



CLARISSA

Social Protection Intervention  
– Preliminary Findings



# CLARISSA Social Protection Intervention – Preliminary Findings

## Introduction

This report was prepared in October 2023 on behalf of the CLARISSA Social Protection (SP) team. It documents preliminary findings from their trial of an innovative social policy intervention for tackling poverty, improving wellbeing, and addressing the causes of the worst forms of child labour (WFCL). The intervention is a universal and unconditional cash plus programme, combining intensive community mobiliser support and case work with household monthly cash transfers. It has been implemented between October 2021 and December 2023 across Dhaka's North Gojmohol neighbourhood by Terre des hommes Bangladesh (TDH) and is part of the wider [CLARISSA programme](#), led by the Institute of Development Studies (IDS) and funded by the UK's FCDO. This note is based on preliminary findings from our mixed methods evaluation. Quantitative data includes 11 rounds of bi-monthly monitoring information collected between December 2021 and August 2023, supported by three rounds of surveys. Qualitative data includes three rounds of in-depth interviews and focus groups with children and their families and monthly reflective reports written by the project's community mobilisers.

### Key Messages

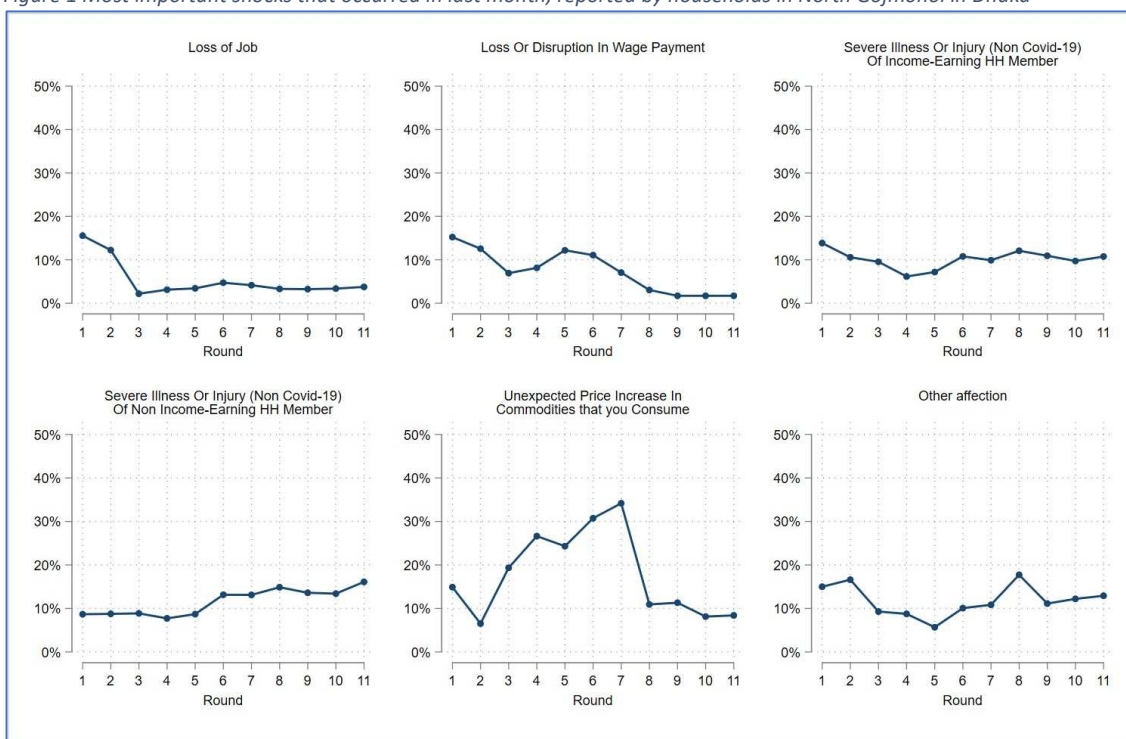
1. Urban poverty is multi-faceted and low-income residents face many intersecting crises, with health shocks and costs of treatment among the most significant. Reducing food consumption, taking children out of school, taking on extra work, borrowing from expensive lenders, and putting children in (hazardous) employment represent common coping strategies for poor households. Limited civil society or state support is available or accessible.
2. Unconditional cash transfers promote resilience in the face of crises. They increase resources, enhance financial resilience, and support families to absorb shocks without having to turn to damaging coping strategies such as the above.
3. Unconditional cash is also associated with multiple individual and household-level improvements. These include: improvements in household ability to earn sufficient income through enabling investments in productive assets; increased wellbeing and reduced stress as a result of improved financial resilience; a greater sense of agency; better nutrition; and the chance to re-start school for those who have dropped out.
4. Alongside cash, community mobiliser support and household-level case work also function as a form of social protection, with benefits enhanced due to the combination with cash. Community workers connect the urban poor to services; improve access to and take up of existing social protection mechanisms; advocate for resident interests; and provide a range of bespoke services tailored to recipient needs, such as employment training programmes.
5. Needs-based organising is essential in the provision of community support and case work. It enhances dignity, supports community ownership, and creates space for appropriate, community-led responses to community-identified problems.



## Message #1: Urban poverty is multi-faceted and low-income residents face many intersecting crises.

Families in North Gojmohol face multiple shocks on an ongoing basis. Figure 1 shows that between December 2021 (Round 1) and July/ August 2023 (Round 11), socioeconomic shocks were a common experience. Job loss or disruption in wage payment were experienced by nearly one in five households in late 2021 and early 2022 when the effects of Covid-19 were still reverberating. From mid-2022, price inflation was increasingly reported as a significant blow to household livelihoods. The overview below also shows that severe illness or injury to income-earning and non-income earning members of the household are routine, affecting one to two of every ten households *every single month*.

Figure 1 Most important shocks that occurred in last month, reported by households in North Gojmohol in Dhaka



Source: Authors' calculations based on CLARISSA bi-monthly monitoring survey data, rounds 1-11

### CASE STUDY 1: The Cost of Ill-Health

Boy: We had to borrow 4 lakhs taka due to my father's illness. He was paralyzed on one side of the body after having a cold while working. He did his treatment in Dhaka. We are still in debt of more than fifty thousand taka.

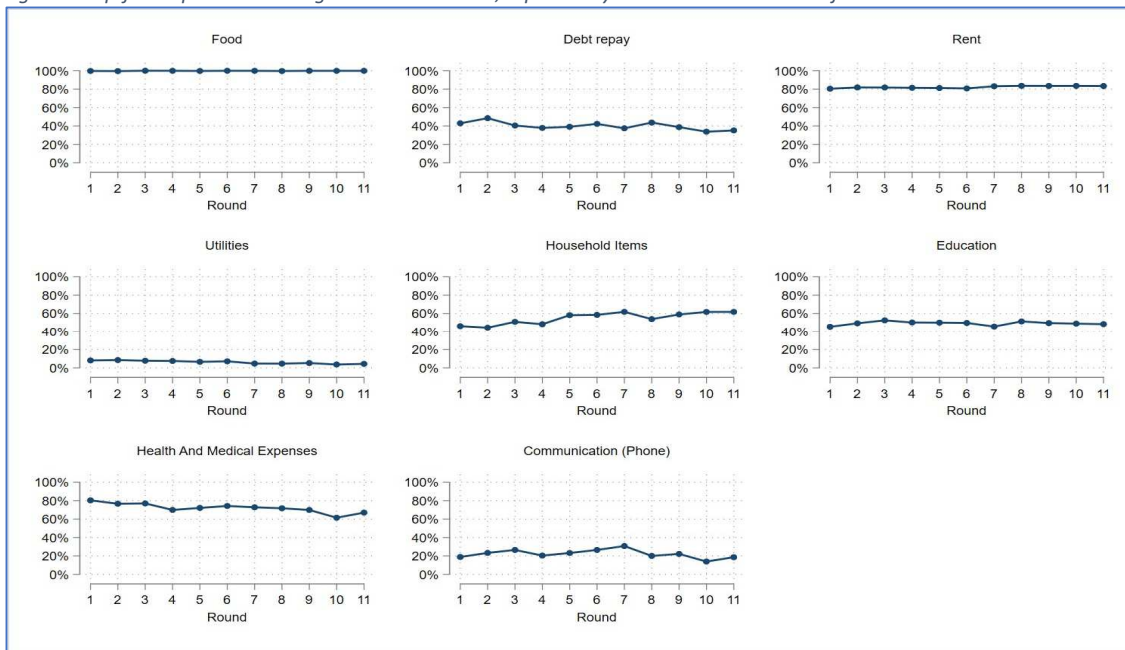
...

Boy's Mother: He had a fever and stomach-ache two months ago; we took him to Bangladesh Medical and they gave him medication for two months. We had to spend 15-16 thousand taka for the medication – that's why we are short of money now.

*Round 1 Interview with a Boy, 14, and his Mother, North Gojmohol*

Figure 2 further highlights the impact of health shocks on household expenses. Health and medical expenses are consistently rated by intervention participants as amongst the top-five expenditures they face, alongside food and rent.

Figure 2 Top-five expenditure categories in last month, reported by households in North Gojmohol in Dhaka



Source: Authors' calculations based on CLARISSA bi-monthly monitoring survey data, rounds 1-11

Although households are occasionally able to access state or NGO support in times of crisis, in most cases they are forced to rely on a variety of emergency strategies that provide short-term succour but at long-term cost.

**CASE STUDY 2: Coping Strategies**

My Brother was sick during corona and my father did not have his income. I could understand the financial hardship of my family as my parents took out a huge loan for my brother's treatment and household expenses. So, I did not say anything about when I was not sent back to school...

*Girl, 15 in Round 1 Focus Group With Adolescent Girls*

I couldn't continue supporting my daughter's studies. She had to quit school after getting promoted to 9th grade. It was due to our financial problem. Thus, she started looking for a job... We were in a big crisis at that time. Also, my husband wasn't good to us...He was an addict.

*Mother, 45, in Round 2 Focus Group with Mothers*

If we have an emergency, we may borrow from a loan shark. But these loans are expensive. And the lenders call the borrowers names and even beat them up.

*Adult Male in Pre-Intervention Focus Group*

We couldn't eat much during the lockdown. We used to eat lentils, vegetables, rice and what we got as reliefs. We got reliefs from Bangladesh Army, ward commissioner Babul and from some other rich persons in our area. We used to eat three times a day but we couldn't eat fish and meat at that time.

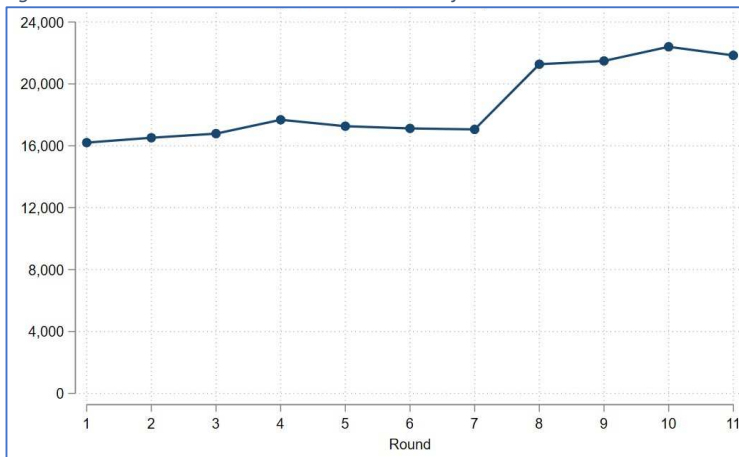
*Boy, 15, Round 2 Interviews*



## Message #2: Unconditional cash transfers promote resilience in face of crises.

Households in the intervention reported an increase in their income throughout the cash transfer period consistent with the cash transfer amount. As can be seen from Figure 3 below, household incomes increased approximately 25% throughout the cash transfer period – a significant sum in the context of urban poverty.

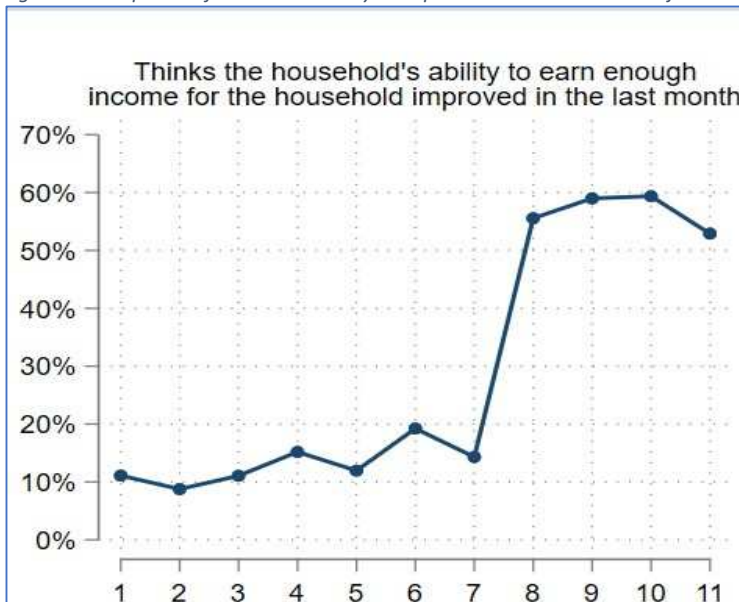
Figure 3 Household income over time in North Gojmohol in Dhaka



Source: Authors' calculations based on CLARISSA bi-monthly monitoring survey data, rounds 1-11

Importantly, this increase translated directly into a reported increase in coping capacity, as Figure 4 demonstrates: reported capacity increases slowly as the effects of Covid wane and jump in Round 8 before plateauing again when cash arrives.

Figure 4 Perceptions of household ability to cope with shocks in North Gojmohol in Dhaka



Source: Authors' calculations based on CLARISSA bi-monthly monitoring survey data, rounds 1-11



This insight was confirmed in our qualitative research, as household after household cited the impact the cash had on resilience in the face of shock – either enabling recipients to cope with ‘live’ shocks or as preparation for shocks to come through savings or existing debt repayment.

**CASE STUDY 3: Cash = Resilience**

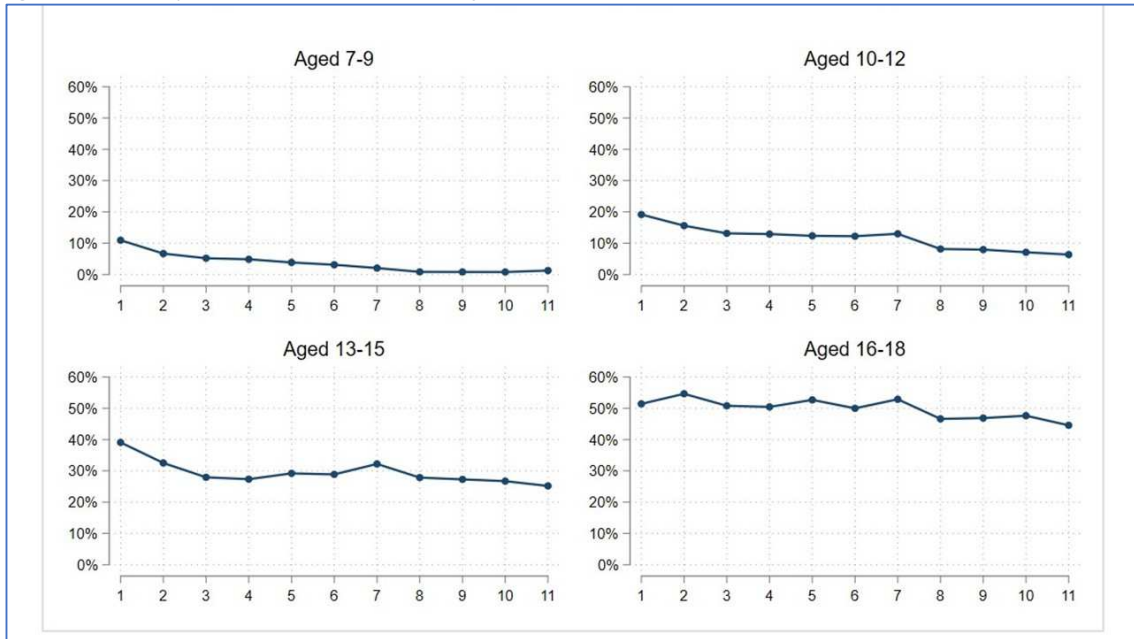
Things started looking up when TDH NGO helped us. Over six months, they gave us support. I got 3700 taka every month through my Upay account. We used the money to cover our daily expenses, send our granddaughter to school, and get our basic needs met. During that time, their money was a lifeline, helping us through tough times.  
*Mother in R3 Interview, post-cash*

TDH has been a blessing for us. We got a good amount of money for 6 whole months. It was really helpful.  
*Father in R3 Interview, post-cash*

Yes, we do receive a small financial support. For my two daughters, myself, and my husband, we receive taka 3200. And, yes, it has helped us pay off the small amounts of money we owed to different people. Also, I had an infection in my arm and this financial support allowed me to do the treatment.  
*Mother, 4, in Round 2 Focus Group with Mothers*

Looking at school dropout rates over the course of the programme further supports the notion that the programme prevents households from turning to negative coping strategies. As shown in Figure 5, school dropout rates decrease for all age cohorts, and most notably for children aged 13-15.

Figure 5 School dropout rates over time in North Gojmohol in Dhaka



Source: Authors’ calculations based on CLARISSA bi-monthly monitoring survey data, rounds 1-11



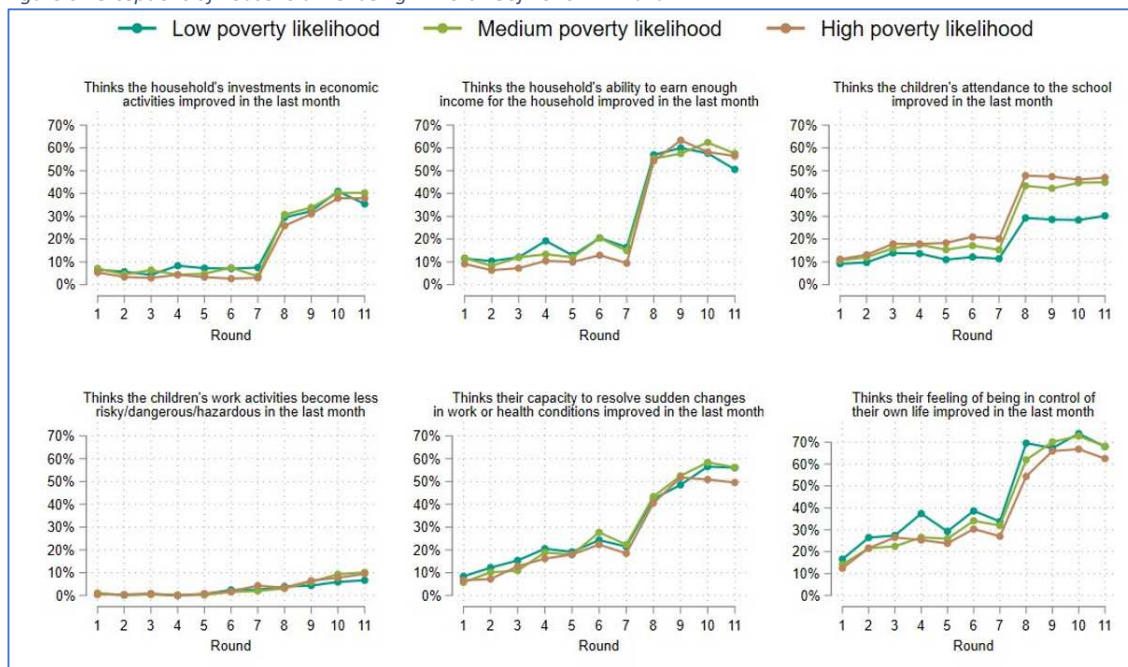
Qualitative data strongly confirms that where households see value and possibility in re-admitting children to school or delaying drop-out, cash transfers support them to do so. As one 15-year old girl explained in a Round 2 Interview:

*“I enrolled in school... You know the brothers and sisters from TDH? They got my admission to school. I left the school last time ... it was in 2021 when lockdown ensued... Now I got readmission because the TDH has been providing money for six months....”*

### Message #3: Unconditional cash is also associated with multiple individual and household-level improvements.

Throughout the process of project implementation, participants were asked about changes their lives in the past month. Figure 6 shows improvements across the board, ranging from investments in economic activities to feeling in control of their own lives, increased child schooling and a reduction in damaging children’s work. These trends can be observed in equal measure regardless of whether they were deemed to have low, medium or high likelihood to be poor at the start of the programme. Although some of these improvements began to happen gradually during the period when the intervention deployed only community mobilisation without cash (up to round 7) a significant jump can be seen after receipt of the first transfer (after round 7). This suggests that wellbeing for the urban poor can meaningfully be enhanced by unconditional cash as a tool of social protection, especially when combined with community mobilisation.

Figure 6 Perceptions of household wellbeing in North Gojmohol in Dhaka



Source: Authors’ calculations based on CLARISSA bi-monthly monitoring survey data, rounds 1-11

It is worthwhile to point out that we see a small but notable increase in the perception that children’s work activities become less risky or dangerous over the course of the programme period. As child labour statistics are notorious for being under-reported, the implications of this small yet noticeable change in working conditions should not be underestimated. Qualitative research also provides



evidence for children’s ability to navigate work opportunities that offer better conditions as perceived by them. When interviewed in June 2023, an 18-year old boy said:

*“I was working for [xx] when you visited me earlier. [xx] is a container manufacturing company. It is a factory where containers are made. Now I work for AGR/Courier. [...] Now., my duty is during the daytime, not at night. It’s been a month since I switched my job. The only problem at that factory was that they paid our salary once in four months. Would you do such a job where you are paid once in four months?” [NG-A-0109-03]*

The case study below sheds further light on the positive trends in household wellbeing and illustrates the multiple overlapping feedback loops that can be at play.

#### **CASE STUDY 4: The Multiple Benefits of Unconditional Cash**

The financial help has benefitted me a lot. You see, I have been living in Dhaka for the last four years. My husband’s doesn’t earn enough to get by with the bare minimum. <Timestamp 36.18 to 36.22 unclear> I didn’t have the money to buy a basket to store our clothes. When I heard that we would be receiving an amount of money... I was told, “You have good news waiting for you!” Right at that moment, I planned that if I receive any financial aid, I will buy a wardrobe with it, so that I can store the clothes in it. I had suffered much due to leaving the clothes outside. You see, rats and cockroaches would eat away the clothes. Such a heartache that would cause me! Thus for three months, I didn’t spend a single taka from the amount I received. I saved the entire amount and bought the wardrobe for taka 9300. Now I store all my clothes inside my wardrobe. I am very happy due to this. Your help has benefitted us greatly. I have also saved the money they sent me for the next two months. Once I receive the money next month, I will buy my husband a rickshaw. That’s what I have planned. My husband has to pay rent for the rickshaw he pulls now. He has to pay taka 100 to the rickshaw owner every day.

*Woman, 40s, in FGD R2 with Mothers*

Message #4: Alongside cash, community mobiliser support and household-level case work also function as a form of social protection.

Social protection in urban informal settlements is low. Government social assistance schemes such as the Old Age Allowance and Allowance for Persons with Disabilities are difficult to access and often unknown to those potentially eligible to claim them. One of the barriers to accessing these schemes is national voter registration, which is tied to the national identification card. Migration into and out of informal settlements in Dhaka is common, but when families move into the city, they often do not change their registration to their current area of residence. This limits their ability to apply for government social assistance schemes, as one community mobiliser notes:

*‘People living in this area are eligible for receiving different government allowance, for example: old age allowance, disability allowance, etc. However people cannot avail themselves of those opportunities since they migrated from other districts. Thus, they are not the voters of Gojmohol areas and cannot get the allowances from this area’.*





Community mobilisers work hard to support households to overcome these barriers, performing a function that can be understood as akin to the ‘last mile’ for delivering established services. This ranges from assisting family members with getting national identification cards to making community members aware about their eligibility for schemes such as the Widow Allowance (500 BDT per month, 2019) or Allowance for Persons with Disabilities (700 BDT per month). The following excerpts from community mobilisers’ reflective reports shows how their interventions to access social protection schemes.

#### **CASE STUDY 5: Community Mobilisers Making Connections**

When I was doing the bi-monthly monitoring, I asked if the child's birth is registered or not? He [the participant] told me that he could not register the birth certificate due to financial problems, but for school admission, the birth registration certificate is very necessary. “I could not send boys to school without birth registration. It would be very helpful if you help in registering for the birth certificate”. I told him that if you want, you can easily register a person's birth at 50 Taka. He could not believe that it is possible to register the birth of a person for 50 Taka. I asked him to get the electricity bill of the house with a photo and national identity card of the parents and child's vaccination card. After submitting the application for the birth registration of two children, they called me and told me that the application is complete. I took a print copy from the shop. After the councillor’s signature, I sent it to the city corporation office and came with two birth registration applications for 100 Taka. The participant was in disbelief at first, but after the application was completed, faith returned, and he was overjoyed that he could enrol the boys in school. I am pleased with the fact that trust was created in me; I was able to earn her trust and complete the birth registration of two babies for 100 Taka.

*Extract From a Community Mobiliser Reflective Report*

[One of the] participants has a physically disabled child who cannot walk. If the child wants to go anywhere, he has to ride on his mother's lap. The child has a broken wheelchair which is unusable. So I reported it in writing to the Social Service Office and verbally to the Centre for Zakat Management Office at different times. Zakat Management Office provided a wheelchair. The family benefited by getting this wheelchair. Now the child can move in the wheelchair and eat all kinds of food. The family is very happy to receive this support.

*Extract From a Community Mobiliser Reflective Report*

Community mobilisers have also successfully contributed to enhancing households’ productive and human capital, through providing income generating (IGA) activity trainings, business advice, and encouragement as well as support for children to return to school. In total, CLARISSA community mobilisers have delivered IGA trainings to well over 100 people and supported more than 15 new businesses to be set up. They have advised in investments in assets such as livestock or auto-rickshaws. Reports from community mobilisers and families supported through the programme suggest community mobilisers have brokered re-entry to school for children who had previously dropped out.



#### **CASE STUDY 6: Community Mobiliser Impacts - Schooling**

What kind of changes occurred in me because of the CMs? If they didn't come here then it wouldn't be possible for me to get readmission in school. With their help I managed to get readmission. They encouraged me a lot. That's why I managed to get readmission, and also, I am helping many other children to get their admission . Yes, there are some children who get admitted to school with our help. There are two who got admission in the same class as mine... I mean they got admission in class 9... And also, we admitted one student in class 8. Yes, we did it. They, the TdH personnel, went to the school with us to talk to the teachers. They told the teachers to give a chance to those children who are working and want to continue their education as well. The head teacher was really a nice person. TdH personnel advocated with the head teacher regarding the working children who also desire to study.... he was told to create an opportunity like taking classes on Fridays for the working .children...the head teacher said they could do it.

*Girl, 15, Schoolgoing, in Round 2 Interview*

Message #5: Needs-based organising is essential in the provision of community support and case work.

*'They can create big changes in our lives. They made the impossible possible for me'.*

Girl, 17, in Round 2 FGD with Adolescent Girls

In contrast to the large majority of social protection schemes, CLARISSA's Social Protection community mobilisers did not have pre-determined outcomes to achieve. Instead, they were free to connect with participants meaningfully and in-depth, learning their needs and their desires, and working collaboratively with them and others to create innovative solutions. In this sense, their unconditional approach to support matched the unconditionality of cash delivery. This type of needs-based organising allowed community mobilisers to act on issues that emerged throughout the course of the project.

Nowhere was this better evidence than in their response to the lack of affordable healthcare in North Gojmohol. Community mobilisers quickly realised that illness is a common phenomenon here and understood that the cost of medical care alongside limited access to quality and community-friendly health services often proved prohibitive in seeking healthcare. The economic impact of illness was revealed by many participants to be of great concern. As a response, community mobilizers connected with a health service provider (The Zakat Foundation of America) to facilitate the establishment and management of fortnightly health camps in the community. To date, 12 health camps have been facilitated at each of which approximately 100 participants have received consultation and medication support. One community member stated:

*'I was suffering from back pain for a long time, but after receiving consultation and medication support from the health camp, I am feeling better now. I met with the doctor three times. It is a great help for me, I felt helpless before about where I would go to take the treatment and how much I must pay, like this'.*

**Image 1: Health Camps**



Similar other initiatives have taken place. For example, community mobilisers have helped establish a rotational savings initiatives, which have supported financial investments for participants in land or productive assets, and organised skills training, which have helped set up income-generating activities. Community-led collective action has also been facilitated, with adolescents in particular reporting not only the effectiveness of collective activities but their instrumental value – as givers of confidence, self-belief, and organisational capacities.

## Concluding Remarks

These preliminary findings attest to the power of unconditional cash plus to address poverty and insecurity, increase resilience and wellbeing, and reduce poverty-related negatives such as school dropout, expensive borrowing, or hazardous work. Combining the delivery of economic support with intensive, needs-based engagement of community mobilisers at individual, household and community level can ignite change and foster ownership, connection, and human dignity. In all this, the solidaristic spirit of unconditionality is important.

Participants at the end of the pilot lamented its conclusion, with interviewee after interviewee noting that the CLARISSA period provided respect, resources, respite, and above all renewed hope. Unsurprisingly, therefore, many called for the programme to be extended, not just for themselves but nationwide as a new policy for social protection:

*“If there is a programme to extend this to all of Bangladesh, it would be great!”*  
Woman in Round 2 FGD with Mothers

More research will be required to ascertain the costs and cost-benefit trade-offs of extending this pilot into a policy, comparing the potential total cost with existing alternatives. Tying provision of cash plus social protection in with health insurance would also be essential, since offering poor households affordable healthcare has the potential to be transformative. The introduction of health camps delivering basic health care is a first step in this process.



Funded by the UK Foreign, Commonwealth and Development Office (FCDO), the CLARISSA consortium includes the Institute of Development Studies (IDS); Terre des hommes (Tdh); ChildHope UK; and the Consortium for Street Children (CSC). The social protection intervention of CLARISSA is implemented in Bangladesh by Terre des hommes with Brac Institute of Governance and Development.

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