



DESIGN NOTE 1

CLARISSA CASH PLUS: INNOVATIVE SOCIAL PROTECTION IN BANGLADESH

Keetie Roelen, Neil Howard, Jiniya Afroze, Afrin Aktar, Giel Ton and Lopita Huq
June 2023



Authors

Keetie Roelen, Neil Howard, Jiniya Afroze, Afrin Aktar, Giel Ton and Lopita Huq.

Suggested citation

Roelen, K.; Howard, N.; Afroze, J.; Aktar, A.; Ton, G. and Huq, L. (2023) *CLARISSA Cash Plus: Innovative Social Protection in Bangladesh*, CLARISSA Design Note 1, Brighton: Institute of Development Studies, DOI: [10.19088/CLARISSA.2023.002](https://doi.org/10.19088/CLARISSA.2023.002)

Copyright

© Institute of Development Studies 2023

DOI: [10.19088/CLARISSA.2023.002](https://doi.org/10.19088/CLARISSA.2023.002)

This note has been funded with UK aid from the UK government (Foreign, Commonwealth and Development Office, formerly the Department for International Development). The opinions expressed are those of the authors and do not necessarily reflect the views or policies of IDS or the UK government.



This is an Open Access paper distributed under the terms of the [Creative Commons Attribution 4.0 International licence \(CC BY\)](https://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original authors and source are credited and any modifications or adaptations are indicated.

Front cover photo

Community mobilisers talking to the HH members. ©Raj Debnath

Child Labour: Action-Research-Innovation in South and South-Eastern Asia (CLARISSA)

is a consortium of organisations committed to building a participatory evidence base and generating innovative solutions to the worst forms of child labour in Bangladesh and Nepal.

SUMMARY

Social protection, and cash transfers especially, have been found to have many positive impacts on families' lives and are now widely recognised as a cornerstone of any prosperous, fair society. The CLARISSA Cash Plus intervention is an innovative social protection scheme for tackling social ills, including the worst forms of child labour (WFCL). Combining community mobilisation, case work and cash transfers, it aims to support people in a poor neighbourhood in Dhaka to build their individual, family, and group capacities to meet their needs. An increase in capacities is expected to lead to a corresponding decrease in deprivation and community-identified social issues that negatively affect wellbeing, including WFCL.

KEY MESSAGES

- The CLARISSA Cash Plus intervention is unique and innovative in its universal and unconditional design, combining intensive needs-based and people-centred community mobilisation and case work with monthly cash transfers.
- Individuals, families, and communities are best placed to identify and prioritise needs, and the provision of open-ended, emergent support in combination with unconditional cash can enable people to find the best ways to meet those needs.
- In contrast to individually targeted schemes, providing support to everyone in a given community creates a context that facilitates collaboration and collective action, which targeted programmes are unlikely to achieve, making the intervention more effective and sustainable.
- Findings from this intervention offer key insights into how social protection can meaningfully contribute to ending WFCL, and meeting Sustainable Development Goal (SDG) 8 on child labour, by 2030.

OVERVIEW OF INTERVENTION

There is growing evidence on how interventions such as cash transfers positively impact children's and families' lives, including in the area of children's work. Yet within social protection, conditional and targeted transfers remain the norm. In addition, while an increasing number of cash transfer schemes are combined with complementary support such as coaching or skills training (also referred to as 'cash plus'), many of these are highly technocratic in nature with limited focus on individuals' needs and relationships, or the potential for collective action.

By contrast, the CLARISSA Cash Plus intervention is unconditional and universal across a given community, placing needs and relationships front and centre. The intervention takes place across a slum community in Dhaka, from October 2021 to December 2023, to test and study the impact of providing unconditional and people-led support to everyone in a community. The intervention is designed to increase the capacities of individuals, families, and community groups to become more resilient to shocks, choose alternative livelihoods, and improve their wellbeing. Participation in the intervention can address WFCL by enhancing people's freedom to choose alternatives to hazardous or exploitative child work, and respecting their autonomy and understanding of their own lived circumstances in the process.

'The intervention is designed to increase the capacities of individuals, families, and groups to become more resilient to shocks, choose alternative livelihoods, and improve wellbeing.'

The intervention consists of two components.

First, a *relational component* that involves needs-based community organising (NBCO) with a group of 20 community mobilisers who work from a centrally located office. Their goal is to collaborate with community members at the individual, family, and group level to identify needs, mobilise resources to address those needs, and to grow agency and capacity of the people they work with in the process. These community mobilisers began work in October 2021 and will continue until December 2023. The team received extensive training in core skills such as non-violent communication, facilitation, conflict mediation, disability inclusion, and safeguarding.

The size of the community mobiliser team has been set at a level that would allow an intervention such as this to be taken to scale by a state. The case load is therefore set to be higher than typical for social work but lower than usual for community organising, at 20 community mobilisers to roughly 1,500 households (case load 1:75). As a result, in contrast to traditional interventions which rely on top-down, criteria-focused methods of selection, the choice to collaborate with community mobilisers is left to individuals, families, and groups of community members. This honours their own willingness and constraints to participation, creates ownership, and enhances effectiveness.

Second, a *cash component* with monthly unconditional transfers to all households, recognising that cash is a vital resource and can augment the process of building agency and capacity. Six monthly cash transfers are delivered in the form of mobile payments (through Upay) between January and June 2023, coinciding with the ongoing relational component. Transfers consist of a basic amount for all households (2,000 Bangladeshi taka, or BDT), topped up for each additional child under 18 years of age (500 BDT). This approach to determining transfer amounts recognises the greater levels of vulnerability associated with having more children in the household. The cash is transferred to a primary recipient, who is selected through conversation with community mobilisers, encouraging families to select the person who is best able to use the transfer for the benefit of the whole family.

LEVELS OF OPERATION

The CLARISSA Cash Plus intervention operates at three levels, with activities creating positive, mutually reinforcing feedback loops.

First, at the *individual level*, community mobilisers operate akin to case workers in supporting activities that benefit from tailored collaboration at this micro level, such as service referrals (to affordable health care, for example), help in accessing services (such as obtaining a national identification card – often a precondition for accessing services) or psychosocial support.

Second, at the level of the *family and/or household*, community mobilisers again operate like case workers, working with families (within and beyond the confines of the household) to prioritise their needs and discuss how best to address them. Activities include mediation (in case of intra-family conflict) and mentoring. Critically, their offerings are responsive to needs and requests, rather than directive interventions based on risk profiling seeking to incentivise desired behaviour. In one example, when community members made an urgent request to improve access to health care, community mobilisers sought collaboration with a non-profit health care provider to offer monthly ‘health camps’ locally where community members could receive basic health care at low cost.

Third, at *group level*, community mobilisers also work as community organisers, seeking to weave threads of collective power and catalyse change. Issues that community groups work on emerge in various ways.

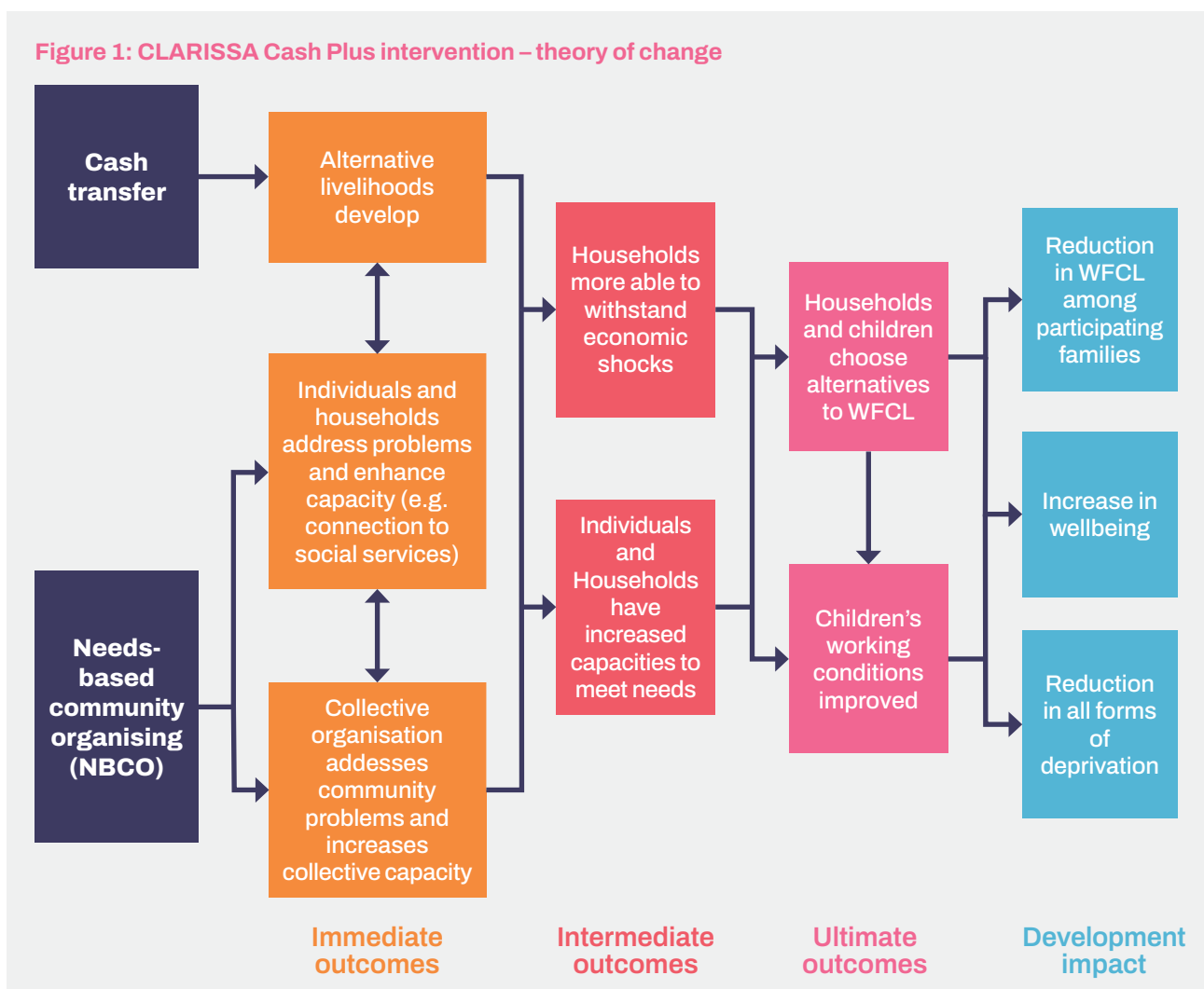
First, during the planning stage for the intervention, community-wide analysis raised several key concerns (for instance, around high levels of debt, strained relationships within families and communities, poor access to health

care and schooling, and lack of waste management). Community members were subsequently asked to participate in groups to discuss how to address these issues. One adult group convenes around the issue of parent–child relationships, and how these can be improved. One children’s group works proactively to tackle environmental issues and pollution within the slum community.

Second, formation of groups took place since the start of the intervention, as and when other needs emerged, and community members pulled together to try and address them. These priority needs were identified either following direct requests by community members or based on community mobilisers’ observations. Various groups have formed in this way, including: female heads of household finding solutions to common challenges such as childcare; adolescent boys discussing how to use their leisure time with sports instead of social media; adolescent girls discussing how to be safe in the community and at work; and community members discussing how to start alternative income-generating opportunities.

THEORY OF CHANGE

The theory of change behind the CLARISSA Cash Plus intervention (see Figure 1) illustrates how the interaction between the two programme components is expected to lead to immediate, intermediate, and ultimate outcomes, and therefore to development impact.



The relational component (NBCO) and the cash component (cash transfer) together result in immediate effects on people's livelihoods and capacities to meet needs at the individual, family, and community levels. This translates into intermediate and ultimate outcomes including – it is anticipated – a reduction in children's engagement with WFCL. Note that intermediate outcomes are considered to be within the intervention's direct sphere of influence, but ultimate outcomes and development impacts lie outside of such direct influence. There are simply too many other factors that influence these outcomes.

Against the backdrop of the theory of change, the intervention's research design is framed around an evaluation question and research question. The evaluation question asks: 'For whom, under what conditions, and why does the intervention improve the ability to choose alternatives to WFCL?' The research question asks: 'How does the cash transfer influence the effectiveness of the NBCO activities?' Answers to these questions will be available after the end of intervention, in 2024 and will contribute to the evidence base and a lively policy debate on the role and cost-effectiveness of 'cash plus' programming, the potential for basic income, and alternative ways to tackle child labour.

'Desirable and undesirable social phenomena have causes that interlink and overlap, and change often happens in unanticipated ways, with the most effective route not always the most obvious or direct one.'



Community mobilisers talking to the HH members. ©Raj Debnath

CHALLENGING PREVAILING PRACTICE

The intervention, and the findings of its evaluation, aim to challenge policy and practice in social protection in four ways.

First, the intervention is *universal*. Whereas many other social protection schemes are often narrowly targeted to poor or vulnerable groups, the CLARISSA Cash Plus intervention takes place across an entire community, with every household eligible for both the relational and cash component. This decision avoids ethical pitfalls associated with within-community targeting and sets the conditions for unanticipated, emergent change through collective action when all community members participate in a shared experience.

Second, the intervention is *unconditional*. Many cash transfer programmes that aim to improve children's outcomes or family wellbeing are conditional, making receipt of transfers contingent on school attendance (for example). The effectiveness of conditionality is contested, but often has negative ethical and practical consequences. The CLARISSA Cash Plus intervention's cash component has no such conditions, allowing programme participants to make decisions they feel are most appropriate to their situation.

'Every human has needs, and experiences suffering when those needs are unmet. Acknowledging the importance of human needs, being attentive to those needs, and finding ways of meeting them are foundational to our intervention.'

Third, the intervention is *needs-centred* and *people-led*. Every human has needs, and experiences suffering when those needs are unmet. Acknowledging the importance of human needs, being attentive to those needs, and finding ways of meeting them are foundational to the intervention. Community mobilisers' engagement builds around and is led by the needs and desires expressed by the people they work with, collaboratively and creatively formulating (new) ways of meeting those needs. This contrasts with current practice in 'cash plus' programming that often provides complementary support in a pre-defined manner, with limited tailoring to participants' circumstances. This approach is anticipated to lead to greater participation, appropriateness, ownership, and effectiveness.

Fourth, the intervention is *open-ended* and *emergent*. Instead of pushing participants in any specific direction (towards, for example, 'child issues' like labour or schooling) – as is common in many social protection interventions – community mobilisers remain open as to what issues to focus on and with whom. This recognises that desirable and undesirable social phenomena have causes that interlink and overlap, and that change often happens in unanticipated ways, with the most effective route not always the most obvious or direct one.

FURTHER READING

Howard, N. (2020) *Towards Ethical Good Practice in Cash Transfer Trials and their Evaluation*, CLARISSA Working Paper 3, Brighton: Institute of Development Studies (accessed 12 June 2023)

Roelen, K.; Howard, N.; Paul, S. and Mathur, V. (2020) *Children's Engagement with Exploitative Work in Dhaka, Bangladesh*, CLARISSA Working Paper 4, Brighton: Institute of Development Studies (accessed 12 June 2023)

Ton, G.; Roelen, K.; Howard, N. and Huq, L. (2022) *Social Protection Intervention: Evaluation Research Design*, CLARISSA Research and Evidence Paper 3, Brighton: Institute of Development Studies (accessed 12 June 2023)



T +44 (0) 1273 606261

E clarissa@ids.ac.uk

W clarissa.global

T [@ChildLabourActn](https://twitter.com/ChildLabourActn)

F [#ChildLabourAction](https://facebook.com/ChildLabourAction)

T +44 (0) 1273 606261

E ids@ids.ac.uk

W www.ids.ac.uk

T [@IDS_UK](https://twitter.com/IDS_UK)

F facebook.com/idsuk

CLARISSA works by co-developing with stakeholders practical options for children to avoid engagement in the worst forms of child labour in Bangladesh, Myanmar, and Nepal.

The participatory processes which underpin the programme are designed to generate innovation from the ground which can sustainably improve the lives of children and their families.

The programme's outputs are similarly co-designed and collaboratively produced to enhance local ownership of the knowledge, and to ensure that our research uptake and engagement strategy is rooted in the direct experience of the people most affected on the ground.