

Non-contributory social protection through a child and equity lens in Sudan¹

International Policy Centre for Inclusive Growth (IPC-IG)

The Republic of Sudan is a multi-ethnic country located in the north-eastern part of sub-Saharan Africa. In 2016 the country's population was estimated at 39.57 million, the fourth largest in the Middle East and North Africa (MENA) region, with 66 per cent living in rural areas. Much like Iraq, Palestine, Syria and Yemen, nearly half of Sudan's population are under the age of 18, and 5.9 million are children under age 5. The country has one of the lowest Human Development Indexes in the world (0.490, ranked 165th out of 188 countries), placing it below the MENA regional average of 0.704. In 2009, 46.5 per cent of the population lived under the national poverty line. Regional disparities are severe, with rural areas experiencing the highest levels of poverty: 57.6 per cent of the rural population are classified as poor.

In 2017, Sudan had an estimated 2.3 million IDPs, and 4.8 million currently depend on humanitarian aid for survival. Continuous armed conflicts significantly affect the well-being of children, particularly in the regions of Darfur, South Kordofan and in the Blue Nile states. About 2.2 million children below the age of 5 suffer from acute malnutrition, and the country has the highest rate of out-of-school children in the region: approximately 3 million school-age children between 5 and 13 years old. According to 2014 estimates, under-5 mortality stands at 68 per 1,000 live births, one of the highest rates in the region, together with Djibouti and Yemen. Special attention needs to be paid to the well-being of girls, as there is a high prevalence of female genital mutilation and early marriage is a recurrent practice. It is estimated that 38 per cent of women get married before the age of 18.

A range of social protection programmes, policies and action plans exist in Sudan, although spending on social assistance is considered low, accounting for only 0.6 per cent of the country's gross domestic product (GDP) in 2015. The main institution responsible for implementing social protection policies is the Ministry of Security and Social Development (MoSSD)—previously the Ministry of Welfare and Social Security—while 18 Poverty Reduction Centres are responsible for implementing the government's poverty reduction policies at the local level.

In 2016 the Sudanese government launched *Shamel*, an integrated programme for social support. The programme is financed by public funds, with technical assistance from the World Bank to improve efficiency in the targeting process. In 2011 the Higher Institute of Zakat Sciences partnered with the Central Bureau of Statistics to conduct a poverty census, creating a database to identify poor and vulnerable households, which serves as the main instrument to identify potential beneficiaries for *Shamel* and *zakat*-funded programmes. Previous initiatives, such as the Social Support Project, were incorporated into *Shamel*, which was designed to provide unconditional cash and in-kind transfers, water services, housing and nutritional support to

Sudan's poorest households. As part of the initiative, a school feeding programme was implemented in states where poverty rates are highest. *Shamel* is currently in place in nine states, but it is expected to expand and cover all 18 Sudanese states.

The Zakat Fund is another important source of non-contributory social protection in Sudan, providing cash transfers, subsidies, services and productive support to poor households. The Zakat Fund operates as a semi-autonomous agency affiliated to the MoSSD, and its contributions are collected both in cash and in-kind (including agricultural products and livestock). It also provides education fee waivers and student support grants, supporting 82,691 students from poor households to pursue higher education in 2016. Total expenditure for the Zakat Fund amounted to USD2.1 billion in 2016, covering 2.16 million households.

Since 1996, contributory health care insurance exists for those employed in the formal sector. The Zakat Fund and the Ministry of Finance and National Economy (MoFNE) work in partnership to increase coverage of the non-contributory National Health Insurance Fund (NHIF) by sponsoring contribution fees for poor households. In 2016 the Fund covered 16.41 million individuals (approximately 43 per cent of the population), more than half of whom (8.78 million) were classified as poor. The government has set a target to increase the NHIF's coverage to 80 per cent of the population by 2020, still giving higher priority to the inclusion of poor people.

Despite increased efforts by the government, some challenges remain to ensure equitable childhood development for poor and vulnerable children in Sudan. Promoting equal access to and providing incentives for the completion of primary education, enhancing services related to child and maternal health and creating institutional arrangements to ensure the protection of girls are particularly important in this context. In terms of social protection, Sudan's progress towards improving its non-contributory social protection system through greater integration is noteworthy. While the recent creation of *Shamel* and the expansion of the NHIF are important attempts to improve support to Sudan's poorest families, alleviating poverty and improving children's well-being remain central to the government's efforts.

Note:

1. This One Pager is taken from a comprehensive study developed in partnership between the IPC-IG and UNICEF MENARO. All data are thoroughly referenced in the full report:

Machado, A. C., C. Bilo, R. G. Osorio, and F.V. Soares. 2018. *Overview of Non-contributory Social Protection Programmes in the Middle East and North Africa (MENA) Region through a Child and Equity Lens*. Brasilia and Amman: International Policy Centre for Inclusive Growth and UNICEF Regional Office for the Middle East and North Africa: <<https://goo.gl/QfmKwK>>.