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Towards feasible social security systems in sub-Saharan Africa

Arne Tostensen

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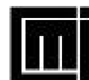

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Introduction

The international community is devoting increasing attention to social security issues in developing countries as part of its preoccupation with poverty reduction (ILO 2000). This paper will discuss various social security arrangements in place in sub-Saharan African countries to mitigate the contingencies of their citizens, with emphasis on the masses of poor people, including the ways in which the poor themselves try to tackle unexpected adversity.[1] My basic argument is that for a social security system to be *feasible* in the current circumstances of widespread economic crisis, formal and informal mechanisms will have to be combined.

Vulnerability

The African poor pursue a series of strategies on a daily basis to supplement their low incomes, to meet rising consumer prices, and to cope with inadequate or unreliable economic and social infrastructure. Elsewhere, I have devoted considerable space to discussing how poor households, in effect, become translocational in their efforts to pool income from multiple sources, of which oscillatory labour migration is but one (Tostensen 2003).

Being poor, however, means more than daily struggle to eke out a living. A defining aspect of poverty is vulnerability to shocks and contingencies. Vulnerability means defencelessness, insecurity and exposure to risk, shocks and stress. It is a reflection not only of low incomes but also of limited assets, such as human investments in health and education, productive assets including housing and domestic equipment, access to community infrastructure, stores of social capital and claims on other households and patrons. It may also stem from the lack of access to the government and to the international community for resources in times of need (Wratten 1995:17).

The shocks that threaten the well-being of individuals, households or communities take many forms. They include natural and ecological calamities (droughts, floods, earthquakes, epidemics, pests, etc.) or human-made disasters of economic, social or political nature (e.g. wars and civil strife). Perhaps more difficult to redress than sudden dramatic shocks are the gradual long-term adverse trends or seasonal cycles that often produce crises, although the drama may be less evident.

To withstand economic shocks or economic crises, households must be able to survive such periods without irreversible damage to the productive capacity of their members and to their net asset position. The greater the risk and uncertainty, the more households are inclined to diversify their assets to prevent such erosion. When asset bases become so depleted that even an upturn in the economy cannot reverse the damage – when all 'capital is cashed in' – households are extremely vulnerable (Moser 1996:24).

Poor people who live at the margin are particularly sensitive to unexpected events and are less capable of coping with their consequences. In other words, vulnerability is not

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[1] This paper is a slightly revised version of the trial lecture over a topic of my own choice for the Dr. Philos. degree, held on 30 May 2003 at the University of Bergen.

only related to coping with the sudden and temporary loss of income, but equally much to the wherewithal to recover after the shocks and to restore livelihoods at least to the pre-shock level. The ability to recover or not could mean the difference between survival and continued livelihood at a very meagre level, on the one hand, and spiralling indebtedness, eventually resulting in destitution and social exclusion, on the other. The imperative of post-shock recovery is a major reason why social security – even in rudimentary form – takes on particular importance for the poor.

The normative foundation

A social Darwinist perspective would consider social security an entirely superfluous institution: the economy functions the way it does, and if any of the players in the marketplace become casualties, so be it; nobody else has a responsibility to bail them out, except perhaps their immediate families and whatever faith-based organisations that might be around to provide charity. Whereas such a view may have had some currency two-three centuries ago, it is not acceptable today. Since the end of the 19th century the normative basis of social security has been carried forward and buttressed by social and political movements and gradually taken hold as part of a general social ethos, especially in the early parts of the 20th century (Ghai 2003:128–130).

After the end of World War II the right to social security was enshrined in Article 22 of the Universal Declaration of Human Rights. ILO Convention no. 102 of 1952 is far more detailed and specifies a series of minimum standards that social security is expected to satisfy. These rights were subsequently reconfirmed in Article 9 of the International Covenant on Economic, Social and Cultural Rights from 1966 which recognises "the right of everyone to social security, including social insurance." Thus, the normative foundation of social security is not in question, neither in society at large nor in international law.

The actual implementation, however, of these obligations on the part of the signatories to the conventions varies widely across the globe. In most industrialised countries elaborate welfare states have been established which afford the citizens generous social protection – some would say too generous. The Nordic states are often seen as models to be emulated in that regard and represent one extreme of the spectrum of legal systems and practises. The situation in most developing countries is a far cry from the Nordic case. The predicament of sub-Saharan Africa is particularly egregious – perhaps with the exception of South Africa (Olivier et al. 2001). In its General Comment no. 6 (para. 30) the Committee on Economic, Social and Cultural Rights recognises, however, that the full implementation of Article 9 can only be done "within the limits of available resources" but it does not specify what they are. This is an example of what is often referred to as an aspirational or hortatory right, of which there are many. In fact, most of the articles contained in the Covenant on Economic, Social and Cultural Rights are of that nature. With regard to the 'rubber-like' quality of these rights the qualifying formulation of Article 2 is telling. It refers not only to availability of resources but also to the "progressive realisation" of rights. In other words, the Covenant concedes that the obligations of the signatories are not expected to be fulfilled immediately; the process seems open-ended. Although the primary responsibility for social security provision rests on the state, the challenge is to determine what resources are available for social security purposes in different sub-

Saharan African societies at particular points in time and what social security measures are affordable within those resource constraints.

What is social security?

The conventional ILO definition of social security (ILO 1984:3) is deficient in two respects. First, it places undue emphasis on the role of the state in social security provision. Second, it presumes that the majority of the citizens have already reached a satisfactory living standard in a modern economy, which social security is designed to protect. The referent is obviously Western societies which hardly fits the contemporary African situation.

With reference to developing countries, three functions of social security in a broad sense are often considered: amelioration, prevention, and development. First, the ameliorating function is evident in social assistance with a view to relieving acute stress, although it sometimes approaches semi-permanency. Social assistance is generally subject to means-testing. Second, the preventive function of social security is exemplified by social insurance and employer liability programmes, designed to maintain income when regular earnings are interrupted or terminated due to various contingencies. Third, at a higher level of social security a developmental function materialises through the use of social security resources for both economic and human capital mobilisation, e.g. the deployment of provident or social insurance fund resources for investment purposes (Midgley 1993:136).

In criticising the ILO definition, several authors have argued for a wider conception and see the objective of social security as the prevention, by social means, of very low standards of living, irrespective of whether these result from chronic deprivation or temporary adversity (Burgess and Stern 1991:43; Leliveld 1991; Guhan 1994:48). However, such comprehensive definitions are so wide that social security would then encompass virtually all sorts of programme designed to alleviate or reduce chronic poverty. To exclude the *temporary* nature of distress from the definition of social security, ostensibly to make it more applicable to the situation of developing societies where *chronic* distress prevails, i.e. poverty, would render it meaningless. It would serve both analytical and policy-making purposes better to keep social security arrangements and poverty-reducing measures separate at the conceptual level, rather than lumping them together in an unwieldy blanket definition. Social security must address *contingencies*, not permanent conditions.

Acknowledging the need for a broad and flexible definition suitable for developing countries – without extending it to comprise poverty-reduction as well – an appropriate definition which embraces all forms of social security in varying configurations of traditional, informal and formalised modern forms would be the following (Schmidt 1995:11–12):

> … the sum of all regulations within a society which aim to guarantee the individual or the group not only physical survival, but also general protection against unforeseeable risks which would entail the deterioration of their situation, and the consequences of which cannot be borne by the individual or group without external assistance.

Following the independence of African countries in the early 1960s, it was expected – up until the late 1970s – that their economies would expand and continue to provide formal employment for a growing proportion of the population. Instead, the 1980s saw economic contraction and structural adjustment. The youthful age structure of the populations produced an explosion of school-leavers seeking work. And the rural exodus continued unabatedly. As a result, large numbers of labour market entrants sought refuge in the informal economy, predominantly in towns and cities. Recovery is still elusive for most African economies. These developments have left three-fourths of the labour force outside the formal economy, either in subsistence agriculture or in low-income informal activities such as small-scale manufacturing, domestic service or petty trading (Gillion et al. 2000:518). Since most social security arrangements cater only for the formal economy this means that, in terms of coverage, the overwhelming majority of Africans remains unprotected by formal means against the main risks.

In these circumstances, from what sources do Africans actually derive social security? It should be inserted here that large segments of the African populations do not enjoy social security at all; they are at the mercy of nature and human forces beyond their control. Traditionally, however, the collective solidarity of the extended family, clan and ethnic group was the mainstay of income and social security for the majority of Africans (Kayongo-Male and Onyango 1984:80–82; Kaseke 1997:42). In archaic agricultural societies stockpiling of goods, in particular foodstuffs, was the only buffer or 'insurance' against seasonal risks of crop failure, or other natural calamities. With increasing differentiation and more complex redistribution systems, more sophisticated forms of traditional social security came into existence. The various cropping, leasing and farming systems of a community form the material foundation on which compensatory mechanisms are build, based on custom, culture and religion (Platteau 1991). These collective, community-based social security arrangements are based on systems of mutual dependence or reciprocity, although of variable strength (Sahlins 1972). But this stylised representation of traditional society is largely gone or is fast disappearing. Family ties are eroding and the pressures on family cohesion are tremendous and increasing, owing particularly to the devastating consequences of the HIV/AIDS pandemic in many African countries.

Under colonial rule and after independence most African countries saw the establishment of social security institutions, initially catering for the expatriates. Gradually, they were extended to Africans so as to supplement the traditional forms. To a limited extent private insurance companies have also entered the field. Furthermore, various informal arrangements have co-existed with those of the state and the private sector. Today, four broad types of institution provide social security in the African context: the state; the private market; civil society; and the family. From an institutional perspective the principal difference between these sources of social security is found in their underlying incentive structure of co-operation and compliance. The state relies on legislation and compulsion, whereas the market depends on economic incentives. By contrast, civil society social security arrangements are predicated on mutual interest and peer pressure, while the family provides cohesion based on deep-seated social norms and values (Jütting 2000:7).

Different social security institutions

Social security provision in developing countries has evolved by default rather than by design. Since developing countries still find themselves in a transitional phase, however protracted, traditional forms of social security co-exist with modern ones, supplemented by 'in-between' variants of an informal nature.

State-based systems

State-based social security systems are modelled on European experiences and cater for people in the modern sector of the economy, i.e. only for those in organised public and private employment. For example, social insurance pension schemes and provident funds typically cover only 5–10 per cent of the total labour force plus their dependants (Gillion et al. 2000:520).

With regard to the design of state-based social security schemes a distinction is normally made between *social assistance* and *social insurance* (Iyer 1993:189–192). The former is defined as benefits in cash or in kind financed by the state (at central or local level), as a rule provided on the basis of means-testing. Typical examples are so-called safety nets for poor people in need. The concept also includes universal benefit schemes which are not means-tested, e.g. child and family support. Social assistance is non-contributory, i.e. the beneficiaries do not contribute in advance of drawing benefits. It is funded from general tax revenue.

By contrast, social insurance as a form of social security is financed by contributions and is based on the insurance principle. In this context, insurance is understood to mean the elimination of uncertainty associated with loss for the individual or the household. This is achieved by pooling the contributions of a large number of similarly risk-exposed individuals or households into a common fund that compensates the loss experienced by any member. In other words, resource-pooling and risk-sharing are defining characteristics of social insurance schemes which by nature are collective. As such they contain an element of redistribution. But they may be administered either publicly by the state or privately by insurance companies. Social insurance schemes may be compulsory or voluntary.

Another important distinction is drawn between *defined-benefit* and *defined-contribution* schemes. The former means that the benefits accruing to the beneficiaries are defined when the scheme is designed, which ensures the predictability of benefits. In the case of pension schemes the formulae used may be simple such as a flat rate per year of service or more complex such as a percentage of the average wage during a specified period of service (Barbone and Sanchez 2000:48–49). With regard to health plans the benefits are usually defined in terms of the treatment offered, including hospitalisation, and monetary ceilings or maximum duration of hospitalisation. Defined-benefit schemes can be public or private, compulsory or voluntary, contributory or non-contributory. In the case of public schemes, the benefits are often guaranteed by the state, in which case there is little incentive to improve performance.

On the other hand, in defined-contribution schemes – typically pension schemes – the benefits received depend on the contributions made previously. In principle, defined-contribution systems are fully funded: the assets equal the liabilities (Barbone and Sanchez 2000:49). Provident funds are typical examples of such arrangements. The members pay individual contributions during their working life on the pay-as-you-go principle. Upon retirement they receive the accumulated contributions in a lump-sum payment plus accrued interest, less administrative costs. Alternatively, annuities may be set up. Individual accounts are kept for each member. A major weakness of such schemes is the effects of inflation and currency devaluation, which tends to erode the real value of the pension benefits received. With good financial management, however, the yield on the investment of fund reserves might compensate for the inflation loss. With defined-contribution systems, the beneficiaries have a strong incentive in improved management and would have sought to ensure that it happened if proper mechanisms were in place. Most often they are not, though.

Few countries in sub-Saharan Africa have defined-benefit pension schemes so far. But it is politically very tempting to convert provident funds to defined-benefit systems, partly due to the poor performance of the former and partly because the lump-sum payments to the beneficiaries are grossly inadequate. The short-term political and economic attraction of this conversion lies in the ability of the government to improve its outlays to beneficiaries without increasing its contributions. It may even be possible to increase the range of benefits. This apparent 'miracle' is possible because the scheme thus moves from a fully funded to an unfunded system. The long-term consequences will not have to be faced until well into the future. If the fund is well managed and the returns on investments are competitive, the conversion may be sustainable for a considerable period of time. However, with a changing age structure of the population and the increasing life expectancy of pensioners, pressures will be mounting and eventually the reserves will be depleted. At some point contributions will have to be increased or the benefits reduced (Barbone and Sanchez 2000:51). Sustained economic growth and a broadening of the contributions base would, of course, postpone that eventuality, and politicians seem to bank on that.

Tanzania converted in 1998 its erstwhile National Provident Fund to a fully-fledged National Social Security Fund to be implemented in phases (Bandawe 2000). In the first phase, the new scheme provides a qualified member with at least 15 years' membership comparatively generous pension benefits from the age of 60, including monthly payments (Ejuba 2000:19).

Four other African countries have done the same: the Seychelles (late 1970s), Ghana (1991), Nigeria (1994), and Zambia (1997). Kenya, Swaziland and Uganda plan to follow suit. Gambia administers both a social insurance pension scheme and a provident fund. Mauritius and the Seychelles operate both universal as well as employment-related benefit programmes. Botswana introduced a means-tested social programme in 1980 (Bar-On 2001) and provides a social pension scheme. South Africa and Namibia also give social pensions to sizable population groups (Devereux 2001). Most francophone African countries adopted from the outset the social insurance method as opposed to the provident fund approach.

Of the types of social security benefits that the ILO and the International Social Security Association prioritise, two take precedence in sub-Saharan Africa: old-age and survivor benefits; sickness and injury benefits. Given the state of African economies and the very high rate of unemployment, it would definitely not be feasible to introduce a tax-funded unemployment benefit scheme. International organisations have advised against it (Kaseke 1988:17). For much the same economic reasons, maternity benefits, child and family allowances have been left out; fertility rates are too high. The exception is social assistance for those close to destitution, which has been politically inevitable.

One of the main social protection problems in Africa is coverage. The normative and political imperatives of extending existing schemes are so strong that it seems unavoidable. On the other hand, the economic and fiscal situation is such that the prospects are bad in most sub-Saharan African countries for the introduction of tax-based social assistance schemes either on a universal or means-tested basis. The number of poor is simply too large and the tax base too narrow. Contributory health insurance schemes suffer from similar problems, mainly because of the unpredictability of benefits and the adverse selection problem (Cichon and Gillion 1993). The prospects are somewhat better with respect to contributory pension schemes. A convincing case can be made for the judicious extension of coverage in order to improve the financial base. More contributors mean greater revenue immediately while the payable benefits may be deferred into the future. Trust and governance are the main hurdles.

Apart from the question of scope and coverage, existing public social security institutions face major problems of governance and management (Bailey 2000). The administration of social security systems is complex and many schemes have not been managed in the best interest of the contributors and beneficiaries. There are deficiencies in record keeping and in the processing of benefit claims (Gillion et al. 2000:522). In terms of financial management the greatest challenge is related to compliance. Failure by participants to fulfil their payment obligations threatens both the legitimacy and financial viability of the schemes. If evasion is widespread, governments may be compelled to cover the shortfall (McGillivray 2000:77).

For employees social security contributions are, as a rule, withheld from their wages by their employers who, in turn, are legally required to remit the contributions, along with their own, to the appropriate collection authority. Normally, this check-off system works well but sometimes employers fail to make the remittances within the specified time limits. An employee's evasion presupposes collusion with the employer, but more often the employers collude with the compliance officers of the collection authority. If schemes comprise self-employed and young, domestic, casual or part-time workers, the scope for evasion is even greater. Evasion is prevalent among employers in small-scale enterprises, in the informal economy and those in financial difficulties. Typical evasion techniques include failure to register eligible workers, under-reporting of earnings, and delay or failure to remit contributions (McGillivray 2000:78–82).

Market-based systems

In the 1980s structural adjustment programmes emphasised liberalisation, deregulation and a reduced role for the state. These developments provided new opportunities for

the private sector. Hence, complementary market-based social security schemes run by private insurance companies on a commercial basis were introduced alongside the state-based systems.

Although market-based systems are on the ascendancy they still play a marginal role in the total provision of social security. This is a reflection of the state of African economies and the low income level of the majority of the population. While the efficiency and quality of commercial social insurance systems are recognised, their inaccessibility for the low-income strata renders them suitable instruments mainly for the affluent, urban-based parts of the population.

Pressures to privatise social security have not really taken hold in Africa. Statist traditions are resilient and social security is considered such an essential service that the state prefers to retain it under its umbrella. Even so, since the investment performance of public social security funds has been so abysmal – in effect, funds have been appropriated by governments – a case can be built for privatising the particular investment function, if not the entire administration and management (McGillivray 1998:23).

Membership-based systems in civil society

Owing to the limited coverage of state-based and market-based social security systems an array of membership-based schemes have emerged in civil society. They fill a gap left by the state and the market. The distinguishing criteria of these schemes are their internal homogeneity and limited size. Those who form such groups have something in common that bind them together in mutual interest: kinship or ethnicity; geographical origin, or friendship (Lourenco-Lindell 2001). And they are small enough to be manageable. These mutual-help societies take a multitude of forms. All over Africa, the best known are perhaps the informal rotating savings and credit associations (ROSCAs). The basic principle is the same everywhere: a fixed sum is paid periodically into a common pool by each member. From this pool each member may withdraw at fixed intervals a lump sum equal to his/her own contribution multiplied by the number of members. Thus, each member has rotating access to a continuously replenished pool of capital (Geertz 1962:243). The pool may run for a short while, only a few months, or extend over several years; it may involve small sums of money or considerable amounts; the members may be few or many; it may comprise a mixture of members, only women, only men, urban dwellers or rural peasants. The variants are legion but the basic principle remains the same.

Most ROSCAs are perhaps not primarily social security institutions. As a rule, the withdrawn money may be used for any purpose. Some members use it for investment, others for pure consumption items, and still others to withstand hardship in social security contingencies (illness, accident, death, unemployment, etc.). As such they constitute an important informal social security mechanism, which enables poor people to deal with contingencies.

A second, slightly more formalised type of social security arrangement is organised along co-operative lines. Savings and credit co-operatives (SACCOs) are often linked to the workplace. Small deductions are made regularly from the wage, and after a

stipulated period the contributor is allowed to withdraw, say, three times his/her contribution. Repayment is also through a wage deduction. Again, there is generally no restriction on the use of the loan and many borrowers use the money to meet contingencies.

At present, social security arrangements hardly exist for the great majority of self-employed peasants in the rural areas. There is some scope, however, for crop-based schemes. To finance basic social protection levies could be imposed on cash crops delivered to co-operatives or other marketing organisations. The design of such schemes could be negotiated by the peasants in conjunction with the officers of their organisations, probably with technical assistance inputs from outside.

More or less formalised NGOs also perform social security functions but they appear to be less important than ROSCAs and SACCOs. Be that as it may, there seems to be scope for strengthening the role of NGOs in social security provision. Trade unions are particularly well placed in that regard, but their disadvantage from the point of view of coverage is that they are confined to the formal sector of the economy.

All the above civil society forms of social security have an untapped potential, and with concerted efforts their relative importance could grow. Some would argue that the state should leave them alone lest they become ‘contaminated’ and acquire the same problems that have beset the state schemes. On the other hand, judicious, unobtrusive technical assistance might be in order to improve management and enhance efficiency.

Kinship-based systems

The support system of the extended family is still alive in Africa, albeit under severe pressure. First, the productive resources an average household commands are diminishing, mainly due to the sub-division of land from one generation to another. Second, household expenditures are soaring with the introduction of cost sharing in education, health and other services due to high inflation rates. Third, the dependency ratio is increasing due to unemployment, persistently high fertility rates, children orphaned by AIDS, and the destitution of relatives. All this constrains the ability of the households to contribute to informal social security networks, simply because there is little to spare. Instead, indebtedness results for an increasing number of households. The ratio of households forming the backbone of the informal social security system to those in need of support, is falling.

Demographic impacts

All social security systems are sensitive to demographic changes (Lambo 2000). Some parameters are particularly important: fertility, mortality and population growth rates, as well as age structure. To varying degrees the HIV/AIDS pandemic has a bearing on them all.

After independence natural population growth rose in sub-Saharan Africa and peaked at about 2.8 per cent in the early 1990s. The estimated overall annual growth rate had declined to about 2.7 per cent by 1997, largely stemming from declining fertility rates in countries that undoubtedly have entered a demographic transition period. The UN

has projected that the average fertility rate will fall from 6.0 in 1995 to 4.6 in 2010 and further to 3.7 in 2020.

Notwithstanding falling fertility trends, population growth rates will still be maintained at a high level by the momentum built into the age structure. The African population is comparatively young. In most countries about half are below the age of 15. In the decades ahead these young cohorts will enter their reproductive age and produce babies.

The proportion of elderly above 60 years of age is low, on average 5.3 per cent in 1998, compared to nearly 20 per cent in Europe. Although this may seem reassuring in terms of pressure on pensions and some other social security schemes, the picture is deceptive. Declining fertility rates combined with declining mortality rates and the resultant rise in life expectancy have contributed to the ageing of the population. What is more, the greying of the population has increased, i.e. those who have reached retirement age live longer than before.

The consequences of the HIV/AIDS pandemic have interfered with the 'normal' demographic trajectories. Above all, mortality rates have risen sharply in those countries in Eastern and Southern Africa where the infection rate is highest, with 15–20 per cent of the adult population. The rising mortality rates have had dramatic effect on life expectancy. In the 29 hardest hit African countries life expectancy at birth is currently estimated at 47 years – seven years less than what might have been the case in the absence of AIDS. Projections suggest that by 2010–2015 life expectancy is likely to be 16 years shorter than without AIDS (Lambo 2000:134). Although life expectancy at birth is plummeting, the longevity of pensioners, however, will not decline.

These devastating consequences will not only influence long-term population growth prospects. Cynics of the Malthusian persuasion might say that AIDS is 'solving' Africa's population growth problem. In the context of social security, however, the consequences of AIDS impact on dependency ratios because the size of the labour force will decline. The population dependency ratio measured by 60-years-olds and older to total population will increase, as will the ratio of 60-year-olds and older to the population between 15 and 59.

The HIV/AIDS pandemic puts severe strain on all social security arrangements, regardless of design. The resources consumed at all levels of society to deal with this scourge undermine the ability to finance long-term investment in social security measures. It is an irony that the very phenomenon of HIV/AIDS, while undermining the evolution of better social security systems, also reinforces the need for reform and improvement.

Feasibility considerations

In view of the above, the prospects for feasible social security systems in sub-Saharan Africa do not appear encouraging. In the circumstances, the only practicable way forward is to combine the four main tiers of social security, and devise a new division of responsibility between public and private provision. At any rate, whatever new 'blends' emerge must be closely tailored to the needs and conditions of each country.

Judicious expansion of state- and market-based schemes is no doubt feasible, with emphasis on contributory arrangements. The problems of collection, administration, investment and general governance are tough but not insurmountable. The real challenge, however, lies in expanding the membership-based arrangements of civil society, including crop-based schemes to capture the vast majority of smallholders who generally fall outside existing systems. State and foreign technical support can probably play a significant role in establishing unconventional schemes outside the formal structures.

In the long run the feasibility of sub-Saharan social security systems will depend on sustained economic growth to create jobs and opportunities so as to improve the basis for both tax-based social assistance and contributory social insurance.

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Summary

The international community is devoting increasing attention to social security issues in developing countries as part of its preoccupation with poverty reduction. This paper discusses social security arrangements in place in sub-Saharan African countries to mitigate the contingencies of their citizens, with emphasis on the masses of poor people, including the ways in which the poor themselves try to tackle unexpected adversity. The basic argument is that for a social security system to be *feasible* in the current circumstances of widespread economic crisis, formal and informal mechanisms will have to be combined.

While recognising the normative foundation of social security in the international human rights regime and taking its point of departure in the vulnerability of poor households the paper looks at various definitions of social security. It proceeds with an enumeration of formal state-based and market-based systems, as well as informal membership-based systems in civil society and traditional kinship-based systems. Taking into account the demographic impacts of the HIV/AIDS pandemic the paper concludes that the feasibility of social security arrangements in the present economic circumstances of sub-Saharan Africa hinges on the combination of formal and informal sub-systems.

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