



International Journal of Current Research Vol. 6, Issue, 01, pp.4806-4814, January, 2014

RESEARCH ARTICLE

FIGHTING EXTREME POVERTY IN GHANA; A STAKEHOLDERS ANALYSIS OF THE "LEAP" CASH TRANSFER PROGRAMME

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ARTICLE INFO

Article History:

Received 18th October, 2013 Received in revised form 07th November, 2013 Accepted 19th December, 2013 Published online 31st January, 2014

Key words:

Poverty, Cash transfer, Stakeholders, LEAP.

ABSTRACT

Over the years, alternative approaches at fighting extreme poverty have yielded substantial results among those hardly hit in the world today. The number of people in extreme poverty in the world has declined from 47 percent to 22 percent in 2010. Thus, about less than 700 million people live in extreme poverty today than in 1990. Despite this gain, development and programme financing, management, politics, poor programme design and engineering are still a very big challenge to the acceleration of progress. This paper examines a stakeholder's view of the Livelihood Empowerment Against Poverty (LEAP) programme in Ghana. The study revealed that the introduction of the LEAP programme has been lauded by both implementation and beneficiary stakeholders. However, lack of monitoring indicators, inadequate funding as well as institutional bottlenecks have been the greatest challenge to the smooth running of the programme. The study recommends the provision of a framework to institutionalised social protection interventions and programmes in Ghana through a synergy of institutional competence, political will and legal support systems. The study also recommends the design of clear and measurable indicators for effective monitoring and evaluation of the programme to enhance its sustainability.

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INTRODUCTION

It is more than a decade now from the time when the UN Millennium Development Goals (MDGs) were adopted by 149 governments at the UN Millennium Summit in New York. Since the year 2000, lack of resources and capacity has slowed down global efforts at eradicating extreme poverty. However, twelve years down the line, significant gains have been made in the fight against extreme poverty despite the global economic distortions in 2008 and 2009 (Millennium Development Goals Report, 2011). For instance, according to the 2013 MDGs report "poverty rates have been halved, and about 700 million fewer people lived in conditions of extreme poverty in 2010 than in 1990" (Millennium Development Goals Report, 2013). Efforts at dealing with poverty have generally focused on a number of options including cash transfer for social protection. This strategy is not a new concept and has been the main strategy for public financing when markets fail (Sadoulet and Janvry, 2004). Again, cash transfer is a very important subject in the poverty reduction debate largely because of concerns about equity, rights, access and the promotion of strong and inclusive growth (Conceição and Levine, 2010). Cash transfers can enhance the accumulation of resources and human capital for the future while providing

short term relief (poverty reduction in the longer-run) (Baird et al., 2011) such as the Bolsa-Familia programme in Brazil. In Africa, countries like Botswana, Mozambique, Kenya, Lesotho, Namibia and Malawi among others have been implementing social protection programmes as public strategies that target vulnerable groups and individuals for some time now. These social protection strategies are in the form of social assistance, social insurance, social inclusion and direct cash transfer systems where beneficiaries are selected either through a Community Based Targeting (CBT) strategy, Proxy Means Test (PMT) targeting or a combination of both. Attempts at reducing poverty in Ghana over the past years have generally focused on the adoption of a number of policies and strategies by various governments. The introduction of Ghana Vision 2020, Growth and Poverty Reduction Strategy One (GPRS I) and Growth and Poverty Reduction Strategy Two (GPRS II) were all attempts to provide a comprehensive approach to dealing with extreme poverty within a national framework. However, even though substantial gains were made with the introduction of these strategies, this was not enough to drastically off-set poverty levels especially in rural Ghana. Therefore, the introduction of the LEAP programme in 2008 was seen by donors, Non Governmental Organisations (NGOs), Civil Society Organisations (CSOs), technocrats and especially the rural poor as a giant step towards the fight against extreme poverty. For this reason, the programme

attracted positive commendations from several individuals, groups, organisations and political leaders across the country. For instance;

"a group calling itself 'Critical Eye network' has lauded the government's Livelihood empowerment Against Poverty (LEAP) social intervention policy to provide financial assistance to people in extreme poverty. In a statement signed by the Amstrong Esaah, its spokesperson, the group described policy as 'remarkable feat of a visionary the government'......The statement noted that several governments around the globe are reaching out to the vulnerable in society; 'the poor who cannot make ends meet ;the aged who are not working; minors who have no source of help of their own to better their lot, adding that the Livelihood empowerment Against Poverty (LEAP) is no exception from this global practice and trend" (Source: Ghana News Agency, January. 27, 2008). At inception, the essence of the LEAP programme was essentially to target vulnerable groups, and other individuals by providing short term relief while stimulating long term economic growth. At the political level, there was a very high level of political enthusiasm for the programme at its inception. It has been five years since the introduction of the LEAP cash transfer programme in Ghana, and it is therefore necessary to collect stakeholder's view about the programme as a basis for future policy reforms.

METHODS

The study was conducted in three Districts in Northern Ghana that is Savulugu, Nanton and Tolon Districts. The reason for selecting these Districts lies in the fact that poverty rates in these areas are extremely high as compared to any other part of the country. A case study approach was adopted in order to gain a deeper understanding of the issues involved (Yin 1994; Stake 1995; Bowling 2002). For the purposes of triangulation (Mack et al., 2005; Silverman, 2006) data was collected from focus group discussions (FGDs), face-to-face key informant interviews and other relevant documents. The FGD's were held with beneficiaries of the LEAP programme in some communities in the selected Districts. The Districts were selected through a purposive sampling procedure. Face-to-face key informant interviews were held with key personalities and individuals connected to the study. These individuals included; the Northern Regional Director of Social Welfare, the District Director of Social Welfare in Tolon, the District Director of Social Welfare in Savuligu-Nanton, Assembly men in all the selected communities, CLIC members in all the selected communities, some LEAP beneficiaries in the selected communities and donor organisations. Implementation stakeholders in this study included;

- CLIC members
- Department of Social Welfare
- UNICEF
- Government of Ghana
- Department for International Development (DFID/UK Aid)
- World Bank

Beneficiary stakeholders included

• LEAP beneficiaries in all the selected communities.

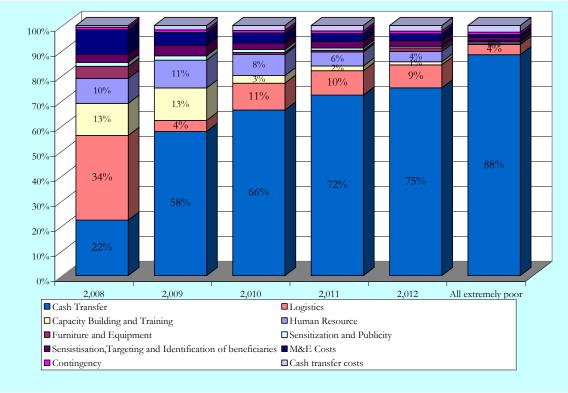
The individuals selected for the key informant interviews were selected using purposive sampling. Fifty-two (52) face-to-face key informant interviews were held with various individuals. The composition of the FGD ranged from 8 to 12 members. Data was analysed using SPSS.

RESULTS AND DISCUSSIONS

Understanding the LEAP Programme in Ghana

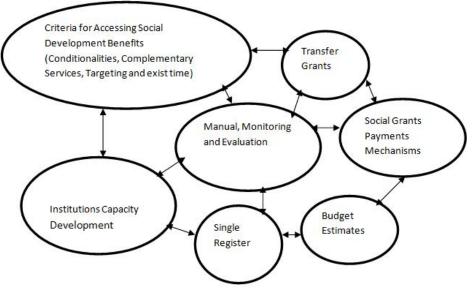
The Livelihood Empowerment Against Poverty (LEAP) programme was introduced by the government of the New Patriotic Party (NPP) in March 2008. The essence of the programme is to reduce extreme poverty among urban and rural households in Ghana. The LEAP targeting process includes the selection of deprived districts in the country using the poverty profile maps prepared by the Ghana Statistical Service. However, the selection of LEAP beneficiaries involves a series of participatory stages. The first step entails the selection of Community LEAP Implementation Committee (CLIC) members. CLIC members outline indicators of poverty in the community, and this is used as a bench mark to select the poorest households. Households and individual beneficiaries are however selected by Proxy Means Testing (PMT). After the PMT, a list of families and individual beneficiaries who are considered to be very poor is prepared. In cash transfer programmes like this, greater emphasis is placed on the family as a complete entity, instead of on the individual members in the family (Cecchini and Madariaga, 2011). At this stage, the list of beneficiaries may be scaled down based on the PMT. The final list of beneficiaries is sent back to the community for further discussions by community members. Once selected, beneficiaries are given a LEAP identity card which must be presented at the point of payment (LEAP, 2013).

A public forum is sometimes organised for LEAP beneficiaries on days of payment. A Care giver receives monies on behalf of LEAP beneficiaries but this can also be done directly by the beneficiaries themselves. The programme makes cash transfers for the disabled and the aged unconditional while cash transfers for Orphan and Vulnerable Children (OVC) is made conditional. What this means is that, cash transfers impose certain conditions on beneficiaries of transfer cash "from an income effect (if unconditional) into a price effect (subsidy) on the required condition" (Sadoulet and Janvry, 2004). To this extent, OVC on the programme must be enrolled in school, be immunized, and must not be involved in any forms of child labour. "This introduces the concept of co-responsibility in addressing the issue of poverty and a consideration of demand incentives to the supply of social services" (Levy and Rodríguez, 2005; Cohen and Franco, 2006). At present, beneficiaries can only stay on the LEAP programme for only a period of three (3) years. However, lack of resources and slow implementation has undermined the successful implementation of the LEAP exit plan. Financing the LEAP programme will require long term financial engineering and costing. It is expected that spending on the programme will cover cash transfers, capacity building, logistics, human resourcing, monitoring and evaluation among others. The figure (1) below presents the financial plan of the LEAP programme and the levels of percentage spending expected to be incurred.



Source: (LEAP, 2007)

Figure 1. Graph showing the financial plan of LEAP



Source: (LEAP Final Report, 2007)

Figure 2. Implementation design of the LEAP programme

Like many cash transfer programmes, LEAP beneficiaries and family members benefit from free registration with the National Health Insurance Scheme (NHIS- a health insurance scheme introduced by government). The cost of enrolment unto the National Health Insurance Scheme will cost a beneficiary GhC 12.00 (\$6.00) but this cost is being absorbed by the government. Other associated cost such as the cost of acquiring a birth certificate, attaining ante-natal and post-natal care (with NHIS card), and the cost of baby weighing are also supposed to be free of charge for all LEAP beneficiaries. Over the years, the implementation of the LEAP programme has been designed

to incorporate a combination of several inter related factors. The programme is built to provide conditional and unconditional cash transfers, complementary services, exit time and targeting as a means of addressing extreme poverty. It is expected that institutional capacity development must lead to effective monitoring and evaluation, the provision of a single register for costing and budgeting purposes as a determinant for social grant payment mechanisms. The Figure (2) below provides the implementation design of the LEAP cash transfer programme. While some cash transfer programmes make transfers quarterly or yearly to beneficiaries, the LEAP cash

transfer system is supposed to make cash transfers to all beneficiaries of LEAP every two months in a year. Thus, a total of six (6) cash transfer payments are supposed to be made every year. The success of every cash transfer programme lies on the targeting mechanism and procedure. The use of the PMT has generally improved on the LEAP targeting process and procedure albeit there are serious concerns about some of the beneficiaries who are currently on the LEAP programme. The PMT exempts from the LEAP programme, households with more than four (4) acres of cultivatable land and households with permanent income and source of employment. Also excluded are households that own a car/motor bicycle, households with a second hand source of dwelling, households that own a tractor or other small agriculture implements. Even though implementation stakeholders believe the PMT has significantly improved the LEAP targeting process, LEAP beneficiaries did not agree with the use of the PMT method. A summary of the features of the LEAP cash transfer programme is presented in Table one (1) below.

Implementers' verses Beneficiaries

LEAP beneficiaries and implementation stakeholders have lauded the implementation of the LEAP programme as a strategy for eliminating extreme poverty in the country. Transferred cash are used by beneficiaries to meet their personal needs such as food, health care and payment of school fees among others. However, while 98.7% of beneficiaries in the study were in favour of the cash system (these were individuals with dependants), 1.3% prefer cash system to be coupled with other services such as the provision of agricultural inputs in the form of seeds, crops and ruminants for rearing. An estimated number of beneficiaries constituting about 0.78% also shared the view that, the programme must provide other complementary services such as the provision of credit in the form of loans, and micro finance schemes for farming, thus supporting farm subsidies. These individuals are however in the physically active group of the sampled population. Implementation stakeholders are not too convinced

Table 1. Table showing a summary of the features of the LEAP programme

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Objective of the programme	 To assist the poorest families with basic needs, including food. To improve health and education status of children in the poorest families To help the poorest families come out of their poverty situation. 				
Source of Funding	Government of Ghana World Bank				
	World BankUNICEF				
	 UNICEF Department for International Development(DFID)/UK Aid 				
Executing Agencies	National Level –Ministry of Gender and Social Protection				
Executing Agencies	Regional &District Level –Department of Social Welfare				
Targeting Mechanism	Districts				
	 Deprived districts in the country 				
	Beneficiaries				
	 Proxy Means Testing (PMT) 				
Target Group	Poorest families in communities with				
	Orphans and vulnerable children (OVC)				
	 Single / double orphans 				
	 Disabled children 				
	 Chronically ill children (Children with prolonged chronic disease) 				
	 Children in a family with a head who is a child/under 18+ years old. 				
	Children in a family with a head who is chronically ill.				
	Children in a family with a parent whose whereabouts are unknown.				
	Children with no means of income.				
	Children not in school due to poverty.				
	Children engaged in child labour.				
	Aged/elderly (65 years and above)				
	Without productive capacity. With a constant first interest of the second of the sec				
	• Who can work but cannot find jobs.				
	Severely disabled people who cannot work. Persons with severe disabilities.				
	Transfer Conditions Conditional -Orphan and Vulnerable Children (OVC)				
	Unconditional -Disabled and the aged				
Value of money transferred	Depends on the number of eligible beneficiaries of the family.				
value of money transferred	• ONE Beneficiary –Gh¢48.00(\$24)				
	■ TWO Beneficiaries -Gh¢60.00(\$30)				
	■ THREE Beneficiaries -GhC72.00(\$36)				
	■ FOUR or more Beneficiaries -Gh@90.00(\$45)				
Payment Mechanisms	Table top payment -that is payments made directly at a central location in the village for example at the village				
	school or under a big tree in the centre of the village.				
Geographical coverage	National Level – All ten (10) regions, 99 districts.				
	Regional Level of study areas-19 Districts (3,89 Communities)				
Number of people reached	National Level -72,000 households (Plans to expand to 100,000 by the end of 2013 and 150,000 by 2014)				
	Regional Level of study areas-11,497 beneficiaries.				
Transfer Mechanism	Care giver receives money but beneficiaries can also receive money themselves.				
Use of transferred money	 Feeding 				
	 Medicines 				
	 School supplies 				
	 Investments into farming or small animals and livestock 				
	Petty trading				
Benefits/free items for LEAP	 NHIS is FREE for ALL LEAP family members, Ante-natal and post-natal is FREE with an NHIS card, 				
beneficiaries	Growth monitoring for babies and children is FREE, Birth registration is FREE for all children under				
	twelve (12) years.				

Source: Field Survey, 2013

about the provision of complementary services such as the provision of agricultural inputs to beneficiaries because there are instances where beneficiaries consumed agricultural inputs that were given to them for sowing. In terms of payment periods, beneficiaries who were in the physically active group were satisfied with the bi-monthly payment arrangement currently being implemented. Beneficiaries in the vulnerable group (aged, sick and physically challenged) however prefer monthly payment plans no matter how small the cash may be. Majority of the beneficiaries under the LEAP programme who can work and have found work are in the agriculture industry. These individuals are mostly found in the rural areas. The study revealed that 82.7% of the beneficiaries are not engaged in any form of employment at all while an estimated number of 0.01% of the beneficiaries who were involved in this study are engaged in alms begging as a means of sustenance. Another 8.4% of the beneficiaries provide labour services on farms, at mills and for other individuals, organisations and institutions.

All the beneficiaries who were involved in this study prefer transfer payments to be made by government officials. LEAP beneficiaries rejected any attempt to directly involve chiefs and women group leaders as a way of improving and facilitating the payment system or procedure. Implementation stakeholders however believe this system can promote community ownership and sharpen payment procedures in a bid to reduce the level of bureaucracy and as a way of improving confidence in the system. Information sharing and dissimilation can also be enhanced through this system. Among the reasons why LEAP beneficiaries rejected any local arrangement that will involve chiefs and community leaders included rivalry, conflict and abuse of the system. Majority of the beneficiaries constituting 92.1% of the beneficiaries held the view that any such arrangement may result in rivalry and conflict between beneficiaries. Another, 29.8% believe chiefs and other community members may use their own power to withhold payments to some beneficiaries for one reason or the other. Another reason why LEAP beneficiaries rejected the involvement of chiefs and community leaders was based on the issue of accountability. LEAP beneficiaries held the view that government officials were more accountable in matters like this than chiefs and other community leaders. Implementation stakeholders believed political will and support for the programme has been very low and has adversely affected the programme. However, some political groups and individuals were still convinced about the prospects of the programme. Tables 2 and 3 below show the rating and summary of the views of implementation and beneficiary stakeholders.

Strengths and Sustainability of the LEAP Programme

The strengths and sustainability of the LEAP programme hinges on a combination of several factors. Like most community development programmes, the study revealed that one of the strengths of the LEAP programme was that the programme is a community based one. The selection of Community LEAP Implementation Committee (CLIC) members forms the starting point of contact between beneficiary communities and implementation stakeholders. After initial selection of beneficiary districts; CLIC members were involved in the selection of individual LEAP beneficiaries up to the point of transfer payments. The study revealed that 72.0% of LEAP beneficiaries were of the view that because

CLIC members were made up of community members, their confidence, trust and awareness of the LEAP programme had been strengthened. Contact and information sharing had also generally improved among LEAP beneficiaries due to this. This claim was made by 96.0% of the beneficiaries who were interviewed in this study. Significantly, a greater part of the strength and sustainability of the LEAP programme rested on the fact that the programme is a community based one. This strength had however not been optimally utilized. The study revealed that community participation had been a very strong force that continues to strengthen and sustain the LEAP programme. Participation of community members in the selection of LEAP beneficiaries had directly led to an increase in commitment, technical and management skills and social learning on the part of community members (World Bank, 1996). What was however very important was how these gains could be sustained since many CLIC members had become dormant and inactive for a very long time now. Lack of constant follow-ups, community and beneficiary forum and sensitisation were however a major threat to the programme.

Just like many other cash transfer programmes, the main focus was the family unit with women playing leading roles. "In the vast majority of cases, the transfers are actually paid to the mothers, on the assumption that they will use the monetary resources to improve the wellbeing of the family as a whole and of their children in particular. Mothers are also responsible for fulfilling the conditionalities, and they sometimes act as programme promoters" (Cecchini and Madariaga, 2011). The focal point of the LEAP programme has been built on the role of women. The study revealed that implementation stakeholders were of the view that women were better care givers and their role in the family has a multiplier effect on the whole family unit as compared to their male counterparts. Therefore, in order to achieve the desired impact, the LEAP programme targets mostly women. This has the potential to improve the visibility of women, boost empowerment and allow for greater participation in decision making in household and community affairs and in meetings of the programme (León, 2008; Molyneux, 2007). Another significant reason why the use of women is a major source of strength and sustainability of the LEAP programme was based on the fact that women tend to use cash transfers to augment or enhance the human capital of their children instead of their own (Molyneux, 2007). In addition, cash transfers like the LEAP programme tend to add up or reinforce the conventional care activities and functions that have traditionally limited or restricted women's labour-market participation (Cecchini and Madariaga, 2011). To suffice, the role of women can effectively allow them to serve as liaisons between beneficiary households and the LEAP programme primarily due to the "triggering effect" of women's role in the family and the community as a whole. The study however revealed that the role of women in the LEAP programme has not been well structured and utilised in order to achieve the desired results and for the meeting of LEAP conditionalities. The Table (4) below shows the SWOT analyses of the LEAP programme.

Challenges of LEAP as presented by beneficiaries and implementation stakeholders

LEAP implementation stakeholders have lauded the programme but institutional bottlenecks still remains the main

Source: Field Survey, 2013

Table 2. Table showing the rating and summary of the views of implementation stakeholders

Issues	Stakeholders Rating	Implementation Stakeholders Views	
Perception about LEAP targeting process.		Targeting criteria very good in theory but not true in practice. There are people enjoying LEAP benefits who do not fall in any of the qualified criteria outlined (i.e. not aged, OVC or severely disabled). Programme must also be expanded to include HIV/AIDS patients.	
Perception about the involvement of technocrats.		 Believed the programme is too technocrat based. Implementation stakeholders believed technocrats laud the programme but had low expectations about its success because of the attitude of politicians. 	
		 Strongly believed technocrats had no power to influence the programme. 	
Perception about LEAP payment process and procedure.		 Requires serious restructuring in order to give more responsibilities to the District Social Welfare Officer in a bid to improve accountability. 	
		 Method of paying the money from government chest to the District level is good. 	
Perception about LEAP cost and sources of funding.		More emphasis must be placed on securing sustainable and reliable funding.	
Perception about programme monitoring, supervision and evaluation.		Monitoring and evaluation efforts must drastically be stepped-up by implementation stakeholders.	
Political will and commitment from politicians.		 Politicians' commitment level is low. Talks about LEAP only surfaces during election periods. 	
Perception about the introduction of complementary services.		Laudable but requires intensive and extensive education.	

Note: The number of ticks implies how implementation stakeholders rate issues relating to the LEAP programme implies high; ticks implies medium; tick implies low and no tick implies no rating by implementation stakeholders.

ticks implies very high;

ticks

Table 3. Table showing a summary of the views of beneficiary stakeholders

Issues	Summary of Beneficiary Responses		
Age ranges/cohorts of beneficiaries interviewed	6-10, 10-20, 20-30, 30-40, 40-50, 50-60, 60-70, 70+		
Number of children of beneficiaries who had children	Ranges from none (0) to fifteen (15) children.		
Occupation of beneficiaries who were able to work and were working.	Farming, trading, begging		
 Off-farming Season 	■ Labourer, Idle		
Beneficiaries' use of transferred cash.	Transfer cash were used mainly for farming, household feeding, school fees, health care,		
	clothing and buying thatch for roofing of building among others.		
Whether beneficiaries preferred cash or other forms of transfers such as food aid.	Most beneficiaries preferred cash to any other form of support.		
Beneficiaries' perception of current payment system/method.	Beneficiaries preferred current payment system/method where they are paid at a central point.		
Beneficiaries view of time span of transferred cash. Beneficiaries view of the provision of complementary services.	Beneficiaries say transferred cash does not last long (last usually from 10 days to 2 months). Out of the sampled population 0.78% of respondents prefer the provision of complementary services.		
Beneficiaries' perception of the qualification of other	Even though some beneficiaries who were currently enjoying the facility were not qualified,		
beneficiaries.	all the respondents claimed they were all qualified to be on the LEAP programme because		
	they believed they were all poor.		
Beneficiaries' perception of the amount of cash transferred to them.	Respondents claimed cash transferred to them is not enough and should be increased.		
Number of children of beneficiaries in school.	From none (0) to four (4)		
Beneficiaries' perception about the process involved in selecting beneficiaries.	Beneficiaries were not happy about the process of selecting beneficiaries. They claim the selection process leads to rivalry among fellow community members who were not selected. This may be an indication that the intensity of education about the selection process was not well understood by beneficiaries.		
Whether beneficiaries were aware they were supposed to benefit from free NHIS registration, ante-natal and post-natal and baby weighing.	Beneficiaries were not aware they were supposed to benefit from free NHIS registration, ante-natal and post-natal care and baby weighing.		
Beneficiaries' perception of whether programme should be scraped or not.	Beneficiaries preferred programme to be maintained no matter the current challenges.		
Beneficiaries' perception of every two (2) months payment system.	Beneficiaries were split between monthly (every month) payment and bi-monthly payment system (every two (2) months).		
Whether beneficiaries apart from payment days met on other days to interact and share ideas on issues of common interest.	Beneficiaries did not meet on any other days apart from on payment days.		
Whether OVC beneficiaries were not engaged in child labour,	Child Labour –Not well defined		
were in school, were immunised and have birth certificates.	Schooling –Not all children were in school.		
,	Immunization –Not all children are immunised.		
	Birth certificate –Most OVC did not have birth certificates.		
Whether beneficiaries made any feedback into the LEAP programme for further improvements and strengthening of the programme.	Beneficiaries claim they did not make any feedback into the programme.		

SWOT Analysis of the LEAP programme

Table 4. Table showing a SWOT analysis of the LEAP programme drawn by implementing and beneficiary stakeholders

Strength	Weakness	Opportunities	Threats
Community based	There are lots of loop holes in the targeting process and procedure that needs to be addressed.	Potential for community evaluation and local ownership from community members in order to improve programme design and ownership.	Non LEAP beneficiaries accuse CLIC members of selecting their cronies and family members; this has affected community ownership, participation and management in some areas.
Community Participation	There are many CLIC members who are no long active, some have left their communities but have still not been replaced.	Programme has the tendency to attract more funding if it is well packaged and designed.	Non implementation of the LEAP exist strategy has hindered coverage levels.
The involvement of women	Lack of effective monitoring has hindered the achievement of targets and desired impact.	Potential to adopt local language and video show for community education, sensitisation and information dissemination to improve programme	It is very difficult to measure progress since there are no monitoring indicators thus; programme cannot attract enough
TTI (COTT) of 12 to d	Lack of vehicles especially at the local level has affected monitoring and effective supervision.	visibility at the local and national level.	funding from other donors. Too much emphasis on implementation rather than results
The concept of "Targeting" in the programme can help archive the desired/greater impact if it is well utilised.	Administrative Weakness- Inadequate staffing is affecting effective implementation and monitoring of the programme.	Prospects for long term economic growth and transformation if well implemented and monitored.	Poor targeting may affect the real essence of eliminating extreme poverty among vulnerable groups.
The use of conditionalities will enable the achievement of a multiple of other pressing problems.	Administrative weakness- Poor record keeping is affecting the measuring of progress.	Potential and prospects of effectively linking programme with other social policies and intervention programmes such as MASLOC, capitation grant etc.	Conditionalities will not be met because of lack of monitoring
Transparent cash transfer payment.	There is low education, sensitisation and information dissemination among and between beneficiaries.	Conditionalities can help eliminate cultural perceptions about education, immunization among others.	Low political commitment
The programme can easily be connected or linked to other social protection programmes.	Lack of clinics in most rural communities for ante-natal and post-natal care, baby weighing among others has affected the ability of beneficiaries to access free services from LEAP. This may rollback efforts at eliminating extreme poverty.	The provision of free NHIS registration, ante-natal and post-natal care can significantly help improve mortality rates as well as maternal health i.e. the achievement of MDG goals four (4), five (5), and Six (6) if well implemented.	Low education, sensitisation and information dissemination is negatively affecting free NHIS, Ante-natal and post-natal care, baby weighing and birth certificate registration. Thus, no concrete gains will be made after all.
The use of local language by CLIC members has Improved contact.	Lack of adequate staffing and resources has weakened supervision.	Programme can be used to introduce functional literacy among adults.	Irregular flow of funds likely to fuel apathy, slow public support and programme enthusiasm.
CLIC members are local individuals from beneficiary communities. This has improved trust for the programme.	Beneficiaries are not involved in programme evaluation or discussions for improvements and feedback.	The exclusive role of women in the programme can be effectively harnessed or utilized in order to enable them play the role of programme promoters.	Conflict and rivalry between LEAP beneficiaries and non beneficiaries has radically slowed down community level commitment in some areas.
	No monitoring indicators	Potential of linking programme to skills acquisition and trade.	Lack of a clear reporting system makes data on the programme not very readily available.
	Delays in transfer payments have affected the meeting of LEAP conditionalities.	Making the programme universal will make the programme more visible in order to attract more funding from other donor organisations.	There is too much emphasis and emulation of other models rather than relying on prevailing local conditions.
	There are many care givers in some communities who are men and this is negatively affecting the meeting of conditionalties and the acceleration of progress on poverty reduction.	avior organizations.	Poor and unrevised beneficiary's register has compounded the huge budgeting and costing constraints. This can affect programme sustainability.

threat to the smooth running of the programme. Thus, the main challenges to the LEAP programme were institutional factors. While institutional funding for the programme has been slow in coming especially from government, other donor sources of funding for the programme have been erratic and fragmented in nature. The funding problems have greatly delayed current expansion plans and strategies for the programme. At present, since June 2013 no single transfer has been made to LEAP beneficiaries, a situation which is impacting negatively on the lives of beneficiaries. Constraints in funding plus the huge accumulation of arrears since June 2013 has dampened the

morale of beneficiary stakeholders about the success and sustainability of the programme. Other donor stakeholders were however convinced that these delays are normal as associated with many other cash transfer programmes across the world. Over the years, programme monitoring has also been a major bottleneck to the programme. There are no monitoring indicators to measure progress of the LEAP programme. Again, there is lack of monitoring of the activities of beneficiaries, and on the spot monitoring of the activities of CLIC members in LEAP beneficiary communities. Revision and updating of LEAP beneficiaries register (deletion of dead

beneficiaries from the register) still remains another major loop hole that must be plucked in order to save resources for expansion. At present, there is no tracking system to check and roll in families that have become poor after the initial selection process was done in 2008. This is also true for extreme poor families who have moved into beneficiary communities after the initial selection process was done. Administrative constraints have also been a key challenge to the smooth implementation of the programme. Staffing problems have directly hindered effective monitoring of the LEAP programme and the activities of beneficiaries. At present, there is only one staff each in each district supervising the LEAP programme. This has put enormous pressure on most of the staff since they have to combine this with other additional roles as social welfare workers. Transportation for easy monitoring, facilitation and movement by District Social Welfare Officers has also been a major setback to the programme particularly in rural Ghana. While inadequate resourcing still remains a big challenge, the lack of an exit plan for old beneficiaries to leave in order to make room for new beneficiaries may defeat the real essence of reducing extreme poverty as well as limit coverage levels. At present, the programme has become a permanent source of income for some beneficiaries and this may lead to corruption and excessive abuse of the system. There was evidence that there were some beneficiaries on the programme who were not supposed to be on the programme. This may be a result of targeting failure or abuse of the system. This can negatively affect the political will and confidence of those in government and politicians. As a prescription, it will require more education, sensitisation and effective targeting to create visibility and to convince politicians about proper resource utilization, and the fact that the programme is achieving results and making the desired impact. At present, there is too much emphasis on implementation rather than the achievement of results. Again, there is excessive emulation of other models rather than a clear assessment of local level conditions. This has negative implications for the programme because the long term desired impact will not be achieved. Again, donors and politicians may be discouraged and hence will withdraw their support and resources for the programme.

Conclusion

In sum, considering the problems related to political sustainability and the enormous financial constraints associated with the LEAP programme, it is very critical for the programme to become part of a comprehensive safety net scheme with universal coverage. This will boost funding and commitments from politicians just like the National Health Insurance Scheme (NHIS). Again, what is also required is "the creation of suitable legal frameworks and proper institutional structures, accountability and citizen participation, the transparency of beneficiary registries and the search for crosssector synergies" (Cecchini and Madariaga, 2011). Even though cash transfers are a mechanism for addressing extreme poverty, cash transfers may lose their relevance if they are not well targeted. The LEAP targeting mechanism needs to be more sharpened in order to meet those hardly hit by extreme poverty. Much effort is required from politicians in order to make giant gains in the fight against extreme poverty. The development of the right political force will accelerate progress and support for the programme at governmental level.

Conditionalities such as the acquisition of birth certificate and the enrolment of children into school may not be achieved if government does not take steps to make these services available and free at the local level for LEAP beneficiaries. Other issues such as the non involvement of children in child labour can never be successfully achieved if what constitutes child labour is not given a local definition or broaden to include local factors.

The use of some conditionalities without recourse to the fact that such services cannot be acquired in some beneficiary communities and thus; any attempt to acquire these services outside the community may bring additional cost far in excess of the cash transferred is a very clear indication of the fact that the programme is technocrat based in terms of plan and design. Thus, the conditional aspect of the programme as a precondition for cash transfer benefits was not well thought out because schools and clinics for ante and post natal care do not exist in some communities and therefore the role of conditionalilties in the programme cannot be better served under such circumstances. The lack of monitoring indicators has made it very difficult to access the level of progress and impact of the programme. There are many beneficiaries who are not aware of the fact that they are suppose to benefit from free NHIS, ante-natal and post-natal care, baby weighing and birth certificate registration. There are many men instead of women who are care givers in some communities. This has the effect to widening gender disparities and limiting the role of women in community participation and household decision making. In Malawi the Mchinji pilot cash transfer programme relied on local government structures (District Assemblies) as its implementing channel or agency, but any attempt to replicate a similar move in the LEAP programme may have serious repercussions on the political front since it has the tendency to politicise the programme and limit community commitment and participation. In a similar move, any attempt to involve chiefs may complicate the whole process by increasing tension especially in communities that are already plagued by ethnic rivalry and chieftaincy conflicts.

Recommendations

General Recommendations

There are a number of steps that are required in other to achieve a good balance in the fight against extreme poverty. First, there must be sustainable employment especially in the informal sector. Investment in agriculture is one way out since it has the potential to trigger growth in rural economies. Introduction of new innovations, improvements in storage capacities and marketing can help. In a similar move, investment in agriculture will increased food production and revenues with improvements in road construction in rural areas and the provision of insurance for farm products. The promotion of accelerated education particularly on the supply side (more schools, teachers, teaching and learning materials) in order to improve more access at the basic level in addition to the introduction of functional literacy for adults in rural communities is urgently required. This will open the way for the smooth introduction and sustainability of more poverty driven programmes and projects.

LEAP Recommendations

Monitoring and supervision must be improved and tightened through institutional resourcing and the design and introduction of clear and measurable monitoring and evaluation indicators. There must be serious moves to institutionalise the LEAP programme as a comprehensive safety net and social protection system as a way of building synergy between technical competence, political will and resource availability and utilisation (Cecchini and Madariaga, 2011). Intensive education is urgently required in order to boost public knowledge and political support for the programme. The criteria for joining LEAP must be reviewed and conditionalities expanded and well monitored in order to accelerate growth. Officials must seek local support in order to make the programme more visible and to improve the levels of sensitisation at the local level. It is not late to review the entire programme, but this time with special emphasis on how to guarantee sustainable funding by making the programme universal, a critical consideration of local conditions and the meeting of realistic conditionalities.

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