

A Review of the Social Protection Programmes in Sāmoa since 2009.

Sasa'e Fualautoalasi Walter, National University of Sāmoa

ABSTRACT

Social Protection Programmes for Sāmoa have assisted our policy makers and development partners to promote economic growth and development of physical and social infrastructure. The significance of social protection has become evident, as investments in social protection reduce vulnerability, mitigate chronic poverty, and nurture inclusive growth. Social protection programs assist households to invest in their future and to manage risks, such as extreme environmental events, sudden illness, and economic shocks. Governments across the globe recognize the need to improve their countries' social protection systems to better target disadvantaged and marginalized groups. To develop and implement effective social protection programs, a Social Protection Index, a monitoring tool is essential to inform decision making and track progress over time. By reviewing the current Social Protection Programmes for Sāmoa, which are specifically enhancing our own social protection. In essence, an update of the Social Protection Index's (SPI) are encouraged to be conducted regularly which will lead to improvements in the way that the tool is constructed and used. These revised SPIs enables in-depth analysis of social protection at the country and regional levels, capturing the adequacy of social protection by looking at program expenditures, coverage, distribution, and impact. With uniformity in metrics and methods, the revised SPI can be used as a benchmark to improve social protection through better design, coverage, gender equity, and poverty targeting.

Key words: *Social protection, Social Protection Indexes, poverty, program expenditures*

Introduction

Social protection is defined as “the set of policies and programs designed to reduce poverty and vulnerability by promoting efficient labor markets, diminishing people’s exposure to risks and enhancing their capacity to protect themselves against hazards and interruption/loss of income. This definition categorizes all programs under the traditional components of social protection as social insurance, social assistance, and labour market programs” (ADB 2012).

The Social protection Index (SPI) is a “relatively simple indicator that divides total expenditures on social protection by the total number of intended beneficiaries of all three social protection programs e.g., social insurance, social assistance, and labor market programs.” (ADB 2013) SPI’s enable in-depth analysis of social protection at the country and regional levels. It captures the adequacy of social protection in a country by looking at program expenditures, coverage, distribution, and impact. With uniformity in metrics and methods, the SPI can be used as a benchmark to improve social protection through better design, coverage, gender equity, and poverty targeting.

For Sāmoa, the definition of social protection is defined and incorporated in the context of events such as tsunamis or tropical cyclones, which have huge impact on the lives of the people. Social protection is defined as “the means to ensure community preparedness and resilience, community protection and security, community

sustainable livelihoods and that the gendered impact of natural disasters is minimized” (MWCSO 2010).

In a country regularly affected by natural hazards one-fifth lives below the national poverty line (ADB 2011). However, poverty in Sāmoa does not mean hunger or destitution. A UNDP analysis on the 2008 HIES estimates the Basic Needs Poverty Lines (BNPL) for essential non-food expenditure as a national average household expenditure of SAT\$493.01 per household, or SAT\$53.59 per capita per week; 26.9 percent is the proportion of the population with weekly per capita expenditure less than the basic needs poverty line (ADB 2012).

Sāmoa’s extended family system is an important contribution to social protection, which is so central to our country’s social structure and way of life. The extended family is the central unit and organisational structure for traditional social protection. The extended family system consists of several family units (*‘aiga*), each headed by a chief (*matai*). This hierarchy forms the basis of the matai system. Each family group is represented on the village’s ultimate decision-making body, the council of chiefs, by its *matai*. Each family is also represented in the *auluma* and the women’s committee of which it is part, and the *a’umaga*, two bodies in the traditional village social governing structure that serve the Council of Chiefs. The traditional role of the *auluma* is maintaining peace, producing crafts and ensuring cleanliness in the village. The *a’umaga* mainly implements the Council of Chief’s decisions, helps families in need and provides food (AUSAid 2012).

Social Protection Programmes for Sāmoa are divided into 3 categories. They include the Child Protection Unit (CPU) of the Ministry of Women Community and Social Development (MWCSO), Disaster Management Recovery Programmes of government, Medical Treatment Schemes of the National Health Services (NHS) and the Ministry of Health (MOH), and the Disability Assistance programmes of Ministry of Education, Sports and culture MESC and MWCSO. The Social Insurance schemes include the Pension Schemes of National Provident Fund (NPF) and lastly the Labour Market Programme includes the Ministry of Commerce, Industry and Labour (MCIL) and the NUS Apprentice Schemes and the Talavou related Programmes of MWCSO. The review of Sāmoa’s SPI was based on the total expenditure of the government ministries in these programmes and is divided by the total number of intended beneficiaries of all three social protection programs, for example social insurance, social assistance, and labor market programs. This gives an index of the total social protection expenditure spread across all potential beneficiaries, compared to the estimated value of the total poverty line expenditure of the reference population. For the purposes of the SPI calculations, the poverty lines were standardized as being equivalent to 25 percent of nominal gross domestic product (GDP) per capita for 2015.

In this research paper the most recent overall Social Protection Index (SPI) calculated for Sāmoa in 2015 is 0.049, revealing that the average per capita social protection expenditure was 4.9 percent of poverty line. This is a decline when

compared to the last SPI for Sāmoa in 2009 which was calculated at 0.066. The SPI for this period (2009) is also very low if compared to the previous results of other Pacific Island countries, such as the Marshall Islands 0.167 and Fiji 0.060 for the years 2009–2011 (ADB 2012).

The breadth of 0.231 implies that the social programs, together, reached nearly 23 percent of the population. A depth of 0.213 indicates that the impact is weak, as average expenditures per actual beneficiary is 21.3 percent of poverty line expenditures.

As calculated, Sāmoa's social assistance components are about 16 percent of total expenditure on social protection (2015) with social insurance 82 percent and Labour Market Programme two percent. The large allocation for social assistance is a result of the government assistance during disasters such as the Tsunami of 2009 and Cyclone Evan in 2011 which killed about 250 people and devastated most of the tourism industry infrastructure and many plantations.

In relation to poverty reduction, in 2015, the values of SPI are 0.002 for the poor and 0.047 for the nonpoor, indicating that the poor have less access to most social protection programs, except for those programs directly targeted to them. The poverty focus indicator is 0.034 for 2009–2015. In relation to gender disparities, in 2015, the SPI is 0.005 for women and 0.007 for men. The social protection expenditure for women was also lower than that for men, thus indicating that gender inequality is increasing and must be addressed. This suggests that Sāmoa should work to further increase the value of its SPI, in both breadth and depth. This may be achieved by shifting the social protection focus toward more labor market programs and other related activities, especially for youth, the poor, and others who are vulnerable to poverty or hardship.

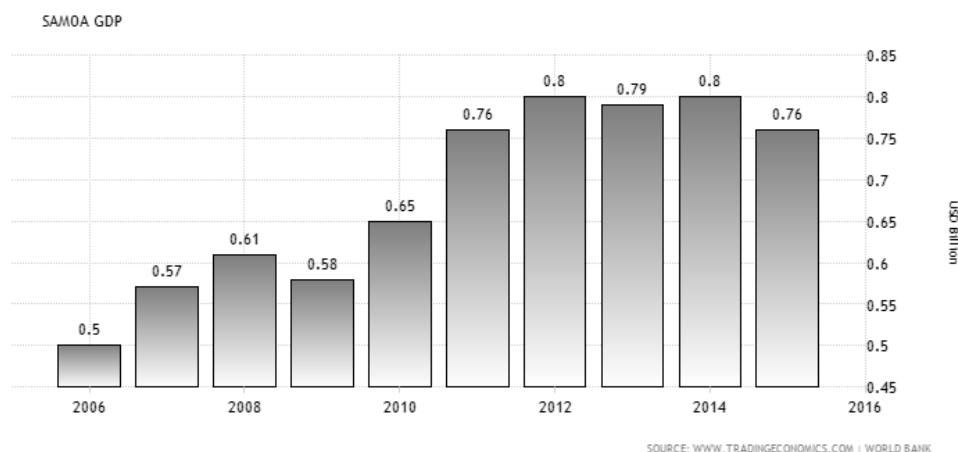
Sāmoa's Economy

Sāmoa's economy is driven primarily by remittances, tourism, industry, agriculture and infrastructure projects funded mainly through aid from its development partners. This leaves the economy highly sensitive to exogenous shocks. Further, Sāmoa's vulnerability to natural disasters remains a constant threat to the development of the economy as a whole. An earthquake and tsunami in 2009 plunged the country into years of reconstruction and rehabilitation, only to be followed by tropical cyclone Evan in 2012. Sāmoa was one of the Pacific's better performing economies before it was hit by an earthquake and tsunami in fiscal year (FY) 2009.

From FY1999 to FY2008, the economy grew at an average of 4.3 percent a year. The bulk of this growth was driven by services output, mainly commerce, and transportation and communication, whose share of gross domestic product (GDP) averaged 58.8 percent during this period. Industrial output, mainly from manufacturing and construction, ranked second with an average share of 28.6 percent. Agriculture and fisheries output had an average share of 13.8 percent (Sāmoa Bureau of Statistics 2015).

For the periods of 2009–2011 about 51.2 million tala was disbursed by the government to all sectors in the country as payments for relief, recovery and rehabilitation activities. It does not include funds and cash received as loans and grants for specifically targeted programmes such as tourism rebuilding programmes, education programmes and other recovery programmes (MOF 2012). This can contribute to a higher SPI of 0.66 calculated in 2012 (ADB 2012).

Figure 1: Sāmoa GDP 2006-2015



There was a significant increase of Sāmoa's GDP in the periods of 2009–2012, but then it remained stagnant with little growth from years 2012–2014 and continued to fall in 2015. There were also two consecutive quarters of negative economic growth (Dec and Mar quarters of FY 2012/13) following Cyclone Evan in December 2012. The outcome was led by the transport and communication sector largely due to the seasonal pattern of the industry, as well as the recovery of the agriculture sector from the devastation caused by cyclone Evan (MOF 2012–2013).

Table 1: Basic Statistics, 2015

Indicators	Unit	2015
GDP (current prices)	SAT million	1,574
GDP per capita (current prices)	SAT	8,316
Gross national income (current prices)	SAT million	7,905
Total population	persons	189,236
Average household size	persons	3,300
Population aged 60 years and over	persons	7
Employed population	persons	58,673
Population living below the national poverty line	persons	47,309
Disabled population	persons	4,061
Children aged 0–14 years	persons	71,890
Disaster-affected population	persons	7,500
Per capita poverty line income (annual)	SAT	1,641
Number of unemployed and underemployed	persons	13,263

Fualautoalasi-Walter 2013

Employment

Sāmoa faces a critical challenge in supporting sustained economic and employment growth and poverty reduction in the aftermath of the 2008 global economic crisis, the 2009 tsunami and the 2012 cyclone. In fiscal year (FY) 2011/12, the economy grew by 1.2 percent, and growth is estimated to have slowed to 0.9 percent in FY 2012/13, reflecting the impact of Cyclone Evan on the economy (Ministry of Finance, [MOF] 2012). In FY 2013/14, economic growth is projected to recover to 3.1 percent (MOF 2014).

Sāmoa's labour market is characterized by the formal sector and the non-formal sector. The formal sector is estimated to account for around 40 percent of the labour force in Sāmoa and the non-formal sector for around 60 percent of the labour force.

Since 2005 however, job growth in the formal segment in Sāmoa declined. Between 2000 and 2007, the number of jobs in the private sector increased from 12,168 to 16,921 but fell to 12,711 in 2010 (SBS 2011). Analysis of census results tells a similar story, with wage employment declining from 28,179 in 2006 to 23,365 in 2011 (SBS 2011).

The decline in jobs in the formal segment has coincided with a decline of value added in manufacturing. Between 2000 and 2005, manufacturing GDP grew by 35 percent but decreased -36.7 percent between 2005 and 2010 (SBS 2011). Such developments are likely to have been influenced in part by the expiration of the Multi Fiber Agreement. This is an international trade agreement on textile and clothing that was active from 1974 until 2004. The agreement imposed quotas on the amount that developing countries could export in the form of yarn, fabric and clothing to developed countries. It expired at the beginning of 2005 and under which Chinese investors produced garments for export—garments were one of Sāmoa's leading exports in the first half of the 2000s (ILO 2016).

A recent negative impact on the economy is the forthcoming closure of Yazaki Electrical Distribution System Eds Ltd in 2017. This is Sāmoa's largest manufacturing industry making electrical wiring apparatus for the car manufacturers in Australia. It employs more than 2,000 workers and makes up over 20 percent of the manufacturing sector's total output. Another devastating impact is the closure of Sāmoa Tuna Processors (S.T.P.) in American Sāmoa where a hundred more workers are expected to lose their jobs. The company's canning operations are shutting down indefinitely on 11 December due to "adverse business conditions". The majority of production staff at the Cannery are from Sāmoa.

Population

The population of Sāmoa is 189,236 where 97,722 (51.64 percent) are males and 91,514 (48.36 percent) are females. About 76 percent live on the island of Upolu, and 24 percent of the population lives in the bigger island of Savaii (Samoa Bureau of Statistics [SBS] 2011). The census 2011 showed that the urban population in the Apia urban region constituted 19 percent of the total population, while 81 percent made up

the rural population. The region of north-west Upolu has the highest proportion of the total population with 33 percent while the other regions of rural Upolu and Savaii shared 24 percent each.

Sāmoa differs from other Pacific island countries in that its population is concentrated on only two islands that have relatively well developed roads and communications infrastructure. However, there are significant gaps between the two major islands, with Savai'i lagging behind Upolu in both economic growth and human development indicators.

A strong development pattern has emerged across Sāmoa in which rural and urban villages are located in close proximity to the coast, along the fringing plains. About 98 percent of the population lives in these narrow coastal plains, which include the town of Apia on Upolu with a population of 38,000 (SBS 2011). Sāmoa's 11 districts encompass 330 villages. The population is largely homogenous, with an estimated 93 percent of native Sāmoans.

Disability

Given the strong linkages between disability and poverty, there has been a growing interest in mainstreaming disability in social protection interventions. Evidence clearly indicates that persons with disabilities are more likely to live in poor households, have limited access to employment opportunities, and have lower education enrolment and attendance rates.

People with disabilities may share a number of experiences that reduce their access and/or demand for services: discrimination and stigma, traditional social norms preventing use of services, limited resources, visibility, inaccessible programmes etc. Alongside an adequate supply of services, social protection can help address these causes of exclusion. Social protection plays a key role in realizing the rights of persons with disabilities of all ages: providing them with an adequate standard of living, a basic level of income security; thus reducing levels of poverty and vulnerability. Social protection schemes concerning persons with disabilities can have a major role in promoting their independence and inclusion by meeting their specific needs and supporting their social participation in a non-discriminatory manner. These social protection measures may include poverty reduction schemes; cash transfer programmes, social and health insurance, public work programmes, housing programmes, disability pensions and mobility grants.

The 2011 Census of people with disabilities, a total of 4,061 persons with disabilities were identified of which 47 percent were males (1,358) and 53 percent (1,516) females. Although the vast majority (80 percent) lived in rural areas and 17 percent lived in the Apia urban area, nearly all services and schools for people with disabilities are concentrated in the urban area only.

The National Policy on disability endorses the initiatives already taken by the Ministry of Education Sports and Culture (MESCC) with respect to the development of "inclusive education" in Sāmoa. The Ministry of Education, Sports and Culture Strategic

Policies and Plan 2006–2015 aims at building upon the strength of the existing systems and programmes to improve outcomes of its Special Needs Education Strategic Policies and Plan statement.

One notable development has been the establishment of the national building code for Sāmoa which requires provision of access for people with disabilities to public buildings through building regulations. Access requirements in the code include continuous pathways from the boundary of the allotment, and from any car parking space on the allotment, whether within or outside the building, as well as from any other building on the allotment to which access for people with disabilities is required.

Education

There are links between social protection and education: Education is one route through which poverty can be prevented from passing on from one generation to the next, by providing employment skills. Social protection aims to address the problems of poverty and inequality that act as barriers to universal education in many countries. Social protection instruments can help to improve education outcomes for poor people by addressing the underlying poverty and inequality that prevents poor children accessing education (if, for example, they have to work to survive) or from fully benefiting from the education they do receive. It can also strengthen demand for education by reducing direct or indirect costs of accessing services. Social protection can be made universally available or targeted at particular groups in order to increase the impact and minimize costs. Programmes can also impose conditions, such as that the children of families who receive cash transfers should attend school regularly. Social protection may raise families' demand for education by improving their situation so that, for instance, they no longer need their children to stay at home or work.

In 2015, Sāmoa continued to require compulsory primary education. All students attending year 1–8 have access to free tuition toward the achievement of universal primary education. The literacy rate for Sāmoa is 99.58 according to the United Nations Educational, Scientific, and Cultural Organization (UNESCO) Institute for Statistics 2010. This is high, and it may be a result of Sāmoa having had an above 90.0 percent net enrolment from 1999–2007 (SBS 2011).

Social Protection within the National Development Strategy

The Strategy for the Development of Sāmoa, 2015–2016 builds on the long-term goal of achieving an improved quality of life for all. In pursuit of this objective, a number of key strategic economic outcomes must be achieved: maintaining macroeconomic stability; scaling up investment in tourism to promote Sāmoa as an attractive tourist destination; promoting a healthy and educated Sāmoa; improving the business environment; strengthening social cohesion and stability; improving infrastructure services; and recognizing the importance of the environment through sustainable management of natural resources, increased investment in renewable energy sources, and

mainstreaming climate change and disaster resilience. It is believed that the achievement of these strategic outcomes will result in the attainment of Sustainable Development Goals and targets.

Social Protection Initiatives

Education and Health Services in the country five years prior to independence were very basic although the population enjoyed human rights and fundamental freedoms without discrimination in respect of race, sex, language or religion (USP 2012). These services have been greatly improved over the past 50 years and are now accessible to all members of the rural population.

Sāmoa prioritises children in social protection. The Ministry of Women, Community and Social Development has taken a leading role in the provision of policies that create a centralized framework for the care, protection, and development of children from birth to age 18 years. These documents also direct the work of all government stakeholders and partners on child development and child protection. Such programmes include the works of the Child Protection unit (CPU) and the Division for Youth under MWCSO who worked with the children under the Care of Sāmoa Victim support group.

Although much progress and success has occurred in child development, evidence is increasing on the rising vulnerability of children in certain areas. Sāmoa has made a moderate advancement in efforts to eliminate the worst forms of child labor by enacting the *Labor and Employment Relations Act*, which raised the minimum age for hazardous work to 18. A new law has strengthened protection against the sexual exploitation of children, and has criminalised forced labor; however children are still working as street vendors. Although data are limited and the extent of the problem is unknown, children are also employed in agriculture. The Government of Sāmoa has not collected recent information on exploitative child labor and the last official study on child labor was conducted in 2005. The lack of recent official data and other information does not allow for an accurate assessment of the full nature and extent of the worst forms of child labor in Sāmoa. However, the focus on children remain to be aligned with the government's commitment to the Convention on the Rights of the Child, A World Fit for Children, and the Sustainable Development Goals that place child development as a top priority in national policy and planning. Much of Sāmoa's social protection commitments for children are the responsibility of the Ministry of Women Community and Social Development.

The Sāmoa National Youth Policy, 2011–2015 ensures that the justice systems through the facilitation of appropriate training and human resources development opportunities will protect children. It provides a commitment to the promotion of their collective human rights by identifying risk and protective factors related to child maltreatment. It commits to strengthen the delivery of effective and responsive social reintegration and restorative justice programs for children and young people in contact with the law. And it commits to enhanced efforts to protect the rights of children with

disabilities by facilitating and supporting the ratification of the Convention on the Rights of Persons with Disabilities. Another commitment was to advocate for and promote law reform in line with the Legislative Compliance Review of Sāmoa with the Convention on the Rights of a Child in 2006.

Further, the *Family Safety Act* of 2013 provides for greater protection of families and the handling of domestic violence and related matters. In 2013, child care and protection legislation was passed to address care and protection issues relating to children in light of obligations under the Convention on the Rights of the Child. It also makes specific references to findings in a report by the Ministry of Women, Community and Social Development on the *Convention on the Rights of the Child Legislative Compliance Review* in 2006. Given the number of acts involved in these initiatives, the Sāmoa Law Reform Commission has indicated a focus on protection of families and in particular child care to be emphasized again in the Constitution of Sāmoa, the Infants Ordinance 1961, and the Young Offenders Act 2007. These issues were included in the Commissions agenda for Legislation Review in 2006.

Some of the following interventions are proposed to be achieved in the coming years by government in its latest Strategy for the Development of Sāmoa:

1. Continue to strengthen affiliations between the government and its partners to ensure that the Ministry of Women, Community and Social Development is adequately resourced to realize its mandated function as the national children's social protection mechanism (SDS 2016–2020).
2. Work toward enacting the *Child Care and Protection Act*. At present, community representatives, line ministries, nongovernment organizations, the private sector, and those under aged 18 years have consulted on the bill. It should be submitted to the Cabinet for discussion before it goes through parliamentary procedures by the end of 2014 (SDS 2016–2020).

The Ministry of Women Community and Social Development (MWCSD) is the national Focal Point for the CPU. The unit is responsible in ensuring and advancing the country's commitment to the Convention on the Rights of the Child, "World Fit for Children", and the Millennium Development Goals which puts child development as a top priority in national policy and planning. The unit also administers the National Policy for children which is based on the vision for the Government of Sāmoa's Strategy for Development (SDS 2008–2015), which is "Improved Quality of Life for All".

There is a *Child Care Protection Bill 2013* that is in progress and it provides for the care and protection of children in Sāmoa and for the recognition and enforcement of the rights of children in a manner which reflects Sāmoan culture, traditions and values and is consistent with international conventions and standards. There is also a *Family Act 2013* which is for the protection of families including children. There is also the *Education Act 2010* that provided relief for school fees for all children in government primary schools from Years 1 to Years 8.

Government Funding in supporting this unit has been steady that is about 275,000 has been appropriated for works to support all services for children. Donors such as WHO and Healthy Environments for Children Alliance (HECA) through the Ministry of Health were also very instrumental in the many Programs for the protection of children.

Low primary school attendance and secondary completion rates—the recently completed Demographic Health Survey (DHS), 2009 records that 89 percent of children aged 5–12 are attending primary school. Note the MDG indicator for achieving universal primary education is based on enrolment achievements of 88.5 percent. Secondary School figures for age group 13–18 are much lower. Only 59 percent of those students aged 13–18 who should be attending are attending with much wider gender gap in favor of females (70 percent) than for males (51 percent).

There is free primary (except after 4 pm at the Tupua Tamasese Meaole Hospital, TTM) and secondary care for children under five years of age in all government facilities. There is also now a separate pediatrics outpatient clinic at the TTM Hospital. However, despite the upgrade in health facilities, the long waiting queues, lack of specialist’s pediatricians and poor tertiary service, care continues to be a problem and is often reported in the media. Sāmoa’s Health Care System, which is predominately a public service, has a well-developed Primary Health Care and Health Promotion System resulting largely from the collaboration between the national network of village women’s committees and community nursing services in the delivery of health programmes to the community.

However, Sāmoa’s child mortality rate is quite low if compared to international standards and is a cause for concern as the child and infant mortality are the basic indicators of a country’s socioeconomic situation and quality of life. Since 2012–2013, the MWCS D budget for Child Protection Services has been increased by SAT\$42,116, from SAT\$275, 335 to SAT\$317,451. For the same period, child protection services were allocated 2.55 percent of the MWCS D funds—in 2014–2015 it is 3.04 percent.

Table 2: The Child Protection Unit

<u>The Child Protection Unit (CPU)</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Annual Cost/Expenditures*	253,578	276,000	275,335
Number of Beneficiaries, total	49,151	52,127	60,000
Number of Beneficiaries, female	39,320	41,701	48,223
Number of Beneficiaries, male	9,831	10,426	11,777
Number of Beneficiaries, poor	49,151	52,127	60,000
Number of Beneficiaries, non-poor	NA	NA	NA

Medical Treatment Scheme (MTS)

The Ministry of Health and the National Health Service are the implementing agencies for the MTS/Institutional Programme to provide quality health care for the country. This scheme is part of the SSCSIP (Strengthening Specialized Clinical Services in the Pacific) program who worked with Pacific Island Counties Ministries of Health to provide clinical

service, academic and health training. The Scheme supports the costs of treatment in New Zealand hospitals for a modest number of Sāmoa-based patients with life-threatening medical conditions but with a good prognosis for recovery. The scheme also focuses on strengthening the regulatory functions of the Ministry of Health, health promotion, disease prevention and improving the quality of health service delivery which is the strategic focus of the Health Sector Plan 2008–2018 in the SDS 2015–2016. NZ Aid and AusAID works with Sāmoa, the World Bank and United Nations to support this initiative. The scheme also supports regular visits to Sāmoa by New Zealand medical specialists in specialties not currently supported by the Sāmoa health service. The medical specialists treat patients, conduct clinics, and provide training for Sāmoan health professionals. NZAID provides over NZ\$700,000 annually in support of the Medical Treatment Scheme (MTS). The government of Sāmoa also contributes about SAT\$10 million tala annually in the funding of overseas treatment, which includes travel and hospital visits. The main challenges are the allocation of this assistance. All Sāmoans are eligible to be funded, but no specific criteria have been put in place to identify for example the poor from non-poor and prioritizing women and children.

Furthermore, NZAID also provide NZ\$12 million over five years to the Ministry of Health through a SWAp which focuses on key areas including governance, improved health systems, health promotion and prevention, quality health care delivery, partnership commitment and financing health. NZAID also supports the collective agreement between Government of Sāmoa, Health Agencies and Development Partners (including the World Bank, AusAID and NZAID) for the delivery of sector wide health development assistance.

Table 3: Medical Treatment Scheme/Institutional Programme (NZ)

<u>Medical Treatment Scheme (MTS)</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Annual Cost/Expenditures*	11,050,000.0	10,550,000.00	10,068,850.00
Number of Beneficiaries, total	300	385	524
Number of Beneficiaries, female	144	185	251
Number of Beneficiaries, male	156	200	273
Number of Beneficiaries, poor	234	300	409
Number of Beneficiaries, non-poor	66	85	115

Fualautoalasi-Walter 2013

Disability Assistance

The MWCSO is the national Focal Point for Persons with Disabilities whereas the Disability Unit is its implementing program unit. Its key role is to coordinate and implement the National Policy for Persons with Disability and lead mainstreaming disability issues into national plans, legislations and Plans. The total number of people with disabilities living in Sāmoa is 2,096, females 941 and males 1,155 The National University of Sāmoa (NUS) is providing special needs education training under the Faculty of Education Program for the Diploma in Teaching. There is also a major Inclusive Education Special Needs Program implemented by MESC as identified in their

Policy and Strategic Documents. The advancement and full protection of women and girls with disabilities is also an area that is addressed under the Policies and Plans.

The Government of Australia through AusAID, has agreed to support the Government of Sāmoa in mainstreaming disability initiatives/programs and national development policies. This program is expected to last 4 years covering the period July 2013–June 2017. AusAID contributed about SAT\$1.5 million tala for the period of 2012–2013 for inclusive education activities across four prioritized outcome areas and each activity will contribute to achieving the objectives of the National Disability Policy. The initiation of this program marks an important milestone for both Governments’ as it strengthens their commitments to the Development for All Strategy and Pacific Regional commitments such as the PRSD and the Incheon Strategy in addition to the provisions of the United Nations Convention on the Rights of Persons with Disabilities (UNCRPD).

Whilst the establishment of the special needs units in government schools saw an initial rise in the number of children with disabilities attending school the number again dropped due to operational difficulties. Referrals of new born babies and children detected with impairment from the Ministry of Health continues to be made to the Loto Taumafai Early Intervention programme which is the only village based program available on island that focuses on prevention and rehabilitation of children with disabilities under the age group of 15 year. The programme continues to support at least 300 families of children with disabilities and is struggling with the limited financial and human resources available to cater for the increasing demand for such services.

Table 4: Disability Assistance

Disability Assistance	2011	2012	2013
Annual Cost/Expenditures*	1,100,000.0	1,100,000.000	1,100,000.000
Number of Beneficiaries, total	103	1522	2096
Number of Beneficiaries, female	45	670	941
Number of Beneficiaries, male	58	852	1155
Number of Beneficiaries, poor	80	1171	1613
Number of Beneficiaries, non-poor	23	351	483

Fualautoalasi-Walter 2013

Pensions

The Senior Citizens Benefit Fund (SCBF) was established in 1990 pursuant to section 71 of the National Provident Fund (NPF) Amendment Act 1990. This Scheme is fully funded by the Government of Sāmoa and is administered by NPF. Sāmoa does not have a compulsory social insurance scheme for its entire population; however, the NPF provides for retirement in a system where employers and employees paid premiums as part of their contributory schemes. When they reach age 55 years, they are entitled to their payouts (NPF 2012).

The Benefit Fund is unique because all its aged citizens in all walks of life are qualified as beneficiaries, free in choosing of any profession in contrast to Developing Nations where one would have to work to earn it. That is, as long as you are 65 years and living in Sāmoa and is a Sāmoan citizen, you are eligible regardless of whether you contributed to NPF or not.

The SCBF has for the past years since November 1990 grown and fledged. Its beneficiaries have increased by four percent and costs increased by two percent in this Financial Year 2013/2014. At the close of the 2013 Financial Year, the Fund has in its Operations cash of SAT\$1,480,228.00 from Total Budget approved of SAT\$17,609,641.00.

The monthly Pension for those aged 65 and over is SAT\$130 tala to SAT\$135 tala. They also receive free travel on Government inter-island sea ferries, business class travel on government ferry to Savaii, free medical treatment and free medications at Government Hospitals.

The SCBF paid out SAT\$9,236 beneficiaries at the end of June 2014 a total of SAT\$15,180,497.00 for monthly pensions, and SAT\$1,344,931.00 for medical and travel expenses all of which are funded fully by Government. Of the 9, 236 beneficiaries, 5,175 are women which are about 56 percent of the total number of beneficiaries.

The challenge is that the SAT\$135.00 tala or US\$61.00 dollars a month is low, if compared to other neighboring islands.

Table 5: Expenditure on Pensions by Number of Beneficiaries and Amount 2011-2013

<u>Senior Citizen Benefit Fund</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Annual Cost/Expenditures*	15,940,000.00	16,674,261.00	16,911,381.00
Number of Beneficiaries, total	9,526	8,565	9,236
Number of Beneficiaries, female	5,337	4,799	5,175
Number of Beneficiaries, male	4,188	3,765	4,061
Number of Beneficiaries, poor	NA	NA	NA
Number of Beneficiaries, non-poor	NA	NA	NA

Fualautoalasi-Walter 2013

Apprentices Program

The Ministry of Commerce Industry and Labour (MCIL) administers the Apprenticeship Scheme. This Scheme was established under the Apprenticeship Act 1972 and the Apprenticeship Regulations 1973. The scheme combines work and part-time study which involves both practical skills and an understanding of theory in the trades. Apprentices need to complete three (3) to four (4) years or six thousand (6,000) to eight thousand (8,000) hours. The award of the Certificate of Due Completion is awarded to candidates who qualify as competent in a trade of their choice.

The Apprenticeship, Employment and Labour Market Division (AELM) Division keeps a record of job seekers who have registered with the Ministry. They refer these jobseekers to employers who have vacancies within their place of work. The Placement of jobseekers from the registry occurs when employers accept the referred jobseeker

after interviews. The Ministry also offers assistance in compiling curriculum vitae (CV's) and the writing of job applications for jobseekers who seek such assistance. This is also a free service.

The AELM Division also under its annual budgetary activities conducts annual job search skills training for those on the jobseekers register and those who wish to further their knowledge on basic job search skills in finding employment. The budgets have been the same of about SAT\$0.5 million tala per year for the MCIL to service these needs. Government also allocated SAT\$125,300.00 tala for the National University of Sāmoa as the Apprenticeship Training Provider. It aims to assist students with their final year's school and to be aware and prepare for jobs available in industries and sectors of our country. It also allows Year 12 and 13 students to increase their knowledge and to experience the various services being provided by different industries or workplaces. The main challenge is that not many people are tapped into these free services. Awareness Programs and advocacy support is required for young people and especially the unemployed to use these services.

Table 6: Expenditure on the Apprentice Program and Number of Beneficiaries 2011-2013

<u>Apprentices Program</u>	<u>2011</u>	<u>2012</u>	<u>2013</u>
Annual Cost/Expenditures*	508,874.00	511,972.00	508,916.00
Number of Beneficiaries, total	111	123	123
Number of Beneficiaries, female	11	25	33
Number of Beneficiaries, male	100	98	90
Number of Beneficiaries, poor	85	94	94
Number of Beneficiaries, non-poor	26	29	29

Fualautoalasi-Walter 2013

Analysis of Country Results

In 2001, ADB approved a Social Protection Strategy, which supports developing member countries in their efforts to reduce poverty and vulnerability and to provide their populations with effective social protection. It recognized that monitoring and assessment of social protection was a priority for improving the existing systems and developing new policies and programs.

Table 7: Calculation and Disaggregation of Social Protection Index by Category

	Social Insurance	Social Assistance	Labor Market Programs	All Social Protection Programs
Total social protection expenditure (SAT)	16,911,351	3,257,000	509,000	20,677,351.00
Beneficiaries	9,591.00	37,075.00	111.00	46,177.00
Reference population	71,936.00	123,260.00	7,627.00	202,823.00
25% of GDP per capita (SAT)	2,079	2,079	2,079	2,079
Social Protection Index	0.040	0.008	0.001	0.049

GDP = gross domestic product.

Source: Consultant's estimates 2013

The overall SPI for Sāmoa in 2015 is estimated at 0.049, as shown in Table 4. This implies that the per capita social protection expenditure of the government was about 4.9 percent of the poverty line expenditures (set at 25 percent of the per capita GDP).

The disaggregation of social protection for social assistance is approximately eight percent of the social protection expenditure. Table 5 shows social protection expenditure by category in Sāmoa. This is a very significant increase due to the increase in assistance during the Cyclone Evan period in 2015 December.

Table 8: Social Protection Expenditure by Category

Social Protection Category	2015 Annual Expenditure (SAT)	Percentage
Pensions	914,372	7
Health insurance	0	0
Unemployment benefit	0	0
Other social insurance (e.g., maternity, disability benefits)	0	0
All Social Insurance	914,372	7
Assistance for the elderly	0	0
Health assistance	1,881,000	15
Child protection	276,000	2
Disaster assistance and relief	7,808,000	61
Other social assistance	1,350,815	11
All Social Assistance	11,315,815	89
Labor Market Programs	518,577	4
TOTAL SOCIAL PROTECTION EXPENDITURE	12,748,764	100
	Gross Domestic Product	1,574
Social Protection Expenditure Indicator (SPEXP)	0.8%	

Source: Consultant's estimates 2015.

The depth of social protection expenditures is about 0.213, while the breadth is 0.231, indicating that social protection programs together reached nearly 49 percent of the population. However, the value of breadth warns that the expenditure per beneficiary was low and did not meet people's needs. Table 9 shows the SPI disaggregation by depth and breadth.

Table 9: Disaggregation by Depth and Breadth

	Social Insurance	Social Assistance	Labor Market Programs	All Social Protection Programs
Depth	0.848	0.042	2.206	0.213
Breadth	0.047	0.183	0.001	0.231
Social Protection Index	0.040	0.008	0.001	0.049

Source: Consultant's estimates 2015.

The disaggregation for the SPI for the poor is 0.002 and 0.047 for the nonpoor (Table 10). This indicates that the poor have less access to most social protection programs except for those programs that were developed or earmarked for a particular group of beneficiaries.

Table 10: Disaggregation by Poverty Status

	Poor	Nonpoor	
Social protection expenditure (ST)	673,663	20,003,688	
Reference population	202,823	202,823	
25% of GDP per capita (ST)	2,079	2,079	Total
Social Protection Index	0.002	0.047	0.049

GDP = gross domestic product.

Source: Consultant's estimates.

In relation to gender, the SPI for women is 0.022 and men 0.027 (Table 8). Women, both in number of beneficiaries and as well as expenditure, are behind men. Women's access and expenditure were 22 percent, compared to men's 27 percent, further illustrates that the gap between the genders is widening.

Table 11: Disaggregation by Gender

	Women	Men	
Social protection expenditure (ST)	9,152,808	11,524,543	
Reference population	202,823	202,823	
25% of GDP per capita (ST)	2079	2079	Total SPI
Social Protection Index	0.022	0.027	0.049

GDP = gross domestic product.

Conclusions

The SPI in 2015 for Sāmoa decreased in comparison to the 2012 results. One reason could be the increasing number of social protection programs recently established for the disaster relief programmes that were completed or were not sustainable and were active only for a particular period of time. However, the social protection programs with the most challenges are those focused on persons with disabilities and the school fee scheme. Both have been involved in court cases because of misuse of funds by employees. In addition, funding by the Australian aid program for programs focused on children with disabilities is now being scrutinized.

Another issue to be examined is the lack of health insurance and unemployment benefits in Sāmoa. Although the economy of Sāmoa could not sustain such major financial commitment, these are basic rights that still warrant government consideration. Medical treatment is heavily subsidized by the government, but more needs to be done, on accessible and affordable health insurance and better medical facilities and outreach. Other social insurance, such as maternity benefits and disability benefits, also do not exist. However, provision of maternity leave (eight weeks of leave with pay) is a statutory requirement for all government ministries and corporations and is administered by the Public Service Commission under the *Labour and Employment Relations Act, 2013*.

Data on SPI programs should be collected and be updated regularly to reflect the real situation in Sāmoa. Data should be disaggregated by gender and related to economic status of individuals to better analyze the situations of women and of the

poor in social protection programs and policies. Most of the financial assistance provided to Sāmoa is not specific to the poor, and the most vulnerable. For example, funds received either as pledges and donations during the tsunami disaster went into general revenue accounts of government and was disbursed and appropriated to all the sectors in Sāmoa, suggesting that there was no targeting of people according to their need. As a result, it reached only a small proportion of those in need, especially women and children. More transparencies would be achieved if the SBS were given the mandate and support to collect and collate information for a properly designed database with access to up-to-date, accurate information for social protection activities and beneficiaries. This initiative would result in more complete data sets leading to more accurate assessment and calculation of our social protection indicators which may result in improved policies and programs.

References

- Asia Development Bank. 2011. *Key Indicators for Asia and the Pacific 2011*. Manila: Central Bank of Samoa, Government of Samoa.
- Asia Development Bank. 2012. *Key Indicators for Asia and the Pacific 2012*. Manila: Central Bank of Samoa, Government of Samoa.
- International Labour Organisation. 2012. *Calculations Based on Asia Development Bank Key Indicators for Asia and the Pacific 2012*. Geneva: International Labour Organisation.
- Ministry of Finance. 2013. *Approved Estimates of Receipts and Payments 2011,2012, 2013 for Ministry of Education Sports and culture and National University of Samoa*. Apia: Samoa Government Printery.
- Ministry of Women, Community and Social Development. 2012. *Annual Report 2012*. Apia: Samoa Government Printery.
- National Provident Fund. 2014. *Annual Report 2014*. Apia: Samoa Government Printery.
- National Provident Fund. 2014. *Samoa Citizen Benefit Fund Annual Report 2010-2014*. Apia: Samoa Government Printery.
- Samoa Bureau of Statistics. 2006. *Samoa Population and Housing Census 2006*. Apia: Samoa Government Printery.
- Samoa Ministry of Commerce, Industry and Labour. 2012. *Labour Market Survey of Private Sector Employers in Samoa for various years Annual Report*. Apia: Government of Samoa.
- United Nations Educational Scientific Cultural Organisation. 2000. *The Education for All (EFA) Assessment Country Report*. Geneva: UNESCO.
- University of the South Pacific. 2012. *Faculty of Business and Economics Annual Report 2012*. Suva: University of the South Pacific.