

Evaluation of the Kenya Hunger Safety Net Programme Pilot Phase

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The Kenya Hunger Safety Net Programme (HSNP) Pilot

The HSNP is an unconditional cash transfer that aims to reduce poverty in four counties¹ in the arid and semi-arid lands of northern Kenya. The pilot phase (2007–2013) was operated under the Ministry of State for the Development of Northern Kenya and funded by the UK Department for International Development (DFID) and AusAid. During its pilot phase, the HSNP delivered regular cash transfers every two months to around 69,000 beneficiary households, targeted using three distinct methods: community-based targeting, dependency ratio, and a social pension (which targets individuals rather than households). The transfer started at a value of KES2,150 (USD21.48)² and rose to KES3,500 (USD34.97) by the end of the evaluation period.

The pilot phase evaluation

An independent evaluation of the HSNP pilot phase was conducted to provide a rigorous assessment of the programme's impact and performance. The evaluation utilised a mixed-methods approach, with the quantitative component underpinned by an experimental randomised controlled trial design. Quantitative data collection took place over three rounds across the four counties between August 2009 and November 2012. Qualitative research was conducted periodically across a number of sites throughout the four counties during each year of the evaluation period. The evaluation included an assessment of the programme's operational performance and targeting, alongside an estimate of its impact. The evaluation measured impacts across a wide variety of domains. The results presented here represent two years of programme operations.

Evaluation results

The evaluation found strong evidence of positive impacts in some areas, clear evidence of no impact in other areas, and in yet other areas the evidence was more mixed or ambiguous.

There was strong evidence of **positive programme impact on consumption and poverty**, with beneficiary households 10 percentage points less likely to be extremely poor than control households³ and the programme reducing both the poverty gap and severity of poverty by seven percentage points. In addition, the programme improved **food expenditure** for beneficiary households (by KES213 per adult equivalent), while 87 per cent of beneficiary households reported eating more and/or larger meals as a result of the programme. **Health expenditure** also increased, as did households' propensity to **save money and access loans**.

The evaluation also showed that the HSNP did not have impacts across all possible domains. There was clear evidence of **no programme impact on: child nutrition** (it was shown that stunting and wasting are determined by factors beyond the HSNP); **receipt of food aid** (households were not deprioritised for food aid as a result of the programme); **health status** (HSNP did not reduce incidence of illness or injury); **livelihoods** (HSNP did not cause dependency or disrupt pastoralist livelihoods); **local prices** (HSNP did not cause inflation or stabilise prices over time); and **social tension** within or between communities.

At the same time, the evidence of the programme's impact on a number of areas was more mixed or ambiguous; evidence either suggested that it had differing degrees or types of impact across heterogeneous groups,

or was indicative of impact or lack of it but not fully conclusive. Some of the key areas in this regard included:

- **Dietary diversity:** The HSNP may have improved dietary diversity for poorer and smaller households.
- **Educational attainment:** The HSNP did not increase enrolment, attendance or expenditure on education, but it did improve educational performance for those children in school.⁴ This result was strongly linked by the qualitative research to improvements in the psychosocial well-being of children.
- **Assets:** The HSNP may well have enabled retention of livestock assets (especially for poorer and smaller households), but did not aid retention or accumulation of non-livestock productive assets.
- **Access to credit:** The HSNP improved access to credit for some households.
- **Vulnerability to shocks:** The HSNP helped households to avoid certain negative coping strategies (e.g. sale of household assets).
- **Local economy:** Evidence suggested that the HSNP was having a positive impact on the local economy.

Policy implications

The quantitative and qualitative evidence showed that different households respond in different ways to the programme. Specifically, analysis showed that impacts were more pronounced on smaller and poorer households, and households that received a greater cumulative per capita value of transfer. These results indicated that targeting the poorest households and/or appropriately calibrating the value of the transfer (e.g. to household size) could maximise impact. In addition, the evidence showed that, at its current value, the HSNP alone will not impact all aspects of well-being. Other complementary interventions are necessary.

HSNP phase 2

Evidence from the HSNP pilot evaluation fed directly into the design of the second phase of the programme. The HSNP is now scaling up to cover 100,000 households with payments every two months, plus a facility to scale up the transfer to cover up to 75 per cent of the population with one-off emergency payments in case of severe drought. The HSNP is now attempting to target the poorest households through a combination of community-based wealth ranking and proxy means testing. HSNP phase 2 includes an independent Monitoring and Evaluation component, results from which will start to become available from late 2016.

Notes:

1. Mandera, Marsabit, Turkana and Wajir.
2. As of 6 July 2015, 1 Kenyan Shilling (KES) = 0.009 USD.
3. Extreme poverty is conditioned on the likelihood of falling into the bottom decile of national consumption.
4. HSNP children were more likely to have passed Standard Grade IV than their control counterparts.

For more information, see: <<http://www.opml.co.uk/projects/hsnp-project-evaluation-kenya-hunger-safety-net-programme>> (accessed 10 August 2015).

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