INPLASY PROTOCOL

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Review Stage at time of this submission: The review has not yet started.

Design and implementation of Social Safety Nets in Tanzania: A protocol for a systematic review

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Review question / Objective: This systematic review aims to assess the design and implementation features of social safety programs in Tanzania. To this end, the proposed systematic review will answer the following questions: i. What are the types of social safety net interventions that have been and/or are being implemented in Tanzania? and ii. What evidence of the design and implementation features of social safety net programs can be discerned in existing literature? These review questions are framed based on the population, intervention, comparison, and outcome (PICO) framework for preparing review questions.

Condition being studied: Our factor of interest to be addressed by the systematic review are mainly two (A) core design features; and (B) implementation features of SSNs: The discussion on core design features will focus on: type of SSNs, main recipient, transfer value and frequency, coverage, duration of exposure and outcome. The implementation features will cover aspects such as: conditionality, targeting, payment mechanisms and governance, and implementation challenges.

INPLASY registration number: This protocol was registered with the International Platform of Registered Systematic Review and Meta-Analysis Protocols (INPLASY) on 18 August 2022 and was last updated on 18 August 2022 (registration number INPLASY202280074).

INTRODUCTION

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outcome (PICO) framework for preparing review questions.

Rationale: Social safety nets (SSNs) are noncontributory interventions designed to help individuals or/ and households to cope with chronic poverty and vulnerability. In principle, SSNs aim to prevent those who are poor and vulnerable groups from falling into poverty or being trapped in a poverty trap when affected by temporary shocks. To date, SSNs are globally used as a crucial policy instrument in addressing issues related to poverty and vulnerability. An important but often overlooked aspect of SSNs in literature is their design and implementation features. These are critical for these interventions to achieve the desired goal.

The available systematic review evidence on the design and implementation of SSNs paint a global picture with limited disaggregation, and much of this focuses narrowly on specific country contexts such as Tanzania. Much of the evidence on design and implementation of SSNs from systematic literature reviews is skewed towards Latin America, Asia, and to a limited extent, Africa. The current systematic review in the Tanzanian context is vital for social safety net providers, policymakers, and other practitioners. This group would otherwise be confronted by an overwhelming bulk of studies and available grey literature on which to base their decisions for designing and implementing social safety programs in the country.

This review will appraise the SSNs that have been, and are being implemented in Tanzania. Specifically, it will describe the core design and implementation features of these SSNs. The former will constitute aspects such as the nature of main recipients, transfer values and frequency, coverage, duration of exposure, and outcomes, while the latter will focus on conditions, targeting, payment mechanisms, and governance, and challenges. We do so in recognition that careful attention to design and implementation details are crucial for achieving the desired SSNs outcomes.

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METHODS

Search strategy: We have organized search terms into two categories (i) interventions and (ii) setting and geography. The interventions consist of all possible social safety nets: conditional cash transfer; unconditional cash transfer, public works programs, and their related nomenclatures that are likely to be found in the title; subject; or abstract of relevant literature, thus forming three subcategories as described below. The setting and geography category is built up with one theme only, "Tanzania". Within "category", search terms are combined with the Boolean Operator "OR", and between "category", the Boolean operator AND is used. We will search for each set of combinations separately, as shown below:
Interventions
i. (conditional cash transfers) OR (in-kind conditional transfer) OR (in-kind conditional transfer) OR (fee waivers) OR (educational subsidies) OR (food subsidies) OR (school feeding program) OR (agricultural inputs) OR (social cash transfers) OR (social transfer programs) OR (agricultural subsidy) OR (conditional AND scholarship)
ii. (unconditional cash transfers) OR (old-age social pension) OR (orphans allowance) OR (disability benefits) OR (child and basic transfer) OR (elderly AND pension) OR (non-contributory pension) OR (noncontributory pension) OR (elderly AND transfer)
iii. (public works programs) OR (PWs) OR (in-kind public works) OR (in kind public works) OR (food for work) OR (food-for-

work) OR (FFW) OR (food for training) OR (food-for-training) OR (FFT) OR (food for assets) OR (food-for-assets) OR (FFA) OR (input for works) OR (input-for-works) OR (IFW) OR (cash for work) OR (cash-for-works) OR (CFW) OR (employment guarantee) OR (workfare program) OR (welfare to work) (Food-based programs) OR (Food-stamp program) OR (food Aid) OR (school meal program) OR (Supplementary feeding program)
Setting and geography
AND
i. Tanzania.

Participant or population: Studies will be included if they report social safety nets on any one or all of the following groups (i) the chronic poor, (ii) the transient poor, and (iii) the vulnerable groups. These are the main population groups targeted by SSNs, the globally accepted antipoverty policy instrument. These groups may include children, women, older people, people with disabilities, the displaced, the unemployed, and the sick. We will include studies addressing adults and children if they are reported separately.

Intervention: We will include major types of SSNs, namely (i) cash transfers (CTs); and (ii) public works (PWs). Cash transfers in this context are also referred to as "social cash transfers" or "social transfer programs", and they are noncontributory in the sense that targeted individuals or households do not pay to get cash grants. We will include conditional cash transfers (CCTs), and unconditional cash transfers (UCTs). The CCTs are cash grants provided to impoverished households upon fulfilling a set of conditions or co-responsibilities such as child school enrolment and minimum level of school attendance, visiting health facilities, participating in workshops, and participating in public works. While UCTs are cash provided without particular conditions or co-responsibilities, targeting specific categories of people, such as the elderly. Public Works (PWs) are programs which involve the provision of cash grants which are conditioned to participating in community projects or activities. We will

include PWs in all forms of payment modalities: (i) those offering food which is also referred to as food-for-work (FFW); (ii) those offers cash which is referred to as cash-for-work (CFW); (iii) those offering inputs-for-work (IFW) where the wage is paid in the form of agricultural inputs such as fertilizers and seeds.

Comparator: Given the broad social safety net interventions, several comparisons will be relevant. For each type of intervention, we will describe and compare the core design features (level of transfer, timing and frequency of the transfer, duration of the transfer, main recipient of the transfer) and implementation features (conditionality; targeting; payment mechanisms; and program governance, and implementation challenges).

Study designs to be included: The review will consider all types of studies (case studies, quasi-experiments, randomized controlled trials, surveys, etc.).

Eligibility criteria: The main inclusion criteria will be (i) study characteristics; and (ii) report characteristics. Within the study characteristics, our inclusion criteria will follow the PICO framework and the study setting. Concerning report characteristics, we will use years of publication and publication status. To avoid bias and ensure that the review is as thorough as possible, we will include both (i) published peer-reviewed studies and (ii) grey literature.

Information sources: The information sources are from the following bibliographic databases: (i) World Bank OKR, (ii) SSRN, (iii) PubMed, (iv) ScienceDirect, (v) Scopus, (vi) IDEAS, and (vii) ProQuest. The information sources for grey literature will include (i) Targeted organization website browsing (TASAF, UNICEF, WFP) and (ii) search engine searching in google scholar (GS).

Main outcome(s): We will include studies reporting on the six broad groups of outcomes: (i) savings, investment, and production; (ii) health and nutritional

outcomes; (iii) employment and empowerment; (iv) education outcomes; (v) consumption; and (vi) reduction in poverty, vulnerability to poverty and vulnerability to food insecurity.

Additional outcome(s): Not Applicable.

Data management: We will import the citations identified from the search strategy into CADIMA, the online systematic review management software. We opt to use CADIMA out of 22 available review management software tools because it is one of the public open-access tools that is designed to (i) assist throughout the systematic review process; (ii) be suited to reviews broader than medical sciences; (iii) allow for offline data extraction; and, (iv) support working as a review team.

Quality assessment / Risk of bias analysis: We will conduct risk of bias assessments to explore the heterogeneity of included studies. To do so, we use the Mixed Methods Appraisal Tool (MMAT) as a risk of bias assessment tool. The MMAT permits to appraise the methodological quality of five categories of studies: (i) qualitative research, (ii) randomized controlled trials, (iii) non-randomized studies, (iv) quantitative descriptive studies, and (v) mixed methods studies.

Strategy of data synthesis: In doing data analysis, we will provide a narrative synthesis of the findings from the included studies, and we will focus on (a) the core design features and (b) implementation features of SSNs. Within the core design features, we will examine to identify: (i) the type of SSNs implemented in Tanzania; (ii) main recipient; (iii) transfer value and frequency; (iv) coverage; (v) duration of exposure; and (vi) outcomes. Within the implementation features, a narrative synthesis will focus on: (i) conditionality; (ii) targeting; (iii) payment mechanisms and governance; and (iv) implementation challenges. We will group the included studies by core design and implementation features, depending on the final sample of included studies. The review and

discussion will be framed in the context of these criteria. Our interest is to reveal how are SSNs being designed and implemented in Tanzania since the design and implementation features influence their effects on outcome indicators.

Subgroup analysis: Not Applicable.

Sensitivity analysis: Not Applicable.

Language restriction: We will restrict to studies reported in English and Swahili, and there will be a restriction on publication year.

Country(ies) involved: Tanzania.

Other relevant information: 1. Basil Msuha is affiliated to President's Office - Regional Administration and Local Government, Division of Sector Coordination, Tanzania. 2. Luitfred D. Kissoly is affiliated to Ardhi University, Department of Economics and Social Studies, Tanzania. 2. Arnold Kihaule is affiliated to Ardhi University, Department of Economics and Social Studies, Tanzania.

Keywords: social safety nets; social safety; systematic review; implementation features; cash transfers; grey literature; transfers; conditional cash transfers; design features.

Dissemination plans: We intend to publish the systematic review protocol as a stand-alone peer-reviewed article in a scientific journal.

Contributions of each author:
Author 1 - Basil Msuha - Author 1 drafted a protocol for a systematic review.
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Author 3 - Arnold Kihaule - Author 3 reviewed and commented on the protocol for a systematic review.