



Human Rights Bulletin



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The right to social security

Introduction

This bulletin provides information on social security. The International Labour Organisation (ILO) defines social security as "*...the protection which society provides for its members, through a series of public measures, against the economic and social distress that otherwise would be caused by the stoppage or substantial reduction of earnings resulting from sickness, maternity, employment injury, unemployment, invalidity, old age and death; the provision of medical care and the provision of subsidies for families with children*". In simpler terms social security is a scheme of income-maintenance to cater for circumstances in which the individual's earning capacity is interrupted, through the use of private or public funds or both. Not entirely new, social security is based on organised social solidarity and risk-pooling to provide for beneficiaries in times of need. Social insurance dates back to traditional social protection mechanisms through the extended family and the local community. These have lost efficiency and reliability as a result of unemployment, high fertility rates, urbanization, destitution and effects HIV and AIDS. Social security approaches based on mandatory government responsibilities and obligations are legitimate expectations of citizens.

Purpose of social security

Social security aims to provide income-maintenance in circumstances where an individual's capacity to earn income is impaired permanently or temporarily. Risks of unemployment, sickness, invalidity and old age are inevitable. There is no guarantee that sole individual effort to avoid or address these risks, for instance through personal savings, can be effective. Collective or assisted investment has proved to be a better approach to risk management. Social security assumes that individuals will develop needs or wants they will not be able to meet using their own resources, making it necessary to mobilise resources not exclusively from the individual. Pensions, insurance and public assistance for purposes of income maintenance in cases of involuntary loss of income are examples.

Forms of social security

Social security can be in the form of social assistance or social insurance. Social assistance, also called public assistance, involves benefits in cash or in kind financed by the state at central or

local level. It includes social safety nets, child and family support and are non-contributory and is financed by governments from taxes or state revenue. Social assistance is a right but typically regarded as optional and a privilege in developing countries. It is also stigmatized in that beneficiaries are often regarded as failures in society. Social insurance on the other hand is financed by contributions and seeks to provide social protection against risks such as unemployment, sickness, invalidity and old age. This is done through resource pooling and risk sharing by a large number of similarly risk-exposed individuals into a common fund that compensates the loss experienced by any member. There is a tendency to view benefits of social insurance as individual achievements. They are not stigmatized as compared to social assistance. However, both forms are rights as domestic and international human rights law dictates.

Social security as a right

Social welfare is one of the National objectives in the Constitution of Zimbabwe, providing that *“The State must take all practical measures, within the limits of the resources available to it, to provide social security and social care to those who are in need”*. Social assistance is catered for under Section 82, which obliges the state to ensure that elderly people receive financial

assistance and welfare support; Section 83, which obliges the state to take appropriate measures for the provision of special facilities and state funded education and training where needed, for persons with disabilities; and Section 84, which entitles war veterans to suitable welfare such as pensions and access to basic health care.

The African Charter for Human and People's Rights (ACHPR) guarantees the rights to life, dignity, liberty, work, health, food, protection of the family and the right to the protection of the aged and the disabled. Articles 4, 5, 6, 15; 16; 18(1), (2) and (4) provide for the right to social security as a guarantee of human dignity in circumstances where persons have limitations in fully realising their rights. The right prohibits arbitrary and unreasonable restrictions on existing social security coverage, both public and private and obliges states to ensure equal enjoyment of adequate protection from social risks and contingencies. ACHPR member states are obliged to ensure access to social security schemes that provides a minimum essential level of benefits to all individuals and families, that enable them to acquire at least essential health care, basic shelter and housing, water and sanitation, foodstuffs, and the most basic forms of education

consistent with human life, security and dignity. In international law the right to social security is enshrined in Article 22 of the Universal Declaration of Human Rights (UDHR); reconfirmed in Article 9 of the International Covenant on Economic, Social and Cultural Rights (ICSECR), which recognises “the right of everyone to social security, including social insurance”. ILO Convention Number 102 of 1952 specifies a series of minimum standards. Zimbabwe signed and ratified ICSECR, thereby accepting that *“The State Parties to the present Covenant recognise the right of everyone to social security, including social insurance”*. Social security is therefore a right that can be demanded. It is not availed at the goodwill of government although governments of developing countries can however implement Article 9 only *“within the limits of available resources”*.

Social security in Zimbabwe

Zimbabwe has provisions for social assistance, which are non-contributory. This is done under the social safety nets programmes, which are instruments for reducing poverty, addressing inequality and helping poor and vulnerable households to manage risk more effectively. These include:

- monthly maintenance payments for people with disabilities;
- payment of school fees for disadvantaged and children with disabilities under the Basic Education Assistance Module (BEAM);
- vocational training fees payments for disadvantaged students and students with disabilities;
- per capita and administration grants for disability institutions and institutions catering for the disadvantaged;
- the Assisted Medical Treatment Order Service (AMTOS) for provision of free medical care and provision of assistive devices to people with disabilities.

There are also contribution-based social insurance schemes provided by both public and private institutions. The Pension and Provident Fund Act; the Insurance Act and the Insurance and Pensions Commissions Act regulate private funeral, pension, health and property protection schemes. The National Social Security Authority (NSSA), constituted and established in terms of the NSSA Act of 1989, [Ch17: 04], is the statutory corporate body tasked by the Government to provide social security. NSSA has a National Pension Scheme that offers a retirement pension and grants, invalidity pension and grants, survivors' pension and grants and a funeral grant. It

also has the Accident Prevention and Workers Compensation Scheme that provides employees and their families with financial relief after injuries or death. The Premier Service Medical Aid is another parastatal offering contributory medical insurance.

Information about social assistance programmes is not adequately disseminated for eligible persons to benefit. Administration and social marketing of social assistance programmes has been fraught with bureaucracy and corruption. Resultantly many eligible beneficiaries are not aware of the programmes or not enabled to benefit. Social insurance is more user-friendly and better to claim as opposed to social assistance. Its administration has however been a source of controversy. NSSA has been associated with corruption, inefficiency and bureaucracy that benefited its senior employees and management board at the expense of employees who are made to make mandatory contributions. Despite the existence of the Pension and Provident Fund Act; the Insurance Act and the Insurance and Pensions Commissions Act, commercial social insurance schemes are not adequately sanctioned, deterred from profiteering and are inaccessible to low-income earners.

Conclusion

Zimbabwe has more commercial than private social security schemes. For the public schemes social assistance is poorly funded and administered to the detriment of beneficiaries and eligible beneficiaries. Commercial social insurance, although more effective, reliable and accountable, practices profiteering and short-changes beneficiaries. It requires more oversight and accountability on the part of regulatory bodies for insurance. The unemployed and those in the informal sector should have access to contributory social insurance. Government should make social assistance, as part of social security, a claimable right and strengthen administrative justice mechanisms in that regard. To monitor the state of social security and intervene as appropriate, watchdog organisations should interrogate government reports such as the Zimbabwe Vulnerability Assessment Committee report (ZimVAC); Zimbabwe Demographic and Health Survey (ZDHS) and update reports from the Insurance and Pensions Commission (IPEC). Government should periodically monitor realisation of the right to social security by submitting state reports to the Committee on International Covenant on Social, Economic and Cultural Rights (CICSECR) and African Commission on Human and People's Rights (ACHPR).

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