

Ministry of Local Government

NATIONAL SOCIAL PROTECTION POLICY

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ACRONYMS

AU African Union

CEDAW Convention on the Elimination of Discrimination against Women CFSVA Comprehensive Food Security and Vulnerability Assessment

CRC Convention on the Rights of the Child

CSO Civil Society Organisation
DIS Direct Income Support
DP Development Partner
EAC East African Community

ECD Early Childhood Development

EDPRS Economic Development and Poverty Reduction Strategy

EICV Household Living Conditions Survey

FARG Genocide Survivors' Fund GBV Gender-based Violence GMO Gender Monitoring Office GoR Government of Rwanda

ICESCR International Covenant on Economic, Social and Cultural Rights

ILO International Labour Organisation

LODA Local Administrative Entities Development Agency

M&E Monitoring and Evaluation
MDG Millennium Development Goal

MIFOTRA Ministry of Public Service and Labour MIGEPROF Ministry of Gender and Family Promotion

MINAGRI Ministry of Agriculture

MINALOC Ministry of Local Government

MINECOFIN Ministry of Finance and Economic Planning

MINEDUC Ministry of Education MoH Ministry of Health

NCC National Council for Children

NCPD National Council for People with Disabilities

NGO Non-Government Organisation

NISR National Institute of Statistics, Rwanda NST National Strategy for Transformation

NWC National Women's Council PwD Person with Disabilities

RDHS Rwanda Demographic and Health Survey

RDRC Rwanda Demobilisation and Reintegration Commission

RSSB Rwanda Social Security Board

RWF Rwandan Francs

SDG Sustainable Development Goal

SP Social Protection

SPSWG Social Protection Sector Working Group

SSP Sector Strategic Plan

UN United Nations

7YGP Seven Year Government Programme

GLOSSARY OF TERMS

Direct Income Support Non-contributory/tax-financed schemes providing regular, predictable income support to eligible individuals or households. Includes public works, unconditional cash transfer schemes, social pensions, disability support grants, child benefits, among others.

Social Security

Overarching term for contributory / insurance-based and non-contributory / tax-financed benefit schemes such as pensions, disability benefits, maternity benefits

Social Assistance Incidental or temporary cash or in-kind assistance for households in crisis or have suffered a short-term shock. May include cash payments to cover essential needs, costs associated with accessing health care, support for vulnerable children to access education services as well as shelter construction/rehabilitation.

Poor

A level of consumption below the official poverty line (RWF 159,375 per year in 2014 prices).

Vulnerable

An individual or household who, for whatever reason, is less able to withstand socio-economic shocks and is therefore at an elevated risk of experiencing declines in welfare and or other forms of social deprivation. In the context of this strategy key vulnerable groups in Rwanda include low income and/or labour-constrained individuals or households such as older people, people with disabilities, female-headed households etc.

Protection

Social protection provides essential support to those living in poverty, protecting them from the worst consequences of that poverty;

Prevention

Social protection provides insurance mechanisms and safety nets that can be activated to catch people in danger of falling into poverty;

Promotion

Social protection supports poor people's investment so that they can pull themselves out of poverty;

Transformation

Social protection aims to improve the social status and rights of the most vulnerable.

Graduation

A situation whereby a previously poor household increase their household productivity and resilience to the extent that their consumption permanently remains over and above the official poverty line.

Complementary services

Any programme or service that directly supports the achievement of thee social protection sector's intended impacts on poverty and human capital development. Although complementary are not formally part of the social protection sector, the social protection sector will undertake special efforts to strengthen coordination with, and promote access to, complementary services by beneficiaries of social protection programmes.

Delinquency

Any conducts that are against the laws and or moral standards of the Rwandan society.

The combined and coordinated use of medical, social, educational and Rehabilitation

> vocational measures for training or retraining an individual to achieve an optimal state of health, psychological functioning, and social well-being

Gender A social construct that refers to the responsibilities, rights, opportunities,

respect and value a person receives from society in accordance with his/her sex, and which is likely to change in relation to time, culture and other

criteria.

A level of consumption below the official extreme poverty line **Extreme**

(RWF105,064 per year in 2014 prices). poverty

The extent to which an individual or household is able to withstand socio-**Vulnerability**

economic shocks and subsequent likelihood of experiencing declines in

welfare and/or social deprivation.

All individuals aged 16 to 30 years. Youth

Social Care Services that provide institutional and community-based care, protection, **Services** rehabilitation, psycho-social support, and advice, referrals and case

management support to the most vulnerable individuals and households.

FOREWORD

From 1994 to 2005, Social Protection was mainly delivered in the form of humanitarian assistance. In 2005, the first National Social protection policy was adopted and evolved from humanitarian assistance to social assistance. During this period, Social Protection has contributed strongly to Rwanda's performance in delivering the national development targets (e.g. reducing extreme poverty and inequality) during the era of EDPRS 1 and 2 as well as the Millennium Development Goals. Eradication of extreme poverty is now within our grasp and the social protection sector remains critical to achieving this noble objective.

In addition, social protection sector has evolved over time with new emerging challenges including malnutrition, livelihood shocks, existence of extreme poverty and poverty in its dimensional nature, necessitating revision of National Social Protection Policy to accommodate the new commitments from the Human Capital Development drive, the National Strategy for Transformation and the Vision 2050, whilst responding to the positive demographic dividend, which calls for focused attention on the emerging issues and concerns of the elderly persons and Persons with Disabilities (PWDs)

This Policy is strongly inspired by His Excellency, the President of the Republic of Rwanda, at the Human Development Summit, Washington, on 13th September 2017, where he strongly emphasized, "we shall no longer limit our ambition to the eradication of extreme poverty" but rather aim for "prosperity and wellbeing for everyone."

It is within this context that the Social protection policy and its strategic plan 2019-2024 is increasingly cognizant of inclusivity and responds to the aspirations of the National Constitution's call which commits the sector to contribute to tackling different forms of vulnerabilities including disability, old age, supporting the needy genocide survivors and any other needy persons.

In its inclusive development character, the Social Protection Policy further responds to the regional and international commitments, respectively the East African Community and African Union agenda, visible in the United Nations Sustainable Development Goals (SDGs). The overriding principle of the SDGs of "Leaving No One Behind", call for a more ambitious approach to social protection that is more inclusive and preventative in nature, providing an environment for protection from a range of social risks as well as being transformative for all citizens. The policy considers key international agreements such as the Universal Declaration of Human Rights (1948), which identify social protection as a fundamental human right for all citizens.

The social Protection Policy, being inclusive and mandated to mainstreaming different vulnerabilities, is anchored on four pillars, namely: Social Security, Social Care Services, Short Term Social Assistance and Livelihoods Enhancement; the four pillars are grounded in the four guiding principles - Protection, Promotion, Prevention and Transformation. This has enhanced the policy conceptualization to render it with qualities to contribute to poverty reduction, societal resilience, social cohesion, human capital development, and economic development, which qualify it to contribute to social transformation and development of a modern nation state that recognizes the Constitutional rights of its citizens.

Last but not least, I would like to thank different stakeholder; namely relevant sector Ministries, Agencies, Local Government Authorities, Civil Society Organizations, and Faith Based Organizations through Social Protection Sector Working Group and Social cluster forum, who actively participated in widespread of consultations process in the elaboration of this policy, and I would like to call upon them for continued collaboration not only in resource mobilization, but also in its implementation, notably in mass awareness creation, behavior change communication, research and development as well as monitoring, and evaluation of this policy implementation.

Prof. SHYAKA Anastase Minister of Local Government

EXECUTIVE SUMMARY

1. Background

The right to Social Protection is clearly established within the Constitution of the Republic of Rwanda (2015) as well as a range of international conventions. Following Rwanda's emergence from the trauma of the 1994 Genocide against the Tutsi, deliberate steps have been taken to achieve the realization of these rights. The 2005 National Social Protection Policy called for a transition from "assistance-type interventions" associated with the post-Genocide humanitarian response and recovery phase to the "prevention of risks" and the establishment of a social protection system that delivered "universal protection for all citizens". Over the course of EDPRS1 and EDPRS2, a range of steps were taken to establish, expand and strengthen formal social protection programs which have made significant contributions to the attainment of a range of national development targets and the Millennium Development Goals. The eradication of extreme poverty is now within our grasp and social protection remains critical to achieving this noble objective.

However, the ambition to transform Rwanda into middle-income country by the end of NST1 and deliver high standards of living for all by 2050, as well as the Sustainable Development Goals (SDGs) and AU Agenda 2063, calls for a more ambitious approach to social protection. Indeed, we shall no longer "limit our ambition to the eradication of extreme poverty" but rather aim for "prosperity and wellbeing for everyone." (Extract from a speech by H.E the President of Rwanda at the Human Development Summit on 13th September 2017). Furthermore, there is a need to ensure that social protection responds to Rwanda's changing socio-economic context (including emerging social risks and vulnerabilities), developments within the wider policy context and the evidence has been generated on the impact and effectiveness of different social protection interventions.

This policy therefore aims to set out a vision for Social Protection in Rwanda and guide the continued process of establishing a comprehensive, life-cycle-based social protection system that ensures a minimum level of income security to all Rwandans at critical points in their lives and protects them against a wide range of socio-economic risks while contributing to the social transformation of the society.

The policy is built on four pillars of (i) social security, (ii) social care services, (iii) short-term social assistance and (iv) livelihood and employment support and aims to not only secure the eradication of extreme poverty but also promote human capital development as the foundation for long-term prosperity, breaking the cycle of intergenerational poverty, support the delivery of equitable and inclusive social transformation and development.

The pillars of this policy are grounded in the four guiding principles of Protection, Promotion, Prevention and Transformation. Going forward social protection is conceptualized, not only in terms of its immediate contribution to poverty reduction, but also in terms of its contribution to societal resilience, social cohesion, human capital development, economic development, and the development of a modern nation state that recognizes the constitutional rights of its citizens.

2. Policy development process

This policy was developed by MINALOC in consultation with the full range of institutions and stakeholders. The policy development process included:

- (a) In-depth analysis of the current socio-economic context, drawing on a wide range of national datasets:
- (b) Review of the national, regional and international policy landscape;
- (c) Consideration of empirical evidence emerging on the impact and effectiveness of Rwanda's existing social protection interventions;
- (d) Review of lessons learnt on social protection system development from a wide range of successful middle-income and upper-income countries;
- (e) Extensive consultations with a range of stakeholders including Civil Society Organisations, Local Governments, Civil Servants and Development Partners.

3. Conceptualizing Social Protection

Social protection is commonly conceptualized in terms of protecting and helping those who are poor or vulnerable, such as children, women, older people, and people living with disabilities, the displaced, the unemployed, and the sick (Harvey et al., 2007). More specifically, social protection has also been defined as "all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks and enhance the social status and rights of the marginalized; with the overall objective of reducing the economic and social vulnerability of poor, vulnerable and marginalized groups" (Devereux & Sabates-Wheeler, 2004:) The concepts of 'income security' and a 'minimum standard of living' are also key to most conceptualizations of social protection.

Following on from these international definitions, but adapting to the Rwandan context, this Policy adopts the following formal definition of social protection:

All public and private income transfers schemes, Social Care Services, livelihood support and insurance schemes that, together, ensure that all extremely poor and vulnerable people have income security, a dignified standard of living and are protected against life-cycle and livelihood risks with a view to achieving sustainable graduation and self-reliance.

4. Key issues arising from socio-economic analysis and stakeholder consultations

- i. The need to focus on transformative interventions approaches for greater socioeconomic resilience: Although Rwanda has made great strides in reducing poverty and improving
 standards of living, the 2017 poverty trends report (NISR, 2017) highlighted that exposure to
 livelihood shocks has resulted in highly dynamic consumption among Rwandan households as a
 whole, and among households at the lower end of the consumption distribution in particular. As a
 matter of fact, according to CFSVA (2018), around 40 percent of households were affected by a
 shock, mainly weather-related (irregular rains or drought but also hailstones, floods and
 landslides). Nearly a fifth of households who were not poor in 2010/11 found themselves in
 poverty three years later and around 40% of households overall experienced a decline in their
 position within Rwanda's income distribution between 2010/11 and 2013/14 (NISR, 2017).
 Sustainable graduation has proved elusive for many and this low level of societal resilience
 undermines economic risk-taking, wealth creation, human capital development and social
 transformation.
- ii. Critical role of Social protection in reducing malnutrition: Malnutrition among children (often measured in terms of stunting) is widely recognised to be critical to long-term cognitive and physical development, health and socio-economic prospects. Although a wide range of factors

contribute to malnutrition, low incomes remain a key contributory factor: malnutrition is strongly correlated with consumption/incomes with malnutrition rates in the poorest quintile standing at 48.6% (RDHS, 2014/15). Increasing the responsiveness of Rwanda's social protection system to the risk of malnutrition among children in low income households is therefore a key policy priority, and makes Social Protection Proactive by investing in early years.

iii. **Demand for the expansion of Social Protection to key vulnerable groups.** Social protection is widely recognized as having made a critical contribution to national development over the EDPRS2 period. However, coverage is widely acknowledged to be insufficient: the VUP currently reaches less than half of households in the poorest sectors.

According to CFSVA (2018), it indicates that 32% of food insecure households are in Ubudehe category 1 while there are 19% and 13% in Ubudehe 2 and 3 respectively. Households which are more prone to food insecurity are mostly female headed households, single worker households and the low educated households. A comparison of Ubudehe category and data from CFSVA (2015) also indicated that that only around one third of households with unacceptable food consumption and only 25% of households with a malnourished child receive social assistance (CSFVA, 2015). Representatives of older people and people with disabilities felt that extension of social protection to these vulnerable groups should be prioritized in particular.

- iv. The need to strengthen the promotion of positive values, attitudes and behaviours and increase public awareness and understanding of social protection. Eligibility for many of Rwanda's social protection programs including the VUP and community-based health insurance (CBHI) premium subsidies are closely tied to the Ubudehe classification system. Although Ubudehe remains highly valued as a tool for participatory planning and targeting of certain complementary services, extensive use of Ubudehe classification for targeting multiple social benefits is widely perceived to create perverse incentives and undermine wider efforts to encourage self-sufficiency. Stakeholders specifically called for increased focus on strengthening values and attitudes on issues ranging from self-reliance to increase community support for the vulnerable, domestic violence and the rights of people with disabilities.
- v. Institutions responsible for delivery of social protection are overwhelmed by increasingly complex and fragmented social protection programmes. Institutional capacity for social protection remains limited and has struggled to keep pace with the scale of programming. Furthermore, as the scale and sophistication of social protection programming has increased over time, the fragmentation of social protection across so many national-level institutions have become increasingly challenging for local governments to cope with.
- vi. The need for a more robust response to emerging social vulnerabilities. As Rwandan society changes, old social challenges may be amplified and new forms of deprivation and vulnerability are emerging. Rwanda's Social Care system was perceived by stakeholders to be rather fragmented at both a policy and implementation level and not yet fully equipped to deal with the social challenges that the country faces.

This policy builds on the following conceptual framework as articulated in detail in under figure 2 which indicate that:

• Social protection is protective in that it provides essential support to those living in poverty, protecting them from the worst consequences of poverty;

- Social protection is preventive in that it puts in place a safety net that can be activated to catch people in danger of falling into poverty.
- Social protection is promotive in a sense that that it supports poor peoples' investment so that they can pull themselves out of poverty and graduate from the need to receive social protection.
- Lastly, social protection is transformative in that it aims to improve the social economic status of the society through promotion of positive values, respect for rights and family and community based support systems.

The integration of the protective, preventive, promotive and transformative aspects of social protection will be critical to the success of the policy and relevant implementation strategy.

5. Policy Orientation

This policy is intended to support the realisation of Rwanda's Vision 2050 as well as a range of regional and international medium-term commitments relating to poverty, hunger and social protection system development.

Vision: A resilient and cohesive society with high standards of living for all Rwandans

Mission: to ensure that all extreme poor and vulnerable groups are prevented from vulnerability and shocks, protected and guaranteed transformational interventions towards sustainable graduation.

Overall Objective: to strengthen the national social protection system with a view to ensuring that all Rwandan citizens have a dignified standard of living.

Specific Objectives: The specific objectives of this Policy are:

- i. To ensure minimum income security for all vulnerable groups and people living in extreme poverty, particularly older people, people with disabilities and poor families;
- ii. To ensure that all affected or likely to be affected populations are supported to cope with and recover from disasters and shocks;
- iii. To improve access to social care services for all vulnerable groups such as the elderly and persons with disabilities;
- iv. To improve access and strengthen social services for the old people
- v. To promote economic empowerment and resilience among households living in poverty;
- vi. To promote community engagement in problems solving at individual and community levels through home grown initiatives, such as Ubudehe and other self-help schemes
- vii. To promote positive values, self-reliance, family and community-based support among the communities with a view to achieve social transformation.
- viii. To strengthen institutional capacity for efficiency, effectiveness, evidence-based policy development and accountability for social protection programmes.

To achieve these objectives, we will be guided by the following principles of universalism and inclusiveness; citizen engagement; transparency and accountability; adequacy and affordability; sustainability and gender responsiveness. This policy is embedded in the internationally recognized pillars of social protection which are Prevention; Protection; Promotion and Transformation.

6. Scope of Social Protection programs and services in Rwanda

Social Protection in Rwanda currently includes:

6.1 Social Security

- i) Non-contributory Direct Income Support (DIS) schemes targeting vulnerable individuals and households;
- ii) Mandatory contributory social insurance schemes for those in formal employment;
- iii) Voluntary contributory social security schemes that are regulated by government.
- iv) Maternity insurance
- v) Targeted health insurance subsidies for key vulnerable groups

Although mandatory and voluntary contributory social security schemes are governed by separate policies and associated legislation. Social security in Rwanda shall be considered in a holistic and integrated fashion with a view to ensuring, as soon as possible, universal access to social protection for all Rwandans.

6.2 Short-term Social Assistance

This includes temporary or incidental (one-off) cash or in-kind assistance that addresses short-term or temporary risks or deprivations. Key interventions currently include:

- i) Food assistance/emergency relief for households affected by disasters.
- ii) Incidental (one-off) support provided to households in difficulty by local governments;
- iii) Construction and rehabilitation of shelter for vulnerable households.
- iv) Support to the most vulnerable to cover critical health care costs.
- v) Distribution of essential items to households affected by disasters (drought, floods, landslides etc.);

6.3 Social Care Services

These include provide protection, psychosocial support, referrals and promote social inclusion for the most vulnerable. These services include:

- i) Rehabilitation and reintegration services for PwDs, elderly persons and vulnerable children, women and youth.
- ii) Services that prevent and respond to violence, abuse and exploitation, particularly against women, children, people with disabilities and older people;
- iii)Outreach services for key vulnerable groups providing protection, psycho-social support and referrals to complementary services;
- iv) Services that ensure that children and the elderly persons remain in families.
- v) Public communication and advocacy campaigns on the rights of vulnerable groups.

6.4 Livelihood enhancement and employment promotion

In order to support the attainment of sustainable livelihoods and social transformation among the poor and vulnerable, the social protection sector delivers targeted livelihood development and employment support through multi-sectoral interventions and approached to households with labour, landless and those with land while also facilitating access to programmes and services provided by other sectors. Key products, services and schemes include:

- i) Proximity advisory (caseworker) services;
- ii) Provision of productive assets for income generating activities through multi-sectoral interventions:
- iii) Training and sensitization on Financial literacy & entrepreneurship
- iv) Skills training, particularly for PwDs, vulnerable Youth and Women;

v) Community-based livelihoods support schemes (e.g. Ubudehe projects, Hanga Umurimo).

7. Implementation Framework and Coordination

The Ministry of Local Government (MINALOC) shall maintain the oversight and policy leadership on social protection as a whole, working through specialized social protection agencies and in partnership with other key Ministries in the social protection sector (e.g. MIDIMAR, MINAGRI, MoH, MINEMA etc). Districts will be responsible for the delivery of the majority of social protection programmes in compliance with policy guidance provided by relevant Ministries and Agencies. Civil Society Organisations, the Private Sector, Communities and Development Partners are all expected to play key roles in the implementation of this Policy.

National level policy coordination will be achieved through two key mechanisms: the regular meetings of Social Cluster and the Social Protection Sector Working Group (SPSWG). At District level, JADFs, including the Social Commissions and Social Protection Sub-Commissions, will remain the key forum for ensuring a coordination of government and non-governmental actors in social protection. In collaboration with different stakeholders, MINALOC will draw up multi-year social protection sector strategic plans (SP-SSP) for the implementation of this policy. Targets from these SSPs shall then be incorporated into annual Joint Sector Imihigo frameworks, Single Implementation Plans and budgets. Districts shall also be responsible for integrating SP-SSP activities and targets into their plans, budgets and Imihigo frameworks.

8. Financial implications

The National Social Protection Policy will be implemented through the social protection sector strategic plan which requires an estimated budget of Frw 121,000,000,000 every fiscal year for the period 2020-2024. Financing shall continue to be provided through a mixture of general government revenues, employee contributions, employer contributions and funds mobilized from the private sector, communities and development partners.

Financing for social protection shall continue to benefit from specific statutory provisions and adequate financing shall be provided to ensure full realization of specific legal entitlements. Over time, financing for social security shall increasingly draw on employee and employer contributions.

9. Implications of Policy Implementation

Legal implications: There are no immediate legal implications of this Policy. However, it may over time be appropriate to determine, from time to time, the implementation arrangements for key social protection programmes in legislation.

Impact on business and the economy: Implementation this policy is intended to support sustainable and equitable economic development. The key transmission mechanisms for include: increased resilience to life-cycle and climate-related shocks and subsequently, increased wealth accumulation within and across generations; increased demand for goods and services in poor communities due to increased purchasing power resulting from the expansion of social protection schemes; reduced child malnutrition and, subsequently, improved health, cognitive development and economic productivity; increased access to skills training and other employment services among the most vulnerable; increased financial inclusion and savings among low income households.

Impact on equality, unity and reconciliation: Strengthening the national social protection system is expected to directly contribute to reducing inequality and promoting social inclusion, cohesion and participation as the foundations for unity and reconciliation.

1. INTRODUCTION TO SOCIAL PROTECTION POLICY

The right to social protection is clearly established within the Constitution of the Republic of Rwanda (2015) as well as a range of international conventions. Following Rwanda's emergence from the trauma of the 1994 Genocide against the Tutsi, deliberate steps have been taken to achieve the realization of these rights. The 2005 National Social Protection Policy called for a transition from "assistance-type interventions" associated with the post-Genocide humanitarian response and recovery phase to the "prevention of risks" and the establishment of a social protection system that delivered "universal protection for all citizens". Over the course of EDPRS1 and EDPRS2, different policies and strategies were implemented to establish, expand and strengthen formal social protection programs which have been shown to have made significant contributions to the attainment of a range of national development targets (e.g. reducing extreme poverty and inequality) and the Millennium Development Goals. As the year 2020 has reached and NST1, eradication of extreme poverty is now within our grasp and social protection remains critical to achieving this noble objective.

However, our ambition to transform Rwanda into middle-income country by the year 2020 and deliver high standards of living for all by 2050, as well as the Sustainable Development Goals (SDGs) and AU Agenda 2063, and embedded in the National Strategy for Transformation (NST) calls for a more ambitious and robust approach to social protection. Indeed, we shall no longer "*limit our ambition to the eradication of extreme poverty but rather aim for prosperity and wellbeing for everyone*" (Extract from a speech by H.E the President of Rwanda at the Human Development Summit on 13th September 2017). Furthermore, there is a need to ensure that social protection responds to Rwanda's changing socio-economic context (including emerging social risks and vulnerabilities), developments within the wider policy context and the evidence has been generated on the impact and effectiveness of different social protection interventions. Going forward social protection shall be conceptualized, not only in terms of its immediate contribution to poverty reduction, but also in terms of its contribution to societal resilience, human capital development, socio-economic development, social cohesion and the development of a modern nation state that recognizes the Constitutional rights of its citizens.

This policy therefore aims to set out a vision for Social Protection in Rwanda and guide the continued process of establishing a comprehensive, life-cycle-based social protection system that ensures a minimum level of income security to all Rwandans at critical points in their lives and protects them against a wide range of socio-economic risks. It is built on four pillars of (i) social security, (ii) social care services, (iii) short-term social assistance and (iv) livelihood and employment support and aims to not only secure the eradication of extreme poverty but also promote human capital development and social transformation as the foundation for long-term prosperity and support the delivery of equitable and inclusive development.

1.1. Key concepts in social protection: vulnerability and resilience

Although 'poverty' and 'vulnerability' are often used inter-changeably, they do in fact have different meanings. Poverty is a condition of deprivation and, although widely recognized to be multidimensional in nature, is usually defined with reference to an officially defined level of income or consumption. This is known as a poverty line. Most countries identify their own unique poverty

lines, either in absolute or relative terms. International poverty lines may also be set for to allow multi-country comparative analysis.

On the other hand, 'vulnerability' describes a person or household's capacity – or lack thereof – to withstand shocks and cope with risks, with a view to maintaining their standard of living and wellbeing. People who lack capacity to withstand moderate shocks to their incomes or assets are vulnerable to significant declines in welfare including decline in their income consumption to a level that falls below the official poverty or extreme poverty line. Vulnerability is thus both a cause and a symptom of poverty. In the context of this strategy, key vulnerable groups in Rwanda include, for example, low income and/or labour-constrained individuals or households such as older people, people with disabilities, members of female-headed households etc.

The contrasting concept to vulnerability is that of 'resilience', which refers to the capacity of a household to maintain a standard of living and well-being in the face of adversity. Social protection aims to address vulnerability and risk by building resilience – helping people to withstand the internal and external risks and shocks that push people into, or keep them trapped in, poverty. Social protection also aims to reduce the need for households to resort to coping strategies that undermine their long-term productivity or human capital development, such as selling productive assets, reducing consumption of food or withdrawing children from school.

1.2. Definition of Social Protection

Social protection is commonly understood as "all public and private initiatives that provide income or consumption transfers to the poor, protect the vulnerable against livelihood risks and enhance the social status and rights of the marginalized; with the overall objective of reducing the economic and social vulnerability of poor, vulnerable and marginalized groups" (Devereux & Sabates-Wheeler, 2004:). Key target groups typically include children, women, older people, people living with disabilities, the displaced, the unemployed, and the sick (Harvey et al., 2007). Although there is considerable variation in the practical definitions used by individual countries and international institutions, the concepts of 'income security' and a 'guaranteed minimum standard of living' remain central to most conceptualizations of social protection.

For the purposes of this policy, social protection can therefore be defined as:

All public and private income transfers schemes, social care services, livelihood support and insurance schemes that, together, ensure that all extremely poor and vulnerable people have income security, a dignified standard of living and are protected against life-cycle shocks and livelihood risks with a view to achieving sustainable graduation and self-reliance.

1.3. Scope of Social Protection programs and services in Rwanda

Social Protection in Rwanda currently includes:

Social Security

- i. Non-contributory Direct Income Support (DIS) schemes targeting vulnerable individuals and households:
- ii. Mandatory contributory social insurance schemes for those in formal employment;
- iii. Voluntary contributory social security schemes that are regulated by government.
- iv. Maternity insurance
- v. Targeted health insurance subsidies for key vulnerable groups

Although mandatory and voluntary contributory social security schemes are governed by separate policies and associated legislation. Social security in Rwanda shall be considered in a holistic and integrated fashion with a view to ensuring, as soon as possible, universal access to social protection for all Rwandans.

Short-term Social Assistance

This includes temporary or incidental (one-off) cash or in-kind assistance that addresses short-term or temporary risks or deprivations. Key interventions currently include:

- i. Food assistance/emergency relief for households affected by disasters.
- ii. Incidental (one-off) support provided to households in difficulty by local governments;
- iii. Construction and rehabilitation of shelter for vulnerable households.
- iv. Support to the most vulnerable to cover critical health care costs.
- v. Distribution of essential items to households affected by disasters (drought, floods, landslides etc.);

Social Care Services

These include provide protection, psychosocial support, referrals and promote social inclusion for the most vulnerable. These services include:

- i. Rehabilitation and reintegration services for PwDs, elderly persons and vulnerable children, women and youth.
- ii. Services that prevent and respond to violence, abuse and exploitation, particularly against women, children, people with disabilities and older people;
- iii. Outreach services for key vulnerable groups providing protection, psycho-social support and referrals to complementary services;
- iv. Services that ensure that children and the elderly persons remain in families.
- v. Public communication and advocacy campaigns on the rights of vulnerable groups.

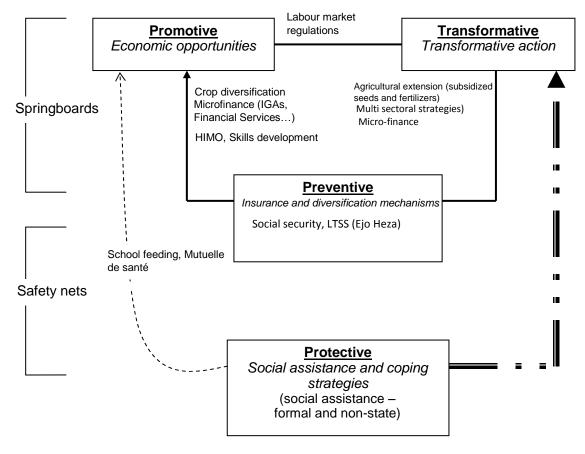
Livelihood and employment support

In order to support the attainment of sustainable livelihoods and social transformation among the poor and vulnerable, the social protection sector delivers targeted livelihood development and employment support through multi-sectoral interventions and approached to households with labour, landless and those with land while also facilitating access to programs and services provided by other sectors. Key products, services and schemes include:

i. Proximity advisory (caseworker) services;

- ii. Provision of productive assets for income generating activities through multi-sectoral interventions;
- iii. Training and sensitization on Financial literacy & entrepreneurship
- iv. Skills training, particularly for PwDs, vulnerable Youth and Women;
- v. Community-based livelihood support schemes (e.g. Ubudehe projects, Hanga Umurimo).

Figure 1. Conceptual Framework for Social Protection



Adopted from Devereux & Sabates-Wheeler, 2004

The figure above depicts the different elements which are in line with Rwanda Vision for social protection which incorporates the important four principles. To begin with, social protection is **protective** in that it provides essential support to those living in poverty, protecting them from the worst consequences of poverty. Such support includes social assistance programs and core social protection programs such as direct income support, public works, disability allowances etc.

Secondary, social protection is **preventive** in that it puts in place a safety net that can be activated to catch people in danger of falling into poverty. E.g. As a result of falling ill. Specific interventions include community health insurance, long term saving scheme (Ejo Heza), social security schemes, insurance schemes etc.

Thirdly, social protection is **promotive** in a sense that that it supports poor peoples' investment so that they can pull themselves out of poverty and graduate from the need to receive social protection. Such interventions include skills development, public works (HIMO) to build skills and boost household incomes, income generating activities to promote off farm activities and other subsidized schemes such as fertilizers and seeds to households with ability to invest farm activities and linkages with market opportunities.

Last but not least, social protection is **transformative** in that it aims to improve the social economic status of the society through promotion of positive values, respect for rights and family and community based support systems. Access to labour market opportunities and linking poor households or communities which are more prone economic and life cycle shocks, to socio-economic opportunities is of paramount importance as part of the mechanisms of empowering the communities towards self-reliance.

The integration of the protective, preventive, promotive and transformative aspects of social protection will be critical to the success of the policy and relevant implementation strategy.

SOCIAL SECURITY Direct Income Support Mandatory Social insurance Health insurance subsidies for Voluntary savings schemes regulated by government vulnerable groups SOCIAL CARE SERVICES **LIVELIHOOD &** Protection of women, children, **EMPLOYMENT** PwDs and older people More resilient SUPPORT and productive Needs assessment and referrals individuals. **Employment** Needs assessment families and / skills and referrals Psycho-social support communities support Targeted asset Institutional care and placement of transfers children and youth Sensitisation & Financial Proximity Advocacy and rights literacy **Advisers** promotion Disaster relief Shelter construction / Support for emergency rehabilitation health costs Cash and in-kind short-term assistance provided by local governments SHORT-TERM SOCIAL ASSISTANCE

Figure 2. Operational scope of social protection in Rwanda

1.4. The role of social protection in national development

Social protection has a critical role to play in reducing poverty, extreme poverty and inequality in all societies and is a key reflection of a societal and political commitment to the promotion of inclusive development and social justice. Social Protection helps stabilize assets, incomes and capabilities in the face of a wide range of life-cycle, economic and environmental shocks, thereby enabling households to take economic risks, make investments and accumulate wealth over time, including across generations.

A strong social protection system is therefore a key to improving resilience and self-reliance in society as a whole, and among lower income households in particular. Social protection also enables investment in the nutrition and education of children at a critical stage in their development, ensuring that they grow up to be productive and self-sufficient adults. Social protection also reduces social exclusion and isolation and helps ensure equitable access to critical social services which underpin human development.

Over the life time of this policy, and in line with Vision 2050, Rwanda aims to develop a comprehensive, sustainable life-cycle-based social protection system that delivers a minimum level of income security to all Rwandans at critical points in their lives and protects them against a wide range of socio-economic risks. However, achievement of the goal of universal access to social protection is an incremental process that needs to be deliberately pursued. It is imperative that approaches to targeting and benefit generosity be assessed subject to change reflecting the wider socio-economic development process.

It is also worth noting that Social Protection alone is insufficient to secure significant reductions in poverty, vulnerability and inequality. Therefore, a wide range of social and economic policies and multi sectoral interventions and approaches in health, education, agriculture, skills development, nutrition etc.) have critical complementary roles to play. The eradication of extreme poverty and the gradual transition towards a poverty free Rwanda will require well-coordinated multi-sectoral policies and programs.

1.5. Lessons from other national Social Protection systems

There is an enormous body of academic and policy literature on social protection from which a number of key lessons can be drawn. Key issues that are pertinent to the future development of Rwanda's social protection system are discussed below:

i. Social Protection remains a priority even after countries achieve middle income status

It is sometimes assumed that public investment in social protection reduces once extreme poverty rates have declined and countries have attained middle income status. A review of the situation in a wide range of middle income countries confirms that, on the contrary, expansion of national social protection systems remains critical to sustaining poverty reduction, reducing inequality and promoting human capital development. For example:

- Mauritius began establishing its comprehensive social protection system as early as 1958, when it was still a low income country, and this early commitment was a critical factor in the country's rapid socio-economic development. Today Mauritius maintains a non-contributory Basic Pension covering all older Mauritians aged 60 years and above, as well as a Basic Disability Pension, a care-giver's allowance and child benefits for children of people with disabilities. Mauritius now achieves the second highest level of human development in Africa (UNDP, 2016).
- South Korea significantly expanded its social protection system following the 1997 Asian Financial Crisis. Key programmes include the National Basic Livelihood Security System (NBLSS) which provides income support to members of poor households that are able to work, conditional on participation in vocational training, counselling and job placements. South Korea also provides a Basic Old Age Pension for around 67% of older people aged 65 years and above (OECD, 2014) as well as a means-tested disability pension, with benefit levels varying according to level of disability.
- South Africa has a comprehensive non-contributory social protection system providing social
 pensions, disability benefits, child support grants, expanded Public Works employment. For
 example, the Child Support Grant has been shown to have significant positive impacts on child
 malnutrition, school attendance and educational attainment (UNICEF, 2012).
- Brazil provides a non-contributory pension to around 6 million poor and vulnerable older Brazilians and has been shown not only to be critical to ensuring minimum standards of living among older people but also to preventing the families of older people from falling into poverty (Barrientos, 2003).
- Cash transfers have the potential increase the rate of economic growth. In Zambia, households that had received three years of transfers were spending 67 percent more than the size of the transfer. This suggests a multiplier effect. Households are able to convert every dollar received in transfers into much more than a dollar's worth of income through both agricultural productions and off-farm activity (Handa et al .2018).

Equally important to note is that non-contributory social protection programmes in all of the above countries co-exist with contributions-based social security mechanisms.

Nonetheless, it is widely recognised at an international level that tax-financed schemes continue to be needed irrespective of the level of socio-economic development and that contributory and non-contributory social protection programmes are complementary. This mixed approach to financing social protection is essential for both financial sustainability and broad-based protection against a range of life-cycle related risks with a view to improving societal resilience, minimizing poverty and inequality and enabling human capital development and wealth accumulation across generations.

ii. The global transition towards a life-cycle approach to social protection system design

In the early stages of the development of national social protection systems, countries used targeted programs to reach the poorest households. However, as social protection systems mature, demand to improve effectiveness tends to lead social protection systems to be shaped to address the root causes of poverty by addressing the risks and challenges associated with different stages of the lifecycle. So,

over time the majority of social protection investment tends to be directed at addressing vulnerability associated with childhood, disability, unemployment, old age and widowhood with only a small proportion set aside as general poor relief to 'catch' the relatively small number of households that experience poverty despite the presence of the life-cycle-based system. Life-cycle based systems are preferred as they are relatively simple to administer, have close linkages with concepts such as citizenship and tend to avoid the perverse incentives associated with other approaches to targeting social protection benefits.

Such a process of transitioning towards lifecycle social protection systems is underway in many developing countries and was foreseen in Rwanda's National Social Protection Policy of 2005.

Commonly, countries initially prioritize non-contributory old age pensions as the starting point for the development of a life-cycle based system before moving onto disability allowances and child support grants.

The lifecycle approach also underpins the approach of the Social Protection Floor, which has been promoted by the United Nations as an effective strategy for delivering the Sustainable Development Goals. The Social Protection Floor sets out four basic social security guarantees for the elderly, people with disabilities, children and the unemployed and provides a minimum level of protection for the vast majority of poor families as well as those who are vulnerable to falling into poverty.

iii. Social protection rarely undermines incentives to work and often increases household productivity

While social protection programs may lead perverse incentives like dependency, graduation and attitude towards work, evidence from lower and middle income countries suggests this is usually not the case, although impacts in this regard vary according to programme type and context.

For example, participation in South Africa's Child Support Grant and Social Pension has been shown to increase labour market participation among the direct recipient (in the case of mothers receiving the Child Support Grant) or other household members (in the case of the Old Age Pension).

Indeed, across a wide range of contexts, well-designed and implemented social protection programmes have been shown to promote investment in economic activities at the household level as well as long-term human capital development that underpins economic development, productivity and prosperity.

iv. Strengthening management of Social Protection programmes

Strong oversight of social protection programs is very critical and as such, inefficiency in management, delivery and accountability mechanisms are catalytic to the success of the programs.

Leveraging new technologies to deliver transfers to recipients to improve reliability and accessibility of payments, reduce costs and fiduciary risk and increase access to basic financial services is very important in programme design and implementation.

2. SITUATION ANALYSIS

Rwanda has made great strides in reducing poverty and malnutrition and improving standards of living, as demonstrated by its achievement of most of the Millennium Development Goals. Strong economic growth, expanded access to social protection, improved agricultural productivity as well as a commitment to good governance underpin all of these achievements. Nonetheless, significant socio-economic challenges remain which need to be addressed by social protection, among other areas of public policy.

2.1. Poverty, vulnerability and resilience in Rwanda

The 2016/17 Integrated Household Living Conditions Survey (EICV5) showed that poverty reduced from 39.1% in 2013/14 to 38.2% in 2016/17 whereas extreme poverty dropped from 16.3% in 2013/14 to 16.1% in in 2016/17. Meanwhile, the Gini-coefficient declined from 0.448 in 2013/14 to 0.429 in 2016/17, confirming a significant reduction in inequality. However, national statistics conceal significant geographic disparities. Western and Southern provinces remain disproportionately affected by poverty compared to the rest of the country and, while rural areas have witnessed considerable reductions in poverty as a whole (NISR, 2017).

EICV 5 shows that almost one fifth (19.2 %) of individuals in Rwanda were in poverty in all three years (2010/11, 2013/14 and 2016/17), while 38.1 % did not experience poverty at any of these times (never poor). About one person out of five persons experienced two spells of poverty over the three waves and about one of four persons fell into poverty in one spell out of three.

More precisely, 42.8 % changed their poverty status at some point between 2010/11 and 2016/17, also shows that that 45.3 % of the poor in 2010/11 were out of poverty in 2016/17 and 21.2 % of the non-poor in 2010/11 fell into poverty in 2016/17. This demonstrates the dynamic nature of poverty and how households can be vulnerable due to exposure to different shocks or how households once provided with safety nets or other support mechanism can get out of poverty and the resilience of certain types of households.

2.2. Malnutrition and the importance of income security

Malnutrition among children (often measured in terms of stunting) is widely recognised to be critical to long-term cognitive and physical development, health and socio-economic prospects. The first 1,000 days of life are particularly critical as, if children do not receive adequate care and nutrition at this time, they are at high risk of life-long disadvantage.

In Rwanda, malnutrition has declined significantly from 51.1% in 2005 to 38% in 2014/15, although somewhat slower than is necessary to achieve Vision 2020 targets. Reducing malnutrition is therefore a key government priority, with a range of interventions in place, or being introduced, to fast-track the achievement of Vision 2020 targets. Although a wide range of issues need to be addressed (e.g. uptake of ante- and post-natal care services, feeding and child care practices, personal hygiene and access to improved water and sanitation facilities), low incomes remain a key contributory factor. Market purchases are the main source of food for most households (on average 70 percent of food is bought at the market, while only a quarter comes from the own production) and in this context low purchasing power results in persistent food security challenges and adequate diets among low income households in particular. Indeed, malnutrition is strongly correlated with consumption/incomes with malnutrition rates

in the poorest quintile standing at 47% (RDHS, 2014/15). Increasing the responsiveness of social protection system to the risk of malnutrition among children in low income households is therefore a key policy priority.

Coordinated interventions are required to improve food security and nutritional practices and to increase access to clean water and good sanitation.

2.3. Vulnerability across the life-cycle

Figure 2 provides an overview of the generic risks faced by individuals at different points in the life cycle. However, it is important to note that deprivation at one life stage can lead to enhanced vulnerability later in life. For example, malnourishment in childhood undermines cognitive development and can therefore result in lower educational attainment. Lower educational attainment is, in turn, likely to result in a higher risk of unemployment or under-employment in adult life and, finally, poverty in old age.

Life-cycle risks tend to increase dependency within households and the vulnerability of one member can have profound negative implications for other members. For example, children's increased susceptibility to illness and subsequent need for care and medical services can undermine the earning capacity of adult members of the household. Similarly, the enhanced susceptibility of older people to illness and disability, as well as the reduced labour productivity associated with old age, can lead to reduced household income and increased likelihood that children in the household are malnourished or withdrawn from school.

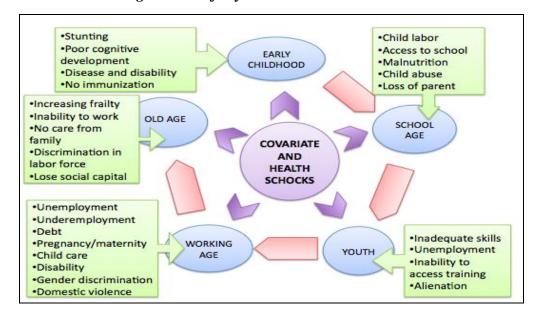


Figure 3: Vulnerabilities throughout the life cycle

2.1.1. Childhood

Children's vulnerability to poverty remains primarily determined by the socio-economic status of their carers (parents or otherwise). Children are more likely to live in low income households than the general population and the depth and severity of poverty among children is also greater. As noted above, poverty and low incomes are strongly correlated with malnutrition which can undermine a child's long-term development. Children from extremely poor households are more likely to engage in some form of labour, which can even be hazardous, resulting in lower attendance at school and poorer educational

achievements due to absenteeism. This raises the need to address the root-causes of poverty and vulnerability at the community and household levels to ensure families have the resources to meet their basic needs while also having the capacity to prioritize time for parenting responsibilities. Gender roles becomes an important aspect of parenting as traditionally, women tend to bear the burden of parenting and as such, the provision of social services to enable parents to combine family obligations with work responsibilities and their participation in public life is a critical policy option for this policy. The inclusion of women headed households as a target groups, also aligns with the UN human rights mechanisms, which emphasize that a woman should benefit directly from social security programmes and participate in all community activities.

It becomes even more complicated for extremely poor households when their children have congenital or acquired physical, intellectual and/or sensory impairments. They become exposed to a range of vulnerable to a range of deprivations as a result of limited access to social services, negative social attitudes to disability and lack of understanding of their needs by their carers. Low income families may also lack the resources to provide children with complex impairments with the care and support that they need and, as a result, many children with disabilities remain in institutionalised care, thereby deprived of the benefit of a family and community participation.

2.1.2. Vulnerability in youth and adulthood

The ability to engage in productive employment is a primary factor contributing to vulnerability in youth and adulthood and there are a variety of risk factors that can affect an individual's ability to work. These are set out below:

Access to employment and income generating activities

Vulnerability among working-age adults is primarily determined by access to employment and other income earning opportunities. EICV5 reports that, in 2014, 79% of heads of household got at least some income from farming, and by 2017 this had fallen to 76%; the proportion getting income from other independent non-farm activities also fell, from 24% to 21%. However, more people worked for wages, either on farms (up from 32% of heads in 2014 to 38% in 2017) or in non-farm employment (rose from 38% to 40%). The labour market participation also remains highly gendered with less than 10% of women engaged in off-farm wage employment compared to over 30% of men. Meanwhile around 65% of women are usually engaged in independent farming compared to only 49% of men. Female-headed households are also less likely to have access to key agricultural inputs, raise livestock, take out loans for productive purposes or to use irrigation than their male counterparts. Differences in educational status among men and women are likely to be a key factor here: on average, only 50 percent of female heads of household have some education compared to around 76 percent of male heads (WPF, 2015).

Care responsibilities

Care for dependents (children, older people, the sick and people with disabilities) has significant economic implications for households, and for low income households in particular. In fact, average dependency ratios among households in the poorest two quintiles are 54% higher than in the wealthiest two quintiles suggesting a significant economic burden that is preventing many households from escaping poverty. Indeed, over 13% of households contain someone over the age of 65 years and analysis of Ubudehe data suggests that at least 9% of all households contain a person with disabilities while analysis of EICV4 data suggest that around 18% of poor households contain someone with disabilities. In the absence of an effective system of social protection for the elderly, people with disabilities and children, support provided by working families to them, and by women in particular, can be extremely costly. It is for this reason that the SDGs have called for social protection systems to recognise informal, unpaid care

work. The burden of care is particularly high among the 27% of households in Rwanda that are headed by women, 70% of whom are widows. These households tend to have fewer working members and higher levels of food insecurity than male-headed households (31% among female headed households compared to 21% among male-headed households).

Illness impacts on families in two ways: if a working member falls ill, household productivity reduces while family expenditures increase to cover the cost of treatment (transport to health facilities, copayments for drugs at Government health centres and payment for treatment in private health facilities). The CFSVA found that almost 9% of Rwandan households had been affected by serious health illness or accidents in the year prior to the survey, leading to reduction of incomes in almost 96% of the affected households (WFP, 2015). Chronic illnesses affect all income groups, but the impact on poor households is particularly sharp and can lead to a spiral of deeper poverty as illness leads to loss of labour capacity and eventually death – most often of adults in the economically active age group. Less severe forms of illness (such as fever and diarrhoea) are particularly prevalent among children, with 41% of children reported as being ill in the two weeks prior to the 2015 CFSVA survey (WFP, 2015), significant disruption to the economic activities of working families, particularly female-headed households with few working members.

Disability among the working age population

Analysis of the Ubudehe dataset confirms that over 250,000 people between the ages of 16 and 65 are unable to work due to disability. Disability fundamentally undermines the productive capacity of an individual, undermines their ability to access services and is also associated with additional costs such as increased need for public transport, medical care, assistive devices and other services. Causes of disability include congenital conditions, injury and accidents (including in the workplace), and disease. Disability among women is more commonly caused by disease while accidents and injury are more common among men (NISR, 2012). 13% of households in Rwanda are headed by a person with disabilities (WFP, 2015), of which around 25% are food insecure compared to only 9% of households headed by people without disability.

2.1.3. Vulnerability in old age

Older people, defined internationally as those aged 60 years and over, represent 5.1% of the Rwandan population, with 59% of older people being women and 41% being male. Social protection programmes, however, tend to define old age from 65 years which comprises around 3.2% of the population. While this is a relatively small proportion of the population, people aged 65 years and above are present in over 13% of Rwandan households, thereby having significant implications in terms of burden of care for a large proportion of the population.

In Rwanda, as elsewhere, old age is associated with increased susceptibility to ill-health, disability and subsequently reduced productivity: one in five older people report experiencing disability compared with only one in twenty people aged under 60 years of age (NISR, 2012b).

Despite the challenges associated with old age, limited access to any form of pension means that most older people are forced to remain economically active well beyond 60 years of age. EICV 5 also shows that older people have significantly lower levels of education than younger age groups as well as lower access to basic services and they continue to have a caring responsibility. The enhanced vulnerability of older people and households containing older people is reflected in the fact that around 67% of households containing older people are classified in the poorest 2 Ubudehe categories, compared to only

52% of Rwandan households as a whole. Of those in category households, VUP reaches 85,542 households by old persons aged 65 years and above.

Other issues related with old age include lack of adequate care from family, increasing fraility and poor health, loneliness and social isolation/social capital, inability to work and discrimination in labor force. It is important to note that ageing prepardness is humpered mainly by a big number of workers operating in informal sector, thereby not expecting any pension benefits to sustain them in old age.

2.4. Cross-cutting sources of vulnerability

2.4.1. Vulnerability to climate- and weather-related risks

According to the 2015 CFSVA, drought/irregular rains are the most common form of shock facing Rwandan households, affecting almost 10% of households annually. Other climate- and weather-related shocks include floods, landslides which affect a much smaller proportion of the population but may have very severe consequences. In almost all cases, the shocks caused a reduction in income (96 percent of cases) and in the majority of cases a reduction in assets (77%). There is significant regional variation in exposure to these types of shocks. Southern and Eastern Provinces have the highest percentage of households that had experienced drought or irregular rains, 15 and 14 percent, respectively while, in certain districts as many as half of all households experienced rainfall conditions that affected their ability to provide for themselves.

EICV5 shows that 43% of poor, and 34% of non-poor, households reported facing a shock over the previous year. A quarter of those who faced shocks said that it was related to farming, but substantial numbers of households mentioned the problem of high food prices, and issues related to health (including a death in the family).

2.4.2. Legacy of the 1994 Genocide against the Tutsi

Even 25 years after its perpetration, the Genocide against the Tutsi persists as a source of vulnerability for a large number of Rwandans. Genocide-related vulnerabilities in Rwanda are profound, wide-ranging and include: disability and chronic health conditions; psychological trauma; high rates of orphan hood; extreme vulnerability among older people who lost their families and prospective careers, and the disruption of livelihoods and loss of assets among displaced families. Indeed, many households in Rwanda, including recent returnees and demobilized ex-combatants and soldiers, are still in the process of reintegrating into communities and re-establishing their livelihoods.

2.4.3. Social Protection and Access to Land

Most of the extreme poor and poor households reside in rural areas and depend on agriculture or farm labour. According to household profiling data (LODA, 2019), 31% of households in Rwanda do not own land, of which, 6% are in the lowest Ubudehe category and 10% in Ubudehe category 2. Access to and use of land is a very important for rural households in improving their livelihoods. However, owning land or addressing land issues does not address the underlying causes of food insecurity and vulnerability. Information about land can help in providing targeted assistance for the poor and vulnerable people which not only 'protects them', but also helps them to 'graduate' out of the need for assistance.

Even so, for some households with land, it does not take away the need for social protection especially when they have no labour in their households. It is important therefore to promote linkages between social protection and agriculture, food security, nutrition, and resilience building. The strategies put in place shall ensure that households with no land are facilitated to access livelihood enhancement schemes

such as skills, income generating activities, financial services and financial literacy, graduation packages that respond to their needs and be able to establish an asset base and eventually accumulate productive assets of which land is included. They will be facilitated and promoted to initiative off farm activities Households with land but have no means of making it productive will be facilitated through multi sectoral interventions and proximity advisory services.

2.4.4. Key challenges to reach the most vulnerable

The key challenges that this policy shall address among others include:

According to EICV5 report, the social protections thematic report on VUP indicated that VUP reached 4% of the households in Rwanda. Of this coverage, VUP public works covered 1.9% of the households, Direct support 1.3% and financial services 1.1% (EICV5). Additionally, 5.3% coverage of the case load is in rural areas against 0.3% coverage of households in urban areas. This may imply that poverty or for that case extreme poverty is more concentrated in rural areas, partly due to using Ubudehe data as a proxy for extreme poverty, however, the issue of urban poverty also needs to be addressed.

- ❖ Geographical and household coverage: Despite the significant scale-up of the VUP, coverage remains low compared to needs. By end of 2016/17, only around 50% of households in Ubudehe 1 were covered by Direct Income Support schemes¹ and only around a quarter of older people and People with Disabilities have access to any form of old age or disability pension or other form of Direct Income Support.²
- ❖ Existing social protection programmes do not always reach the poorest and most vulnerable: Social protection is widely recognized among a wide range of stakeholders as having made a critical contribution to national development over the EDPRS2 period. However, coverage is widely acknowledged to be insufficient: the VUP currently reaches less than half of households in the poorest Ubudehe category and data from the CFSVA (2015) also suggests that only around one third of households with unacceptable food consumption and only 25% of households with a malnourished child receive social assistance (CSFVA, 2015). Representatives of older people and people with disabilities felt that extension of social protection to these vulnerable groups should be prioritized in particular. Proposals to expand Direct Income Support schemes and year-round, flexible public works to improve the gender- and nutrition responsiveness within the social protection system were also widely welcomed. Exclusion of extremely poor labour-constrained households (particularly female-headed households caring for young children or people with disabilities) from VUP Public Works has been a long-standing challenge in the social protection sector.³
- ❖ Targeting of social protection benefits and other subsidies: Ubudehe is a home-grown socioeconomic categorization mechanism. It remains the most valued tool for participatory planning at household and community level. It has also been used a targeting mechanisms for determining eligibility for some key social protection programmes including VUP public works, direct support, community health insurance and certain other social service and complementary services. However, key issues related with Ubudehe being used a targeting tool has at times become a disincentive in program implementation and during different stakeholder consultations and policy dialogue, one of the concerns is that has caused a dependency mindset among households classified in the lowest category due to multiple benefits provided using Ubudehe classification. Stakeholder consultation also highlighted the need to use Ubudehe categories primarily for

¹ The VUP reached 227,477 households out of 467,099 in Ubudehe category 1. This may slightly under-estimate coverage as FARG and RDRC do not record the Ubudehe classification of their Direct Support beneficiaries. However, given the limited scale of FARG and RDRC Direct Support schemes, this under-estimation is expected to be very minor.

² At end FY2016/17, pensions and Direct Support schemes provided by RSSB, VUP, FARG and RDRC covered approximately 156,000 older people and PwDs.

³ Only 5% of VUP PW participant HHs are headed by a PwD compared with 9.2% nationally.

participatory planning at household and community level and social and complementary programmes can use Ubudehe information to supplement programme specific guidelines and targeting tools based on the needs and vulnerabilities of individuals and households and communities rather than their household categories.

- ❖ Coverage and effectiveness of social security schemes: Around 20% of people aged 18-64 are enrolled in a contributory social security scheme. However, the vast majority of these are in the richest quintile (NISR, 2015) and this calls for extending social security to the informal sector.
- ❖ Adequacy of social care services: Over the past few years, an embryonic Social Care system has begun to emerge and notable progress was registered mainly in the following areas: adoption of a professional social workforce for children, establishment of Isange one-stop centers, the establishment of rehabilitation centers for people with disabilities; the establishment of rehabilitation centers for delinquent youth and an associated family placement/reintegration system. Nonetheless, the capacity of Social Care system to prevent and respond to an increasingly complex range of social vulnerabilities remains limited.
- ❖ Availability of proximity advisory services: community based proximity services have contributed greatly to achievement of different sectoral and national targets. These include community health workers, farmer's promoters, friends for the family and most recently VUP case workers who mandated to support extremely poor households to access relevant services, coach households and monitor household welfare.
- ❖ There is a need for a more robust Social Care response to issues such Sexual and Gender-based Violence (SGBV), inclusion of people with disabilities and delinquency among children and youth. As Rwandan society changes, old social challenges may be amplified and new forms of deprivation and vulnerability are emerging. Social deprivation, such as exposure to Sexual and Gender-based Violence (SGBV) and delinquency are not only critical to address in their own right but also as important contributing factors to persistent poverty and malnutrition. Rwanda's Social Care system was perceived by stakeholder to be rather fragmented at both a policy and implementation level and not yet fully equipped to deal with the social challenges that the country faces.
- ❖ Availability of complementary services and interventions to support graduation from extreme poverty: A wide range of complementary services exists to strengthen household livelihoods. These programmes are critical to supporting the eradication of extreme poverty and reducing poverty as they provide support which enables households that have recently exited extreme poverty to continue a positive development trajectory with a view to becoming more resilient to shocks and more self-reliant.
- ❖ Social protection and sustainable graduation out of poverty. It is widely recognized that social protection alone is insufficient to bring households or individuals out of poverty, however, evidence shows that social protection can create pathways out of poverty and can create household resilience against life cycle shocks. This is so because social protection can be a safety net and can also act as a springboard out of extreme poverty. To achieve this, it is important to ensure that beneficiaries of social protection and other complementary programmes have extensive support and access to social services and other economic opportunities such as productive assets grants or subsidies, skills training and knowledge transfer, access to micro finance, coaching and facilitated access to economic opportunities. Of course, access to basic services such as health care, water, sanitation, electricity and social care as well as access to markets is critical for maximizing household productivity.

- ❖ Graduation: With all the resources and investments injected in the social sectors, significant challenges remain in creating an enabling environment for sustainable graduation from extreme poverty. In the first instance poor and vulnerable households are not always adequately reached by the existing livelihood development programs. For graduation to be realized, the multi sectoral interventions targeting the poorest households in the lowest Ubudehe categories needs to be strengthened and well-coordinated. For households benefiting from such packages, graduation will be realized by households in a period of two years, unless there is 'force majeure. The main critical success factors for graduation to happen is graduation timeline of 2 years, proximity advisory services and performance contracts by eligible beneficiaries. Special attention shall be given to households or individuals who have no labour such as disabled persons, elderly, children, and others who fall under this description.
- ❖ Institutional capacity and harmonization: Public sector restructuring and reforms results in a significant improvement in local government capacity. The introduction of introduction of computerized Management Information Systems (MIS) also facilitates the delivery mechanisms and timely monitoring of implementation. However, just as institutional capacity has increased, so have the scale, complexity and demands for performance and accountability within social protection programs. Capacity gaps ae particularly apparent at Sector and Cell level. Furthermore, social protection programs are increasingly fragmented (thereby further increasing the burden on local governments) and this calls for strengthened harmonization and coordination of programs to achieve efficiency gains.
- ❖ Lack of updated legal instruments to address issues of persons with disabilities, elderly and other vulnerable groups.

2.4.5. Elderly Persons

In the recent years, Rwanda has made very rapid improvements in life expectancy and total fertility as a result of significant investments in the health system and reductions in poverty. Despite this positive demographic trend, this poses an additional challenge on how to support an aging population and a changing demographic profile, to meet both SDGs and Rwanda's Vision 2050 commitments.

Elderly persons are facing a big number of challenges. Among them are:

- ❖ The number of elderly Persons is growing very fast, and elderly Persons are consistently and disproportionately among the poorest of the poor. As result, ageing has become a crosscutting issue of critical significance to wider poverty alleviation strategies. Poverty and poor living conditions characterize the lives of the most elderly Persons. There is need for a more responsive social protection system that cater for the elderly Person's needs. Additionally, any credible anti-poverty strategy must help elderly Persons maintain themselves and contribute to their families and communities.
- ❖ There was observed an issue regarding the benefict from pensions, whereby the pension benefit provided are not matching the current standards of living and is calculated without taking into consideration the indexation. There is a need to review pensions scheme to adresse the issue of indexation.
- Ageing prepardness is humpered mainly by a big number of workers operating in informal sector. At their retirement age, they don't expect any pension benefits. The Government should put much effort in institutionalizing the Long term saving sheeme to reach a big number of informal workers to save for their retirement age. In informal sector, there should be installed "Salaire Minimal Interprofessional Grantie-SMIG" system in allocation of salaries.

- ❖ Dominant tendecny influence of external culture lifestyles in which the respect for the elderly persons is diminishing.
- ❖ There is a tendency for considering the elderly Persons as a burden to the family as well as to the Country by ignoring their role should play in socio-economic and cultural development.
- The elderly Persons structures should be organized from Cell, Sector to District for their advocacy thus a establishmement of committee for elderly Persons is needed to ensure proper Coordination
- ❖ There is a need to strengthen community awareness towards equitable access to services, inclusion, participation, and rights of elderly Persons
- ❖ Loneliness or social isolation are observed as heavy challenges for elderly persons.

This policy will therefore address some of the challenges that people in old age face through:

- Creating awareness among the community members as to ensure physical, economical and psychological preparedness for elderly Persons
- ❖ Improving the health and quality of life of elderly Persons.
- Providing elderly Persons with protection and care through appropriate support services
- Promoting positive values for intergeneration relationship
- Through the establishment and distribution of accessible social services tailored to the needs of the elderly, there is potential to reduce and even eliminate many of these difficulties, which not only affect the elderly, but also their families and the society in general.

Table 1: Household composition by location and presence of older people

	All households			Only households with Older Persons		
	Urban	Rural	Total	Urban	Rural	Total
Older Persons only	0.7	2.05	1.84	7.96	14.44	13.77
Older Persons & working age	2.01	2.3	2.25	22.89	16.18	16.88
Older Persons & working age & children	5.51	7.12	6.87	60.7	50.0	51.12
Older Persons & children	0.74	2.75	2.43	8.46	19.37	18.23
Working age & children	69.57	75.72	74.74			
Working age only	21.38	9.93	11.75			
Missing	0.09	0.12	0.12			
Total	100	100	100	100	100	100

Source: (NISR, 2014)

In order that the cohort of people in old age are not left behind, social protection schemes such as direct income transfer will continue to target extremely poor and vulnerable older people. Other cross sectoral policies such as the health sector policies, policies on family, culture, just to mention a few should aim to adddress the concerns of the elderly persons in their entirety.

Currently, social protection schemes have attempted to address old age vulnerability through access to services and programmes such as VUP programme which provides some additional support to extremely poor older people (defined as those in Ubudehe category 1, who are 65 years and above) who live in household with no labour capacity (i.e. no working age household members).

Despite the fact that VUP Direct Support is operational in 416 sectors and is expected to reach 100% of the eligible extreme poor old persons, there remains a coverage gap. Analysis of coverage data shows that only 40% of eligible older people living without any working-age adults - who should have been eligible for the programme as a result of their extreme poverty and lack of other support—were actually being reached by Direct Support.

Over the medium term, options of introducing categorical targeting approach to social protection provision in the form of a universal social pension, to meet the needs of current older people will be explored to align to SDGs requirements and Vision 2050.

To attain universal coverage, the implementation of long-term savings promotion for the informal sector will help to meet the pension and asset protection needs of the next generation of older people.

2.4.6. Persons with Disabilities

Historically, Person with Disabilities (PWDs) have struggled to live and enjoy their rights in the same way as those without disabilities. Negative beliefs, stereotypes, and attitudes were directed towards PwDs by members of their families and communities in whom they live. Disability was and is still seen by some people as a curse, burden, witchcraft or punishment from God. Many children with disabilities (CwDs) were and in many cases are still seen as misfortune to their families. Parents or siblings do not want them to be seen by other people so as to not, as they say, bring shame to the whole family. CwDs are kept indoors by members of the family because they do not want others to know that they live with a person with disability. Persons with disabilities are addressed by the type of their disabilities not their names. All of these beliefs and actions prevent PwDs from enjoying their full human rights.

The Fourth Rwanda Population and Housing Census (2012 RPHC) reports revealed that There are 446,453 PwDs in Rwanda Out of which 221,150 are male and 225,303 are female. When excluding children under five, for whom the identification of activity limitations poses problems, the disability prevalence rate is 5%. There is only a small difference by gender, with a prevalence rate of 5.2% for males (aged 5 and above) and 4.8% for females. Approximately 20% (87,900) of the population of persons with disabilities are children between the ages of five and eighteen. There is no data for children under the age of five. A higher poverty incidence is seen among households headed by a person with a disability (50%) than among households headed by a person with a disability (44%).

The PWDs are facing many challenges related to mainstreaming, accessibility and budget limitation. It was noted that there is a cultural perception that confuses *handicap*, *disability or impairment* by referring to all interchangeably as '*Ubumuga*'. Rwandan service providers focussed their attention on the inability or impairment of a person with disability instead of focusing on the removal of barriers that restrict his or her participation or handicap as required by the UNCRPD, which the country has signed.

Furthermore, there are more challenges identified and that need further remedial measures to sustain the right of PWDs:

- There are loopholes in mainstreaming disability across different sectors mainly in health, education, social protection, agriculture, infrastructure, employment, justice, child protection and sports and leisure.
- ❖ Poverty and poor living conditions characterize the lives of many children and adults with disabilities. There is need for a more responsive and inclusive social protection system that includes a guaranteed income for PwDs.
- NCPD often faces a challenge to hold accountable other institutions to comply with laws and regulations for proper mainstreaming of PwDs.

- ❖ Institutions that provide care, support, and welfare to PwDs face human capacity gaps across all sectors.
- There is considerable concern that Children with Disabilities' special needs are not adequately prioritized
- There is a need to strengthen community awareness and sensitivity towards equitable access to services, inclusion, participation, and rights of PwDs.

2.4.7. Review and Ubudehe categorization

The policy also addresses issues of effectiveness of targeting through the review of the current Ubudehe categories with a view to: spur graduation and self-sufficiency for transformation; deter the dependency mind set; reduce citizens discontent associated with the current Ubudehe categorization and to streamline the implementation of social protection programs; to resuscitate Ubudehe as a home grown solution and increase community ownership; to update household socio-economic data/characteristics and to align categorization with evidence based profiling data.

The proposed Ubudehe categories have been designed basing on the following principles:

- i) Ubudehe categorization shall use objectively verifiable criteria based on the household profiling data to put households into categories based on socio-economic characteristics;
- ii) The set criteria are labour capacity, income that is earned from net salary, earnings, businesses, service offered or any productive asset such as land, livestock and rentals. These were selected as proxies for income and livelihood determinants as they can be physically verified during the categorization process;
- iii) Households in category A & B are expected to be partners in community development through their investments and skills that create jobs and corporate social responsibility;
- iv) Households in category C & D (category with labour capacity and low income) will benefit from a range of targeted social protection interventions based on their socio-economic profiles.
- v) Households in category E (Special Category) are not expected to graduate and shall benefit from full state social protection package.
- vi) It is expected that with multi-sectoral interventions, time for graduation from one category to another will be in a period of 2 years, unless there is 'force majeure'.

A standalone policy for Elderly Persons and Persons with Disabilities and their related implementation strategies have been developed. Also a detailed Ubudehe review and categorisation document and its detailed implementation modalities have been developed.

2.5. Legal and policy context

2.5.1. Constitutional provisions and international commitments

The right to social protection is clearly recognized by the Rwandan Constitution of 2003 and revised in 2015 which specifies the State's obligations with regards to social protection as follows:

• Article 10, sub-article 5 commits the government to "building a State committed to promoting social welfare and establishing appropriate mechanisms for equal opportunity to social justice;

- Article 50: Welfare of needy survivors of the genocide against Tutsi: The State, within the limits of its means and in accordance with the law, has the duty to undertake special actions aimed at the welfare of the needy survivors of the genocide against Tutsi;
- Article 51: Welfare of persons with disabilities and other needy persons: The State has also the duty, within the limits of its means, to undertake special actions aimed at the welfare of the persons with disabilities
- The State has also the duty, within the limits of its means, to undertake special actions aimed at the welfare of the indigent, the elderly and other vulnerable groups.

Furthermore, this policy also reflects Rwanda's ratification (or other form of formal commitment to):

- The Universal Declaration of Human Rights (article 25) which stipulates that "Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control."
- The International Covenant on Economic, Social and Cultural Rights (ICESCR); the Convention on the Elimination of Discrimination against Women (CEDAW); the Convention on the Rights of the Child (CRC); and, the Convention on the Rights of Persons with Disabilities.
- The **UN Convention on the Rights of Persons with** Disabilities (UNCRPD) of 2008 promotes, protects and ensures the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities and to promote respect for the inherent dignity.

The Global Disability Summit commitments (London, July, 2018) around the following themes:

- Tackling stigma and discrimination
- Inclusion in education
- * Routes to economic empowerment
- Harnessing technology and innovation
- ❖ Convention 102 of the International Labour Organization (ILO) which provides a widely accepted framework for social protection systems. As a member of ILO, Rwanda has committed to the goal of "universal access" to social protection in order that all older people, children and people with disabilities enjoy income security.
- The 2030 Agenda for Sustainable Development which specifically commits the Government of Rwanda to:
 - i. Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable and,
 - ii. Recognize and value unpaid care and domestic work through the provision of public services, infrastructure and social protection policies and the promotion of shared responsibility within the household and the family as nationally appropriate.
- The **AU Agenda 2063**, including the first 10-year plan which sets the following targets for the development of national social protection systems by 2023:
 - i. At least 30% of vulnerable populations including persons with disabilities, older persons and children provided with social protection;

- ii. All persons working in the formal sector are provided with social security and at least 20% of the informal sector and rural labor to have access to social security.
- iii. A minimum social protection package for vulnerable groups to be developed by 2016 and resources ring-fenced in national budget by 2017.
- The AU Social Policy Framework for Africa (2008) which commits member states to adopt minimum social protection policies covering the following: essential health care, social insurance, social welfare, employment guarantee and non-contributory cash transfer schemes for children, informal workers, the unemployed, elder persons and persons with disabilities.
- EAC Vision 2050 commits member states to review and harmonise their national social security policies, laws and systems to provide for social security for self-employed persons who are citizens in line with Article 12 (2) of the EAC Treaty. Article 5(2) (c) and Article 10 (3) (f) also provide a strong basis for social protection within the framework of the EAC.

2.5.2. National policy framework

Vision 2020 and 2050. Vision 2020 seeks to fundamentally transform Rwanda into middle-income country by the year 2020. Vision 2020 sets out a wide range of targets of relevance to social protection including: average per capita income of at least US\$1240; a Gini coefficient of no more than 0.350; a poverty rate of no higher than 20%; and a chronic malnutrition rate of no more than 15%. As 2020 approaches, Rwanda has embarked on developing Vision 2050 which will aim to deliver high income status and high standards of living for all by 2050. Medium-term national and sectoral strategic plans are expected to proactively and deliberately pursue this long-term development agenda.

The National Social Security Policy (2009) commits Rwanda to a vision of Social security coverage for all and makes a firm commitment to "develop all necessary programs and mechanisms aimed at universal social security coverage. This means that all Rwandans will be covered with maximum benefits possible for retirement and key pre-retirement benefits such as housing and education, for professional risks benefits, sickness benefits, maternity benefits, health care, and eventually unemployment benefits when social and economic conditions will allow this last branch to be implemented." The policy also set specific coverage objectives for different branches of social security, namely pension, occupational hazards, medical care and sickness leave, as well as maternity leave.

The Social Security Policy also acknowledges that, although contributory social security coverage will expand as with formal sector employment, the Government, must take additional steps to cover the poor, vulnerable and workers in the informal sector. The Policy goes on to acknowledge the importance of non-contributory social security schemes such as social pension schemes aimed at providing a basic level of universal coverage to the elderly.

The Integrated Child Rights Policy (2011) is aligned to the Convention on the Rights of the Child and is a comprehensive national document detailing Rwanda's vision and commitment to all children. It was developed to strengthen the thinking and analysis around policies related to children and the coordination and implementation of Government activities for realization of children's rights. The policy notes the responsibility of the government for supporting families to provide good care for their children and the responsibility to 'put in place a national child protection system, a monitoring system including mechanisms for data management, formal reporting, referral and response.

The National Early Childhood Development Policy (2016) clearly articulates the role of social protection in supporting Early Childhood Development (ECD) and specifically calls for the government to:

- i. Ensure ECD interventions are mainstreamed into social protection programmes to support poor and vulnerable families and children. This includes ECD related cash incentives to vulnerable families"
- ii. Identify families struggling to maintain their children and provide support for their care. Specific attention will be given to single parents (adoptive or biological)/ guardians. Various social protection measures in cash/kind are to be explored.
- iii. Prioritize children in the design and implementation of programs for poverty reduction, such that child poverty is eliminated within a stipulated period of time.
- iv. Explore provision of direct support to families in difficult circumstances, child headed households, orphans and other vulnerable children."

The **National Delinquency Policy** (2016) aims to reduce the prevalence of delinquency among the children, youth and adults through sustainable and home-grown restorative approaches through a) the establishment of a conducive environment and opportunities to pre-occupy and prevent children, youth and adults from indulging into delinquent behaviors; b) the rehabilitation of delinquents; and c) strengthening existing and new reintegration and follow-up mechanisms, that prevents potential recidivism.

3. POLICY ORIENTATION

This policy is intended to support the realisation of Rwanda's Vision 2050 as well as a range of regional and international medium-term commitments relating to poverty, hunger and social protection system development.

3.1. Vision

A resilient and cohesive society with high standards of living for all Rwandans

Vision for Social Protection System in Rwanda by 2050

Rwanda aims to achieve a high standard of living for all citizens by 2050. A comprehensive social protection system will be critical to realizing this vision and should include the following aspects:

- i. All workers in the formal sector will be enrolled in a social security scheme which provides a comprehensive range of retirement and pre-retirement benefits;
- ii. All older people in Rwanda will have a pension income that guarantees a minimum standard of living in old age, be it from a basic state pension or a private pension scheme;
- iii. All people with disabilities will have a disability pension that guarantees a minimum standard of living. Financial support will be provided to care-givers so that people with disabilities can remain in a family/community setting;
- iv. A child benefit will ensure that all families are able to meet their children's basic needs and that all children have a good start in life;
- v. A comprehensive Social Care Service will ensure the protection and inclusion of the most vulnerable, particularly vulnerable children, women, older people and people with disabilities;
- vi. Mechanisms will be established to support the unemployed and linked to a comprehensive set of services to support unemployed people to find suitable employment;

The above vision of the Rwanda's social protection system will be realized incrementally, with approaches to eligibility and benefit generosity evolving over time in line with fiscal capacity.

3.2. Overall objective

The overall objective of this policy is to strengthen the national social protection system with a view to ensuring that all Rwandan citizens have a dignified standard of living.

3.3. Specific Objectives

The specific objectives of this Policy are:

- a) To ensure minimum income security for all vulnerable groups and people living in extreme poverty, particularly older people, people with disabilities and poor families;
- b) To strengthen contribution of social protection to reducing malnutrition;
- c) To ensure that all affected or likely to be affected populations are supported to cope with and recover from disasters and shocks;
- d) To improve access to Social Care Services for all vulnerable groups;
- e) To improve access and strengthen service for the Elderly persons;
- f) To Promote universal design standards and regulations across different sectors, health, education, social protection, agriculture, infrastructure, employment, justice, child protection, ICT and sports and leisure.
- g) To promote economic empowerment and resilience among households living in poverty by creating an enabling environment for sustainable graduation;
- h) To promote positive values, self-reliance, family- and community-based support for the vulnerable.

3.4. Policy actions

For each policy actions outlined in this policy is linked with its specific strategic actions/ interventions with are the following:

1. To ensure minimum income security for all vulnerable groups and people living in extreme poverty, particularly older people, people with disabilities and poor families, we will:

- Strengthen contributory and non-contributory social protection mechanisms to ensure that all older people and people with disabilities have a dignified standard of living. This will be done through the
- introduction of old age disability grant
- Establish the legal instruments to address the issues of elderly persons, Persons with disabilities and other vulnerable groups.
- Expand coverage of poor and vulnerable children to ensure their basic needs are met and that their physical and cognitive development is protected and promoted at the most critical stage in their life;
- Ensure that social protection schemes reach the most vulnerable, labour-constrained households, food insecure households and households with caring responsibilities;
- Strengthen social protection's contribution to sustainable graduation by expanding coverage of vulnerable groups at high risk of falling into poverty.

2. To strengthened contribution of social protection to reducing malnutrition; we will

- Implement Nutrition-Sensitive Direct Support scheme targeting extremely poor pregnant women and infants under the age of five years 2 years of age)
- Design behavioral change communication strategy targeting the extremely poor and specifically pregnant women and mothers of children under 2 years to accompany VUP implementation.

3. To ensure that all affected or likely to be affected populations are supported to cope with and recover from disasters and shocks, we will:

- Strengthen mechanisms for detecting, alert and prevention of disaster and shocks;
- Strengthen institutional capacity for poverty and vulnerability analysis;
- Strengthen capacity of local governments for design and implementation of disaster risk reduction interventions;
- Leverage short-term infrastructure public works schemes also known as HIMO to build community resilience to, and support recovery from, climate- and weather-related shocks. This will include supporting extremely poor and vulnerable households to establish groups and/or cooperatives to implement public infrastructures projects associated with integrated development program, marshland reclamation, afforestation to increase employment opportunities for extremely poor and vulnerable households in rural areas and specifically to areas at high risk or vulnerable to food insecurity to address unemployment among vulnerable youth and women.
- Strengthen the provision of short-term social assistance (including food and other basic needs, essential medical care and shelter/housing etc.) to households affected by shocks, natural disasters.

4. To improve access to Social Care Services for all vulnerable groups, we will:

- Strengthen a comprehensive and integrated community-based services for vulnerable groups, especially children, older people and people with disabilities;
- Strengthen interventions that prevent delinquency while also strengthening capacity for delivery of rehabilitation and reintegration services for delinquent children and youth;
- Strengthen coordination with specialist civil society-based service providers working in the fields of child protection, gender-based violence and disability rights among others.
- Reinforce protective measures against violence, neglect, abuse and discriminatory practices to elder Persons
- Strengthen partnership with Private sector and civil society, Faith Based Organization on establishment of elderly care centres and development centers
- Strengthen social care system tailored to the needs of elder Persons (in gerontology and geriatrics, palliative and hospice care)

5. To improve access and strengthen services for the Elderly Persons, we will:

- Create awareness among the community members as to ensure physical, economical and psychological preparedness for elderly Persons;
- Improve the health and quality of life of elderly Persons;
- Provide the elderly Persons with protection and care through appropriate support services;
- Promote positive values for intergeneration relationship;

- Promote universal design standards and regulations across different sectors, health, education, social protection, agriculture, infrastructure, employment, justice, child protection, ICT and sports and leisure.
- Increase advocacy to other concerned sectors to set standards and regulations in line with accessibility and inclusiveness of PWDs

6. To promote social transformation, economic empowerment and resilience among households living in poverty by creating an enabling environment for sustainable graduation; we will:

- Review Ubudehe categorization that shall use objectively verifiable criteria based on the household profiling data to put households into categories;
- Develop graduation strategy whereby graduation package, graduation measurement and tracking will be defined.
- Strengthen multi-sectoral coordination of livelihood development interventions to support sustainable graduation from extreme poverty;
- Strengthen system and mechanisms of household profiling and social registry;
- Promote livelihood diversification among low income households through skills development, business start-up support, employment support services, affordable financial services, savings and business development advisory services;
- Increase employment opportunities for poor and vulnerable households and ensure that Local Economic Development (LED) Strategies and LED investment planning processes actively support sustainable graduation through the creation of employment opportunities and infrastructure that supports household production, micro-enterprise development and human capital development;
- Improve infrastructure and basic services for extremely poor and vulnerable households through mainstreaming graduation into planning and performance management frameworks for basic infrastructure and social service sectors. This to include greater use of data on geographic distribution of poverty and also district with high risks of food security;
- Roll-out subsidy scheme to increase access of subsidies to households based on their needs to address household resource gaps in order to create household resilience.

7. To promote positive values of self-reliance, respect for rights and family- and community-based support for the vulnerable, we will:

- Strengthen national and local level public communications and community sensitization campaigns on positive values, self-reliance, family- and community-based support;
- Strengthen the culture of self-reliance and cooperation and generating own solutions to problems faced:
- Strengthen targeting mechanisms within social protection programs to ensure that they incentivize household productivity and family cohesion;
- Strengthen the use of Home Grown Solutions to promote positive values for supporting the most vulnerable;
- Expand partnerships with CSOs for community mobilization /sensitization and promotion of community-based savings and credit mechanisms and income generating activities;
- Promote corporate social responsibility as well as faith- and community-based charitable initiatives.

- **8.** To strengthen coordination, Monitoring and evaluation institutional capacity for efficiency, effectiveness, evidence-based policy development and accountability for social protection programs. we will:
 - Strengthen national and local-level technical capacity on social protection, ensuring that relevant institutions have the required structures, staff, expertise and systems required to provide effective policy leadership and sector coordination;
 - Strengthening mechanisms for extreme poverty analysis and evaluation of social protection programmes;
 - Strengthen data collection and dissemination on extreme poverty and vulnerability;
 - Strengthen inter- and intra-sectoral coordination mechanisms at all levels for SP programs;
 - Strengthen monitoring and evaluation systems for social protection including ensuring access to high quality ICT tools for planning and management of social protection programs;
 - strengthen sensitization on social protection delivery and beneficiary's responsibilities as well as
 enhancing accountability mechanisms for both service providers and social protection
 beneficiaries.

3.5. Guiding principles

In the implementation of the above policy actions, we shall be guided by the following principles:

Universalism and inclusiveness: All eligible citizens shall be guaranteed a minimum package of social protection services within the limits of Government means with a view to ensuring that all Rwandan citizens achieve a dignified standard of living;

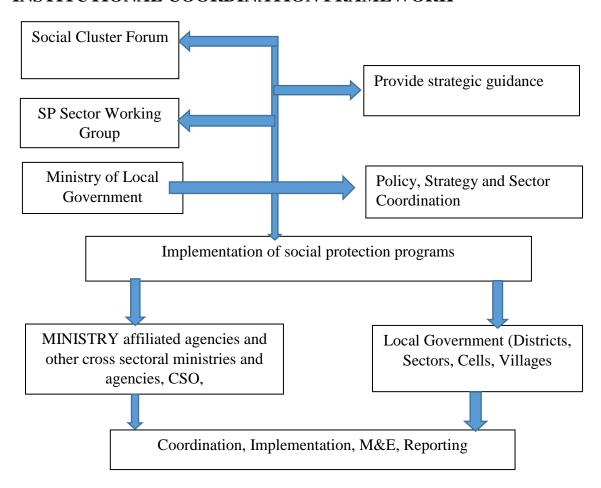
Equity: Fairness and justice shall underpin the provision of social protection services across different demographic categories and geographical locations;

Transparency and accountability: Fairness and openness shall be emphasized in the provision of social protection services. Duty bearers and institutions implementing social protection interventions be accountable for their performance;

Adequacy, affordability, and sustainability: Social protection programs will be adequately provided to eligible beneficiaries within the limits of Government's means;

Gender Responsiveness: All social protection interventions shall address specific needs and vulnerabilities for both girls and boys, women and men.

4. INSTITUTIONAL COORDINATION FRAMEWORK



At National level

Inter-sectoral coordination will be achieved through two key mechanisms: the regular meetings of 'Social Cluster' Ministers and Permanent Secretaries and the Social Protection Sector Working Group SPSWG). The Social Cluster meetings will provide a high-level forum for consultation on key policies, strategies and programmes prior to their submission to Cabinet, as well as monitoring of implementation of Presidential pledges, post Cabinet Actions, National Dialogue and Leadership Retreat resolutions.

MINALOC leads the Social Protection Sector at national level. Given the significant increase in scale and complexity of social protection programming envisaged in this policy, staffing and structure at MINALOC will be kept under regular review to ensure it remains equipped to provide the required strategic leadership to the social protection sector.

The Social Protection Sector Working Group shall remain the primary forum for technical-level interministerial and inter-agency coordination at national level. The SPSWG will continue to be led by MINALOC and a designated development partner shall be designated as the co-chair. The SPSWG will also be restructured to create dedicated technical working groups or sub-committees focusing on all key elements of this policy, namely: social security; social assistance; social care services; linkages for graduation and malnutrition; financing and institutional development. The precise configuration of these technical working groups or sub-committees will be determined in in consultation with stakeholders.

The SPSWG's responsibilities will include:

- Ensuring the implementation and monitoring of the social protection strategy, including providing regular six-monthly reports on progress
- Making recommendations on annual budgets for all activities set out in the strategy
- Monitoring the execution of social protection budgets across government
- Monitoring all social protection initiatives across government

Overseeing analytical work undertaken by Ministries on social protection

Given its cross-cutting role and relationship with local governments that are responsible for delivery of most social cluster services, including social protection, SPSWG shall be chaired by MINALOC and its role in the Social Cluster be more prominent. This is also intended to strengthen the flow of information from the SPWSG through MINALOC to the Social Cluster meetings.

At decentralized levels

At District level, JADFs, including in the Social Commissions and Social Protection Sub-Commissions, will remain the key forum for ensuring a coordination of government and non-governmental actors in social protection. Every year, development partner and non-governmental actors will present to District authorities a detailed plan of their social protection interventions in the District, disaggregated for each sector. The JADFs will ensure that these programmes are aligned with District development priorities and a District wide plan of social protection activities by Governmental and non-governmental actors will be elaborated as part of the District Development Plan. This process will be facilitated by the secretary to the District JADF, who is supported by the Rwanda Governance Board.

At Sector level, the Sector administration shall be responsible for coordinating social protection interventions, working through Cell and Village level structures as necessary.

4.1. Roles and responsibilities

MINALOC shall be responsible for:

- Developing and disseminate sector policies, strategies and programmes
- Developing legal frameworks
- Developing institutional and human resource capacities, including assessing and building the capacities of decentralised entities
- Monitoring and evaluate the implementation of sector policies, strategies and programmes
- Overseeing the functioning of social protection institutions supervised by the Ministry
- Promoting effective intergovernmental relationships,
- Mobilising resources for sector activities, including promoting partnerships for joint development efforts by stakeholders at local level.
- Strengthen the Social Protection Sector Working Group
- Developing multi-year SP sector strategic plans
- Mobilising resources for policy implementation

<u>Social Protection Agencies</u> (currently LODA, FARG, NRS, NCPD, NECDP, NCC, NIC, and RDRC) will be responsible for:

- Translating sector policies and strategies into detailed operational guidelines for programme delivery
- ensuring quality delivery of their respective programmes by decentralised government.
- ensuring that effective M&E mechanisms are in place and that the findings of routine monitoring and impact assessments inform practical improvements in programme design.
- Oversee programme financial management
- Ensure that frontline staff in Districts and Sectors are properly inducted and trained and have the skills required to deliver programmes.

MIGEPROF will:

- oversee programmes implemented by NCC as well as Social Care Services delivered by local governments.
- Over policy and programme implementation by <u>National Early Childhood Development Programme</u> which will play a key role in ensuring, through technical support and strengthening coordination, that the social protection sector maximizes its contribution to addressing malnutrition.

<u>Ministry of Agriculture</u> – often working through the <u>Rwanda Agricultural Board</u> (RAB) will be responsible for:

- Proactively coordinating agricultural support programmes with the core social protection programmes under the multi sectoral approaches and interventions geared towards the livelihoods and graduation programs.
- Reviewing agricultural policies and programmes to maximise their contribution to reducing poverty and vulnerability
- Building the capacity of local governments to deliver relevant high quality agricultural support services to poor and vulnerable households.

The Ministry of Emergency Management (MINEMA)will:

• Coordinate all interventions from key stakeholders in disaster risk reduction and management and refugee affairs.

• Oversee the development and implementation of District Disaster Management Plans (DDMP), disaster management policies and the Law relating to the disaster management in Rwanda.

The Ministry of Health (MoH)

• Proactively work with the social protection sector to establish robust coordination mechanisms between local health services and nutrition-sensitive social protection initiatives.

The Ministry of Education (MINEDUC) and its associate agencies (Rwanda Education Board and the Workforce Development Authority will be responsible for ensuring that education and skills development policies, programmes and services include and address the needs of the poor and vulnerable, with a specific focus on women, youth and people with disabilities living in low income households.

<u>The Ministry of Public Service & Labour (MIFOTRA)</u> will support the social protection sector's efforts to ensure that appropriate structures and staffing are in place at national and decentralised levels to enable efficient and effective implementation of social protection programmes.

The <u>Ministry of Finance and Economic Planning</u> (MINECOFIN) will coordinate with concerned organizations to implement and mobilize resources necessary to finance SP-SSP implementation. MINECOFIN will also ensure that financial management systems enable sufficiently detailed tracking of social protection expenditures to enable accountability for resources and evaluation of value-for-money in social protection sector investments.

<u>NISR</u> will ensure that its various surveys capture data on poverty, vulnerability and resilience to inform policy-making and will also support the evaluation of key social protection interventions through the inclusion of 'oversamples' within national surveys as agreed.

<u>Districts</u> will be responsible for the delivery of the majority of Rwanda's social protection programmes in compliance with guidelines provided by national institutions. Although precise responsibilities will vary according to the nature and design of the various social protection interventions, commons responsibilities are expected to include:

- Identification and selection of beneficiaries
- Case management
- Coordination of interventions at local level
- Coaching and sensitization of social protection beneficiaries
- · Recruitment and management of frontline social protection staff
- Narrative and financial reporting to social protection agencies and central Government
- Handling complaints and appeals about targeting and programme delivery issues
- Channeling feedback from the field on programme delivery challenges and recommendations for design improvements to agencies and central Government.

The Private sector will:

- Ensuring compliance with mandatory social security obligations;
- Creating jobs for the poor that respect labour standards;
- Offering a range of appropriate financial services including savings and insurance;
- Providing the technical skills required for the design of more complex public works projects and the skilled labour to work alongside unskilled public works beneficiaries in implementation
- Providing technological solutions to key social protection delivery challenges/instruments;
- Supporting effective communications in the sector drawing on the positive experience of m-health internationally;

 Creating revenue-generating investment opportunities for pension and other formal social security funds.

Government will work increasingly in collaboration with the private sector in delivering social protection objectives and will explore new opportunities for partnerships.

Civil society and faith-based organizations have key roles in social protection in Rwanda, including in:

- Service delivery: particularly with regards to Social Care Services and complementary programmes related to livelihood development and nutrition. Whilst most CSO projects are reaching only small numbers of people, the large number of active CSOs means that their collective contribution to service delivery will be substantial.
- Sensitization of citizens on social protection rights and responsibilities and supporting citizens to hold service providers to account: civil society organisations are encouraged to actively empower citizens to understand their rights and responsibilities, to monitor service delivery quality and proactively engage with duty bearers where service delivery is found to be wanting.
- **Innovation:** Many NGOs are piloting new approaches in Rwanda, often drawing on lessons from international experience. Lessons from such pilots will be used to inform the on-going improvement of existing Government SP programmes.
- Participation in policy and programme development: Given their experience of delivering services at community level, civil society organisations are encouraged to participate in policy formulation and programme development and evaluation processes.

Key civil society networks will be permanently represented on the SPSWG. At District levels, civil society organisations intervening in the social protection sector will continue to actively participate in JADFs, including in the Social Commissions and Social Protection Sub-Commissions (once established), helping to ensure a coordinated approach to social protection delivery.

Communities will be responsible for:

- Engaging in participatory planning processes to identify community and household needs
- Validating the eligibility of individuals and households for social protection programmes, where appropriate
- Raising complaints with service providers an open and constructive manner
- Promoting positive values and attitudes related to self-reliance, solidarity and protection of the most vulnerable
- Engaging in Disaster Risk Reduction to protect themselves against environmental risks
- Mobilising available resources to support vulnerable households
- Participating in evaluations of programmes and provide other forms of feedback to policy makers and programme managers

<u>Development Partners</u> will provide technical and financial support to the development of the social protection system, ensuring that support is aligned with national policy and strategic priorities.

5. PLANNING AND FINANCING ARRANGEMENTS

In collaboration with partners, MINALOC will draw up multi-year Social Protection Sector Strategic Plans (SP-SSP) for the implementation of this policy. Targets from theses SSP shall then be incorporated into annual Joint Sector Imihigo frameworks, Single Implementation Plans and budgets. Districts shall

also be responsible for integrating SP-SSP activities and targets into District Development Strategies (DDSs), budgets and District Imihigo frameworks.

Financing for Social protection shall continue to be provided through a mixture of general government revenues, employee contributions, employer contributions and funds mobilized from the private sector, communities and development partners. Financing for social protection shall continue to benefit from specific legislative provisions and adequate financing shall also be provided to ensure full realisation of legal entitlements (for example relating to health insurance subsidies for vulnerable groups). Over time, financing for social security shall increasingly draw on employee and employer contributions.

6. IMPLICATION OF POLICY IMPLEMENTATION

6.1. Legal implications

There are no immediate legal implications of this Policy. However, it may over time be appropriate to determine the implementation arrangements for key social protection programmes in legislation.

6.2. Impact on business and the economy

Implementation this policy is intended to support sustainable and equitable economic development. The key transmission mechanisms for this are expected to include:

- a) Increased investment opportunities to make productive investments among low income households from reception of safety nets and protect the most vulnerable households from extreme poverty.
- b) Increased resilience to life-cycle and climate-related shocks and subsequently, increased wealth accumulation within and across generations.
- c) Increased demand for goods and services in poor communities due to increased purchasing power resulting from the expansion of social protection schemes.
- d) Reduced child malnutrition and, subsequently, improved health, cognitive development and economic productivity.
- e) Reduced juvenile delinquency and public expenditure on rehabilitation services.
- f) Increased access to skills training and other employment services among the most vulnerable.
- g) Increased financial inclusion and savings among low income households.

In general, Social protection programmes play two potential roles in sustained economic growth. First, they increase the inclusivity of growth. Not all economic growth is equally effective at reducing poverty.

Safety nets also protect the most vulnerable households from extreme poverty and give them opportunities to make productive investments. Cash transfers if well implemented can reduce inequality and improve the quality of life for the poorest households.

6.3. Impact on equality, unity and reconciliation

Strengthening the national social protection system is expected to increase the inclusivity of growth. Not all economic growth is equally effective at reducing poverty there by promoting social inclusion and participation as the foundations for unity and reconciliation. In particular, this policy has been specifically designed to:

a) Deliver on key obligations related to the role of the state in providing social protection as provided for in the Rwandan Constitution

- b) Providing a tangible demonstration of Rwanda's commitment to equal opportunities, prosperity and wellbeing for all
- c) Promoting positive values of national and community solidarity
- d) Reduce the risk of social tensions associated with the targeting of social protection schemes
- e) Reduce vulnerability and juvenile delinquency

7. MONITORING AND EVALUATION

The M&E system comprises three main elements: monitoring; impact evaluation; and focused analytical work.

7.1. Sector monitoring arrangements

Regular monitoring of sector performance will continue to be carried out through the Joint Sector Reviews which take place twice a year (backward and forward looking). These reviews will assess performance against indicators and policy actions contained within this strategy and others agreed over time by the SPSWG.

All social protection sector institutions will review their internal M&E systems to ensure that they are able to deliver reliable and timely data on all SP-SSP indicators to the JSRs. An integrated Social Protection MIS (which was expected to be operational by end 2017/18) that will compile data from programs and institutions across the sector.

7.2. Sector evaluation framework

A sector-wide M&E framework was developed in 2016 including a sector-wide theory of change, log frame, evaluation matrix and implementation framework. This should be reviewed by the SPSWG to ensure alignment with this SP-SSP and on at least an annual basis thereafter. Key evaluation activities to be conducted over the course of this SP-SSP include:

- i. Impact evaluation of the VUP shall continue to be conducted through analysis of the 'VUP oversample' included within the EICV series. NISR shall continue to be responsible for producing a 'Social Protection Thematic Report' after the completion of each EICV survey round and in-depth descriptive and impact analysis shall be commissioned by the SPSWG as necessary. A specific impact evaluation will also be conducted for the Nutrition-Sensitive Direct Support scheme.
- ii. Analysis of national survey datasets (e.g. EICV, Ubudehe, RDHS) and programme administrative data
- iii. Special reviews, studies and process evaluations shall be commissioned on the following issues, among others:
 - a. The design and implementation of the minimum package for graduation
 - b. Ubudehe classification process
 - c. Household profiling mechanism
 - d. Disability classification mechanism
 - e. Institutional capacity and arrangements in the social protection sector
 - f. Gender audits of key social protection programs
 - g. The effectiveness of development partner support programs (bilateral financial aid, World Bank operations and technical assistance etc.)

The vast majority of these reviews, studies and evaluations will be conducted through the SPSWG.

- iv. Changes in the welfare/socio-economic status of social protection beneficiaries shall be monitored through:
 - a. A mobile-phone-based households monitoring system to be managed by proximity advisors
 - b. A multi-dimensional household welfare assessment mechanism, to be implemented annually on a sample basis
 - c. Dynamic household profiling and social registry.

On an annual basis, sector progress, evaluation evidence and lessons learnt will be documented in a Social Protection Sector Performance & Learning Report, to be published by the SPSWG.

8. IMPLEMENTATION PLAN

Detailed implementation of this policy will be achieved through multi-year, costed Social Protection Sector Strategic Plans (SP-SSPs) starting with the current one aligned to NST1 whose extracted implementation matrix for the remaining years is presented in Annex. 2.

The implementation plan in this Policy document is therefore limited to the identification of the key strategic policy actions and is presented in Annex 2 below.

This plan also presents the institutional framework for policy implementation, allocation of roles and responsibilities to concerned stakeholders and the identification monitoring and evaluation arrangements.

8.1. Cost and Financing of the Sector Strategic Plan

The implementation of this policy through its detailed strategic plan requires strong and supportive partnership in terms of financing and technical resources. It is paramount that besides the current financing mechanisms and instruments, innovative financing mechanisms and by way of implementation focus starts to shift to addressing key vulnerabilities such as old age, disability, child malnutrition is done in a systematic way. Increased focus needs to be placed on ensuring that the poor and vulnerable households have access to a range of complementary livelihoods development.

Continued commitment to public and private investment in social protection will therefore be required, including in response to changing expectations for minimum living standards as the country raises its ambitions towards the attainment of prosperity and wellbeing for everyone. The budget breakdown for each fiscal year is presented in the table below.

Table 2: Annual cost of the SP-SSP by component (2017 prices)

OUTCOME	Baseline (17/18)	18/19	19/20	20/21	21/22	22/23	23/24
1: Expanding access to social security	41,164,892,197	51,634,842,965	53,264,062,910	58,532,267,129	47,259,049,000	48,371,449,000	48,117,874,000
2: Increasing SP contribution to reducing malnutrition	0	4,356,136,313	6,969,904,946	7,155,033,402	6,806,175,229	6,806,175,229	6,806,175,229
3: Increasing effectiveness of social assistance	21,248,205,543	28,444,965,543	16,358,755,293	15,992,505,556	16,057,868,305	16,571,512,917	17,071,125,298
4: Strengthening Social Care Services	9,467,751,125	13,220,960,544	20,232,360,544	13,254,760,544	13,629,460,544	14,037,960,544	14,037,960,544
5: Strengthening livelihood support services for economic empowerment	20,423,050,733	21,712,770,889	21,290,436,197	20,661,924,814	17,516,050,722	15,961,458,783	14,310,439,811
6: More postive values, attitudes and behaviours among all stakeholders	1,793,617,999	2,344,507,216	7,527,040,903	2,691,754,590	2,691,754,590	7,691,754,590	2,691,754,590
7: Institutional capacity building	9,468,177,929	11,271,810,009	12,059,544,903	11,195,544,903	11,704,104,903	11,344,104,903	11,853,304,903
TOTALS	103,565,695,526	132,985,993,478	137,702,105,696	129,483,790,938	115,664,463,293	120,784,415,966	114,888,634,375

A sector-wide funding mechanism for social protection will be developed. There are some development partners who fund specific social protection programs, in particular the VUP. However, the development of a sector-wide funding mechanism will allow development partners to contribute to the sector as a whole, rather than specific projects. This will ensure that funding is aligned to government priorities and will also enable development partners to engage over the whole sector.

Table 3: Implementation Plan

SSP Priority Outcome indicator	Priority Action Description	2018/19 (baselines)	2019/20	2020/21	2021/22	2022/23	TARGET 2023/24	Responsible
OUTCOME 1: Increased	access to social security and		mes, particularly a		able older people,	people with disab	ilities, households	with low labour
% of extremely poor and	Direct Support provided to extremely poor households with no labour	VUP DS: 107,000 FARG DS: 26,334 + RDRC DS: 3,500	VUP DS: 107,000 FARG DS: 27,650 RDRC DS: 3,500	FARG DS:	VUP DS: 107,000 FARG DS: 29,003 RDRC DS: 3,500	FARG DS:	FARG DS:	LODA, FARG, RDRC, Local governments
vulnerable population benefitting from regular Direct Income Support	Disability grant provided to people with severe disabilities according to the severity or level of disability ⁴			Approx. 73,000	Approx. 73,000	Approx. 73,000	Approx. 73,000	Approx. 73,000
	PW provided to extremely poor households with labour in 416 sectors	ePW: 30,000 cPW: 142,000	ePW: 56,250 cPW: 135,000	ePW: 75,000 cPW: 128,000	ePW: 82,500 cPW: 60,000	ePW: 90,000 cPW: 60,000	ePW: 97,500 cPW: 60,000	LODA, Local governments
No. the people enrolled in voluntary long-term savings scheme (Ejo Heza Scheme)	Enroll the population into the informal sector long- term savings scheme (Ejo Heza Scheme) and provide associated financial incentives for saving.	100,000 (U1:3,400; U2: 34,000)	200,000 (U1: 6,800; U2: 68,000)	300,000 (U1: 10,200; U2: 102,000)	400,000 (U1: 13,600; U2: 136,000)	550,000 (U1: 18,700; U2: 187,000)	700,000 (U1: 23,800; U2: 238,000)	MINECOFIN/ RSSB, Districts
% of PwDs with health insurance	Strengthen implementation of the Mutuelle de Santé health insurance scheme to ensure compliance with Ministerial orders relating to subsidized health insurance for people with disabilities.	RDRC: 3,500	RDRC: 3,500	RDRC: 3,500	RDRC: 3,500	RDRC: 3,500	RDRC: 3,500	RSSB, Local governments

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⁴ Estimates provided for the number of PwDs expected to be eligible for this new sub-component of Direct Support assume that 25% of eligible PwDs are already targeted by existing DS schemes.

	OUTCOME 2: St	rengthened contribution	of social protection	n to reducing	malnutrition			
No. of extremely poor mothers and infants in first the 1,000 days benefitting from nutrition-sensitive social protection	Nutrition-Sensitive Direct Income Support provided to extremely poor mothers and infants Develop guidelines delivery of sensitization on nutrition to ePW HBCC beneficiaries Design behavioral change communication strategy to accompany VUP implementation.	50,000	55,000	60,000	90,000	90,000	90,000	LODA, RBC, NECDP
	OUTCOME	3: More effective social p	protection response	es to shocks ar	nd crises			
% of cPW projects contributing to Disaster Risk Reduction	Public work projects/HIMO construct community infrastructure that contributes to Disaster Risk Reduction in areas at high risk of climate- and weather-related shocks	Develop cPW guidelines			Revise cPW planning and implementation guidelines			LODA and other institutions
No. of households in crisis provided with short-term social assistance	Review guidelines for all social protection ear-marked funds and train local governments to strengthen and better coordinate emergency assistance to	MINALOC e/m funds social support: 3784 HHs		MINALOC e/m funds social support: 3,850 HHs	MINALOC e/m funds social support: 3,900 HHs	MINALOC e/m funds social support: 3,950 HHs	MINALOC e/m funds social support: 4,000 HHs	MINALOC, local governments
	families in crisis Households in crisis provided with short-term / on-off cash-	MINALOC e/m funds shelter: 137 HHs	MINALOC e/m funds shelter: 140 HHs	MINALOC e/m funds shelter: 145 HHs	MINALOC e/m funds shelter: 150 HHs	MINALOC e/m funds shelter: 165 HHs	MINALOC e/m funds shelter: 170 HHs	
	or in-kind support	RDRC shelter: 200 HHs	RDRC shelter: 100 HHs	RDRC shelter: 100 HHs	RDRC shelter: 100 HHs	RDRC shelter: 100 HHs	RDRC shelter: 100 HHs	
		FARG shelter: 1,765 HHs	FARG shelter: 516 HHs	FARG shelter: 500 HHs	FARG shelter:	FARG shelter: 590 HHs	FARG shelter: 651 HHs	

No of districts effectively and efficiently implement DDMPs	Ensure that District Disaster Management Plans are reviewed on an annual basis and strengthen monitoring of implementation by	RDRC health: 3500 bnfs All districts review and update their DDMPs	RDRC health: 3500 bnfs All districts review and update	RDRC health: 3500 bnfs All districts review and	All districts review and	RDRC health: 3500 bnfs All districts review and	RDRC health: 3500 bnfs All districts review and	MIDIMAR, local governments
	MIDIMAR.	DDMB involvers to the	their DDMPs	update their DDMPs	update their DDMPs	update their DDMPs	update their DDMPs	
	Districts implement effectively their Disaster Management Plans	DDMP implementation review conducted in 5 districts per year	DDMP implementation review conducted in 5 districts per year	DDMP implementation in review conducted in 5 districts per year	review conducted	DDMP implementation review conducted in 5 districts per year	DDMP implementation review conducted in 5 districts per year	
	OUTCOME 4: In	nproved access to Social (Care Services deliv	<u> </u>	ost vulnerable			
	Strengthen advisory/outreach services through an integrated case worker management and develop guidelines and implemented by local governments	Train staff in 150 sectors on paras social workers management guidelines	Train staff in 210 sectors on paras social workers management guidelines	Train staff in 270 sectors on paras social workers management guidelines	Train staff in 320 sectors on paras social workers management guidelines	Train staff in 370 sectors on paras social workers management guidelines	Train staff in 416 sectors on paras social workers management guidelines	MINALOC/ LODA
	Community outreach volunteers trained on SGBV and child protection	Update SGBV training curriculum for community volunteers 52,879 community outreach volunteers trained on SGBV	52,879 community outreach volunteers trained on SGBV	52,879 community outreach volunteers trained on SGBV	52,879 community outreach volunteers trained on SGBV	52,879 community outreach volunteers trained on SGBV	52,879 community outreach volunteers trained on SGBV	MIGEPROF
# of persons with access to rehabilitation services	Establish a community- based rehabilitation system for people with disabilities and their families in 416 sectors	Commission design of CBR scheme and pilot	Pilot CBR scheme	Evaluation of CBR pilot	CBR scheme rolled-out to 150 sectors	CBR scheme rolled-out to 300 sectors	CBR scheme rolled-out to 416 sectors	MINALOC, NCPD
	Provide rehabilitation services to PwDs	500 PwDs rehabilitated	500 PwDs rehabilitated	500 PwDs rehabilitated	500 PwDs rehabilitated	500 PwDs rehabilitated	500 PwDs rehabilitated	

	Deliver rehabilitation and reintegration services to 49,123 vulnerable children and youth	NRS: 5,623 NCC: 167	NRS: 7,500 NCC:167	NRS: 8,500 NCC:167	NRS: 10,500 NCC:167	NRS: 9,000 NCC:167	NRS: 8,000 NCC:167	National Rehabilitation Service, NCC
	Ou	tcome 5: Improved acces	s and strengthene	d service for t	he Elderly persons	S		
# of elderly community care centres (ECCC) operationalized	Establish elderly community care centres (ECCC) for social services Strengthen partnership with Private sector and civil society, Faith Based Organization on establishment of elderly care centres		Develop standards for elderly community care centers	Determine the type of services to be provided at the center (social services/activities, health services, occupational therapy, intergenerational activities) Establish ECCC in at least 30 sectors Avail professional social care givers for vulnerable elderly Persons	Determine the type of services to be provided at the center (social services/activities, health services, occupational	health services, occupational therapy, inter- generational activities) Establish ECCC in at least 120 sectors Avail professional social care givers for vulnerable		MINALOC, MIGEPROF, MINISANTE, DISTRICTS,
# of health care facilities with geriatrics unit	Set up geriatrics clinic in health facilities	0	0	0	500	500	500	MINISANTE, MIGEPROF Districts, Private sectors, Civil societies
# health care professionals trained	Provide in-service trainings on gerontology and geriatrics to health care professionals	0	0	0	500	500	500	MINISANTE, Districts, Private sectors, Civil societies

# vulnerable elderly persons supported to access palliative and hospice care services.	Provide support to vulnerable elderly Persons to access palliative and hospice services	-	32,000	40,000	50,000	110,000	225,000	MINISANTE,, Districts
# of professional social care givers for vulnerable elderly Persons	Subside NCDs services and medication for vulnerable elderly Persons	-						MINISANTE, MINALOC
	Develop and implement a communication strategy to raise awareness of the importance of the elderly Persons policy among the general population	-	Develop the communication strategy	Communicati on strategy implemented	Communication strategy implemented	Communication strategy implemented	Communication strategy implemented	MINALOC MIGEPROF
	Establish a legal framework, Ministerial instructions, orders for eligibility to different insurance services and establishment of the law on elderly care		Develop a legal framework	Establish ministerial instructions	Implement the ministerial instructions	Implement the ministerial instructions	Implement the ministerial instructions	MINALOC, MINIJUST, MINIJUST, RALC
	Develop a detailed implementation plan for elderly persons	-	Detailed implementation plan for elderly persons developed	Detailed implementat ion plan for elderly persons developed and implemented	persons developed and implemented	Detailed implementation plan for elderly persons developed and implemented		MINALOC MIGEPROF
	OUTCOME 6: Extremely	poor households have in	creased access to l	ivelihood supp	port services for e	conomic empower	rment	
No. of sectors implementing household profiling mechanism to support targeting of complementary services	Update household profiling for all households in Ubudehe Categories	Update profiling of any households newly classified in all Ubudehe Categories	Profiling repeated in 416 sectors Each sector to develop multi-year plan for targeting			Profiling repeated in 416 sectors Each sector to develop multi- year plan for		LODA

			services to			targeting services		
			extremely poor			to extremely poor		
			households			households		
			Household			Household		
			profiling monitoring report			profiling monitoring report		
			developed			developed		
%. of eligible social protection beneficiary households receiving asset transfers under Multi sectoral	155,000 extremely poor households provided with productive assets or IGA	19,700 households supported under asset transfer scheme MINALOC e/m funds: 674	20,832 households supported under asset transfer scheme	21,636 households supported under asset transfer scheme	13,250 households supported under asset transfer scheme	14,000 households supported under asset transfer scheme	14,750 households supported under asset transfer scheme	LODA, MINALOC
approach/framework	support	0/4	MINALOC e/m funds: 700	MINALOC e/m funds: 735	MINALOC e/m funds: 770	MINALOC e/m funds: 800	MINALOC e/m funds: 840	1
% of extremely poor and		Issue guidance on regulation and capacity building of community savings groups		Support				LODA
vulnerable households who are members of a community savings group	Promote and strengthen community savings groups	Support establishment of 2,150 new community savings groups and delivery financial literacy training	Support establishment of 2,150 new community savings groups	establishment of 2,150 new community savings groups	Support establishment of 2,150 new community savings groups	Support establishment of 2,150 new community savings groups	Support establishment of 2,150 new community savings groups	
		VUP: 3,016	VUP: 3,125	VUP: 3,245	VUP: 3,975	VUP: 4,200	VUP: 4,425	LODA, RDRC, FARG, NCPD, local
		RDRC skills: 350 RDRC IGA: 200	RDRC skills: 300	RDRC skills: 280	RDRC skills: 260	RDRC skills: 240	RDRC skills: 220	governments
N. Lov. CGD	Extremely poor and vulnerable households to	RDRC employment	RDRC IGA: 150	RDRC IGA: 150		RDRC IGA: 150	RDRC IGA: 150	
No. and % of SP beneficiaries receiving formal skills training	receive technical and vocational training	support: 350 NCPD: 300	RDRC employment support: 300	RDRC employment support: 280	RDRC employment support: 260	RDRC employment support: 240	RDRC employment support: 220	
		MINALOC e/m funds employment support: 340	NCPD: 300	NCPD: 300	NCPD: 300	NCPD: 300	NCPD: 300	
		FARG: 15,281	FARG: 12,747	FARG:	FARG: 8,716	FARG: 6,273	FARG: 3,942	
		Total: 19,837	Total: 16,922	11,254	Total: 13,661	Total: 11,403	Total: 9,257	
				Total: 15,509				

nº/% of households that have graduated from extreme poverty under the multi sectoral approach	Implement the multi sectoral action plan in selected 17 districts	Implement the multi sectoral action plan in the 17 districts	Provide productive assets to households based on their needs	Provide productive assets to households based on their needs	Conduct assessment on households receiving productive assets to ascertain the number of households that have graduated from extreme poverty	Provide productive assets to households based on their needs	Conduct assessment on households receiving productive assets to ascertain the number of households that have graduated from extreme	MINALOC, MINAGRI
OUTCOME 7: Strengthened values of self-reliance, respect for rights and community-based support for the vulnerable								
% of SP beneficiaries with good awareness of their rights and responsibilities	All villages in Rwanda to be reached by high quality public communications on social protection rights and responsibilities	Develop public communications plan on social protection rights and responsibilities 4,500 community meetings to be held	Partnerships established with at least 60 CSOs 4,500 community meetings to be held 4 radio talk shows to be conducted 2,000 posters to be distributed	Partnerships established with at least 90 CSOs 4,500 community meetings to be held 4 radio talk shows to be conducted 2,000 posters to be distributed	least 120 CSOs 4,500 community meetings to be held	Partnerships established with at least 150 CSOs 4,500 community meetings to be held 4 radio talk shows to be conducted 2,000 posters to be distributed	Partnerships established with at least 180 CSOs 4,500 community meetings to be held 4 radio talk shows to be conducted 2,000 posters to be distributed	MINALOC, LODA, Local governments
	Deliver community sensitization on the rights of children, elderly persons and persons with disabilities in all villages nationwide	Community sensitisation	Community sensitisation meetings held in TBC villages	Community sensitisation meetings held in TBC villages	Community sensitisation meetings held in TBC villages	Community sensitisation meetings held in TBC villages	Community sensitisation meetings held in TBC villages	LODA, local governments
	National public awareness raising events conducted on the rights of children, women, PwDs and older people	Implement national campaigns on annual priority theme	Implement national campaigns on annual priority theme	Implement national campaigns on annual priority theme	Implement national campaigns on annual priority theme	Implement national campaigns on annual priority theme	Implement national campaigns on annual priority theme	NCPD, NCC, MIGEPROF
% of core social protection programme payments delivered on-time	Ensure all beneficiaries of core social protection programmes are paid directly and electronically	Workflow management and electronic payments pilot to be implemented in LODA	Workflow management and electronic payments modality to be rolled-out	Workflow management and electronic payments modality	Workflow management and electronic payments modality	Workflow management and electronic payments modality	Workflow management and electronic payments modality	LODA, FARG

				implemented	implemented	implemented	implemented	
No. and % of complaints resolved within the approved time period	Complaints tracking system strengthened and reviewed annually	Complaints modules in all core SP MIS to be fully operational and LG staff trained in their use SP institutions quarterly reporting frameworks to be revised to include analysis of complaints	SP programme design and implementation guidelines to be reviewed to address source of complaints	SP programme design and implementatio n guidelines to be reviewed to address source of complaints	SP programme design and implementation guidelines to be reviewed to address source of complaints	SP programme design and implementation guidelines to be reviewed to address source of complaints	SP programme design and implementation guidelines to be reviewed to address source of complaints	LODA, FARG, RDRC
households supported through HGS (e.g.	Support Extremely poor and vulnerable households through Umuganda, Kuremera and Urugerero	30,000 households supported through HGS	30,000 households supported through HGS	30,000 households supported through HGS		30,000 households supported through HGS	30,000 households supported through HGS	MINALOC
# of elderly groups involved in coaching and mentoring young generations	Form elderly groups to coach and mentor the young generation on core values	30	60	90	120	150	30	MINISPOC, MINALOC, MIGEPROF, REAF, MEDIA HOUSES,DPs, NIC, ELDERLY PERSONS ORGANIZATIONS
	OUTCOME 8: Strengthene	ed institutional capacity fo	or evidence-based	policy develop	ment and social p	rotection service (delivery	
No of policies/strategies reviewed/ developed	Develop high quality, evidence-based policy and strategy documents	National SP Policy updated National Disability & Inclusion Policy approved		Conduct MTR of SP-SSP implementatio n			Develop SP-SSP 2025-2032	MINALOC
No. of policy dialogue and public communication activities conducted	Conduct national and local level policy dialogue and advocacy activities on the performance and future development of the social	Implement Social Protection Month advocacy activities nationwide	Implement Social Protection Month advocacy activities nationwide	Social		Implement Social Protection Month advocacy activities nationwide		MINALOC, LODA, FARG, RDRC, NCPD
	protection system	Convene National SP conference	Convene international SP conference			Convene international SP conference		MINALOC

		SPSWG structure developed and implemented	2 JSR conducted and report produced	2 JSR conducted and reports produced annually		2 JSR conducted and report produced annually	and report	
	Social Protection Sector Performance and Learning Report published	Social Protection Sector Performance and Learning Report published	Social Protection Sector Performance and Learning Report published	Social Protection Sector Performance and Learning Report published		Sector	MINALOC	
	EICV5 SP thematic report published	Review EICV questionnaire and VUP oversample strategy and collect EICV6 data		EICV6 SP Thematic Report published			MINALOC	
No. of studies/evaluation conducted through SPSWG and disseminated	conducted through SPSWG Social protection sector M&F systems strengthened	Conduct impact evaluation of VUP using EICV4 and 5 data			Conduct final evaluation of World Bank IPF for social protection			LODA
and disseminated	Conduct evaluation of Ubudehe classification using EICV5 data	Conduct review of institutional capacity and arrangements for SP and develop roadmap for institutional harmonization					MINALOC	
		Conduct annual household profiling sample assessment	Conduct annual household profiling sample assessment	Conduct annual household profiling sample assessment	Conduct annual household profiling sample assessment	Conduct annual household profiling sample assessment	Conduct annual household profiling sample assessment	LODA
Increased access to high quality data on household		Conduct review of Social Protection Sector M&E systems						MINALOC
welfare, needs and access to services			Conduct review of disability classification mechanism					NCPD, MoH

		10,000 PwDs classified	20,000 PwDs classified	20,000 PwDs classified Disability classification database integrated	20,000 PwDs classified On-demand disability assessment mechanism in	20,000 PwDs classified	10,000 PwDs classified	МоН, NCPD
		Update household profiling for new entrants to all Ubudehe categories Develop mobile-phone based household monitoring system Develop multi -dimensional welfare assessment tool		with iSP-MIS Household profiling conducted for all households in Ubudehe Categories		Household profiling conducted for all households in Ubudehe Categories Review of household profiling mechanism to be conducted	Revised household profiling mechanism implemented	LODA
		Initiate the review of ubudehe categorization	Conduct review of the Ubudehe categorisation	Implement the revised Ubudehe categories	Implement the revised Ubudehe categories -	Assess the implementation modalities of Ubudehe categorisation	Conduct Ubudehe re- classification	LODA
No. of households in lower Ubudehe categories with a dedicated proximity advisory services/Para social worker	Proximity advisory services/para social workers recruited and assigned to households	Annual refresher training provided to para-social workers in 30 sectors Induction training provided to 2,000 new para-social workers	Annual refresher training provided to 2,500 para- social workers Induction training provided to 1,200 new para-social workers	Annual refresher training provided to 3,700 para- social workers Induction training provided to 1,100 new para-social workers		Annual refresher training provided to 5,100 para- social workers Induction training provided to 1,900 new para-social workers	Annual refresher training provided to 6,100 para- social workers Induction training provided to 400 new para- social workers	
% of social protection beneficiaries satisfied with	Train all District and Sector Councils on social protection	District (15) Sector (70)	District (30) Sector (140)	District (15) Sector (210)	District (30) Sector (280)	District (15) Sector (350)	District (30) Sector (416)	MINALOC
quality of services	Annual refresher training provided to LG staff on social protection programme	1,552	1,552	1,552	1,692	1,772	1,844	MINALOC, LODA

implementation					
Provide essential equipment and training to enable sector-level access to social protection MISs	Essential IT equipment	Refresher training to be provided to all District and Sector SP staff	Refresher training to be provided to all District and Sector SP staff	Refresher training to be provided to all District and Sector SP staff	MINALOC, LODA

The Social Protection Sector results matrix indicates targets under different sector outcomes to be achieved against baseline from national statistics including EICV5, DHS5, Citizen report card (CRC) over the course of Social Protection sector strategic plan by delivering on activities in the implementation plan at Table 2 above.

Table 4: Social Protection Sector results matrix

	BASELINE	TARGET	TARGET	TARGET	TARGET	TARGET	TARGET	MEANS OF	
INDICATOR	EICV5 (2016/17)	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	VERIFICATION	ASSUMPTIONS
Extreme poverty headcount (%)	16.0	5.7	3.5	2.4	1.4	<1%	<1%	EICV	
Poverty headcount (%)	38.2	23.2	20.0	16.8	13.6	10.4	7.2	EICV	Annual rate of decline
Gini co-efficient (%)	0.429	-	-	=	0.350	-	-	EICV	in poverty between 2010/11 and 2013/14 continues
% of social protection beneficiary households with improved socio- economic status	-	TBD	20%	40%	60%	80%	100%	Household profiling sample study	
OUTCOME 1: Increased according to the low labour capacity and		•	come support	t programmes	, particularly	among vulnera	able older pe	ople, people with disal	pilities, households
% of the population accessing social security and income support programmes	8.7%	13.0%	12.9%	12.8%	17.1%	17.4%	17.7%	JSR reports/EICV	
% of older people covered by social protection	25%	25%	30%	35%	40%	45%	50%	JSR reports/EICV	Old age defined as >65

No. of extremely poor child-headed HHs accessing social protection	Approx. 1,000	Approx. 1,000	Approx. 1,000	Approx. 1,000	Approx. 1,000	Approx. 1,000	Approx. 1,000	JSR reports/EICV		
% of PwDs covered by social protection	3.9%	4.8%	4.5%	30%	30%	30%	30%	JSR reports/EICV		
No. workers enrolled in voluntary long-term saving scheme	Not yet operational	100,000	200,000	300,000	400,000	550,000	700,000	RSSB annual reports		
% of PwDs with health insurance	80%	100%	100%	100%	100%	100%	100%	RSSB annual reports		
OUTCOME 2: Enhanced of	OUTCOME 2: Enhanced contribution of social protection to reducing malnutrition									
No. of extremely poor mothers and infants in first the 1,000 days benefitting from Nutrition-Sensitive Direct Support	0	50,000	55,000	60,000	90,000	90,000	90,000	LODA annual report		
OUTCOME 3: More effect	ive social protec	ction response	es to shocks a	nd crises	1					
No. of households in crisis provided with other short- term social assistance (temporary financial assistance, shelter, health fees, NFI distribution etc.)	Financial assistance:	shelter: 1,765 Financial assistance: 3,784		shelter: 745 Financial assistance: 3,850	assistance:	assistance:	shelter: 921 Financial assistance: 4,000	MINALOC, LODA, RDRC, FARG and MIDIMAR reports		
% of VUP cPW expenditur contributing to Disaster Ris Reduction	220/5	25%	30%	35%	40%	45%	50%	LODA annual reports		

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⁵ Baseline calculated as % of VUP cPW budget invested in terracing, greening, marshland development and tree planting plus 5% of the road construction/rehabilitation/ maintenance project budgets is spent on drainage management. Baseline and targets to be reviewed following completion of VUP Climate Sensitivity Study in 2018.

% of HHs in Ubudehe Cat 1									
benefitting from integrated caseworker management system	7%	20	150	270	300	360	416	LODA annual reports	
No. of PwDs with access to rehabilitation support services	4,349	4,849	5,849	7,349	9,349	11,849	14,849	Report from Annual Orthopedic and Rehabilitation Centers	
No. of vulnerable children/youth benefitting from NRS rehabilitation and reintegration services	16,184	5,623	7,500	8,500	10,500	9,000	8,000	NRS annual reports	
% of children in orphanages integrated into families	75% of children in orphanages reintegrated into families	77%	82%	85%	90%	95%	100%	NCC annual reports	700 children in orphanages at pro
Outcome 5: Improved access	and strengthe	ned service f	or the Elderl	y persons					
# vulnerable elderly persons supported to access palliative and hospice care services.	-	-	-	32,000	40,000	50,000	110,000	MINISANTE,	
OUTCOME 6: Extremely po	oor households	have increas	ed access to l	ivelihood sup	port services f	or economic en	npowerment		
	10%	30%	40%	60%	70%	80%	100%	iSP-MIS Household Profiling MINAGRI/RAB	LODA, MINA CSOs, private s
No. and %. of extremely poor households receiving asset transfers	1070							reports	

% of extremely poor households who are members of a community savings group/VSLA	11%	20%	40%	60%	70%	80%	90%	SP sector household profiling system	
No of extremely poor and vulnerable individuals receiving formal skills training and apprenticeships	18,566	38,403	55,325	70,834	84,495	95,898	105,155	LODA, FARG, RDRC, NCPD reports	
OUTCOME 7: Strengthened	values of self-	reliance, resp	ect for rights	and commun	ity-based sup	port for the vu	lnerable		
% of social protection beneficiaries satisfied with quality of services	61.2%	63%	66%	70%	73%	76%	80%	RGB Rwanda Citizens Report Card	
% of households in Ubudehe category 1 with a performance contract	7%	7%	36%	65%	72%	87%	100%		
% of core social protection programme (VUP, FARG, RDRC) payments delivered on-time	35%	50%	60%	80%	85%	90%	90%	JSR Resports	
No of formal partnerships between districts and CSOs on social protection	28	50	60	90	90	90	90	District annual reports	
% of formal complaints (in MEIS and CMS) resolved within the approved time period	No data	20	40	60	70	75	80	LODA MEIS	
No. of poor and vulnerable households supported through HGS (e.g. Umuganda and Kuremera, Urugerero)	No data	60,000	120,000	180,000	240,000	300,000	360,000	District annual reports	

% of PwDs classified (disaggregated by sex)	154,236	164,000	184,000	204,000	224,000	244,000	254,000		
No. of programme systems linked to iSP MIS	0	3	5	6	7	7	7	JSR reports	
No. of studies/evaluations conducted through SPSWG and disseminated	1	4	4	4	4	4	4	JSR reports	
% of Sectors and Cells with dedicated Social Protection staff (CSDOs and SPOs)	Cells: 0% Sectors: 9%	Cells: 0% Sectors: 36%	Cells: 50% Sectors: 50%	Cells: 75% Sectors: 100%	Cells: 100% Sectors: 100%	Cells: 100% Sectors: 100%	Cells: 100% Sectors: 100%	JSR reports	

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