# Social protection policies in the Pacific: Issues for post 2015 Development Agenda

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Paper for 4<sup>th</sup> Biennial Oceania Development Network (ODN) Conference, in association with University of the South Pacific, Addressing Inequality and Promoting Inclusive and Sustainable Development in the Pacific, University of the South Pacific, Laucala Campus, Suva, 11-12 September, 2013

#### Abstract

With the shelf-life of the Millennium Development Goals (MDGs) coming to an end in 2015, and the conclusion of Rio+20 UN Conference on Sustainable Development in June, 2012, discussions have been underway about a post 2015 Global Development Agenda. UN agencies have organized in conjunction with regional bodies several consultations about what might constitute the goals, targets and indicators of the post-2015 Development Agenda. UNESCAP, UNDP, ADB and Pacific Islands Forum Secretariat organized such a regional consultation in Nadi in October, 2012 and an Asia Pacific experts meeting was convened in Manila in November, 2012. From the discussions, and recommendations made at these meetings, it is apparent that MDGS remain unfinished business, and climate change is featuring starkly in the minds of Asia-Pacific scholars, activists and policy makers. Addressing growing social inequality, poverty, environmental sustainability and 'green growth' are regarded as critical for sustainable development in the region. This orientation has been highlighted by the reported talk on blue and green growth at the recently concluded inaugural meeting (August, 2013) of the Pacific Islands Development Forum (PIDF).

This paper addresses the unfinished business of the MDGS in PICs and especially, the critical need for governments to adopt formal social protection policies to promote sustainable social and economic wellbeing of citizens in their respective countries. It discusses a number of social protection policies as well as the rationale for the adoption of appropriate 'social protection floors' by all PICs.

#### Introduction

Social indicators for PICs are 'not too bad' in world terms, but growing social inequality, relative deprivation and poverty provide evidence of development processes that are not inclusive. Likewise there are clearly critical issues arising as a result of environmental degradation and climate change which also point to the lack of sustainable development. This is compounded by high population growth rates and relatively youthful population (between 40-70%), particularly so in some Melanesian and Micronesia countries. The inclusive development framework will need to take account of these challenges.

\*Incidence of poverty; unemployment; social and gender inequality; domestic and gender violence; rape; child sexual abuse and exploitation; teenage pregnancy; deterioration of law and order and increasing crime; suicide; problems of ageing, and disability, strained familial relations and consequent marriage breakdown; sole parenthood; school drop-outs; alcoholism and substance abuse; poor health and sickness (often called 'life style' diseases); sexually transmitted diseases; HIV/AIDS; and high mortality are some areas of growing concern in PICs. In addition, female-headed households are on the rise in most countries and these have serious implications for social development. Wage earners, casual workers, the unemployed, women and children; youth; elderly; disabled (physically and mentally); chronically sick persons; single parents; widows and widowers; landless people and marginal farmers; homeless and ex —prisoners are some of the vulnerable social groups in PICs. Modern social protection and social security services are inadequately developed and traditional social safety nets have been eroding." (Naidu and Mohanty, 2009, 2)

It is unsurprising therefore that Oceania together with Sub-Saharan Africa are deemed to be 'off track' in progress towards achieving the MDGs (Wood and Naidu, 2008; PIFS, August, 2012). This paper provides a brief overview of progress towards MDGs in PICs, identifying the Goals that are yet to be achieved; it then discusses briefly the post-2015 Global Development agenda, which is followed by state of affairs relating to social policies and social protection policies in Oceania; this in turn is followed by policy suggestions regarding social protection in PICs in the context of global development goals when the MDGs time line comes to an end.

#### MDGs in the Pacific

Nearly all the 8 MDGs are social, and therefore impinge on social policies. They seek to significantly reduce extreme poverty, enhance education and literacy, increase gender equality, improve child and maternal health, reverse the scourge of major diseases including HIV/Aids and Malaria and promote environmental sustainability by *inter alia*, reducing the number of slum dwellers, and improving the availability of safe water. The eighth goal, 'global partnership' seeks to mobilize resources from wealthy countries to poorer countries in support of efforts in achieving the other seven goals. Historically, a number of PICs in Polynesia have had relatively good social indicators, and therefore with little effort could achieve nearly all the goals. Niue and Cook Islands have achieved the goals, and Samoa has recently been acclaimed to have done so as well. On the other hand, the situation of Micronesian and Melanesian countries has been variable, and their inability to progress in achieving the goals in the last 13 years, has resulted in the 'off track' verdict. The PIFS Regional MDGs Tracking Report (August, 2012) suggests that reducing infant mortality is an achievable goal for most PICS, and that Fiji, Palau, Samoa and Tonga reported that they are on track or have mixed achievement for most of the goals. The self-reporting claims by governments (whose data collection and analysis capabilities are

questionable) with respect to the goals need to be independently assessed (Wood and Naidu, 2008). However, countries with a semblance of inclusive social policies appear to have done well.

In regard to MDG1 halving the number of people in poverty, overall in Oceania, both income inequality and poverty are on the rise. Gini coefficient in recent years in nearly all PICs have moved to closer to 0.5 and poverty levels have grown to between 30% and 50% of the population, and even in the Cook Islands some 12 % of the people were living below the poverty line (Abbott and Pollard, 2004). According the PIFS MDGs report, 2 million out of around 7 million Papua New Guineans are in basic needs poverty, and this number is added to by a further 0.6 million islanders from other PICs. In Fiji where Household Income and Expenditure surveys have been conducted over a 30 year period, poverty levels have been growing.



"Over this period the proportion of households in poverty rose from 11% in 1977 to 25% in 1990/1991 and to nearly 35% in 2003. Both the Asian Development Bank study of 2004 and the analysis of 2002-3 HIES by Narsey (2006) show that more than 30 percent of Fiji's people are below basic needs poverty line. Barr and Naidu have maintained that official poverty figures tend to use yardsticks that downplay the level of deprivation (for instance the basket of food items included in the food poverty measures). Their view is that close to 50% of the population struggle with varying degrees of poverty with the same proportion of households earning incomes below \$8000 a year." (Naidu, Barr, and Seniloli, 2009).

With respect to the second MDG, basic education for all, the Solomon Islands, Vanuatu and Papua New Guinea still have between 20% to 50% of school age not attending school. High drop-out rates in PNG mean that 60% of children do not complete basic education(http://www.unicef.org/png/children\_3857.html.). More generally, there are issues relating to the quality of education. In Kiribati there is a serious shortage of trained teachers. A similar observation can be made of nearly all Melanesian countries. In Fiji, loss of trained teachers through migration, and the early retirement policy has reduced the proportion of experience teachers.

The third MDG of gender equality and empowerment remains elusive in PICs. There is relative parity in school enrolments and progress through the school system into tertiary education for girl children and young women in Polynesia and in Fiji. The situation is different in Micronesia and Melanesia. In Papua New Guinea:

"There are about 80 girls for 100 boys at the basic education level dropping to 65 at the secondary and 35-40 at the tertiary levels. Female students at teachers' colleges only occupy 42 percent of places. The presence of female teachers has been known to influence girls' attendance and completion of schooling" (Ibid).

Everywhere in the Pacific women are not well represented in decision making positions in both the public and private sectors. Samoa is an exception to this pattern in terms of senior public sector employment, and therefore the ability of women to provide policy inputs at the highest level of government. However, Samoa has been grappling with the relatively miniscule number

 $<sup>^1</sup>$  The 2008 Budget has increased the tax threshold to \$9000, adding another 500 households in the category of those not required to pay income tax. The current threshold is \$16,000.

of women in the national parliament, and as cabinet ministers. The proportion of women in PIC parliament (5%) is lower than in Arabian countries (7%).

MDGs 4 and 5 remain out of reach for several PICs. While there have been improvements in child and maternal mortality rates, there are still rather large number of infants who die in the first two years of their lives in a number of PICs. Micronesian and Melanesian countries have higher incidents of infant mortality rates. Under 5 mortality rates range from 15 in Samoa to 70 in PNG, and 72 in Kiribati. Maternal mortality also remains high in these two countries with 733 deaths per 100,000 and 158 deaths per 100,000 respectively. These sub regions also have significantly high maternal mortality rates. Solomon Islands down from 100 to 100,000 live births in 2008 to 93 to 100,000 life births (http://www.indexmundi.com/g/g.aspx?c=bp&v=2223)

Goal 6 of the MDGs seeks to reverse the scourge of such diseases such as HIV/AIDS, malaria and tuberculosis. While enormous strides have been made in the battle against these diseases, there are still present in many PICs. Malaria is a significant health burden in Melanesia, and HIV/AIDS is likely to reach a pandemic stage in PNG. A number of PICs have included the reduction of non-communicable diseases (NCDS) to this goal and a target to address. NCDS continue to be an epidemic in nearly all PICs.

MDG 7 include the provision of safe water and reduction in the number of slum dwellers. While Polynesian with the possible exception of Tuvalu has reasonable safe sources of water supply, much of Micronesia and Melanesia have serious issues about the quality of water accessed by a majority of islanders. In these sub regions, informal settlements are on the rise. Very crowded and unsanitary conditions prevail in the mushrooming slums or squatter settlements in Fiji, PNG, Solomon Islands, Vanuatu, Kiribati, Marshall Islands and Tonga.

It can be said therefore that there is a lot of urgent effort needed to achieve MDGs in most PICs by 2015. Turning to the post-2015 global development agenda it is clear that some if not all MDGs remain pertinent to the development agenda of PICs for the next decade or so. This was recognized at the October, 2012 Pacific sub regional consultation of Forum Island Country representatives on the post-2015 development framework.

## Post-2015 Global Development Agenda

At the November, 2012 consultation on the Asia-Pacific position relating to the post-2015 global development agenda, a number of different positions emerged among the experts present. These included a strong affirmation of the on-going relevance of MDGs and the need to 'stay the course' until these goals had been achieved; a MDGs plus position was put on the table; and there was talk of merging MDGs and sustainable development goals. SDGS were highlighted by the outcome document, 'The Future We Want' of the Rio + 20 conference. The Oceania position based on the immediacy of the threats of climate change, took on board the importance of the planet's environmental health for the wellbeing of humanity in general, and especially those living in small island developing states (SIDS). The merging of MDGs and SDGs highlighted by poverty reduction, and mitigation and adaptation to climate change goals seem eminently sensible. In June, 2013, the UN high level international panel of 27 Eminent Persons report on post-2015 global development agenda, 'A New Global Partnership: Eradicating Poverty and

Transform Economies through Sustainable Development was released. Twelve universal goals and 54 targets together with 6 cross cutting issues, and 5 transformative shifts to enable the achievement of the goals and targets are recommended.

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The first 6 goals: end poverty, empower girls and women to achieve gender equality, provide quality education and lifelong learning, ensure healthy lives, ensure food security and good nutrition, achieve universal access to water and sanitation resonate strongly with MDGs. Goals 7, 8 and 9, namely secure sustainable energy; create jobs, sustainable livelihoods, and equitable growth; manage natural resource assets sustainable also have MDGs flavor and are linked to poverty reduction and environmental sustainability. Goal 10, ensure good governance and effective institutions addresses enabling frameworks within countries that are most likely to result in Goal 11, ensure stable and peaceful societies. Goal 12, create a global enabling environment and catalyze long-term finance resonates with MDG 8, global partnership to achieve the other goals.

Peace, equality, climate change, urbanization, youth and sustainable consumption and production comprise 6 cross-cutting issues identified in the report. Furthermore, 5 transformative shifts are suggested "to drive the goals and create an enabling environment for achieving targets". These are:

"Leave no one behind: "We must ensure that no person — regardless of ethnicity, gender, geography, disability, race or other status — is denied basic economic opportunities and human rights."

Put sustainable development at the core: "We must make a rapid shift to sustainable patterns of production
and consumption, with developed countries in the lead. We must act now to slow the alarming pace of
climate change and environmental degradation, which pose unprecedented threats to humanity."

• Transform economies for jobs and inclusive growth: "A profound economic transformation can end extreme poverty and promote sustainable development, improving livelihoods, by harnessing innovation, technology, and the potential of business. More diversified economies, with equal opportunities for all, can drive social inclusion, especially for young people, and foster respect for the environment."

Build peace and effective, open and accountable institutions for all: "Freedom from violence, conflict, and oppression is essential to human existence, and the foundation for building peaceful and prosperous societies. We are calling for a fundamental shift — to recognize peace and good governance as a core element of wellbeing, not an optional extra."

Forge a global partnership: "A new spirit of solidarity, cooperation, and mutual accountability must
underpin the post-2015 agenda. This new partnership should be built on our shared humanity, and based on
mutual respect and mutual benefit." http://www.abdn.ac.uk/sustainable-internationaldevelopment/news/2693/

While this, 'A New Global Partnership ...' report will be one of a number of documents that will be the bases of the post-2015 global development framework, it does provide a sense of the issues that the countries of the world would be required to address for the next decade and a half. The Rio+20 outcome document, 'The Future We Want', has *inter alia*, launched a process to establish SDGs (another UN high level panel of eminent persons is working on this) and has emphasized the critical importance of inclusive development. In this regard green economy, gender equality, and poverty elimination continue as priorities. Clearly then, matters relating to inclusive growth, social inclusion and poverty reduction will be part of the post-2015 global development agenda. These global priorities together with the continuing social transformation of PICs will require the adoption of explicit social policies and social protection measures.

#### Social Policies, Social Protection and Social Protection Floors

Social policies are the broad umbrella under which social protection measures are placed. Social policies cover the social sector comprising education, health, housing, social protection or social security. Social protection refers to a "set of policies and programmes designed to reduce poverty and vulnerability by promoting efficient labour markets, diminishing people's risks, and enhancing their capacity to protect themselves against hazards and interruption/loss of income" (Asian Development Bank, 2003a, 17). In a somewhat similar vein, social security is the "protection which society provides for its members through a series of public measures against economic and social distress that otherwise would be caused by the absence or substantial reduction of earnings resulting from sickness, maternity, unemployment, invalidity, old age or death" (ILO, 2006a, 7). The common methods of social security included social insurance such as provident fund and worker's compensation and social assistance. The Asian Development Bank has identified five broad areas of social protection: labour markets, social insurance, social assistance, micro-and area based schemes and child protection.

When the life cycle approach is used, social protection measures cover infants (and their mothers), children, youth, working adults, the unemployed, retirees, the elderly, the disable and the chronically ill. These measures combine a mix of interventions that are contributory and noncontributory, targeted and universal, public and private. This protection "throughout the lifecycle reduces poverty, inequality, ill health and the number of premature deaths". The term social protection floor (SPF) was adopted in 2009 by the UN as one of 9 initiatives to respond to the global financial and economic crisis of 2008. SPF is a global social policy approach that seeks to ensure access to essential services and income security for everyone. It denotes universal access to health, education, water and sanitation and other services in terms of national capabilities, as well as social transfers in cash or in kind to ensure income security, food and nutrition security and access to essential services. In the context of SPF, social protection is seen as a universal human right (derived from the Universal Declaration of Human Rights, and Convention on the Rights of the Child) and as a means for longer term development. The ILO Convention 102 on Social Security identifies universal minimum standards of social protection (http://www.socialprotectionfloor-gateway.org/.).



ILO Director – General Juan Somavia has said, "Social protection has proven to be a powerful anti-crisis measure. It protects and empowers people, and contributes to boosting economic demand and accelerating recovery. It is also a foundation for sustainable and inclusive economic growth" (14, June, 2012 : <a href="http://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS\_183286/lang--en/index.htm">http://www.ilo.org/global/about-the-ilo/newsroom/news/WCMS\_183286/lang--en/index.htm</a>. Accessed on the 21st August, 2013

### Social Policies and Social Protection in the South Pacific

There are numerous issues with policy making generally in PICs, and often policies are made with little consultation with stake holders, no research, little forethought about resource implications when it comes to implementation, and no mechanism for monitoring and evaluation. It is also not unusual that policies are adopted from rim countries and advice of multilateral agencies. Local inputs have tended to be minimal and even non-existent. These shortcomings are

particularly applicable to social policies and social protection policies. For most countries of the region, these policies have largely been conspicuous by their absence. Social matters have been left by Pacific states to the private sphere of the family and kinship groups. However, it must be said that the work of the South Pacific Commission over the last 50 years has both directly and indirectly affected the social sphere in many PICs with the greatest impacts on the smaller countries. Health and education indicators for a number of Polynesian countries provide evidence of this.

In recent years social policies have evolved in erratic ways in a number of PICs to cover education, health and increasingly, the elderly. In Fiji there has been a poverty alleviation policy in place since the 1920s. These policies are actually socially protective in character. The following section provides an outline of such policies.

In many PICs basic education has been either free and or heavily subsidized. This has resulted in high levels of school attendance and literacy in nearly all Polynesian countries and in Fiji. As noted earlier, access to education remains a challenge in Melanesia and some Micronesian states. Backed by WHO and SPC, vaccination efforts have been in place for more than 60 years in most PICs to prevent measles, diphtheria, tetanus, pertussis (whooping cough) and Hepatitis B. Currently the most comprehensive social protection system in Oceania is to be found in the Cook Islands. Social protection measures are tabulated below (see Table 1). This is partially due to its political affiliation with New Zealand.

Table 1: Cook Islands Social Protection Measures

Universal	Means-tested			
Child Benefit: All resident* children to the age of 12 yrs, \$60 a month.	Destitute and Infirm Persons Relief: People assessed as having no access to a livelihood. \$ 200 a month.			
Old Age Pension: All residents* over the age of 60 yrs. \$ 400 a month.	Care-Givers Allowance: People assessed as fully occupied in caring for a disabled or destitute beneficiary. \$150 a month.  Power-subsidy: Welfare recipients assessed having a total income of less than \$600 per month.			
New Born Allowance: Mothers of all new born infants. \$ 300 (proposal to increase to \$ 500) a month.				
Crown Welfare Christmas Bonus: all welfare recipients, \$ 50 in December.	Special Assistance Projects: Welfare recipients assessed as requiring extra help with their living conditions.			
Assistance to the family of the deceased: Families of all welfare recipients, funeral expenses are a major cost to families.	, see and thous.			

Source: Government of Cook Islands, June, 2010

Fiji has provided subsidized education and basic health services for some time. It also has had in place the 'Fiji National Provident Fund' scheme for formal sector workers pensions on retirement. For those not covered by this and other earlier pension schemes, and for those who

were destitute, a small non-contributory payment was provided by the government. This arrangement was renamed 'family assistance allowance', and lately changed to, 'poverty benefit allowance'. The amount given to a recipient varies from F\$60 to F\$ 150 a month. This allowance can include a food voucher of F\$30 a month. The post-2006 coup government has also put in place policies relating to free bus fare for children whose parents are poor and free text books in school. These have been added to free education at primary and secondary levels.

Table 2: Fiji Social Protection Measures

Universal	Means-tested		
Education at primary and secondary levels is free.	Poverty Benefit Scheme (PBS) for poorest of the poor including single mothers, elderly persons with no support, disable persons, chronically ill persons, and prisoners' families.		
Basic Health is subsidized for all. In addition to existing immunization programmes, three new vaccines - the Pneumococcal vaccine, the Rotavirus vaccine, and the Human Papilloma Virus (HPV) (for girls) are being introduced with AusAid support.	Food Voucher For recipients of PBS \$30 a month.		
Busfare Concession Cards Assist senior citizens, 60 years and above and disable persons. Elderly receive 50% concession and the disable person is supposed to obtain free transportation (?).	Free Bus Fare for school children Children from families defined as poor receive free school bus transportation.		
Free text books (?)	* * * * * * * * * * * * * * * * * * *		

Kiribati's Copra Subsidy Fund is a long standing subsidy scheme which assures producers of stable returns on their copra has been a significant social protection measure. More recently, all citizens over 67 years of age receive A\$30 a month. There are about 2100 beneficiaries (Abbott, 2010 b).

As noted earlier Samoa which has joined the ranks of Cook Islands and Niue as countries in Oceania that have attained the MDGs, has subsidized education and basic health facilities. In addition has introduced non-contributory universal old-age pension fund to all those over 65 years. The pension is administers by the Samoa National Provident Fund and is called Senior Citizen Benefit Scheme. \$130 tala a month is provided to each of the 8,700 beneficiaries (Abbott, 2010a). Solomon Islands and Vanuatu have a formal sector workers' provident fund but on retirement, the workers are allowed to take one off lump sum payment. As such it is not part of a longer term retirees' pension scheme.

# The need for explicit social protection policies in PICs

There is no doubt that social policies which include social protection policies, and in some jurisdictions are together referred to as social development policies are much needed in PICs (see Appendix 1). Already a number of them have policies relating to education and health, and with the growing challenges of societal change (especially urbanization), economic shocks and environmental challenges, these countries have to seriously consider policy options relating to sustainable development. Integral to sustainable development are social policies and social protection measures. Each country therefore will need to deliberate on appropriate social protection floors that would "facilitate access to essential social services, including health, water and sanitation, education, food security, housing, and other areas defined according to national priorities" (Schutter, O. and M. Sepulveda, October 2012)

The following four social protection guarantees should be included in national social policies: "access to essential health care, including maternity care;

- basic income security for children, providing access to nutrition, education, care and any other necessary goods and services;
- basic income security for persons in active age who unable to earn sufficient income, in particular in cases of sickness, unemployment, maternity and disability;
- 3. basic income security for older persons."

A good point to start is the concept of 'social minimum', a package that provides "social grants for all older persons, children, persons with disabilities, unemployed persons and informal workers, as well as universal access to basic health care" (Devereux, 2009). A framework for policies with mixed social risk management strategies and programmes can be developed taking reduction, mitigation and coping strategies with separate programs under each of these strategies. As such social protection measures integral to social (development) policy can be envisaged as being proactively geared to meeting anticipated risks (youth unemployment, debility, and aging) and as more reactive programs that seek to ameliorate the situation of already vulnerable groups (affordable housing for squatters). This social protection framework can be outlined as follows:

Fig. 1: A Framework for Social Protection Policy

Risk Management Strategy	Social Protection Programs			
Reduction	Skill development training     Income generation     Education and training services     Human development     Micro-enterprise development     Health services     Food – nutrition – school feeding and community awareness     Social insurances     - social pension     - health     - unemployment			
	- retirement - disability			
Coping	<ul> <li>Price subsidies</li> <li>Cash transfers</li> <li>In –kind transfers</li> <li>Family allowance</li> <li>welfare funds</li> </ul>			

Source: Naidu and Mohanty, 2009, 23.

It can be seen from the foregoing discussion that social policy generally, and social protection measures in particular are extremely variable in PICs. According to ILO, more than 5 billion people in the world today lack adequate social security. Just as 75-80% of the world's population does not have comprehensive protection, Pacific islanders with a few exceptions lack the right to social security. Expanding up to 3% of GDP on social protection measures can bring considerable benefits to not only vulnerable recipients but to wider community and society.

To reiterate the rationale and justification of such policies is both social and economic. From a human rights perspective they ensure human dignity to all citizens, especially those who are vulnerable. Recipients are assured of income and food security and by extension good health and wellbeing. In fact evidence shows that such supports to individuals are shared with the family as whole. Economically, the receipt and expenditure of social transfers stimulate the local economy by increasing demand for goods and services. These generate local investment and employment. More generally, such policies contribute to social cohesion and inclusiveness that the post-2015

global development agenda will seek to promote.

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Appendix 1:

Social Protection	Fiji	Kiribati	Samoa	Solomon	Vanuatu
A. Labour Market					1
1.income generation program	•	X	X	X	X
2. vocational training		X	X	X	X
3. gender-equity programs	X.	X	X	X	X
4.microenterprise develop.					•
5.OHS	•	X		•	
6. social funds		X	X	X	X
B. Social Insurance					
7. old age pension	X			X	X
8. disability benefits	•			•	•
9. survivor benefits					•
10. work injury insurance					X
11. maternity benefits				X	X
12.unemployment insurance	X	X	X	X	X
13. sickness insurance	X	X	X	X	X
14.social health insurance	X	X	X	X	X
C. Social Assistance				- /	
15. cash transfers	X	X	X	X	X
16.family assistance allowance		• X	X	X	X
17. aged care programs	X	•		X	X
18. programs for disabled	•				
19. School feeding program	X	X	X	X	X
20. In-kind education incentives	X	X	X	X	X
21. assistance for homeless	•	X	•	X	X
22.medical rehabilitation	•			•	
23.disaster victim assistance				•	•
24. subsidized medical treatment					•
D. Micro & Area Scheme			-		
25. micro loans	•			•	
26. micro insurance	X	X	X	X	X
27 welfare funds	X	X	X	X	X
28. Assistance for disadvantaged minorities	•	X	X	X	X
E. Child Protection					
29. child maintenance	•	X	X	X	X
30. vaccination programs			•	•	•
31. homeless youth assistance		X	X		X
32. Human rights		•			•
33.nutrition programs		X		X	X
34.scholarships for disadvantaged	•	X	X	X	X
35. Anti-Child labour / trafficking programs	0	X	Х	X	X

Source: Prepared by Authors based on data from International Labour Organisation, 2006a-e.

• Yes X - No