

The Evolution of Social welfare in Lesotho

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Abstract

Like many other African countries, after gaining her independence forty years ago, Lesotho has also endured a lot of political, economic, social and cultural upheavals all of which have in turn triggered multiple social and humanitarian problems. Some of these problems can be traced back to the colonial era. Evidently, some response measures which were instituted to ameliorate the resultant situations have mainly been inherited from colonialism as well. Thus, the welfare model and social security system in Lesotho have been founded on Western European institutional policy framework which placed greater emphasis on the residual welfare system. Since gaining independence, Lesotho has undergone great social change which requires even a stronger multi- sectoral intervention from Government, voluntary and private sectors.

This paper is therefore an attempt to trace the history (the nature and scope) of Social welfare in Lesotho. Firstly, the paper will focus on the influence of the social, cultural, economic and political histories on the current Social welfare system. Secondly, it will then look into the Social welfare system in Lesotho before and after gaining independence. Finally, the discussion will look at the contemporary and future challenges on the Social welfare system in attempting to overcome people's needs.

Introduction

Social welfare constitutes an integral part in all governments' attempts of alleviating suffering and promoting social development. Lesotho like many other African countries has a history of multiple social catastrophes that have hindered human development and greatly affected its citizen's well-being. Lesotho has suffered immensely due to mounting social problems that have been prevailing for long. Among others, poverty can be singled out as having bred and exacerbated other counter problems like unemployment, HIV/AIDS, substance abuse, child abuse, domestic violence, retrenchment of workers from the mines, the effects of natural disasters and HIV/ AIDS. This situation has raised a need for measures of intervention and plans that will change this situation of despondency into that of hope. To face these challenges new and responsive social welfare programmes have to be initiated and the existing ones should be strengthened.

Over the past ten years, Lesotho has experienced an increase in poverty levels both in absolute and relative terms. Thus, the proportion of the population defined as poor has increased significantly since the 1990s. In

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2002 it was inclusive of 68% of the households who were found to be poor on the basis of income levels (Wason and Hall, 2002). Thus, according to Sechaba consultants (2000), two-thirds of the population lived in destitution with barely enough cash income to satisfy basic food needs. The 16th follow up session of the world summit for social development has indicated that to a very great extent persistent inequalities also exacerbate poverty, high unemployment rates, lack of access to resources like land and further limit the productive capacity of the poor people. Thus, the increasing and unbearable conditions of poverty which can be closely linked to the declining agro-economy, the increasing population and increasing demand for food forces (Chronic food insecurity), have also compelled the Basotho to seek alternative means of livelihood, failing which they have to resort to social welfare schemes to get protection against contingencies they are confronted with. According to Zastrow (1995:5), social welfare can be broadly defined as a "nation's system of programs, benefits and services that help people meet those social, economic, education, and health needs that are fundamental to the maintenance of society".

Recently, one major problem that has severely hampered the Basotho's wellbeing has been HIV/ AIDS. Not only has this had a very debilitating effect on the country's economic situation, but evidently, the premature death of parents has also increased the number of orphans. As the number of AIDS related deaths increases, the number of orphans and vulnerable children (OVCs) increases (Kymario et. al., 2004). This increase is likely to create a vicious circle as already stretched coping mechanisms are unable to respond, thereby increasing the risk and vulnerability of these children (United Nations, 2004). Overstressed and in many cases already overwhelmed, the extended family networks face ever-greater burdens as the number of orphans continues to spiral upward (UNICEF, 2005). In view of these problems, there is a huge challenge facing both the old and the young as the essence of assisting one another through the extended family has lost its grip. This is indicative of the detriment of the informal systems in meeting personal needs.

Wason and Hall (2002) have noted a sharp decline in the number of households that are able to assist poorer relatives and the lapse of traditional support mechanisms which are not able to maintain the increasing number of destitute households. They further observe the failure of the market-driven economy to distribute wealth to the poor as it is not being compensated for by official safety net projects or social welfare efforts. Thus, although some formal strategies for alleviating human suffering and providing an acceptable minimum standard of living have been instituted, Lesotho being a developing country cannot afford to maintain the full-fledge social welfare system.

From the pre-colonial period to date, the Basotho have had their distinct indigenous ways of responding to people's social needs and improving their quality of life. Having noted that some economic upheavals and westernization have greatly undermined the viability of these arrangements, this paper aims to provide a sound orientation to the origins and practice of social welfare in Lesotho. Having noted that there is also dearth of literature in the areas of social security and social welfare in Lesotho, this paper also hopes to fill in these gaps. This paper is mainly a product of desk research and experiences drawn from the author's professional involvement in social welfare service provision. It discusses the history of the social welfare system in Lesotho in three phases, namely, the pre-colonial, the colonial and the post colonial periods. Finally, it concludes with a reflection of the contemporary challenges facing the Lesotho social welfare system.

The History of Social Welfare in Lesotho

The Pre-colonial period

Generally, the indigenous Social welfare system of Lesotho has been driven by the spirit of humanity, solidarity and reciprocity. Above all structures, culturally the family had an obligation of providing for all its members through all possible means. As Kaseke (1999) contends, children were seen as a source of social protection against the contingency of old age which also explains why African families are so large. The Basotho society has always upheld the principle of helping each other through certain culturally recognized societal structures, one of which is the extended family. Lesotho, like in many African countries "...the extended family was an important social security institution, providing support to its members based upon culturally determined patterns of mutual assistance" (Kaseke, 1998).

In the case where the family was failing to provide for its members, other social institutions like the Chiefs or the society would take over. For the Basotho, the Chief did not only play a leadership role but he assumed a pivotal role of ensuring that the wellbeing of all was taken good care of psychologically and materially. It was his sole responsibility or in partnership with the community to make sure that at least all had food and shelter. As a result, there was a traditional communal agricultural system called *matsema* (work parties), whereby community action groups assisted each other especially in ploughing and harvesting the fields. In line with this system, the Basotho often engaged in share cropping- *seanlolo* -whereby at least two households would jointly form a farming unit and agree on the terms of each individual's contribution. Complementarily, there was a patronage system called *mafisa* (loan cattle system) in which a rich cattle owner loaned one or more head of cattle to a poor man who had none. He would be responsible for taking proper care of the animals. As Eldredge

(1993) indicates, in return of caring for the animals, the loaned person had the right to the milk produced, some of the offspring and he could plough with them or use them for transport. These proved to be beneficial welfare systems whereby no member in the village would go to bed on an empty stomach more especially the needy, the old, the sick, widows and orphans. To a great extent these indigenous survival strategies and practices were diffused and overshadowed by colonialism and its resultant factors.

The colonial era (1868- 1966)

The origins of the formal social welfare system in Lesotho can be traced back to the 19th Century whereby it was mainly aimed at addressing social problems and meeting human needs arising from colonialism at large and industrialization in particular (Patel, 2005). Not only has colonialism resulted in a situation whereby the Basotho lost their most fertile land with rich mineral deposits to European settlers, but they also fell prey to enormous social changes on their traditional practices. Thus, the permeation of colonialism has had a very powerful effect in shaping the present social welfare system in Lesotho and also further triggered drastic social changes. As McPherson and Midgely (1987) contend, colonialism has disrupted and disintegrated most traditional forms of Social welfare. Similarly in Lesotho, organized Social welfare services emerged with the destruction of indigenous forms of welfare provisions (Nyanguru, 2003). On this note Rostow (1960) contends that colonial and post independence governments adopted residual social policies compatible with the basic assumptions of development within the framework of modernization theory. It was argued that the welfare policies introduced thereof were meant to get rid of the socio- cultural factors that acted as barriers against economic and social advancement which are embedded within the traditional cultures. Such policies were inclusive of "population control, community development with its emphasis on self- help, the fostering of community integration, the creation of democratic institutions and modification of attitudes and values" (Patel, 1992:28).

Being a neighbouring country to South Africa, Lesotho also endured the aftermaths of industrialization which came as a result of mineral discovery in the 1860s. This contributed to the transformation of the traditional and social structures and depreciation of the rural subsistence economy, the results of which were labour migration, urbanization, excessive poverty, poor housing and health problems. More counter problems further emerged out of this transition. Lesotho lost most of its men to the South African mining industry and consequently the agricultural economy declined exorbitantly, families became disintegrated and social problems mounted at an alarming rate. On this note, Eldredge (1993:199) explains that the Basotho did not choose to work as migrant workers because

they had developed new tastes for European-made goods but they were propelled by the difficult living conditions. These changes impacted heavily particularly on the lives of children, the elderly and people with disability and social problems like poverty became the order of the day for the majority. The Basotho had to adopt the colonial means of living, culture, forms of social organizations as well as welfare systems, all of which came in the name of civilization. The good cultural practices of giving and helping one another as well as solving each other's problems were slowly dissolved.

According to Midgley (1995), the missionary and secular philanthropy also attempted to alleviate the situation by providing social welfare services to the poor. Thus, to a certain extent, the colonial era in Lesotho has also been characterized by Christian philanthropy and charitable giving. Christianity like most of the religions advocated for provision of charitable giving to the needy and thus the church made quite a significant contribution in providing for them. For some philanthropic organizations, illegibility to social welfare services was sometimes determined on the basis of religious affiliation or the notion of the worthy poor. However, Patel (1995) contends that although this philanthropic approach to social provision was of humanitarian value it has also undermined indigenous and traditional systems of giving and the provision of social support.

In response to the collapse of the indigenous social welfare system, the poor Basotho established other survival strategies which may be termed the "informal social security system". These are mutual aid societies which are made up of stockvels, burial schemes, savings clubs and others. Triegaardt (2005) observes that these arrangements are oriented towards meeting the immediate and future needs of both men and women. At first these were more popular in the urban areas than in the rural areas, but they are slowly being adopted even among the rural population. Although Triegaardt (2005) further argues that these systems may not provide sustainability and protection of members from vulnerability, they have proved to have alleviated some of the social problems prevalent among the poor. On this note Olivier (2004) propound that self-organised mutual support systems have emerged partly because of the weakening or inadequacy of traditional support systems or the absence or inadequacy of conventional formal social security systems. They are thus intended to fill a gap or satisfy the needs that cannot be adequately met by traditional support systems and conventional social security systems.

The Post colonial era

After gaining her independence forty years ago, Lesotho endured a lot of political, economic, social and cultural upheavals, all of which have in turn triggered multiple social and humanitarian problems which are reigning even today. Evidently, this situation called for intervention through some

responsive and formalized social welfare mechanisms. Since some of these problems are remnants of colonialism, some response measures which were instituted have in turn been inherited from colonialism. Thus, the social welfare model in Lesotho has been founded on the Western European institutional policy which placed greater emphasis on the residual welfare system.

Since its inception, the Department of Social Welfare has been following the residual approach in social service delivery. The residual approach holds that social welfare institutions come into play when the family and community networks or the private market and normal systems fail to deliver. It can be associated with conservatism as a philosophy that upholds the idea of individual responsibility for meeting human needs. The residual approach is associated with minimal state intervention in the provision and financing of Social welfare services and social security (Wilensky and Lebeaux, 1965). Service delivery in the Department is actually aligned with this approach whereby Government maintains that amongst some of the planned strategies for reducing poverty, it will empower local community structures by resuscitating the extended family structures (Lesotho Government, 2005).

In Lesotho, structured social welfare services were introduced and mainly rendered through religious institutions/ churches and voluntary organizations. With time, Government with complementary assistance from the private sector and the civil society took part in managing social problems and providing social benefits/ programs. Resultantly, in 1976, the Government of Lesotho established the Department of Social welfare whose mandate was to alleviate human suffering, more especially poverty among the vulnerable groups in society (Government of Lesotho, 2002 and Department of Social Welfare, 2007).

The period from 1994 to 2004 saw a wide response from the general community on issues relating to people's welfare but more particularly on children's welfare and protection, the welfare of the most needy and people with disability. Among other issues, the Departments of Social welfare and Probation Unit took initiatives of addressing the deficiencies of the Children's protection Act No 6 of 1980 (CPA). This realization resulted in the establishment of the Child Legislation Reform Project Committee in 2000 (CLRPC) (which later changed into the Child Legislation Advisory Committee) within the Lesotho Law Reform Commission. Hence, the Department of Social welfare received continuous support mainly on Children's issues from other government ministries and Departments, Faith Based Organizations (FBOs) and Non- governmental Organizations (NGOs) (Qhubu, 2006). Through these remarkable efforts, in 2004, The Child Protection and welfare bill was developed. In line with this process, a

number of working documents that are meant to address everyone's well-being have been drawn namely, the National Social welfare policy of 2003, Social welfare strategic plan 2005, the National OVC policy 2005, Residential Care guidelines and standards 2006.

Complementary endeavours were also made to try and advocate for support to the Social welfare agencies and the Profession of Social Work. These included formation of the Lesotho Association of Social Workers in 1993. The Association aims at addressing challenges confronting Social work as a profession and the delivery of Social welfare services through Social welfare agencies in Lesotho. These included the problem of shortage of social work professionals which consequently affected efficiency in the profession (Lesotho Government, 2002). To overcome this situation, the National University of Lesotho introduced a Social Work Degree program in 2000. Not only has this move alleviated the problem of shortage of social work Professionals in the country at large but it has also added value and drawn recognition to the field of Social work.

The Department of Social welfare in Lesotho provides mainly selective social services to those people who cannot be supported by their families and the private market more especially children in difficult circumstances including Orphaned and Vulnerable Children (OVC), the poor/ destitute and people with disability. This principle of selectivity involves the targeting of resources at selected groups who are considered to be most needy/ deserving as determined through an established eligibility criterion (Patel, 1992). Such assistance is provided on a short- term basis and ceases once the crisis is over. To a certain extent Social welfare in Lesotho also bears an element of universality as it has provision for specific categories child and youth, adult and others as enshrined in the National Social welfare policy (Lesotho Government, 2002).

Lesotho has also adopted the two common forms of social security, namely, social assistance and social insurance. Under social assistance, Lesotho operates a non- contributory social relief, war veterans' allowance, old age pensions and public assistance programmes. Public assistance is a state funded programme which is provided either in cash or in kind to the destitute. When the programme was first instituted in 1976, it was referred to as paupers' allowance. The programme is primarily targeted at vulnerable groups such as people with severe disabilities, the chronically ill, the most needy OVC and dependants of indigent persons. The scheme is means-tested and is administered by the Department of Social Welfare. Eligibility for assistance is also determined through a means test which uses minimum criteria. Through some client interviews, home- visits/ assessments and case follow-ups, Social workers then determine a person's eligibility. The programme is inadequately funded, consequently only a few needy persons

are assisted each year. Complementary to this, there is an arrangement for recipients of public assistance to get an exemption from paying medical fees in Government owned hospitals. However, there are quite rigid terms guiding this service. Similarly, they may be assisted on the basis of the official's discretion. There is also a non-contributory old age pension scheme for people over the age of 70 years which was introduced in 2000. Additionally, Lesotho still has War veterans' allowance which is also non-contributory. This allowance is meant for those who took part in the World wars or their spouses. At the moment this is received by just a few people and very soon it will be phased out. Lastly, there is what is called social relief which is also non-contributory, needs tested and provided to individuals or communities who are in emergency situations such as natural or man-made disasters.

There are also some contributory social security schemes which include social insurance schemes, accident prevention and workers compensation scheme and private savings. Social insurance as one other form of social security, offers benefits to cover risks which are wage related but contributory, these include, pensions, medical benefits and maternity benefits. It further provides protection against the contingencies of the retirement and death of the breadwinner. However, as Kaseke (1998) indicates, in many African countries, the low wages make it extremely difficult for workers to contribute to this scheme because contributions take away income which could contribute to meeting immediate needs.

The second scheme is the accident prevention and workers compensation scheme, which provides protection against the contingencies of injury and death occurring at the work place. The scheme does not cover civil servants, domestic workers, casual workers and those employed in the informal sector. It is entirely funded by the employer. The benefits payable include a disability pension, a widow or widower's pension and dependent's allowances. The aim of the scheme is to ensure good health and safety at the workplace.

There are also occupational pension schemes which are operated by employers through the support of private insurance companies. It is not available for those outside the formal wage economy or those in informal employment, sometimes called "piece jobs. Most of these schemes mainly provide protection against retirement.

In a nutshell Lesotho does not have a comprehensive social security system and this means that its only a few whose needs are addressed while majority are still struggling with problems of unemployment, social and economic problems as a result of HIV/ AIDS.

Challenges facing the contemporary and future social welfare system in Lesotho

As Patel (1995:19) indicates, “the meaning of social welfare and the assumptions underpinning Social welfare are intensely political and ideological and continue to shape the debate about what the direction for social welfare should be in a society”. To a very large extent, the history of social welfare in Lesotho, and the country’s level of development have had a significant influence in the current Social welfare system. In turn, the introduction of a social welfare system in Lesotho has also met multiple challenges. Most of them emanated from lack of political will as well as the authorities’ limited understanding of social welfare in general and the profession of Social Work in particular. This led to a situation whereby with the introduction of new forms of governments, the Department of Social welfare has also been moving from one Ministry to the other. On inception, it was first integrated into the Ministry of interior affairs and later on into the Ministry of Justice. With time it was into the Ministry of Employment. From 1993 to date, the Department has been incorporated into the Ministry of Health (Lesotho Government, 2005). These continuous shifting in-between Ministries greatly affected the stability of the Department and its performance. Coupled with this, one of the greatest challenges that have faced the Department for long is the problem of lack of staff which has made it difficult for them to execute the main objective of Social welfare which is to attain a state of human well- being (Midgley, 1997). The fact that government did not offer sufficient support to the Department of Social welfare, this state of affairs also impacted negatively on other complementary government owned bodies like the Department of Probation Services and the Department of Correctional services’ Rehabilitation Unit in the Ministry of Justice and Human rights.

Thus, one of the greatest challenges that faced the Department of Social welfare has been poor recognition from Government that in turn led to poor service delivery. This state could partly be attributed to government’s limited understanding in the area of Social welfare and the low status accorded to the Department (Lesotho Government, 2005). The Department has always battled to get resources (human, financial and material) in order to improve its services. In an attempt to change the situation, joint efforts were made by both the Department in particular with complementary assistance from other government Departments rendering welfare services (both in the Ministry of Justice and Human rights) to lobby for government support.

Overtime the international community also realized that this situation really impeded overall social development. Thus, the period from 2000 has been characterized by commendable developments. As indicated

before, through concerted efforts from various government ministries, especially the Ministry of Justice, Human rights and probation, Ministry of Home Affairs, Ministry of Education, NGOs, CBOs , FBOs and the International organizations, the system has enjoyed overwhelming achievements which include the formulation of a National Social welfare policy and the National Social Welfare Strategic Plan 2005-2010. According to the policy the focus of Social welfare shall cover the following areas; child and youth services, adult and elderly care services, mental health services including psychosocial support, disability services, substance abuse services and probation services such as children in conflict with the law, including the administration of relevant legislation.

However, the policy is also likely to face great challenges. These include deepening poverty, HIV/AIDS and the resultant effects, unequal distribution of wealth and social services that will make implementation quite difficult. Interestingly, amongst some salient issues, the policy observes the longstanding government stance that the family should be the main provider and yet so far very little has been done in introducing economic and social mechanisms and policies to strengthen the family structures. It is imperative that the policy should observe that for the Social welfare system to be responsive to the welfare needs of the nation, it has got to overcome these problems and the fact that they have been prevailing for long. As indicated earlier, one major problem that affects the vast majority of the population in Lesotho is poverty and the poor in turn constitutes most of those in need of social services and one would expect the Government owned Department of Social welfare to be playing a leading role in poverty alleviation particularly through administering a comprehensive social security system. Although the problem can only be addressed through a multi-sectoral and an integrated approach, there is still an outstanding need of ensuring availability of social services/resources to alleviate their situation. As the Policy suggests, there is a need for administering a developmental approach in service delivery as opposed to the 'welfarist' approach that Lesotho has been applying for long. The welfare service delivery model that has/ is being used was based mostly on a social treatment approach to service delivery that mainly emphasized on remedial action, social pathology and individual clinical practice (diagnosis and treatment). Complementarily, one of the observed limitations in Social welfare service delivery is the failure to explore other levels of social work, namely group work and community work which encourages people to jointly utilize their skills and gain the ability to look after themselves.

In as much as the policy advocates for full- fledged social security program, this would mean a need for engaging more Social workers and Social service providers to administer the services. Considering the magnitude of people who require social services and the complexity of their

problems thereof, there is definitely an urgent need of more staff. As a result of shortage of staff, there is substantial dissatisfaction from clients regarding delayed follow-ups on applications, delays in payments, inability to verify the number of clients' in each scheme and their records, the lack of up to date information about applicants as most of the data is handled manually and computerized. In addition to that, there is an evident need of strengthening the administration by ensuring that there are specific persons who are responsible exclusively for managing the social security schemes.

Additionally, gender, sectoral and geographic disparities have also created significant distortions in the delivery system. In general, welfare service provision has a geographical bias. Services are not always located in underprivileged communities. The need for more services is more evident in the rural than in the urban areas. As research has shown, most of the poor and disadvantaged are found in the rural areas but they are unable to access services due to their geographic location, financial constraints especially transport fares to the welfare agencies and to a certain extent due to ignorance. On this note, Olivier (2005) says that the importance of public awareness campaigns cannot be overemphasized, but then one should be clear about the target audiences which should include not only members, beneficiaries and the public at large, but also trade unions, employers and employers' organizations, policy makers, lawmakers and politicians, as all of them require a clear understanding of social security in order to fulfil their respective roles. This has been tried and tested in a country such as Ghana. In addition, for Lesotho to address social problems like poverty and the effects of HIV/ AIDS there is an urgent need to adopt and apply community oriented social services and also appreciate the contribution that can be made through developmental social work.

Conclusion

The indigenous social welfare system of Lesotho has proved to be responsive to the needs of the groups that could be categorized as the most vulnerable in various ways. Evidently, the semi- formal social security schemes have also proven to be stronger mechanisms for poverty alleviation and prevention. These practices have held participatory approach whereby people were being assisted to help themselves just as it is encouraged in the Profession of Social work. Although, westernization coupled with colonialism had a great influence in changing the Basotho indigenous system, there is still a belief that some of the practices need to be revived and strengthened as complementary arrangements to the formal social security system. The expectation is for the poor, people with disability and OVC to get social protection but one cannot turn a blind eye to those in transient poverty and the structurally unemployed workers who also need the same support. This implies an urgent need for a comprehensive social

security system and more organized developmental welfare strategies efforts in responding to the individual and community's felt needs. This raises a need for having more Social workers and social service providers in place to enhance service delivery. Considering the magnitude of Poverty and HIV/AIDS in a poor country like Lesotho, the Social Work Profession and Social welfare agencies face very serious challenges of designing and implementing programmes that require a balanced response between the state, the family and the community.

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