Savings Groups for OVC Households

A USAID Portfolio Review from Mozambique

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THE ASPIRES PROJECT

Overarching goal: to improve economic stability & related health outcomes of highly vulnerable populations, esp.:
- OVC households and caregivers
- HIV-affected households

**RESEARCH**
Evaluation research
- e.g., RCTs, Financial Diaries, standalone qualitative, ethnography
- Varying levels of engagement with program itself

Formative research
- e.g., needs assessments of target populations to help shape interventions

**TECHNICAL ASSISTANCE**
To improve programming
- e.g., better target/serve OVC or HIV-affected households

To scale up programming
To foster new linkages
- e.g., savings groups/clinical outreach

To design, launch, & evaluate new innovations/pilots
OVERVIEW OF MZ PORTFOLIO REVIEW

What we did:
- Combination of desk review & fieldwork
- FGDs & IDIs
- Demand & supply-side
- To deliver observations, recommendations & perhaps follow-on TA

“Improving the capacity of vulnerable [e.g. HIV-affected] households to meet their needs in sustainable ways by strengthening their livelihood, caregiving, and health-seeking skills” (CCP).
FUNCTIONALITY & KEY QUESTIONS

How Programs Reached OVC/VPs:

- Both programs aim for mixed membership—VPs & non-VPs in same SGs.
- Both systems emphasize confidentiality & minimizing stigma for VPs
- Variations on theme: field staff/volunteers identify/recruit VPs & report results without revealing status to public or to group.

Key Questions Included:

- What do participants see as targeting goals/ideals vis-à-vis vulnerable members? How do managers define targeting effectiveness?
- How do participants (esp. HIV-affected) articulate effects of programming in terms of economic, health, & other outcomes?
- To what extent do participants see SGs as source of charity for broader community, & why?
Basic SG methodology: mostly strong.

Outreach to VPs:
- 51% vulnerable reported by USAID
- 39% “most vulnerable” by our analysis
- 20-80% vulnerable by self-report

Exploratory findings on economic impact:
- E.g. “Before, I didn't know business; now, my children can go to school;” “Before the group, she would ask her husband for money, he would say no, and abuse her.”
- Loans and shareouts used for income-generating activities.
- Shareouts also used to meet families’ basic needs and well-being.

Practical innovations: OVC Fund (SCIP).
CHALLENGES & GROUND-LEVEL AMBIGUITIES

Confusion on both demand and supply-side about:
(1) Relation of vulnerability to purpose.
(2) Definition of vulnerability.
(3) Targets for VPs membership.
(4) Connection between SGs & health.

But confidentiality is upheld. So is this a problem?

Complication #1: outreach
- USAID unsure what it’s going to get in terms of VP outreach—waits for reports to trickle up.
- Should funder be satisfied with intervention that serve only 50% target population?
- Do programs need that other 50% to stabilize SGs?

Complication #2: “mission drift”
- Various forms of “pricing out” most vulnerable when savings minimums rise from cycle to cycle.
- Programs can end up skewed to serve non-target population.

Inherent tension in SG practice:
Self-selection vs. targeting, with added complication of need for confidentiality.
IMPLICATIONS

A path out of poverty?
Probably not for many.

A path to resilience?
Much more likely.

Ways to intensify resilience effect for VPs:
- Tighten/focus ground-level buy-in to mission.
- Cultivate the SG+ Plus idea, particularly regarding health.
Thank you!

The ASPIRES Team

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