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Original article

A REVIEW OF STRATEGIES  
TO EXPAND ACCESS TO SOCIAL ASSISTANCE  
PROGRAMS FOR CHILDREN IN KENYA

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*Abstract*

**Background.** In Kenya, a significant number of families live in abject poverty which subjects 47.7% of 21.8 million children in Kenya to several vulnerabilities including malnutrition and lack of education.

**Purpose.** The aim of this study is to assess strategies aimed at expanding access to social assistance programs for children in Kenya. There exist gaps in terms of coverage and the current study seeks to come up with strategies on how to scale up social assistance in Kenya, an area that has not been sufficiently explored.

**Materials and methods.** The study used a narrative review method in order to gather qualitative data on social assistance for children in Kenya. Thematic synthesis design was used to analyze the data collected. This allowed the researcher to evaluate, review and summarize the information while carrying out triangulation from various sources in order to come up with evidence-based conclusions.

The **results** of this study show existence of major geographical gaps in terms of implementation of various social assistance programs due to poor coordination. Lack of access to the programs by eligible children is also evident as a result of errors when selecting target groups.

**Conclusion.** The current study recommends policy and legal reforms directed towards proper implementation and enhanced community engagement. Strategies aimed at expanding access to social protection for children in Kenya ought to be child-sensitive and rights-based in nature.

**Keywords:** social assistance; cash transfers; social exclusion; child vulnerability; poverty reduction; basic needs; policy framework; livelihood; beneficiaries

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## Introduction

Children account for approximately half of the Kenyan population with more than 11.5 million children facing multidimensional poverty. This group faces deprivation of the crucial basic needs for their growth and development including good nutrition, access to education, quality health care and decent housing. Child poverty is extremely severe in the rural and marginal parts of Kenya with statistics showing that 66% of children in the rural part of Kenya live in absolute poverty as compared to 28% of those in urban areas. Additionally, in some of the counties including Mandera, Turkana, Samburu and Wajir, up to 90% of children are multidimensionally poor. These high poverty levels are worsened by recurring drought and inadequate food supply leading to malnourishment in children across these counties [1].

The other reason for an increase in child vulnerability is HIV/AIDS crisis whereby approximately 690,000 children in Kenya are orphans due to the AIDS pandemic, roughly 105,000 are living with HIV/AIDS and a considerable number of children are living in HIV-affected families. These factors coupled with historical inequalities characterized by uneven distribution of resources, have left millions of children in a vulnerable state without access to basic needs. Out of the approximated 11 million children affected by poverty, only 1.4 million have access to support from the National safety net program in form of cash transfer

which implies that the remaining part of the population is exposed to absolute poverty. To address the challenges faced by children living in poverty, the government of Kenya together with development partners have come up with various social assistance programs for the vulnerable and poor children [2].

The flagship project which is a cash transfer program meant for orphans and vulnerable children was initiated through the support of UNICEF in the year 2004 before being fully adopted by the national government. This program offers cash transfers on a monthly basis to extremely poor families with orphans and vulnerable children in order to boost their access to education, good nutrition, shelter and quality health care. In a similar manner, the hunger safety net program has been operating in several arid counties including Samburu, Turkana, Isiolo, Wajir, Tana River Mandera, Marsabit and Garissa offering financial support to extremely poor pastoral communities during droughts. The constitution of Kenya adopted in the year 2010 guarantees every citizen a right to social security as outlined in Article 43(e) and advocates for provision of much needed support for the vulnerable groups. In addition, Vision 2030 and the National social protection policy of Kenya emphasizes the adoption of social safety schemes which are inclusive in nature. These strategies and other cash transfer programs have been incorporated into the National Safety Net Program by the government of Kenya to offer support to vulnerable children. In addition, there has been other complementary programs such as “Inua Jamii” aimed at supporting the elderly and people living with disabilities [3-5].

The current study therefore examined strategies aimed at expanding access to social assistance programs for children in Kenya. It starts by providing the background on child poverty levels in Kenya while outlining the main social assistance programs such as the cash transfer programs and hunger safety nets. The study goes further to evaluate evidence on the impact of the programs as well as the implementation gaps while identifying challenges that hinder eligible groups from benefitting and the current efforts by the government to expand access to social assistance. The study aims at synthesizing secondary data gathered from existing

literature in order to inform policies on the measures to be adopted to scale up social assistance for each and every vulnerable child in Kenya.

*Purpose.* The aim of the current study is to assess strategies for expanding access to social assistance programs for children in Kenya in a manner that is both inclusive and evidence-based. The specific objectives of the study were: (1) Surveying the existing programs aimed at helping children from poor backgrounds such as the cash transfer programs and hunger safety nets; (2) Identifying barriers that undermine accessibility of the programs to the eligible children; (3) Evaluating the government strategies and reforms being implemented or already proposed with the aim of extending coverage; and (4) assessing evidence from government reports and surveys on the effectiveness of the programs on the improvement of child outcomes and enhancing coverage. This analysis will enable the researcher to come up with recommendations on how to scale up social assistance for children in Kenya, ensuring the programs are sustainable and child-sensitive.

The study is therefore significant since there still exists huge gaps in terms of coverage. Even though various programs have been adopted by the government, only 10% of households in Kenya have access to social assistance despite 35% of the household having been identified as extremely poor. This implies that a considerable number of children are disproportionately excluded including orphans and vulnerable children, the disabled and those living in the rural part of Kenya. Failure to coordinate in order to expand coverage will leave millions of children in Kenya without access to social assistance exacerbating multidimensional poverty. A highlight of the best practices and the existing challenges will provide policymakers and stakeholders with important insights on how universal social assistance can be achieved as outlined in the Kenyan constitution of 2010 and the sustainable development goals.

### **Literature review**

Social protection in Kenya has evolved over the years characterized by pilot programs and donor-funded initiatives. The cash transfer program for orphans and vulnerable children was one of the major initiatives ad-

opted by the government. This program was launched with support from UNICEF in the year 2004 and the number of beneficiaries significantly grew after a successful piloting in various districts. The main objective was to offer regular and unconditional cash transfers to extremely poor households providing care to orphans and vulnerable children in order to promote their welfare. The program specifically focused on enhancing access to education, promoting quality health care in order to reduce child mortality, ensuring better nutrition and enhancing birth registration for each and every poor child. Similar to the cash transfer program, the hunger safety net program was also introduced in the year 2008 to cushion pastoralist communities in arid and semi-arid areas in Kenya. This program aimed at providing an unconditional cash transfer in the amount of 2,700 shillings every month to households living in poverty in the counties that are mostly affected by drought including Samburu, Isiolo, Tana River, Turkana, Wajir, Mandera, Marsabit and Garissa [6-8].

Over the years, the Kenyan government combined multiple cash transfer programs to become a unified framework. A national initiative branded “Inua Jamii” was launched in the year 2018 and tasked with the responsibility of coordinating all the cash transfer programs in Kenya. This resulted in an increase in coverage from the year 2022 to 2024 from 1.2 million to 1.7 million beneficiaries. In addition, the Kenyan government has also been focused on improving the infrastructure. One of the mechanisms adopted is the Enhanced Single Registry used to establish a unified database for each and every poor and vulnerable household. This mechanism has streamlined registration and helped in reducing duplication. Apart from cash transfers programs, the government has also come up with complementary initiatives focusing on poor and vulnerable children. These programs include school feeding initiatives which are currently providing meals to approximately 1.9 million school going children. The other initiative is the Economic Inclusion Program which provides asset transfer and business mentorship to individuals from extremely poor families as a way of reducing poverty. The government has also adopted a program called Universal Child Benefit targeting children below the age of 3 in poverty-stricken counties. This program delivers an

amount of 800 shillings monthly with the aim of improving nutritional outcomes of these poor households [9-11].

An evaluation of the social protection programs for children in Kenya shows positive but modest improvement. Research done on the cash transfer programs shows an improvement in child welfare in various ways. Some of the major improvement included increased school enrollment and attendance among vulnerable children, enhanced food security and increased access to health care characterized by higher immunization coverage. However, research has shown that at the macro level, the impact of these programs has been minimal in terms of poverty reduction and this is due to the limited number of beneficiaries covered. The programs cover only 10–20% of the households living in poverty and there also exists equity gaps whereby most beneficiaries are older orphans and not the younger ones between 0-5 years. Additionally, in cases where caregivers die after the initial enrollment of the program, the households have to wait until the next enrollment hence being excluded. There are also cases of gender inequality with male children being over represented in the programs targeting orphans and vulnerable children. Therefore, cash transfer programs have a positive impact at the household level but they only reach a very small number of vulnerable children, making it difficult to eliminate multidimensional poverty [12-14].

Despite the social protection programs being progressive, there exists major challenges in terms of coverage. An analysis of the existing literature shows that the programs do not reach a considerable number of vulnerable children. A recent World Bank report showed that only 10% of the vulnerable households in Kenya have access to social protection programs, despite there being 35% of households living in absolute poverty. Additionally, households that are extremely poor without orphans are not entitled to cash transfer programs and this leads to exclusion of children that are in dire need of social assistance. In other cases, the programs do not cover children aged below five since resources are mostly directed towards school-going children. Geographical location is another cause for exclusion since the resources are distributed to selected districts and not countrywide, leaving some regions without access to any form of social

assistance. Social and cultural beliefs also hinder uptake of the programs with caregivers avoiding some of the health care services provided due to religious and cultural teachings which in some cases campaign against vaccination and other modern health care practices [15-17]. Therefore, the government should expand access to these programs by the vulnerable groups in order meet the legal and policy goals set by the government of Kenya. It is also necessary to strengthen and expand child-sensitive programs in terms of social assistance in order to achieve the set goals by the government support its most vulnerable population which is the focus of the current study.

### **Methodology**

The study adopted a narrative review method in order to examine the existing literature on social assistance for vulnerable children in Kenya. The researcher extensively reviewed literature from both academic sphere and policies dating from the year 2004 to 2025 through databases such as Google Scholar, Scopus, PubMed and ResearchGate. The study used key words including; ‘Social assistance’, ‘Cash transfers’, ‘Social exclusion’, ‘Child vulnerability’, ‘Poverty reduction’, ‘Basic needs’, ‘Policy framework’, ‘Livelihood’, ‘Beneficiaries’. Priority was given to peer reviewed journals published between 2021 and 2025 by organizations such as UNICEF, World Bank, Kenya Demographic and Health Survey and reports from the Ministry of Labor and Social Protection in Kenya on Cash transfer programs.

Secondary data collected was analyzed using thematic synthesis approach in order to come up with descriptive and analytical themes. Special focus was given to recent policy developments including the 2021–2022 pilot program by UNICEF called Universal Child Benefit, Inua Jamii program and the adoption of Enhanced Single Registry. The limitations of the study were dependence on existing literature which may result in omissions and bias from government statistics. To curb this, the study used triangulation by use of data from various sources in order to come up with evidence-based information on social assistance for children in Kenya.

## Results

The major social assistance program in Kenya called “Inua jamii” currently covers approximately 1.2 million households. Around 265,000 of these households are beneficiaries of the orphans and vulnerable children cash transfer program. The Hunger Safety Net Program offers financial support to nearly 130,000 households living in absolute poverty in the 8 counties which are most affected. The Older Persons Cash Transfer covers around 730,000 households with elderly people and the Persons with Severe Disabilities cash transfer program supports nearly 44,000 households. However, the cash transfer programs are only meant for orphans or households in which parents have chronic illnesses which implies that a considerable number of households with vulnerable children are excluded from these programs. Therefore, the Kenyan government is currently focused on strategies to scale up coverage of the Inua Jamii program with a notable increase from 1.2 million beneficiaries to 1.7 million beneficiaries in the year 2024. This has been achieved through a broadened eligibility criteria and enhanced enrollment.

Geographical gaps also exist especially in the implementation of Hunger safety net programs which only target certain districts. The coordination of these programs by the county government including the school feeding programs have been uneven, leading to partial coverage and geographical gaps. Additionally, orphans and vulnerable children cash transfer program does not cover certain group of children such as disabled children. The program is also characterized by gender inequalities with boys being over represented. In other cases, the program only covers school-going children, excluding those aged below 5 years.

Some of the major barriers identified that have kept eligible children from getting access to social assistance programs include lack of documents required during enrollment. These documents are national identity cards and birth certificates which may not be easily accessible for children in rural parts of Kenya. As result, lack of these documents results in exclusion from the programs. In addition, beneficiaries from rural areas incur a lot of expenses in order to access registration centers. For instance, beneficiaries of the orphans and vulnerable children cash

transfer program in Garissa County reported that they spent 19 hours to travel to and from the offices where they collect 2,000 Kenyan shillings. It was established that they end up spending more money than the amount they receive from the program. There also has been errors in terms of targeting and selection. The one-time selection procedure leaves out newly eligible households in cases where a caregiver dies a year after the enrollment has been done.

Another barrier to access of these programs is associated with social-cultural factors including religious and cultural practices which discourage the uptake of complementary (non-monetary) services. For instance, some religious and cultural practices campaign against modern health care hence barring children from benefiting from health conditionalities associated with social assistance programs. It was also established that many vulnerable households are not aware of the cash transfer programs and how to enroll due to poor communication of the program requirements and rules.

In order to overcome these barriers, the Kenyan government has adopted strategies aimed at improving coverage. This first approach is the adoption of the Enhanced Single Registry which is a technique used for establishing a central database for all the beneficiary households. This strategy is aimed at reducing duplication and enhancing coordination hence a more inclusive enrollment. The government has also adopted digital payment system which entails using electronic methods of payment as a way of reducing travel burdens to the offices. Mobile money transfer services have therefore played a major role in ensuring that caregivers do not walk to distant offices to receive the money.

Collaboration with partners is another strategy by the government aimed at working with international organizations such as UNICEF and World Bank. These organizations play a significant role in terms of financing and piloting various programs including school feeding program making it possible to expand access to social assistance programs.

These government efforts are aimed at extending coverage in order to improve the efficiency of the programs. For example, the Enhanced Single Registry and the digital methods of payment help in improving

administration and enhancing inclusion. Research has shown that these strategies are promising in that the adoption of new technology will help in reducing exclusion errors and eventually improve child welfare. However, the Kenyan government is still facing a challenge in terms of scaling up social assistance and ensuring successful implementation of the programs as illustrated in the next part, the discussion.

### **Discussion**

Social protection programs for the poor children have progressively advanced in Kenya as compared to other African regions. The cash transfer programs for the orphans and vulnerable children as well as the hunger safety net programs were amongst the preliminary strategies in Sub-Saharan Africa. In addition, the Kenyan government funds 83% of social assistance programs which reflects national ownership. However, despite this strong foundation for social protection in Kenya, there still exists significant coverage gaps. Comparatively, the social assistance programs in Kenya cover only 10% of the households which implies that a huge number of poor children are excluded from any form of social assistance.

Even though the government increased allocations with the aim of expanding Inua Jamii program, research shows that funding does not meet the current economic needs which means that a huge number of people remain poor. Devolution and coordination is another challenge facing social assistance programs. The constitution of Kenya adopted in the year 2010 devolved most services to county governments. However, some county governments have social assistance programs while others are not capable of funding these programs. These variabilities are capable of undermining national equity objectives.

The strategies highlighted above can strengthen social assistance but they require better coordination and management. For instance, the cash transfer programs are characterized by flexibility hence meeting needs that are a priority to the caregivers such as access to education and improved nutrition. The Enhanced Single Registry tool has played a significant role in reducing enrollment errors and identifying beneficiaries,

but there is need for constant data update and enhanced privacy. It is important to ensure that the programs are monitored and accountability is observed together with the involvement of the communities to ensure that the beneficiaries are paid without delays.

The efforts of the Kenyan government are in line with global policy norms on child protection. For instance, the International Labor Organization Social Protection Floors Recommendation (R202) adopted in the year 2012 advocates for the provision of basic income security especially for the vulnerable children. At the regional level, both the African Union and the UN Convention on the Rights of Children advocate for the right of children to social protection. Therefore, the government efforts to expand the Inua Jamii program are aimed at meeting the outlined constitutional and international goals.

### **Conclusion**

The government of Kenya has put significant effort towards enhancing social assistance for poor children. These strategies have been associated with improvements such as increased access to education, improved nutrition and enhanced access to quality health care. However, there exists major challenges in terms of implementation of these programs due to poor coordination. Guided by the first objective on effectiveness of cash transfer programs, it was evident that many eligible children do not have access to these programs due to lack of documents and enrollment errors.

In addition, other barriers that undermine accessibility of these programs as outlined in the second objective include cultural beliefs and practices which discourage the uptake of social assistance. Lack of awareness is also a factor whereby the eligible groups lack knowledge on how to access these programs.

To address these challenges, the government has come with strategies such as modern techniques of registering the beneficiaries in order to reduce enrollment errors. This will help the government reach all the vulnerable households with the aim of reducing child poverty and be able to meet the constitutional and Sustainable Development Goals.

To meet these goals, there is need for policy makers to streamline administration and ensure that social assistance is universally accessible to children of all ages as well as the marginalized populations in order to minimize exclusion errors. The efforts of the Kenyan government have had an impact but they are not yet enough. It is important to constantly scale up the efforts in order to achieve inclusive social assistance for every poor child in Kenya and eventually curb multidimensional poverty.

### **Recommendations**

Based on the prior analysis, the study recommends policy and legal reforms through shifting towards universal child benefits. The government should increase the budget allocation in order to cover children of all age groups as well as the disabled since this will significantly reduce any exclusion errors.

Another recommendation is to improve targeting and registration. This can be achieved through involving the community in identifying vulnerable households which have new orphans or ailing primary caregivers. The Enhanced Single-Entry tool can effectively help in collecting and maintaining a database for these households.

Program integration is another strategy that can be adopted to improve on social assistance. The cash transfer programs should be linked to other initiatives such as immunization programs and school feeding programs as this will significantly enhance the outcome of these programs.

The government needs to also embrace new technology in order to improve on the delivery mechanism. Mobile money payments will be effective when used particularly in the cash transfer programs. There is need to provide phones to the poorest households or innovate smart cards in order to curb fraud and ensure the money reaches the intended beneficiaries.

Another recommendation is for the government to improve on coordination and capacity to ensure a smooth operation between the county governments and the national government. This will help in reducing duplication of the programs and instead curb regional disparities.

The government should also establish research and monitoring mechanisms for tracking the impact of the cash transfer programs to

the development of the children in terms of education and health. There is also need for regular audits aimed at identifying the regions that are less developed.

Most importantly, the government should establish partnerships as a way of enhancing funding. The government needs to collaborate with development partners including UNICEF, World Bank and Non-governmental organizations for technical support and financial aid when piloting new programs.

An integration of these measures coupled with community involvement and smarter implementation will help build a child-sensitive social assistance programs which are inclusive and transformative hence improving social protection in Kenya.

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