIA
5	NUTRICION		

QUESTIONS

Tabita, Kenya

Rabiya, India

Stephanie, Madagascar

Agatha, Madagascar

Dalima, Kenya

Ann-Sophie, Kenya

Valerie, Madagascar



National MPI Namibia

National MPI Namibia

1.2 Purpose of Namibia's MPI

The national MPI for Namibia was designed mainly for two main reasons. The first is to provide updated multidimensional poverty statistics to inform policy and programmatic design and implementation. A national MPI can guide coordinated policy actions by several Offices, Ministries and Agencies (OMAs), provide clear goals and targets for each indicator, and act as a monitoring and accountability tool. Secondly, the measure is aimed at complementing monetary poverty statistics released by the NSA, by providing an understanding of the multidimensional nature of poverty and the various deprivations faced by different groups of people in Namibia, by location and demographic groups. The evidence generated on the drivers of multidimensional poverty will be used to monitor progress on NDPs and Sustainable Development Goals (SDGs), particularly SDG 1, of reducing, by half, the proportion of men, women and children of all ages living in poverty in all its dimensions by 2030.

Structure

DIMENSION	DIMENSION WEIGHT	INDICATOR	INDICATOR WEIGHT WITH DIMENSION (%)
Education	1/3	SCHOOL ATTENDANCE: A household is deprived if at least one school aged child (aged 7-17 years) is not attending school.	2/15
		YEARS OF SCHOOLING: A household is deprived if all household members aged 16 years or older have not completed 7 years of schooling.	1/5
Living standards	1/3	DRINKING WATER: A household is deprived if it does not have access to improved drinking water ¹ (according to SDG-6).	1/18
		SANITATION: A household is deprived if its sanitation facility is not improved ² (according to SDG-6) or it is improved but shared with other households.	
		HOUSING: A household is deprived if it has inadequate housing – the roof or wall are made of rudimentary materials ³ - OR the dwelling is an improvised housing unit.	
		TRANSPORTATION ASSETS: A household is deprived if it does not own at least one of these assets: car, bus or bakkie.	
		ICT: A household is deprived if it does not own any of these assets: radio, TV, smartphone, or computer; and the household does not have internet access at home or elsewhere.	
		COOKING AND LIGHTING ENERGY: A household is deprived if it uses unclean sources ⁴ for cooking and lighting.	
Health	1/3	ACCESS TO CLINIC/HOSPITALS: A household is deprived if a hospital or clinic is more than a 20-km distance or more than 30 minutes one way from home.	1/15
		FOOD SECURITY: A household is deprived if it did not have enough food in the 7 days prior to the survey.	2/15
		CHILD NUTRITION: A household is deprived if it has at least one child under 5 who is underweight or stunted.	

Poverty cutoff (k value)	Index	Value	Confidence Interval	
k=30%	Headcount ratio (H, %)	4.3	41.0	45.6
	Intensity (A, %)	44.0	43.2	44.9
	MPI	0.191	0.180	0.202

Figure 2. National Censored Headcount Ratio

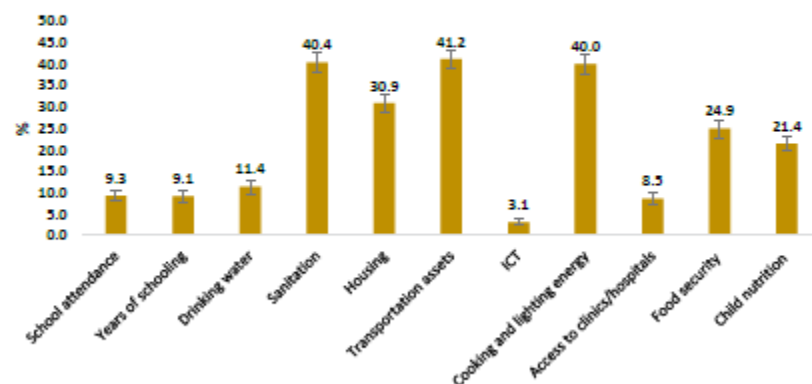
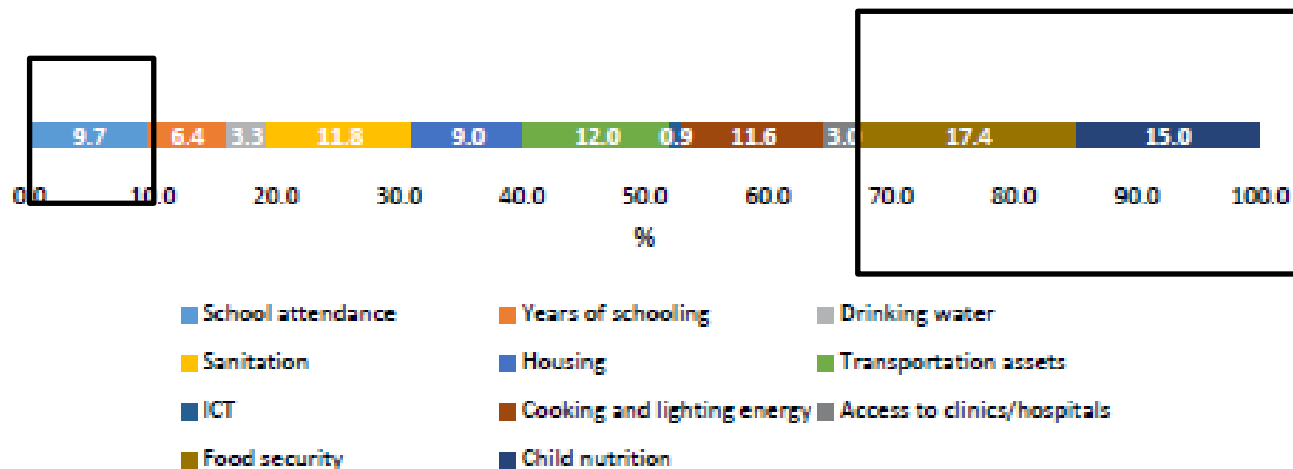


Figure 3. Percentage Contribution of each Indicator to the National MPI



Incidence of Multidimensional Poverty (H)

