

## Conditional cash transfers and their impact on children (Hungary, 8-9 October 2015)<sup>1</sup>

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### 1. Main recommendations

COFACE stresses the need:

- to mainstream the **family dimension** in the setting up and designing of CCTs;
- CCT programmes must **support the diversity** of types of provisions and be flexible enough to be able to reflect the real lives of the families (single parents, low-income families, parents working non-standard hours, jobseeker parents, parents still in education – as all these situations could require different types of assessments on the conditional cash transfer schemes);
- to **mobilise all relevant actors**: civil society organisations, family organisations, social partners, local authorities in providing relevant feedback on the efficiency of CCT programmes in the different Member States by setting up monitoring groups or committees
- to increase the **shared responsibility** approach of CCT programmes and delegate more accountability and trust to institutions i.e. schools, health institutions, local authorities actively involved in the implementation of CCT programmes<sup>2</sup>.

### 2. General statements and comments

COFACE welcomes the Peer Review's abstract paper "Conditional cash transfers and their impact on children" and its very comprehensive accompanying study done by TÁRKI. The background document identifies several key points that are at the heart of COFACE's and its member organisations' concerns. (All background papers and documents will be disseminated to the member organisations of COFACE with the report of the Peer Review meeting.)

In 2015, COFACE's main policy focus is on families in vulnerable situations in connection with we wish to emphasise that in the designing and planning of CCT programmes, more attention should be given to the specific needs of vulnerable groups. These "vulnerable groups" may be very diverse. Hence, COFACE underlines the need to create specific CCT sub-programmes, or measures, for families with a migrant background, families or parents with disabilities, single parent (lone parent) families and "large" families (more than 3 children). The discussion paper states that families' financial situation is identified and used as expectation factor by the various governments in applying CCTs. Therefore programme designs and implementations must be responsive and able to identify and differentiate between families' financial states, moreover, adapt and appropriately react to the life

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<sup>2</sup> Comments and feedback have been received from the following COFACE member organisations: Gezinsbond (Belgium), National Mouvement Women and Mothers Against Violence and Mariela Nankova (Bulgaria)



changes (unemployment, divorce, retirement etc.) of families. In the targeting of such groups the monitoring of conditionality is crucial even though it could have a very high cost effects on the programme designs.

Special attention must be given to families living in rural areas as these groups are less likely to use available social services. Programme evaluations could involve assessments on how CCTs contribute to improving the use of resources on local economic development and enhancing the well-being/quality of life of rural-urban communities/groups.

In terms of the universality approach of CCTs, COFACE would like to point out the following: family allowance systems are generally built around two main avenues. Horizontal redistribution: in this case each parent is entitled to receive the same amount of child benefit, regardless of its conditions of existence. Vertical redistribution: in this case allowances are distributed to parents based on income, employment status or the structure of the family. We can also identify mixed systems that combine both examples of policy-making. Generally, CCT programmes belong to vertical solidarity or to the hybrid model.

Simultaneously, universal conditional transfers must be made available, when it comes to the free movement of workers in the EU, in case of the absence of the harmonisation of EU countries' regulations. Here we wouldn't want to go into the details of EU level regulations and its various special aspects, but wish to emphasise that in theory, the country in which the person works should primarily pay the family allowances, i.e. CCTs.

There should be more officially-funded surveys and studies to better identify CCTs outcomes and parents' real needs and how, why, under which circumstances they might fall out of the programmes. Criteria of who is eligible and after how much time, or under what circumstances, could get back to CCT programmes must be further emphasised.

In addition, based on an initial web research (websites of governments, local authorities etc.) on CCTs and after having consulted the membership of COFACE, it is clear that there is not enough information published and/or explained publicly.

### **COFACE also wishes to stress some other general recommendations which were less prominent in the discussion paper:**

Family policies, generally, must involve three types of government interventions: ensuring financial **resources**, providing public health **services**, and the facilitation of reconciliation of family and private life (**time**). The quality of the outcome of family/social policies, i.e. CCT programmes, derives from the balance between these three pillars. COFACE considers that the integration, or consideration, of **work-life balance**/reconciliation of work and family life (pillar 3) policies must receive attention in the planning, designing and running of CCT programmes. Indeed, CCT programmes must be coupled with relevant work and family life reconciliation policies such as flexible working arrangements or leave schemes (maternity, paternity, carers, parents). Moreover, CCT programmes must not be a one-solution-fits-all type of policy, therefore the above-described tailored instruments must be utilised to achieve the specific needs of parents, workers, but companies as well.



### 3. Cooperation and involvement of stakeholders in CCT programmes

Effective CCT programmes require a strong integrated approach and coordination between all stakeholders (parents, family organisations, local authorities, social partners etc.).

Parents, families or the beneficiaries of CCT programmes should also have the possibility to inform each other about the different benefit schemes. Here, **family associations** could have a key role to play in partnership with the authorities. Generally, national, regional and local level authorities must clearly communicate about CCTs on their communication channels and provide proper information and/or brochures explaining the background of CCTs and their implications on families' lives. Family associations can also play a vital role in spreading information.

**Mobilising** all relevant actors, building partnerships and involving local communities is also essential in the development of CCTs. In family support services the member organisations of COFACE get involved through their local branches where communities participate through volunteering, peer support activities etc. Backing local communities and organisations/associations providing services or other forms of support to families could prove essential in addition to CCTs. Often, these bodies face financial difficulties and need to be supported. Without these actors working at a local level it is much harder to measure the success of such programmes as CCTs.

### 4. Monitoring and evaluation

According to the discussion paper "routine government evaluation and monitoring of CCT programmes is in its infancy in many of the high-income countries", accordingly COFACE would like to underscore that the monitoring of the outcomes of CCT programmes must be key and well embedded in the designing and planning of CCT schemes. Since many countries face similar challenges in terms of measuring and deciding on whether to use or not to use CCT programmes, key/common transferable measures, learning opportunities, experiences must be established. Potential **collaboration** between the different countries' government agencies, municipalities, schools, institutions in charge of the assessing of the actual conditionality of the families/individuals should be further explored.

Under what circumstances CCTs affect learning outcomes? Do children of families who receive CCTs complete more schooling that leads to greater level of higher education application? How does CCTs interact with the quality of schooling? It could also prove beneficial to measure the indirect effects of conditional cash transfer programmes on children's development, families financial and employment situation, social (inter)actions between governments and non-governmental stakeholders etc.

