Case Number 2058.0

# Implementation of a New Country-Wide Social Safety-Net Program: The Jamaica PATH Program

### Part A

Jamaica is an island country in the Caribbean that obtained its independence from Great Britain in 1962. Its 2.8 million residents live on 4,240 square miles (10,990 square kilometers), spread across 14 parishes. Kingston, with a population of 970,000, is the capital and largest city. The World Bank classifies Jamaica as an upper middle-income country. Its economy is heavily dependent on the service industry, particularly tourism and financial and insurance services, but the agricultural, mining, and manufacturing sectors are also important. It is a mixed economy, and the government has been actively pursuing a program of structural reforms and initiatives to grow the market sector.

The Jamaican economy has seen a number of ups and downs over the past twenty years as international economic conditions fluctuated and the country experienced its most serious drought in seventy years. By the end of the 1990s the economy was in a period of negative growth and the well-being of the poor had decreased significantly—despite the country's extensive social safety net.

Jamaica defines poverty in terms of income. The poverty level is determined by the cost of a "minimum socially adequate food budget" scaled up by a multiplier that is the inverse of the share of a family's budget spent on food.<sup>3</sup> In 2002, the poverty rate for individuals was 19.7% and for households was 14.4%. The poverty rate varied considerably across the country, ranging from 7.2% for households in Kingston to 19.3% for households in rural areas.<sup>4</sup>

In the late 1990s, the Jamaican government began rethinking its approach to poverty alleviation. By this time the country's social safety net had grown to comprise 45 programs run through 12 ministries. There were multiple school-based programs, labor market programs, income support programs, subsidized medicine programs and one housing program. Despite the breadth of initiatives, a World Bank study found that the effectiveness of the programs was low. The programs were poorly targeted in three ways. First, they provided benefits to many non-

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<sup>&</sup>lt;sup>1</sup> For a map of Jamaica and its parishes, see Appendix A.

<sup>&</sup>lt;sup>2</sup> The World Bank, Jamaica, <a href="http://www.worldbank.org/en/country/jamaica">http://www.worldbank.org/en/country/jamaica</a>.

<sup>&</sup>lt;sup>3</sup> See Appendix B for a detailed description of poverty level determination in Jamaica.

<sup>&</sup>lt;sup>4</sup> See Appendix C for details.

<sup>&</sup>lt;sup>5</sup> Data provided to author by the Jamaica Planning Institute.

poor families and individuals while failing to provide benefits to many of the poor. Second, many of the poor were unaware of support they might have received or unable to afford the costs of getting access to the benefits. Third, where programs did reach the poor, the level of benefits was often too low to lift these families or individuals out of poverty.

In 2001 the government chose to streamline its social safety net through the creation of the PATH Program—Programme of Advancement Through Health and Education—and delivering it through one Ministry—the Ministry of Labour and Social Security. PATH was based on the conditional cash transfer programs initially developed in Mexico and later replicated in many countries. The central idea behind conditional cash transfer programs was that individuals received financial support from the government contingent on participating in certain activities, specifically sending their children to school on a regular basis and taking them for routine well-child care. Jamaica chose to develop its programs for families with children 17-years-old and younger. Mothers would be issued a health card and would be required to take their very youngest children for well-baby and well-child health care check-ups on a regular basis to ensure that they were on-target developmentally and receiving the appropriate immunizations.

Benefit Category: Children	Required Number of Health Visits:		
Birth to 6 months	3 visits, once every 2 months		
7 to 72 months	Once every 6 months		

Children over six-years-of-age were required to attend a government funded school and to be present at least 85% of the days during an academic year. If mothers and children met these requirements, checks would be mailed to the mother.

### **Determining Eligibility for PATH**

There are two common ways to measure poverty, each with its own strengths and limitations. The first is income poverty—measured by annual income relative to a standard reflecting what is considered to be the line between poor and non-poor. The second is consumption poverty, determined by measuring what people are able to consume over the course of a year. Consumption-based poverty measures are routinely used in developing countries and are preferred over income-based measures for a number of reasons:

The main theoretical reason is that estimates of current consumption are more likely than estimates of current income to provide a reliable estimate of a household's long-run standard of living. ...current income may be more subject to temporary shocks, especially if households engage in predominantly agricultural and self-employment

<sup>&</sup>lt;sup>6</sup> The PATH Program initially included conditional cash transfer initiatives for the elderly, disabled, and pregnant and lactating women. These were later changed to case programs not contingent on behavior and are not discussed in this case.

<sup>&</sup>lt;sup>7</sup> Ministry of Labour and Social Security, <a href="http://www.mlss.gov.jm/pub/index.php?artid=55">http://www.mlss.gov.jm/pub/index.php?artid=55</a>.

activities. In contrast, consumption can be smoothed to some extent by saving and borrowing.<sup>8</sup>

Despite using an income poverty measure to determine overall poverty rates, the Jamaican government chose to use a different strategy to measure eligibility for the PATH Program. They developed an application form that gathered data on a number of characteristics of household members and of the households themselves. Using applicant responses to questions about such things as educational attainment of the household head and ownership of specific assets, they determined an eligibility score.<sup>9</sup>

Jamaican mothers, who had heard about the new PATH Program and believed they were eligible for it, would be required to travel to their local parish government office to apply—the Ministry of Labour and Social Security (MLSS). Local administrative officials at the MLSS would explain the program, answer questions and collect completed applications to send to the national government's Ministry of Labour and Social Security. As can be seen from the map of Jamaica and information on the size of each parish, for some families this would involve travelling a considerable distance. The central government's Ministry of Labour and Social Security would then enter data from the applications into a computer where they would be analyzed according to the algorithm developed to determine eligibility. Applicant families would then be notified by mail of their eligibility status.

Once they were notified of their eligibility for the PATH Program, families would need to register for the program, send their children to school and take them for health care visits. The National Ministry of Labour and Social Security would be responsible for sending lists of registered children to schools and health centers to get confirmation of compliance with the requirements for school attendance and health care visits. These lists were to be delivered monthly. Schools and health centers would record attendance and visit information and the lists would be returned to the Central MLSS office. Staff in the Central MLSS office would determine which eligible mothers had earned payments, write the checks, and mail them to the parish post office.

The intention was that checks would reach the post offices by the 14<sup>th</sup> of every month where mothers would pick them up. Mothers would then be able to cash the checks.<sup>10</sup>

#### Implementing and Assessing the PATH Program

Donald Williams, a staff member at the Planning Institute of Jamaica, was part of the team responsible for setting up and assessing the operations of the PATH Program. He had worked in the Jamaican Planning Institute for a number of years and knew that the political stakes were high. After all, even though the current 45 programs were not well targeted, many families were benefiting from them and would be unhappy when their benefits were discontinued—and many government bureaucrats who were benefiting from their role in delivering these programs would be losing this part of their portfolio. On the other hand, if the government couldn't deliver the

<sup>&</sup>lt;sup>8</sup> Dan Levy and Jim Ohls, "Evaluation of Jamaica's PATH Program: Final Report," Mathematica Policy Research, Inc., March 2007.

<sup>&</sup>lt;sup>9</sup> Prior to implementation of the PATH Program, the government conducted a household survey with a consumption model and used information from the responses to develop an algorithm that could reliably determine eligibility based on a small number of items.

<sup>&</sup>lt;sup>10</sup> For a flowchart of the PATH Programme process, see Appendix E.

benefits to poor families under the new program, rates of poverty and hardship would remain unacceptably high and the political repercussions might be substantial.

Williams knew that getting the new PATH Programme off the ground would be a complicated process. It would involve dismantling the 45 programs that had been in place for some time and working with the national and local governments to set up the new program. It would also involve working with local schools, health centers and hospitals.

He knew that many of the country's poor families, particularly those in the rural areas, were so busy trying to survive that they had little time to pay attention to national news and, as a result, would not learn about the new PATH program for a long time. On the other hand, he knew that the community health workers were highly respected by local residents and were working effectively in most rural areas. He thought he might be able to rely on them to help get the program off the ground in the more remote areas of the country. This made him wonder who else he might be able to reach out to for support.

Williams also knew that many local parish governments were weak and would have difficulty implementing a quick start-up of the new program. But he wasn't certain what the key problems might be or how to address them. He needed someone on his team who could help him think about implementation—how to identify where there were challenges that needed to be addressed and what the characteristics and magnitude of those challenges were. And he needed this information quickly. He didn't want the program to fail because they hadn't thought carefully about how to implement it.

Imagine that it is 2002 and the program is about to be started. Williams has reached out to you, because of your experience conducting evaluations and your deep understanding of formative, process and impact evaluations as well as other evidence generating research strategies. He has asked you to present to his working group your ideas on how you would assess the implementation of PATH. Time and resources are limited, so you will need to anticipate where problems are most likely to occur and how you will assess their characteristics and magnitudes. But you also need to be alert to unanticipated challenges to implementation and have a plan for assessing those. You have only a short time to prepare your strategy. What will you and your team propose?

Appendix A: Map of Jamaica



Jamaica is divided into 14 parishes, which are grouped into three historic counties that have no political significance.

MAP NO.	COUNTIES AND PARISHES	CAPITAL	SQ. KM	SQ. MI	POPULATION
Green	Cornwall County				
1	Hanover	Lucea	450	174	67,037
2	St. Elizabeth	Black River	1,212	468	146,404
3	St. James	Montego Bay	595	230	175,527
4	Trelawney	Falmouth	875	338	73,066
5	Westmoreland	Savanna-la-Mer	807	312	138,947
	Middlesex County				-
6	Clarendon	May Pen	1,196	462	237,024
7	Manchester	Mandeville	830	320	185,801
8	St. Ann	St. Ann's Bay	1,213	468	166,762
9	St. Catherine	Spanish Town	1,193	460	482,308
10	St. Mary	Port Maria	611	236	111,466
	Surrey County				
11	Kingston	Kingston	25	8	96,052
12	Portland	Port Antonia	814	314	80,205
13	St. Andrew	Half Way Tree	453	166	555,820
14	St. Thomas	Morant Bay	743	287	91,604
•	Total		10,991	4,243	2,607,632

Source: Map of Jamaica Parishes, <a href="https://en.wikipedia.org/wiki/Parishes\_of\_Jamaica">https://en.wikipedia.org/wiki/Parishes\_of\_Jamaica</a>; Table based on data from: <a href="https://www.scuba-diving-smiles.com/map-of-jamaica.html">https://www.scuba-diving-smiles.com/map-of-jamaica.html</a>.

## Appendix B: Data on Poverty<sup>11</sup>

## **Incidence of Poverty ...Per Adult Equivalent Method**

	20	2002		2003		2004	
Region	Individual	Household	I	Н	I	Н	
KMA	10.3	7.2	14.6	9.7	14.3	10.8	
Other Towns	18.6	12.8	15.8	12.1	7.8	5.2	
Rural Areas	25.5	19.3	24.2	20.0	22.1	15.8	
Jamaica	19.7	14.4	19.1	14.8	16.9	12.0	

## **Distribution of Poverty 2002-2004**

	2002		2003		2004	
Region	Individual	Household	I	Н	I	Н
KMA	15.8	16.2	12.8	12.6	26.3	29.7
Other Towns	15.7	14.7	13.2	12.2	9.0	8.9
Rural Areas	68.5	69.1	74.0	75.2	64.7	61.4
Jamaica	100	100	100	100	100	100

## **Prevalence of Poverty by Parish**

Parish	1998	2002	2008
Kingston	12.6	18.3	14.5
St. Andrew	7.7	14.8	8.7
St. Thomas	9.4	28.7	14.4
Portland	18.3	32.2	17.3
St. Mary	38.4	27.2	21.3
St. Ann	22.5	37.0	12.5
Trelawny	18.3	31.3	19.0
St. James	8.9	12.9	8.5
Hanover	13.3	14.1	15.5
Westmoreland	33.3	18.7	10.7
St. Elizabeth	18.4	20.0	30.6
Manchester	11.7	24.4	15.3
Clarendon	13.3	27.2	15.0
St. Catherine	8.2	6.2	7.5
Jamaica	15.9	19.7	12.3

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 $<sup>^{\</sup>rm 11}$  Data provided by the Jamaica Planning Institute.

## **Appendix C: Path Brochure**







Breaking the Poverty Cycle through Education & Health in JAMAICA





## What is PATH

The Programme of Advancement Through Health and Education (PATH) is a Programme funded by the Government of Jamaica, Inter-American Development Bank and the World Bank aimed at delivering benefits by way of cash grants to the poorest and most vulnerable persons in the society.

PATH is administered by the Ministry of Labour and Social Security (MLSS) which has the responsibility to provide policy direction, guidance and coordination. Networking is done through the 13 Parish Offices.

The major stakeholders of PATH include the Ministry of Education, the Ministry of Health, the Planning Institute of Jamaica, the Ministry of Finance and Planning and several other agencies involved in the government's Social Safety Net Programme

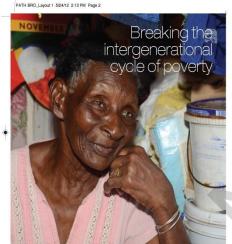
#### The main objectives of PATH are:-

To increase educational attainment and improve health outcomes of the poor by breaking the intergenerational cycle of poverty.

2 To reduce child labour by mandating regular school attendance

To reduce poverty by providing the means for poor families to help themselves

To serve as a safety net for poor families



#### Who should apply?

PATH targets all poor families and provides benefits for:

- Children 0 years of age to leaving Secondary School The Elderly - individuals 60 years and over.
- Pregnant and breastfeeding Persons with disability. Adult Poor (indigent)

If you or any member of your family is in need of assistance, you should apply or ask the head of your household to apply.

#### Documents to have:

household.

- Birth Certificate or other Proof of Age for the family head
- Valid Identification for the Family head of household Birth Certificates for all children who
- live in the household. 4. Birth Certificate or other Proof of Age for Adults 60 and over who live in the

#### Steps in the Process:

- Take the documents to the Ministry of Labour and Social Security (MLSS) Office in your Parish.
- An officer will assist you to complete the Application Form.
- If you qualify a Social Worker will visit your home to verify the information

provided

If your family is selected for benefits you will be advised to visit the Parish Office where you will be given information on your responsibilities under the Programme and sign an agreement letter.



You should ask for your **Application** to be reviewed it is easy as 1,2,3

#### What do Beneficiaries receive?

Each registered and compliant Beneficiary receives a bi-monthly payment. Cheque payments should be collected at the Post Office Indicated by the Beneficiary. Beneficiaries may also apply to receive their payments through a NCB Cash Card. This allows them to access their funds, purchase goods and check their balances at

#### What must Beneficiaries do to keep receiving

#### their benefits?

- Babies 0-12 months-VISIT Health Centre once every 2 months.

  Children 1-6 years-VISIT Health Centre 2 times per year.
- Pregnant and Breastfeeding women should **KEEP** appointments with the Health Centre for Pre&Post Natal Care.
- . Children (0-19)-registered in Primary and Secondary Schools should maintain an

#### What are the other benefits for families on PATH?

- 100% School Fee Assistance for all PATH students attending secondary level scho
- . Free access to Government Book Rental Scheme Referrals to other agencies for benefits not directly administered by PATH.
- Every child on PATH is now eligible to receive free lunch in all Government educational institutions

#### Some of the achievements of PATH

More than 390,000 persons in over 130,000 Jamaican families are now registered under PATH. The Programme has significantly improved the quality of life for its clients and is rated by the World Bank as one of the best Social Assistance Programmes. Children on PATH are among the top achievers in the GSAT and CSEC examinations

Source: Courtesy of the Jamaica Planning Institute

## Appendix D: Government of Jamaica Application for Social Assistance

GOVERNMENT OF JAMAICA APPLICATION FOR SOCIAL ASSISTANCE Application No: Family No: Constituency Code:
1. PROGRAMME: PATH Other  2. PAYMENT OPTION: Key Card Cash (KCC) Cheque  3. SOCIAL WORKER ZONE: Code
SECTION 1: FAMILY HEAD INFORMATION
4. NAME OF FAMILY HEAD:
Surname First Name
Middle Name (s)
Mother's Maiden Name
5. RESIDENTIAL ADDRESS (if different from residential address)
Lot/Apt/P.O. Box/
Street/District Street/District
Post Office/Postal Agency Post Code Post Office/Postal Agency Post Code
1-KMA 2-Other Town 3-Rural
7. DIRECTIONS TO HOUSE
Page 1 of 5

	TION 2: INDIVIDUAL INFORMATION
9. ORDER NO. OF FAMILY MEMBER	16. REGISTRATION DOCUMENTS SUBMITTED
10. NAMES OF FAMILY MEMBERS	1 Birth Certificate
	2 Declaration (Elderly Only)
Surname	3 School Records
DOM: 1975	4 None
First Name	
Middle Names (s)	16 B. BIRTH ENTRY NUMBER
Alias	17. OCCUPATION OF FAMILY MEMBER
Alids	17. OCCOPATION OF PAWILT WEIVIBER
11. DATE OF BIRTH DD/MM/YY	18. SEX: Male 1 Female 2
II. DATE OF BIRTH	16. SLA. IVIAIC
12. TRN	19. MOTHER'S MAIDEN NAME
13. NIS NO.	20. FAMILY RELATIONSHIPS
14. ID TYPE	
	1 Family Head
1 Driver's License	2 Spouse
	3 Son/Daughter
2 Passport	4 Grandchild
2 Passport 3 Voter's ID	
2 Passport 3 Voter's ID 4 Senior Citizen's ID/Disability	5 Other Family member
2 Passport 3 Voter's ID	5 Other Family member 6 Non Family Member
2 Passport 3 Voter's ID 4 Senior Citizen's ID/Disability	
2 Passport 3 Voter's ID 4 Senior Citizen's ID/Disability 5 None	6 Non Family Member
2 Passport 3 Voter's ID 4 Senior Citizen's ID/Disability	

22. CONTACT NO. 1  23. UNION STATUS  24. LAST SCHOOL COMPLETED	
1Married1Completed Prim2Common-Law2Some Secondary3Divorced3Completed Seco4Separated4Post Secondary5Widowed5Tertiary6Visiting9None7Single9None	
25. PREGNANT  26. PREGNANCY DUE DATE    1	27         IS DISABLED         YES         NO           28         IS MENTALLY ILL         YES         NO           29         IS CHRONICALLY ILL         YES         NO           30         IS SHUT IN         YES         NO           31         IS NIS PENSIONER         YES         NO           32         IF "YES" to Item #31, State Pension Number
33. NAME OF SCHOOL  GRADE CLASS SHIFT	SCHOOL CODE
34. NAME OF CLINIC  Page 3 of 5	CLINIC CODE

	SECTION 3: HOUSE ANI	O SERVICES INFORMATION	
35. In terms of the dwelling in which you now live, do you:	36a. Do you own a house?	36 b. If yes to question 36a, how many?	36 c. If you own your house, do you pay insurance?
1. Own 5. Live Rent Free 2. Rent 6. Squat 3. Lease 4. Government Rent	2. No		1. Yes 2. No
37. Do you have a land line telephone in your household?	38. Do you have internet service at home?	39a. What is the main source of lighting for your dwelling?	39 b. Do you pay for electricity?  1. Yes
1. Yes 2. No	1. Yes 2. No	1. Electricity 2. Kerosene 3. Other	2. No
39cAP PECAT (QNS ដាចិត្ត ១២៤) How much db you pay ទាក់ចុត្ត មកទៅ electricity? 2. Incomplete Survey J.\$. Postponed per month	40. What is the กรัสกุVกิลิเรียก์สายอก Ri the outer wall of your หลาย sets tent Ad 2. False Address 1. Wood 3. Blackbers ระยาก 2. Stone ชี-เพลาะเกาะสาย	SULTFlow do you dispose of your dgaybage? 6. Cannot be lo 7. Failed to give parishCentral receptacle 8. Denied acces agiongurn 9. Violence/att	42. What kind of toilet facilit  Attraction  42. What kind of toilet facilit  Number  Order  Order  St to premiser closet linked to sewer  ack 2. Water closet not linked to sewer
VIEW FR		4. Other ON INTERVIEW RESULTS	3. Pit 4. Other 5. N <b>An≩ FIELD VISIT NO</b> .
43. Are the toilet facilities used only IT by your household with a the AR households use the same facilities  1. Exclusive use  52. NAWE AND SIGNATURE  D O	drinking water for WEW family?  DAY N  1. Indoor tap/pipe 2. Outdoor private pipe/tap	ON 1. YEAR k 2. Bottles 3. Drum 4. Do not store water	46. How many rooms are occupied by your family YEXTINGING verandas, kitchen and bathro VINT 2
DECLARATION: I declare that the information of the second	nation provided is true and I authorise	that the information may be used to g	guide the Government's Social Policies.  ———————————————————————————————————
Page <b>4</b> of <b>5</b>			

47. Where is your kitchen? 1. Indoor 2. Outdoor 3. None			48. Amount s per week J\$ per week	pent for the family			
49. Does the FAMILY HEAD have a	50. Do the members of th	e family ha	ve?				
resident partner?		YES I	NO		YES	NO	
	1. Laptop			11. Stereo Equipment	1.20	1	
1. Yes	2. Desktop			12. Video Equipment			
2. No	3. Washing			13. Air Conditioner			
02	Machine			14. Other Electrical			
	4. Refrigerator			Equipment			
	5. Gas Stove			15. Sewing Machine			
	6. Electric Stove			16. Motorcycle			
	7. Car			17. Electric Water Heater			
	8. Fan			18. Generator			
	9. DVD Burner 10. DVD Player			19. Scanner	-	<del>                                     </del>	
	10. DVD Player			20. Dryer (Laundry)			
Page 5 of 5							

## Appendix E: Flowchart

HOUSEHOLD	MLSS PARISH OFFICE	MLSS MAIN OFFICE	<u>SCHOOLS</u>	HEALTH CLINICS
Learn about program				
Make guesses about eligibility				
Go to Parish office	Answer questions about PATH			
	Help applicants complete application			
	Send applications to main MLSS office	Enter application data		
		Calculate Eligibility		
Learn of acceptance		<u> </u>		
		Send acceptances to individuals/families who qualify		
Enroll	Enroll eligible families	Enter enrollment data		
Get health care	×	Send list of enrolled to appropriate clinics		Gather information on health care received by individuals on the list
Send children to school	10	Send list of enrolled to appropriate schools	Gather information on school attendance by individuals on the list	
			Send information to main office	Send information to main office
		Prepare checks		
		Mail checks		
Pick up checks at Post Office	O			