



INTERVIEW: PHILIPPE MARCADENT

Social Security Expert

“Roadmap to extending social security with examples on entry points from Mozambique and Cap Verde”

The aim of the GESS Roadmap is to guide users in the process of social security extension. It is not a matter of providing a list of steps to follow in a chronological manner, but rather to remind the users of certain key elements to keep in mind during a process of extension. Users are then invited to consult the other GESS pages if they wish to delve more deeply into the matter and acquire more detailed knowledge.

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GESS: You have extensive experience in providing technical support and assistance to countries in the field of designing and implementing strategies for extension of social protection. What is, in your opinion, the most important message the Roadmap should convey?

Philippe Marcadent Marcadent: In my opinion, the Roadmap should convey the following two messages:

Firstly, the process of social security extension in a given country is not linear, but a historical product that has developed through political decisions and initiatives from various stakeholders (civil society, Government, social partners, etc.), not to forget bilateral and multilateral cooperation.

ILO interventions should therefore not be linear either, in the sense that they would follow a sequence of already established interventions. We have to be able to listen, show flexibility and seize the opportunities that we get at any given time to progress towards extension. Naturally, this does not exclude defending how we think the process should work.

Secondly, there is no single point of entry for supporting extension, but several ways to proceed. One never arrives on “virgin” or “neutral” land, but in countries with a history and one or more already existing social security systems. Among countries with a high level of coverage, I do not think that two have followed the same developmental path.

GESS: It is often recommended to begin any technical support work by an assessment study that analyses the country’s social security arrangements and to only make suggestions afterwards...

Philippe Marcadent: Yes, that is the common procedure to follow. However, these analyses often do not actually respond to country demands, and they do not make full use of them. How many of these studies are actually used by the countries and how many end up at the bottom of a drawer? Analyses are necessary but their scope and timing must be adapted to the local situation and the needs of the local authorities.

I think that the initiative needs to come from the countries and not from supporting organizations, be it the ILO or others. When seeking to intervene in a country in the area of social security it is much more efficient to form strategic alliances by taking as the starting point requests or suggestions from key ministries – not only the ministries of Labour and Social Protection, who usually have limited resources, but the ministry of Finance. That is what we have tried to do in different countries, such as Argentina, Peru, Cape Verde and others.

GESS: If you do not recommend a systematic approach, can you still advise on any pragmatic attitude?

Philippe Marcadent: I think it is necessary to take the country request as a point of departure, that is, the countries’ own identification of their priorities. This might seem to go without saying, but it is a principle that is rarely applied. Then it is a matter of responding adequately to this request in order to progressively earn credibility and gain a better understanding of the whole context, and develop trust relations with key decision-makers, such as the President’s Office and the Ministries of Finance and Planning. That is what we try to do in Mozambique and Cape Verde, albeit with a different approach in the two countries.



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GESS: What has been the approach to provide support in Mozambique?

Philippe Marcadent: We began by responding to a specific request: improving the social assistance scheme's information system. Then we took part in the working group for social protection in connection with the poverty reduction strategy paper (PSRP PARPA II), where we worked with the Ministries of Finance and Planning. Afterwards, we were requested to provide support to the Government in defining the national strategy for basic social protection. In connection with this strategy, we became one of the most important UNDAF actors whose social protection component is strictly linked to the basic strategy. We are currently in dialogue with most of the important stakeholders involved in social protection and present in the various decision-making forums for extension.

GESS: Do you also try to form work and trust relations with the ministries of Finance in the countries where you intervene?

Philippe Marcadent: In developing countries, social assistance programmes have a positive impact on several dimensions of the development agenda, such as health, education, food, etc. It also has a positive effect on the economy, insofar as transfers enable beneficiaries to engage in productive activity and no negative impact on the labour market is observed. However, ministry of Finance officials have mostly studied in OECD countries (where it is considered that social assistance programmes can have a disincentivizing effect on job demand) and are therefore often convinced that such programmes have a negative impact on the labour market.

It is therefore not easy to convince ministries of Finance to allocate resources to the extension of social protection. Arguments that focus on the right to social security are not enough. It is necessary to develop a whole battery of arguments that convince them of the following: the programmes' intrinsic efficiency, their feasibility (technically and financially), their positive impact on other development dimensions such as employment level, economic growth, etc.

This is why we are currently preparing a "compendium" of 80 social assistance programmes, with a description of their effects on a number of dimensions (indicators). The compendium will be available on GESS shortly.

GESS: And in Cape Verde, what has been the approach to provide support?

Philippe Marcadent: In Cape Verde, our initial entry point was evaluating the feasibility of extending social health protection through mutual health organizations. There was strong pressure from the Government to proceed in this direction. Our study showed that, like we

had thought, the mutual organizations were not a viable option at the time. I think this activity benefited the country, as it spurred debate about which alternatives had already been chosen without a sound technical or financial basis. We were then requested to improve the efficiency of the non-contributory pension system, which had just been standardized. For instance, the information system, which had a number of flaws, needed to be improved. The standardization of the pensions system was a good opportunity to rethink the entire system of information management. Over the course of the technical mission to carry out this work, several problems related to updating and accuracy of the information in the database of the scheme's beneficiaries were identified, such as payment of pensions to persons who had been dead for years, double or triple payment to the same persons registered with different identification numbers, payments to ineligible persons, etc. The information in this database needed to be linked to the ministry of Finance database (declaration of income) and the civil registry. Periodic reconciliation of the data with these two databases helped keep the pension system's database tidy, and together with the elimination of improper payment, the scheme's unjustified expenses could be reduced considerably. This was only the point of entry, and our intervention today concerns the entire social security system, including social insurance (and extension to self-employed workers), non-contributory pensions for elderly and disabled persons, public works for the poor, working-age population and, soon, child benefits and benefits for certain vulnerable groups.

GESS: Has the situation in Cape Verde improved in terms of access to healthcare, especially medication?

Philippe Marcadent: Yes, the situation has changed greatly in Cape Verde. Some years ago, the official rates were not applied at all and the healthcare service left something to be desired in terms of quality, but now the price lists begin to be used, and costs can therefore be recovered from public hospitals. In addition, the quality and availability of care is improving.

Poor persons officially have free access to healthcare in public facilities in Cape Verde. But because these hospitals are sometimes out of stock of medication, poor persons are forced to go to private pharmacies to buy prescription medication. To provide better access to medication for beneficiaries of the social pension scheme, the ministry of Work has implemented a "mutual health fund" which covers the costs of buying medication.

After great efforts to improve the supply of medication to public hospitals, the ministry of Health today says that they have remedied the shortage problem. The expenses of the mutual health fund should therefore be greatly reduced. However, the actual situation appears to be different, and variations in the fund's expenses



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are thus a good indicator of the situation of supply and stock shortage of medication at public hospitals in the country. The information system I mentioned before has a new function in this respect, as it will make it possible to identify very concretely (and pinpoint geographically) any possible malfunctioning in the healthcare system in terms of the poorest people's access to medication.