

Family Networks and Social Inclusion: A Study on Welfare and Poverty Eradication in Pakistan

*Muhammad Muneeb Ahmed & **Muhammad Zahid Siddique

Abstract: This paper explores the significance of family networks as the most prevalent and impactful social safety net, particularly in traditional South Asian society – Pakistan. It argues that family networks serve as a vital bridge between vulnerable and resilient individuals, facilitating societal welfare through the redistribution of resources. Using empirical data from the Pakistan Bureau of Statistics' "Special Survey for Evaluating Socio-Economic Impact of Covid-19 on Wellbeing of People," this study analyzes data from over 5,500 households and 31,022 individuals across Pakistan. The findings highlight the fundamental role of family networks in social protection, surpassing other public and private programs. Family networks have a substantial impact on the welfare of vulnerable segments, effectively alleviating poverty among connected family members. While this paper presents initial findings based on descriptive statistics, future research will employ advanced econometric techniques to further substantiate these results. The results could be applicable to other developing South Asian countries with traditional societal structures and similar demographic profiles. The study contributes to the existing body of research on welfare and poverty eradication, shedding light on the pivotal role of family networks in promoting societal well-being.

Keywords: Social Inclusion, Vulnerable Populations, Family Networks, Social Safety Net, Social Protection, Poverty Eradication, Social Welfare, Resource Redistribution.

*PhD Scholar (Economics) at Department of Economics, School of Social Sciences (S3H), National University of Sciences and Technology (NUST), Islamabad. Email: muneeb_formanite@hotmail.com

**Professor Department of Economics, School of Social Sciences (S3H), National University of Sciences and Technology (NUST), Islamabad.

1. Introduction

Pakistan is not a welfare state; neither the country is in position to become a welfare state in true spirit due to numerous constraints including demographical, cultural, social, and economic constraints (Akram & Hassan, 2017). But the country with population of more than 225 million people has an intense religious, social and cultural penetration rooted in society. Developing countries, like Pakistan, are on course of achieving what developed countries have already achieved. Therefore, policy makers usually make policies that are based on inspirational examples from the developed world but in pursuit of such fancy policies the contextual differences between romanticized developed regions and the developing home country are largely ignored (Dolowitz & Marsh, 2000). This study builds on this niche that if policies are formulated strictly according to the cultural, religious, and other pertinent contextual settings, long-term sustainable and favorable results can be reaped from them.

Welfare maximization of the citizens is the fundamental objective of any government. To achieve this core objective, governments intend to increase economic growth so that employment opportunities and distribution of income increases the circulation of money, and production of new goods and services raise the standard of living for the masses eventually getting closer to the objective of welfare maximization (Lewis, 1954). Despite the continuous governmental efforts, some people remain below poverty line and vulnerable in terms of economic resources, health deficiencies, natural calamity etc. In welfare states, the government can afford to protect such vulnerable citizens and provide them what they need to overcome their deficiencies, especially because of abundant resources and lesser populations (Bulte et al., 2005). But developing countries like Pakistan, having huge chunk of people below poverty line, governments alone have fewer resources to spend on people and take them completely out of their vulnerable positions.

Therefore, to achieve the welfare of citizens, developing countries rely on external resources such as foreign aid, donations, equipment, employment opportunities, and trainings, financial and technical supports. On the other hand, parallel to the governmental support systems, vulnerable segments rely on their networks to get themselves out of any trouble or vulnerability

as it may be. This study intends to unearth the native ways of achieving welfare in the society with the support of family networks including relatives, neighbors, family, and friends in parallel to the governmental institutions intended to do the same for its citizens.

The aim of this paper is to operationalize the debate on significance of family network as the most prevalent, impactful and readily available institution amongst social safety net, especially in traditional South Asian society like Pakistan. It is argued that the family networks act as bridges between vulnerable and invincible, thus paving the way for societal welfare through involuntary re-distribution of resources. Therefore, the prime objective is to examine the impact of prevalent social safety net programs on the welfare of vulnerable segments of the society. Another specific objective of this research is to evaluate the role of family institution in minimizing the poverty of network members.

This study enriches the body of empirical literature on welfare and poverty eradication by operationalizing the debate on welfare through family networks. Results show that institute of family networks are the most fundamental social protections amongst all available in social safety net – comprising a range of public and private Social Protection Programs. Family networks are, by far amongst the largest social protections readily available for vulnerable segments of the society, and casts substantial impact on their welfare by eradicating the poverty of networking family members. Implications from these results can have macro level consequence on country's welfare and social protection expenditures, and may stream them in the better direction –paving the way towards more precipitated welfare for the vulnerable segments.

2. Literature Review

Family is the most fundamental social institution in every society (Chambers, 2013; Coleman, 1987). Habitually, family plays most important role in guiding the individuals (Ginsburg et. al., 2007) and paving their way towards individual identities of what they eventually become in their lives. However, the institution of family gets different treatment in different societies (Kağıtçıbaşı & Kag, 1996; Topor et al., 2006). Today the welfare oriented western states may be considered to be

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the most glittering societies in the world, however, these societies are more individual oriented and pay lesser attention towards family as an institution (Dwairy, 2002). Demographic and economic indicators (income, population, education, employment etc.) in most of these states are such that ignorance of family institution gets overshadowed by profoundly focused pro-individual policies, backed by sufficiency of resources and good governance. Therefore, romanticizing these worldly welfare states without duly considering native economic and demographic characteristics (high population, low income, inadequate level of skill/education, underemployment/unemployment, growth trajectory, etc.) may not be a good policy conception for developing states that predominantly consist of traditional societies.

Poverty is the biggest challenge of all problems, not only for individuals but also for economies (Beckford, 1999; Payne, 2005). Although poverty seems like an individual oriented phenomenon, but it may lead to social disorder and economic calamities. Therefore, this issue has been acknowledged by the highest international forums such as the World Bank and United Nations. It affects huge number of people, in fact about 9.2% of the world population is declared living in extreme poverty i.e. on or less than 1.90\$ per day (Newhouse et al., 2016).

Considering the huge number of people living under poverty line, the worldly forums have assigned greater importance to this issue. In Millennium Summit of the United Nations, in 2000, Millennium Development Goals (MDGs) were introduced for setting certain targets for the year 2015. Out of 8 goals set in MDGs, First and foremost importance was assigned to the goal of reducing extreme poverty and hunger from the world. Later in 2015, United Nations General Assembly laid out the plan to better and sustainable future for all, announcing 17 interconnected Sustainable Development Goals (SDGs). Again, the first goal in SDGs was “No Poverty” which was targeted for 2030. Henceforth, the global efforts are underway to adopt innovative ways to eradicate extreme poverty from the world (Cagatay, 1998; Embong et al., 2013; Soergel et al., 2021; Watt, 2000).

Poverty is a serious matter for whole world but for developing countries the issue is more severe (Chen et al., 1994). First, the developing

countries have lesser capabilities and greater constraints that leave them unable to eradicate the poverty as effectively as required. Secondly, the matter is augmented by the swelling populations in most of the poor countries. The same sets of constraints prevail in case of Pakistan where about 24.3% of the country's population lives under the national poverty line (UNDP, 2019).

Pakistan is 5th largest country of the world in terms of population having population of 225 million people (World Bank, 2022a). Although the poverty has been on declining trend since many past years, but to eradicate the poverty completely from country with people in such large numbers living under the poverty line requires implementation of thoughtful policies to eradicate this illness (Iqbal et al., 2018; Saleem et al., 2021).

Countries have adopted numerous ways to eradicate this mighty challenge of poverty. Pakistan has not done badly either, reducing the poor population by half since 2000 (Farooq & Ahmad, 2020). But the issue of lack of access to electricity by masses and huge energy shortfall has been lingering on since past decade and has played a big role in hampering the efforts to eradicate poverty (Falak et al., 2014). The pandemic of COVID-19 has added fuel to the fire and fears are that millions of people have gone below poverty line and the resulting consequences are undoubtedly long-term and still unaccounted for (World Bank, 2022b). In such circumstances innovating ways are required to combat poverty and ensure the welfare of the masses.

The idea of welfare state is rooted in the framework where state is responsible for the welfare of its citizens and in case of any vulnerability faced by its citizens, state is responsible for their rescue via institutionalization of social protection systems (Dwyer, 1998; Estevez-Abe et al., 2001). Policies such as national health insurances, social security, unemployment benefits, single-parent support, etc. are all manifestation of welfare states (Myles, 1996).

Evidently there have been states that have successfully protected their vulnerable citizens, efficiently fulfilling the responsibility of being welfare state with the help of numerous protective measures in place (Esping-Andersen et al., 2002; Kwon, 2005). Germany, France,

Netherlands and Nordic countries (Norway, Denmark, Iceland, Sweden and Finland) are some examples of modern welfare states (Arnesen & Lundahl, 2006; Buchardt et al., 2013). But essentially the demographic, religious, economic, cultural and social characteristics of these societies are entirely different than that of Pakistan.

3. Theory

This research is grounded in Social Capital Theory. Literature considers Pierre Bourdieu from France and James Samuel Coleman from US as two major sociologists in the domain of social capital theory (Bourdieu et al., 1991; Gillies & Edwards, 2006; Rogošić & Baranović, 2016). Although the analysis of literature suggests that both of these pioneers of social capital theory put forward their views in slightly innovative ways (Gillies & Edwards, 2006; Rogošić & Baranović, 2016). However, this research adapts these sociologists' view points, and converges them into broader economic circumstances illustrated to fulfill the objectives of this study.

Bringing elements of conflict theory into use, Bourdieu associates more instrumental networking of social capital, considering social capital as exceedingly "class specific" that leads to propagate social inequalities. From Bourdieu's view point, social capital is the aggregate of the resources in possession of durable networks (kinship relations and appropriate social organizations) that can be mutually used to maximize utility and stimulate dynamic benefits (Bourdieu, 1986). Since kinship of an entity will be fitting to one's own social class, subsequently, social divide will likely remain and become more blatant. For instance, the elite class will have more powerful social networks and subsequent abundance of resources available at their disposal, whereas trivial resources will likely be available amongst lower class in accordance with their less influential, marginalized social ties. Thus, the social, economic and cultural resources are interdependent, and largely contingent upon one's "social class".

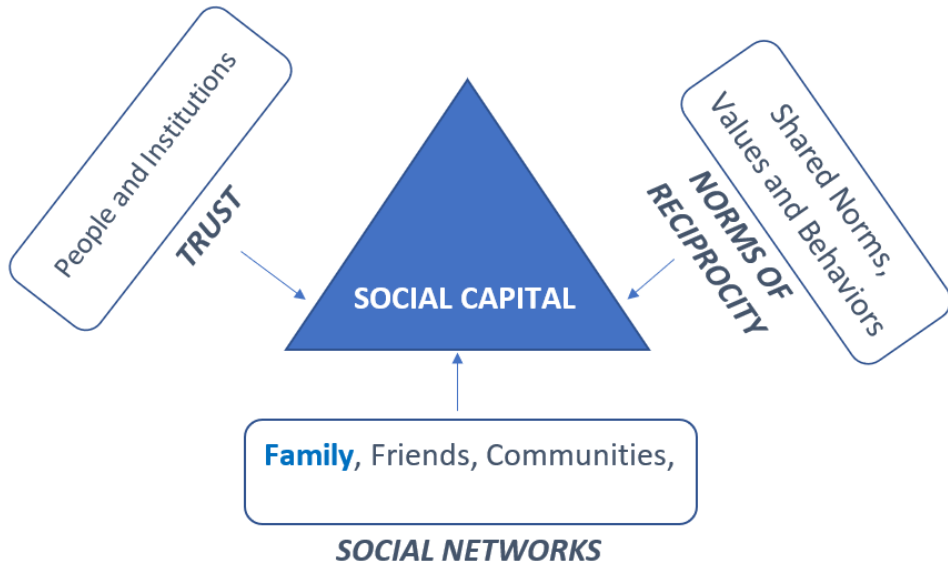
Whereas, Coleman's work rooting from structural functionalism, mainly centers upon the cohesions amongst working class or socially excluded communities. The physical absence of adults in his work may be described as a structural deficiency in family social capital whereas family

social capital plays role in the creation of human capital in the rising generation (Coleman, 1988). According to Coleman, if the human capital possessed by parents is not complemented by social capital embodied in family relations, it is irrelevant to the child's educational growth that the parent has a great deal, or a small amount, of human capital. Moreover, in presence of some structural deficiency (such as single parent family or both parents working for livelihood), the children are possibly constrained to build intergenerational bonds that socialize them into relationships (characterized by mutual trust and obligation) thus affecting the possession of their social capital.

As far as the comprehension of social capital theory for this study is concerned, the Coleman's structural functionalism elements and the Bourdieu's class specific characteristics both play crucial roles in undermining or augmenting the social capital. Parents' ability to invest in social capital for the advancement of their personal and their children's opportunities must be determined by their access to prevailing economic resources –ingrained in their social class, and their structural perfectionism –for diversified intergenerational relationships (Gillies & Edwards, 2006).

Henceforth, malleable definitions of social capital can be cited from the literature as it has been defined in numerous contextual ways (Bhandari & Yasunobu, 2009; Bourdieu, 1986; Coleman, 1988; Fukuyama, 1995; Lin, 2008). But the common thing amongst most of the definitions of social capital is the ability of involved social relations to stimulate dynamic benefits that substantiate social capital as personal as well as social resource. Thus, as conceptualized in (Bhandari & Yasunobu, 2009), the social capital is jointly maintained capital that augments from the streams of social networks (families, friends, communities, and voluntary associations), norms of reciprocity (shared norms, values, and behaviors), and trust (people and institutions).

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Constructs of Social Capital (Bhandari & Yasunobu, 2009)

4. Empirical Method

COVID-19 has impacted every aspect of human life around the globe. The gravity of the crisis can be judged from a report in response to COVID-19 which notes that all of the sustainable development goals (SDGs) are likely to get affected because of this worst global health crisis in the 75-year history of the United Nations (UN, 2020). The crisis is gaged beyond the health and social crisis and termed as a human crisis in the report. COVID-19 altered the world upside down and left it blurry (Holladn & Curran, 2020; Koren, 2020). While all sectors are implicated due to the worst pandemic of the century, health and economy has suffered the most (Chan, 2020; Goodman, 2020; Hess, 2020), consequently increasing the unemployment, food insecurity, and poverty.

This study is based on the survey data that measures the socio-economic impacts of COVID-19 on wellbeing of people. The role of social safety net programs in present of vulnerability is intended to explore in this study. There are numerous vulnerabilities that can be considered to study but this paper will focus on health emergency, unemployment and food

insecurity and the role of public and private social safety net programs in presence of these vulnerabilities.

4.1 Research questions

This research intends to explore the answers of the following questions.

- Which Social Safety Net Programs are prevalent in the country?
- What is the impact of prevalent social support programs on the welfare of the society?
- Does institute of family play any role for the welfare of the vulnerable networking members?

4.2 Hypothesis

In presence of vulnerability (health emergency, unemployment, food insecurity), private social safety net programs (family, friends relatives/neighbors, deeni welfare trust, other welfare trust, NGO, Others) provide/ensure more impactful social support to the vulnerable/needy segments of the society than the public social safety net programs (BISP, Ehsaas-COVID, Zakat/Baitulmal, Workers Welfare/Social Security/EOBI)

4.3 Objectives

- To examine the impact of prevalent social safety net programs on the welfare of vulnerable segments of the society.
- Another specific objective of this research is to evaluate the role of family institution in minimizing the poverty of network members.

4.4 Data & Methodology

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This study is based on empirical survey data from “Special Survey for Evaluating Socio-Economic Impact of Covid-19 on Wellbeing of People” published by Pakistan Bureau of Statistics (PBS), Government of Pakistan.

4.5 Sample Design

Two stage stratified random sampling design was used for the collection of survey data. Selection of Primary Sampling Units (PSUs) using systematic random sampling was done in first stage. While in second stage, systematic random sampling with equal probability in rural and urban vicinities was used for the selection of Secondary Sampling Units (SSUs). 12 households from each PSU were selected as SSUs in this stage.

4.6 Sample Size Estimation & Allocation

The sample size of 500 Primary Sampling Units (PSUs) from all across Pakistan computed based on two indicators from HIES (Household Integrated Economic Survey) 2018-19 i.e. average household consumption and food insecurity. Then 70% of PSUs were allocated to Urban areas while 30% to Rural areas considering that COVID lockdowns adversely affected the highly populated areas or large Urban societies more severely than the less populated rural areas. Furthermore, the Urban sample was divided into two parts i.e. Self-Representative Cities and Other urban areas aiming better accuracy.

The sample size consists of more than 5,500 households encompassing nearly 3% national level representation from the sampling frame of latest population and housing census (2017). It provided details of more than 31,022 individuals from all across Pakistan. Obtained data was supported by statistical software “STATA” and descriptive statistics from it are utilized for this research.

4.7 Estimation of Poverty Line

The updated poverty line for 2015-16 was calibrated at Rs. 3,250.28 per adult equivalent per month (Report, 2016). For this study the poverty line has been adjusted in accordance with the inflation i.e. Consumer Price Index (CPI). According to Pakistan Bureau of Statistics 356 items are included in market basket from which CPI is calculated. The Bureau of statistics set the base year for CPI at 2015-16 and from 100 in base year, CPI augmented to 127.3 in 2019-20. On the same lines, the poverty line has been adjusted for this study from Rs. 3,250.28 to Rs. 4,137.61 with an increase of 27.3%, in accordance with the inflationary increase as per CPI.

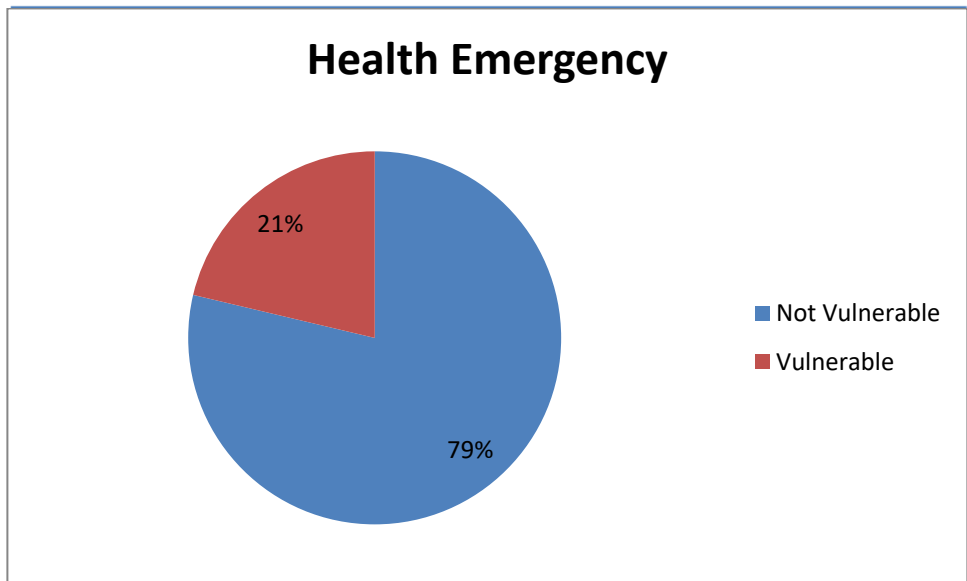
5. Results

This study relies on the survey data that measures the socio-economic impacts of COVID-19 on wellbeing of people within the framework as illustrated above. This section discusses the results with respect to each vulnerability i.e. health emergency, unemployment and food-insecurity.

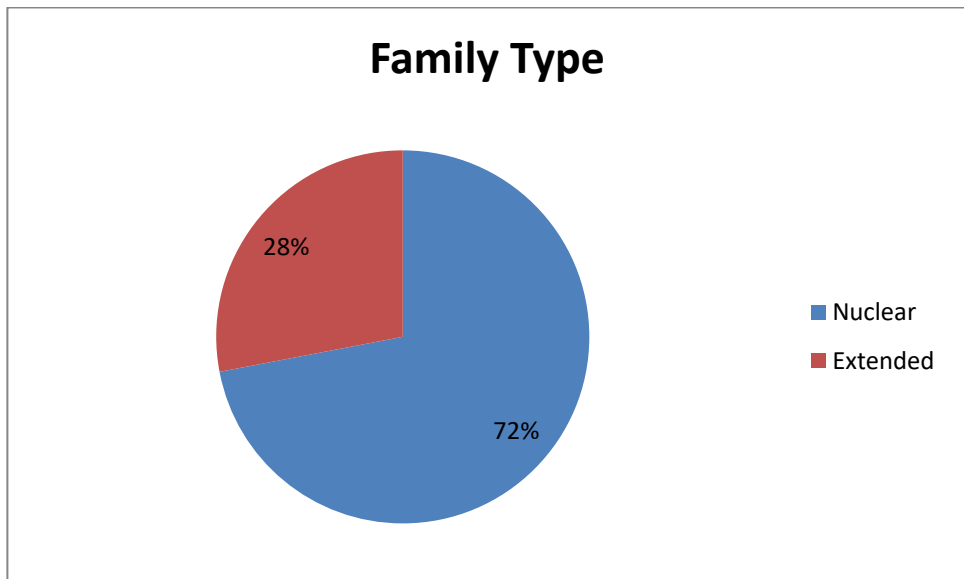
5.1 Health emergency

People who consider themselves as highly affected to severely affected by COVID-19 are considered herein as the victims of health emergency. There were 957 such households who rated themselves as highly affected by the COVID-19 and 216 households who rated themselves as severely affected by the COVID-19. Therefore, 1,173 households (21%) out of total of 5,508 households are categorized here as vulnerable due to health emergency as they are highly implicated from the COVID-19 whereas 4,335 (79%) are not vulnerable. These are not the people who got infected from COVID but these are the people who adversely got affected due to implications arising from COVID.

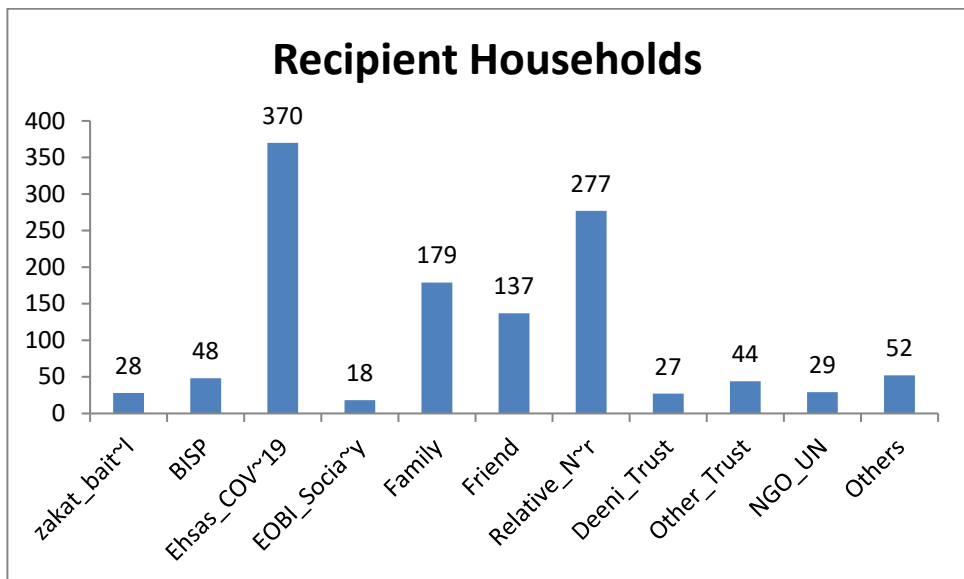
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Following graph shows that 72% of the 1173 highly-severely affected households have nuclear family type (children and parents living under one roof and sharing meal). It inflicts that extended families (children, parents and grandparents and/or other relatives living under one roof and sharing meal) have higher capacity to absorb the adverse effects of shocks even in the case of huge shocks such as COVID.



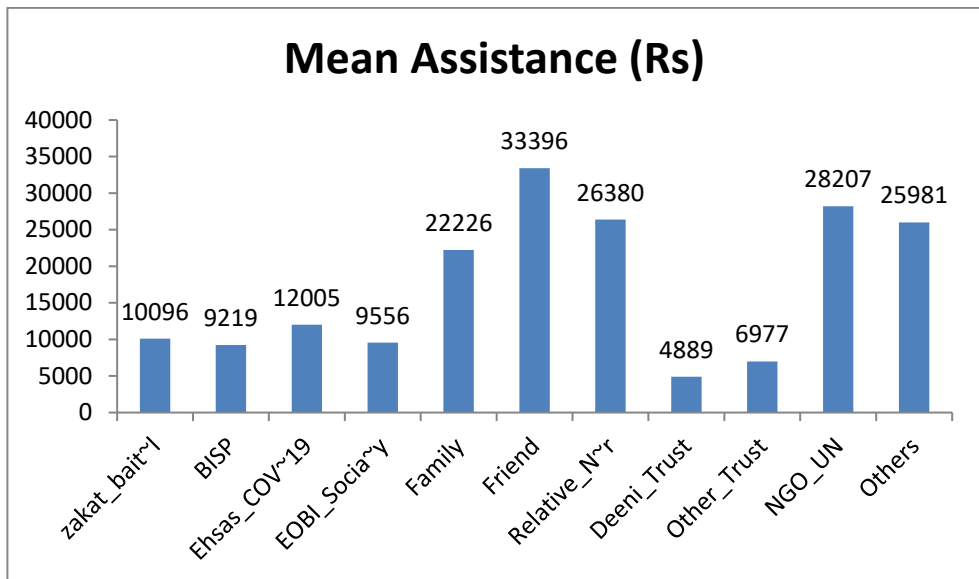
Now let us observe the assistance provided by available social security platforms to these vulnerable families due to this health emergency.



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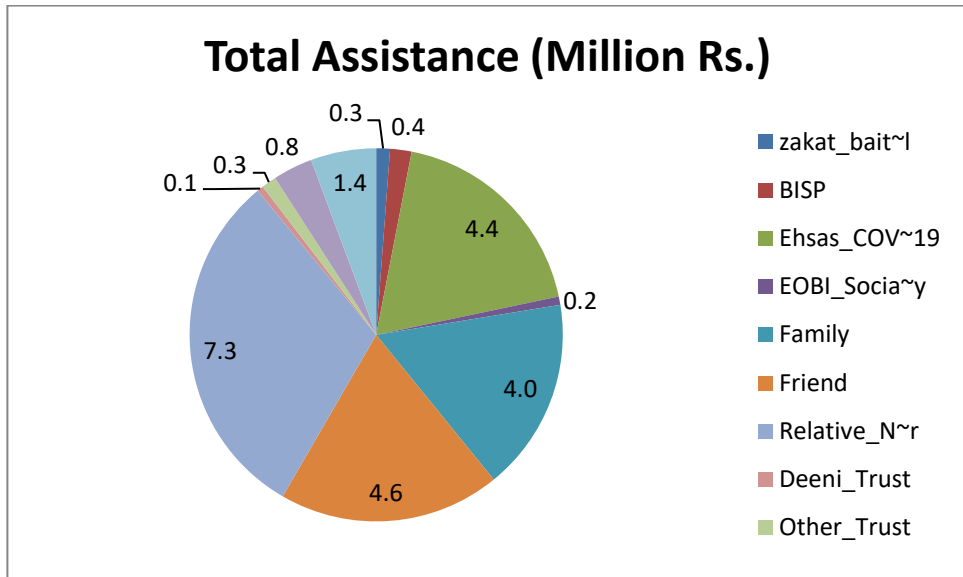
We can see that Ehsas COVID-19 program specifically targeting the COVID-affecteds is the most dominant social security program that extended the assistance to 370 households, followed by the assistance provided by relatives/neighbors (277), family (179) and friends (137). Moreover, BISP, Zakat/Bait-ul-mal, Deeni trusts, other trusts, NGOs and others also contributed in their capacity.

If we look at the mean assistance provided by these programs, the highest mean assistance is Rs. 33,396 provided by the friends, as can be seen by the following graph. NGOs and Other platforms have also relatively higher mean assistance providers but their frequency to engage the vulnerable households is relatively less. Dominantly, the highest mean assistance is provided by family, friends, and relative/neighbors.



It is also clarified by the following graph of total assistance provided by all social security programs that out of all 9 categories, “relatives” emerged as the highest contributor of financial assistance (Rs. 7.3 Million) followed by “friends” (Rs. 4.6 Million), “Ehsas COVID-19” (Rs. 4.4 Million), and “family” (Rs. 4.0 Million). It is also evident that out of four major contributors in social safety net, three are Private Social Security Platforms whereas the only Public social security program in top

four was Ehsas COVID-19 program that was specifically launched to extend help during COVID era.

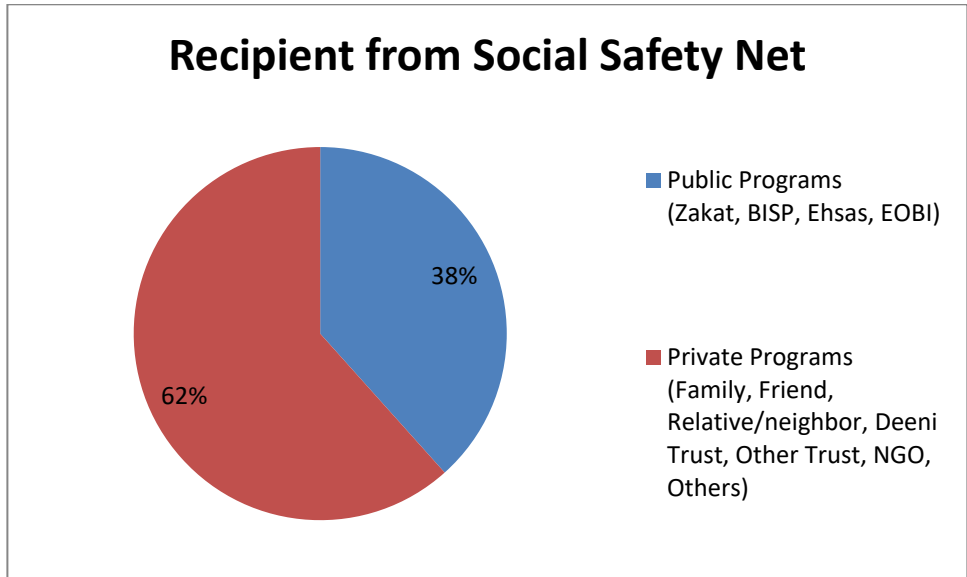


5.1.1 Social Safety Net – Public Programs Vs Private Platforms

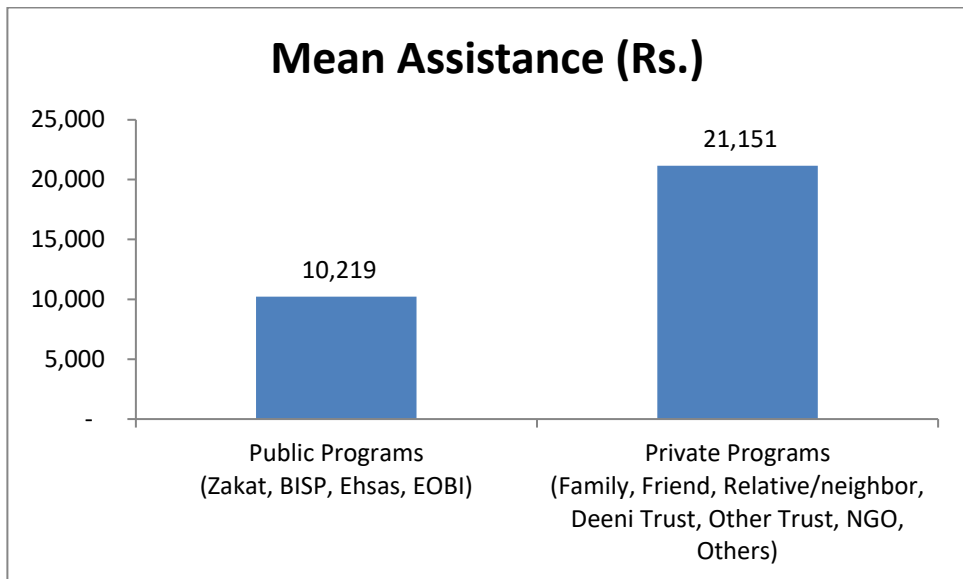
One objective of this research was hypothesized that in presence of vulnerability, private social safety net programs provide/ensure more impactful social support to the vulnerable/needful segments of the society than the public social safety net programs. Therefore, private social security platforms become the core base of social safety net available in society. The gaps/loopholes in private social safety platforms are tapped for its strengthening by public social safety programs that keeps evolving as part of the total social safety net available in a society. As in this case, Ehsas COVID-19 evolved as a booster program (public funded program) in augmentation to already prevailing private platforms such as family, friends, relative/neighbors. Once the COVID-19 situation is under control, the Ehsas COVID-19 program is also curtailed whereas alternatively available private social safety platforms are still in place and actively playing their part to overcome the prevailing vulnerabilities.

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The results show that 62% of the total recipient households received assistance by private programs whereas 38% households received assistance from public programs.

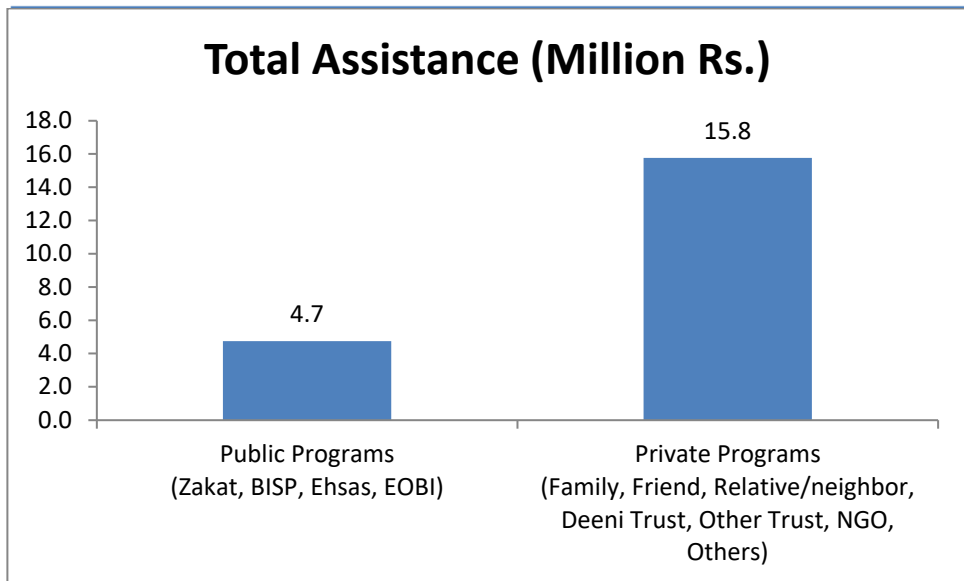


Not only the private programs are more prevalent but also more impactful. It can be inferred from the following graph that the mean assistance provided to each household under public programs is Rs. 10,219 whereas under private social security platforms this mean assistance provided to given household jumps to Rs. 21,151 which is almost 100% increase from publically provided assistance.

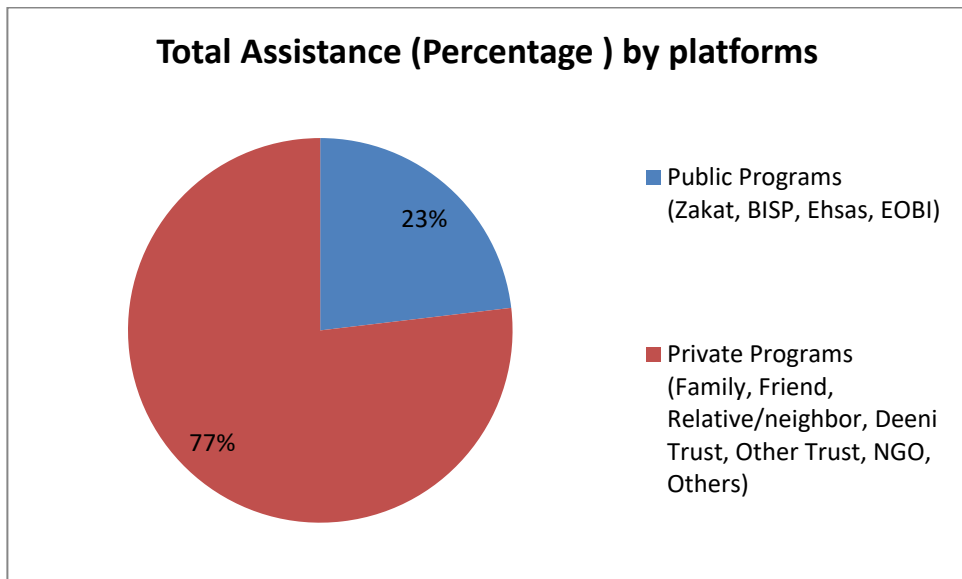


Subsequently, the total assistance of Rs. 15.8 million provided by private programs outclasses the total assistance of Rs. 4.7 million provided by public programs. It reveals under current scenario, private assistance programs almost quadruplicate the amount of assistance provided by public programs as can be seen in following graph.

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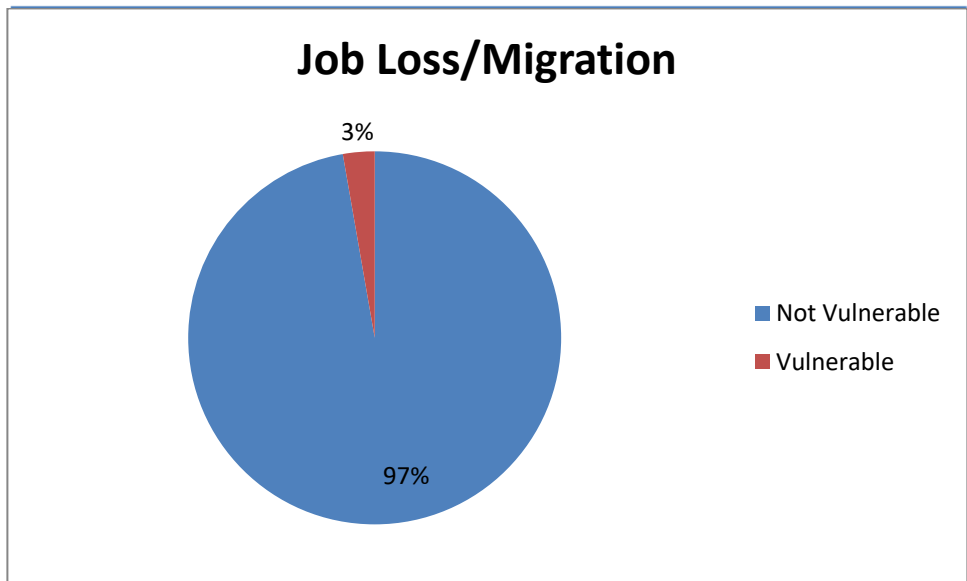
Moreover, if we bifurcate the total assistance injected into the society by total social safety net into Public and Private programs, 23% of the total assistance is provided by the public programs whereas 77% of the total assistance is provided by the private social security platforms which reassures that private social security platforms cast more impact in our society.



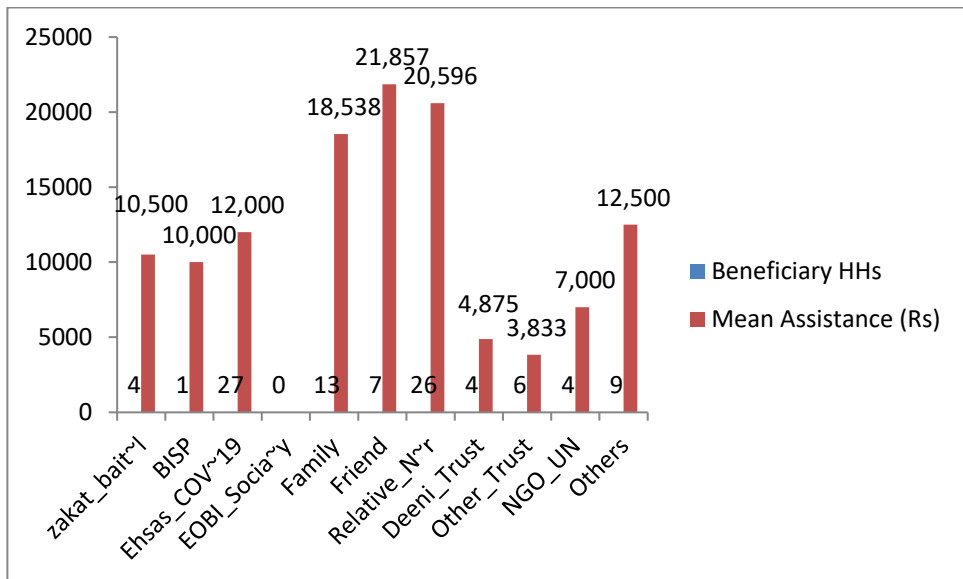
5.2 Unemployment

This is the type of vulnerability in which at least one family member of a household working within Pakistan and/or outside Pakistan returned back due to job loss since the appearance of COVID-19. There are 151 households which fall under this type of vulnerability, accounting for 3% of the total sample of 5,514 households. And the results of this sample are reported as under.

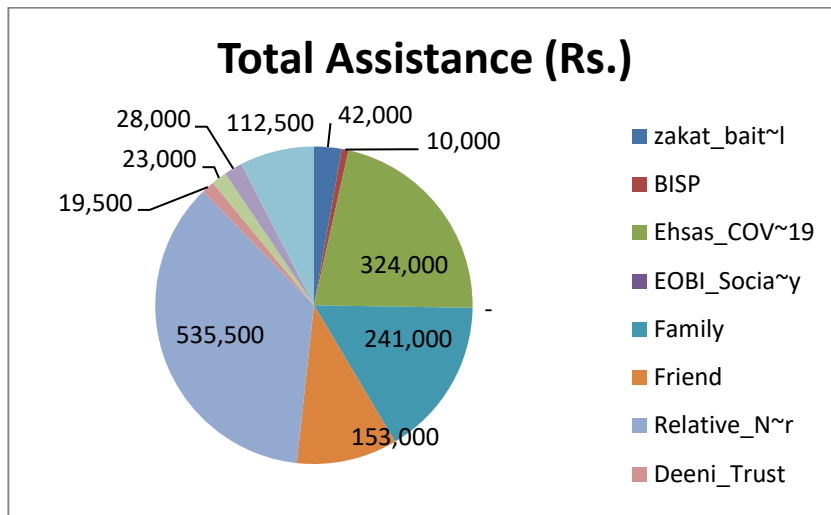
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Out of these vulnerable households, 74% belonged to Nuclear family while 26% belonged to Extended families. Here again, the Nuclear families were found to be more vulnerable than Extended families. Surprisingly, only 49% of vulnerable households were able to receive any type of assistance as social security while 51% could not get any assistance. Ehsas COVID-19 program and relatives of vulnerable households provided the major relief to households who were able to secure any assistance as can be seen below. Family, friends and other sources also supported the vulnerable families. Whereas, if we look at the mean assistance provided by different forums friends, family and relative/neighbor provided highest mean assistances of around Rs. 20,000.

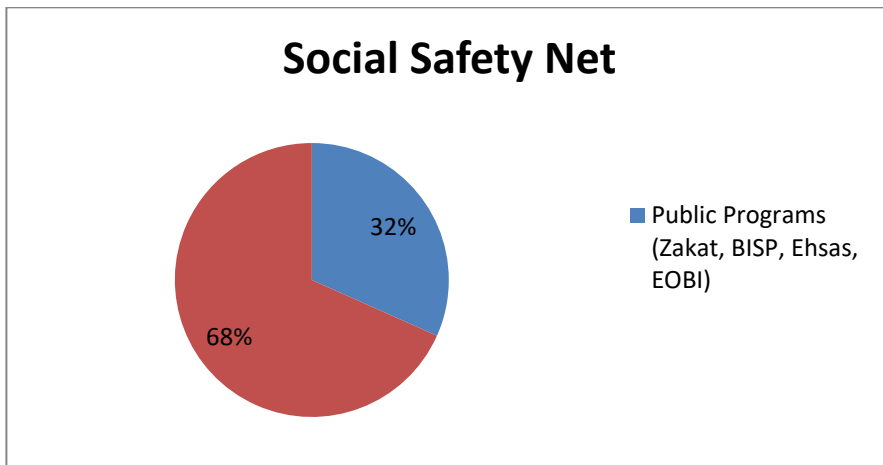


In terms of total assistance provided to vulnerable unemployed households, again the major provider of the assistance were relatives with Rs. 535,500 followed by Ehsas program with Rs. 324,000, family with Rs. 241,000 and friends with Rs. 153,000 assistance.

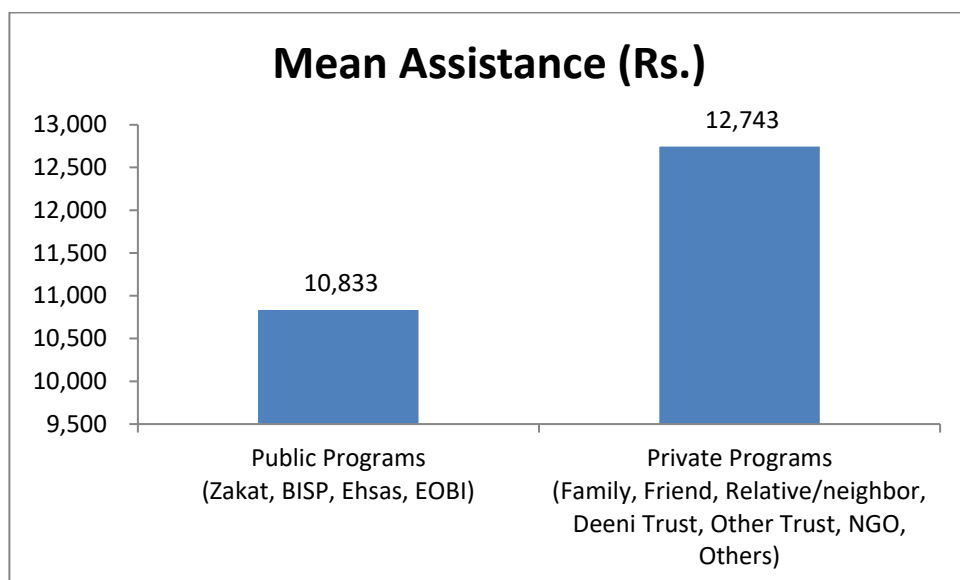


5.2.1 Social Safety Net – Public Programs Vs Private Platforms

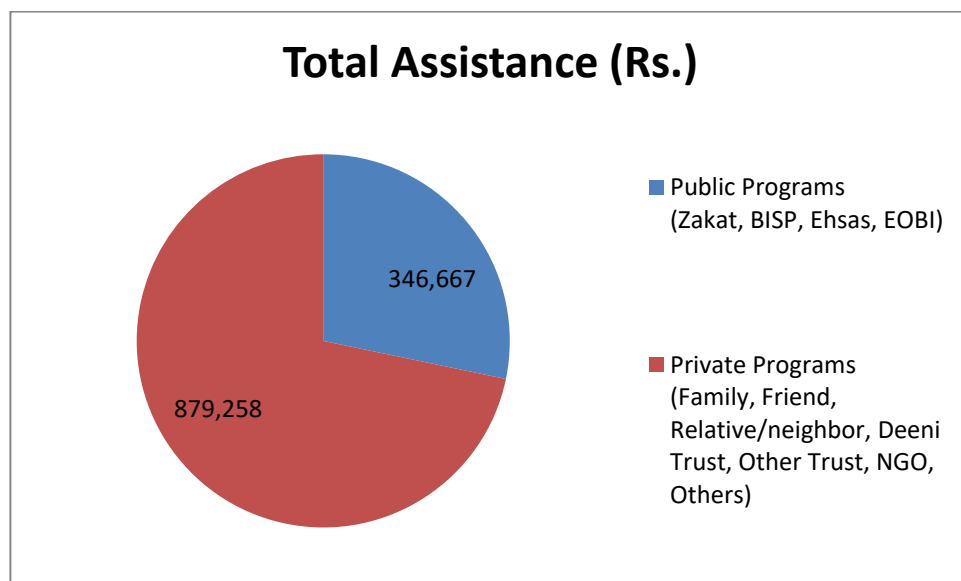
If we look at the social safety net in terms of two broader categories i.e. Public Programs vs Private platforms, the private programs took the lead in providing relief to the vulnerable households. Public programs could reach to 32% of the vulnerable households whereas private programs doubled their reach and extended assistance to 68% of vulnerable households which confirms the dominance of private social security platforms over public programs.



Not only the private programs provided assistance to higher number of families but also they provided them higher assistance relative to public programs as can be seen below.

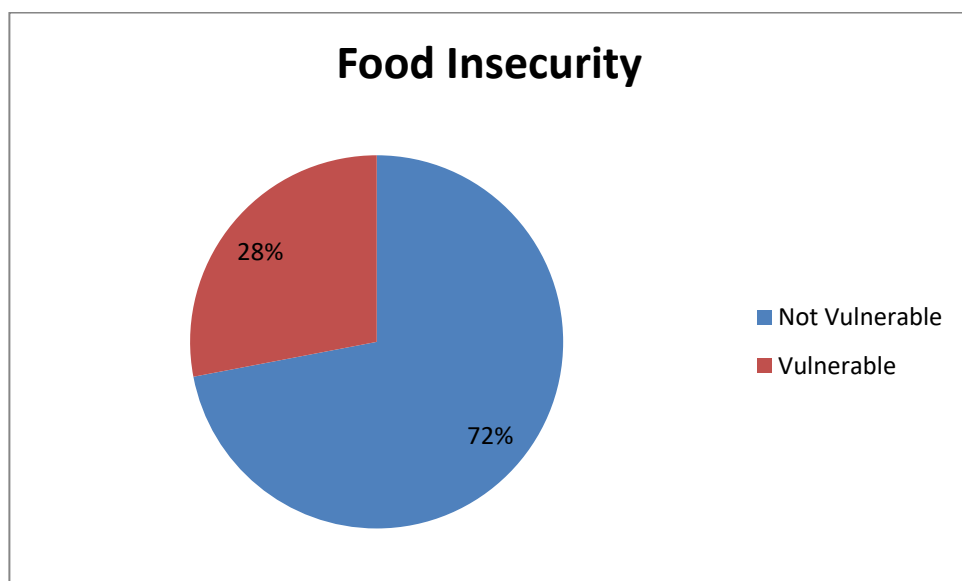


Subsequently, in terms of total assistance, the private platforms of social security provided 72% of the total relief while the public programs provided 28% to the vulnerable households under this category, as visible below.



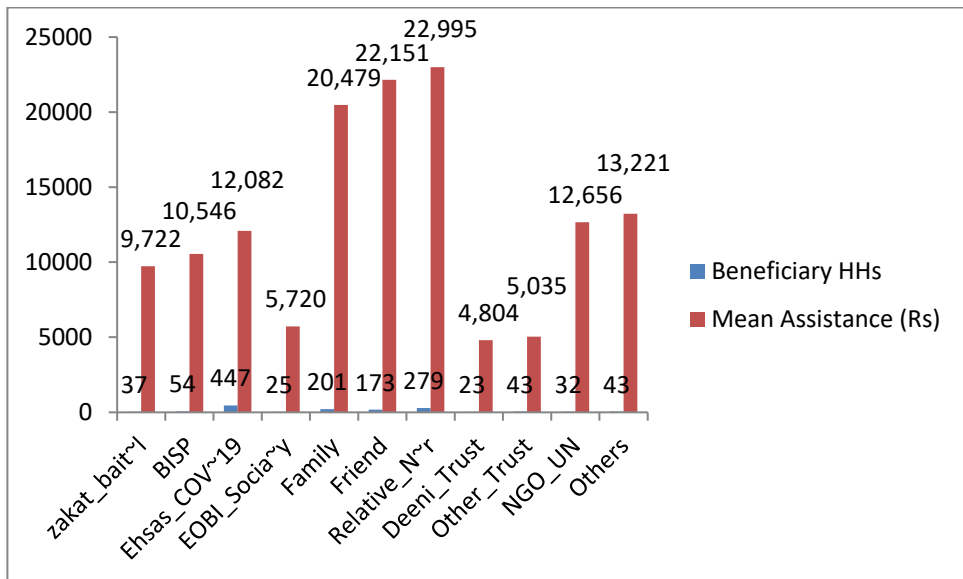
5.3 Food Insecurity

There were households who ran out of food, felt hungry but could not eat, or went without eating for a whole day because of lack of money or other resources. These three types of people are categorized in this study as vulnerable due to food-insecurity. There were total of 1,523 households which fulfill this criterion and are declared as vulnerable due to food insecurity and accounts for 28% of the total sample.

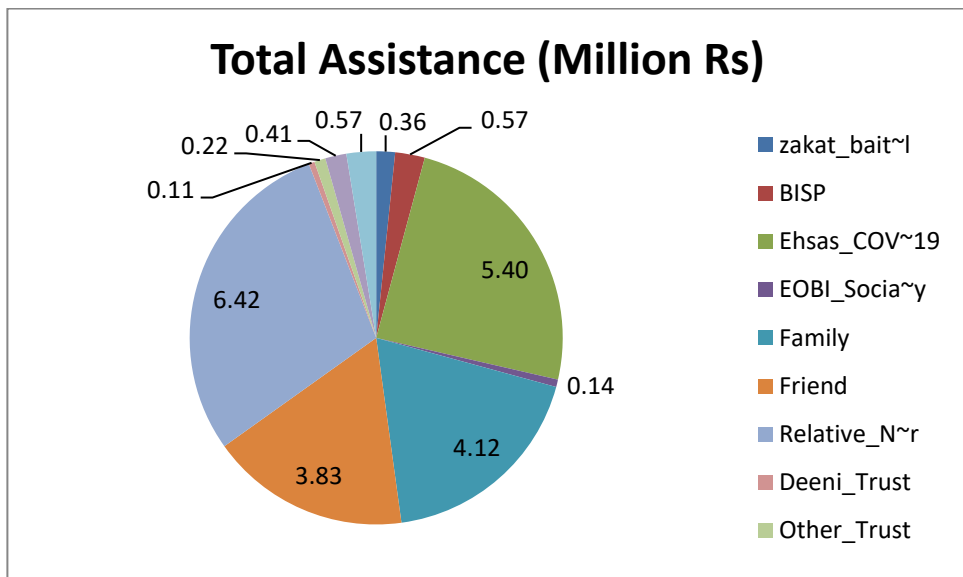


Out of these vulnerable families, 43% did not get any assistance while 57% secured some assistance, either from public or private or from both type of social security platforms. If we analyze the type of families that became vulnerable under this category, there are 22% extended families while 78% nuclear families which became vulnerable due to food insecurity. It implicates that extended families somehow have more food available to them in difficult situations.

The following graph explains number of beneficiaries from social safety net and adjacent mean assistance provided by that specific forum. It explains that highest assistance was provided by the relative/neighbor with mean assistance of Rs. 22,995 while the friends and family stood at second and third highest with average assistance of Rs. 22,151 and Rs. 20,479 respectively.

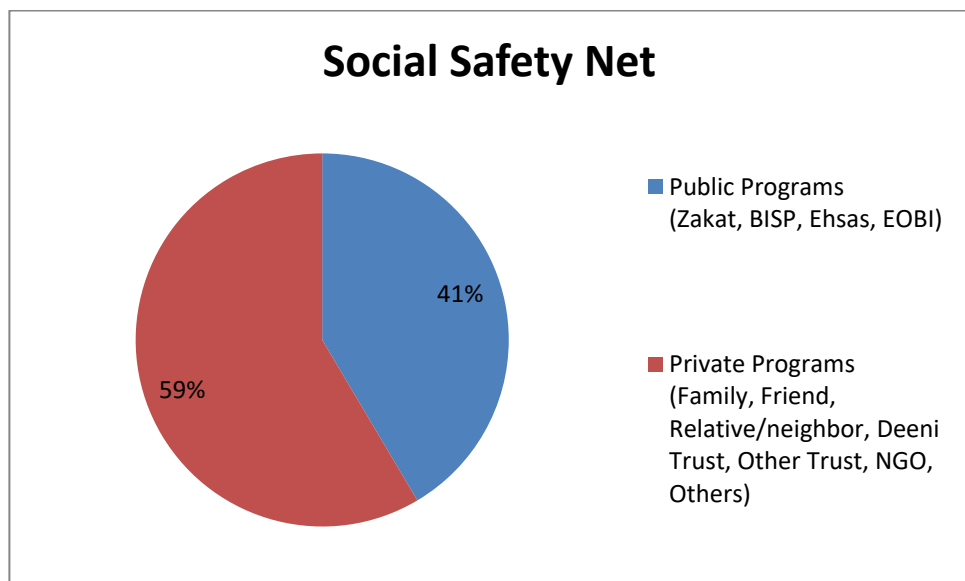


Looking at total assistance provided in social safety net, relative/neighbor contributed the most by providing total assistance of Rs. 6.42 million whereas Ehsas program, family and friends were the successors with Rs. 5.40million, Rs. 4.12 million and Rs. 3.83 million respectively.

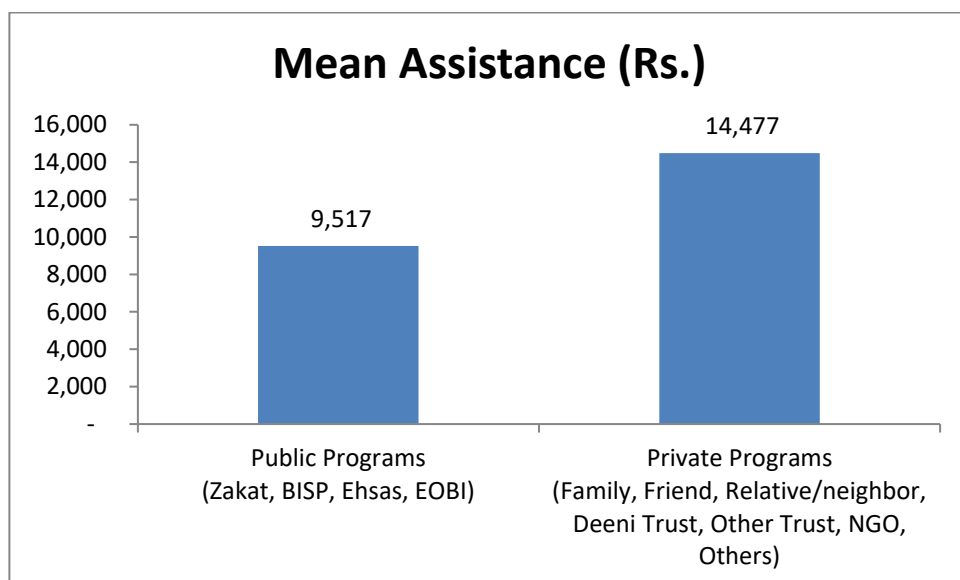


5.3.1 Social Safety Net – Public Programs Vs Private Platforms

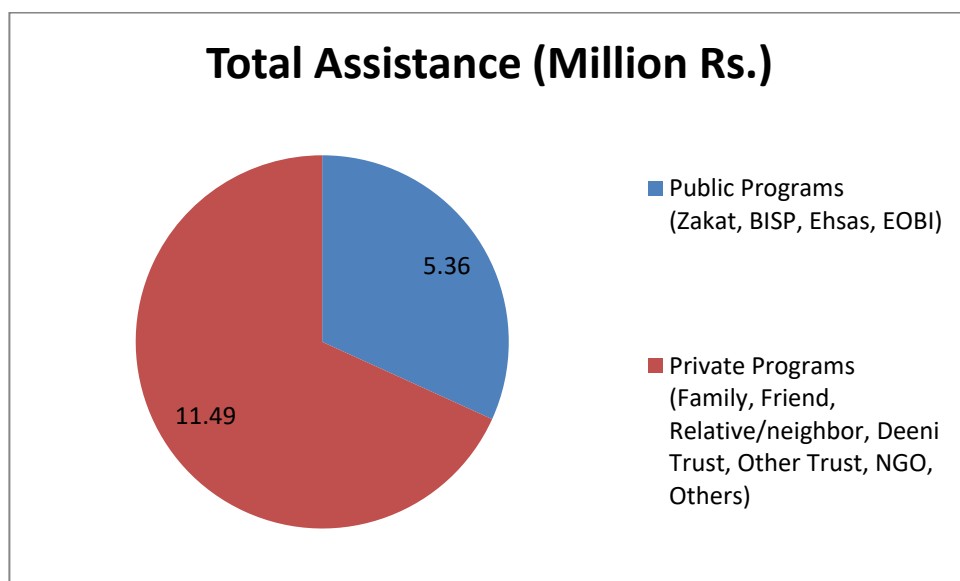
In order to analyze the social safety net as a whole and important platforms providing social security in the society the following graph illustrates that 59% of the vulnerable households are supported by the private platforms such as family, friends, relative/neighbor, trusts, NGOs etc. whereas, 41% of the vulnerable households are supported by public programs that include Zakat/Baitul-mal, BISP, Ehsas COVID-19, and EOBI. Again, it is evident that private programs are more accessible to vulnerable families when need be.



If we consider the mean assistance provided by public programs and private platforms, the later provided little higher mean assistance to each household (Rs. 14,477) than what the former provided (Rs. 9,517).



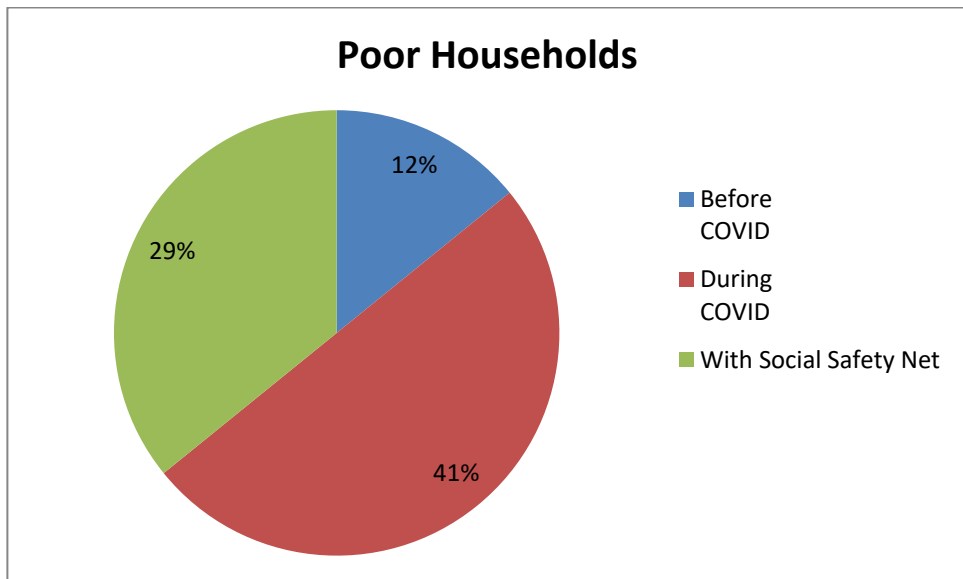
In terms of total assistance provided in social safety net, public programs lagged behind with the provision of Rs. 5.36 million while the private programs provided total assistance of Rs. 11.49 million to the vulnerable household under this category.



5.4 Social Safety Net and Poverty Eradication

In COVID-19 era when there were COVID related restrictions in almost whole world, these restrictions changed the dynamics of labor market across many industries and numerous employees had to face reduced working hours/days and reduced salaries, some had to start the work while some were on paid leaves. Households who were experiencing these sorts of circumstances were separated from the main sample. There was sub-sample of 791 households who fell in either of these categories. Following analysis is based on this sub-sample.

When people were deprived of their usual earnings due to a shock, many people fell under the poverty line. At those times, social safety net present in the society helped the people either to minimize the severity of their poverty or to pull them above the poverty line. In sub-sample selected to analyze the role of social safety net in wake of poverty eradication, there were 92 households out of 791 i.e. 12% who fell under the poverty line of Rs. 4,138/- per adult equivalent per month. These 12% households fall under poverty line before the crisis of COVID-19 begun. Once the crisis began, the number of households who fell under the same poverty line swelled to nearly 41%. There comes the role of social safety net prevalent in the society in the forms of Public and Private platforms. In public platforms, the Ehsas COVID-19 program was specifically crafted to mitigate the adverse impacts of COVID-19, while in private programs predominant role of family, relative/neighbor, friends and other NGOs and trust are notwithstanding. The collected effort from all these platforms uplifted nearly 100 households out of poverty and brought down the poverty rate to 29% as can be seen below.

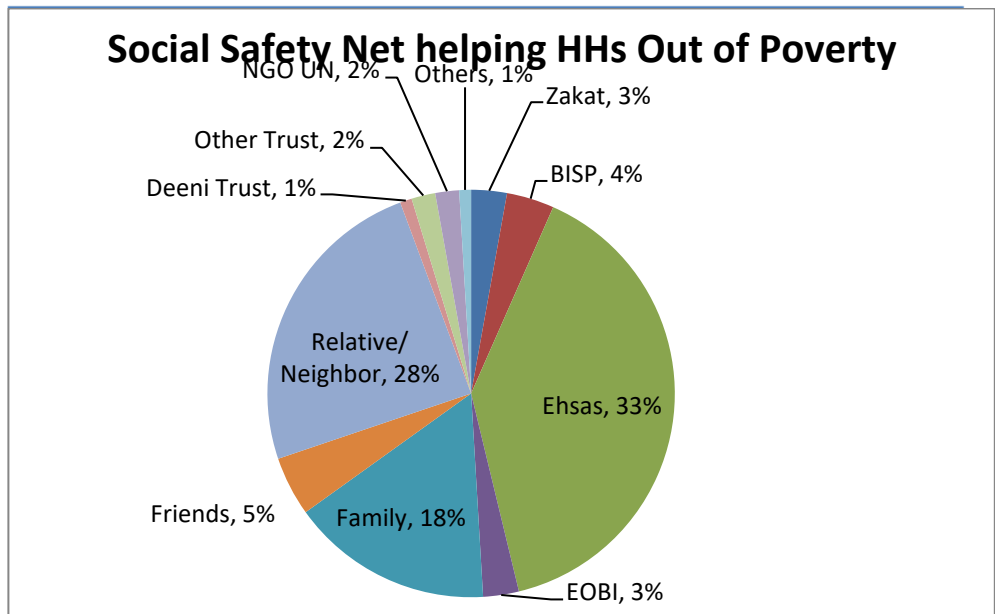


If the social safety net is bifurcated into two main categories being Public and Private assistance providing platforms, both contributed in minimizing the poverty with nearly the same impact, Private Assistance leading by small margin.

If we further dig deep and analyze the role of social safety net in detail, top three contributors of this poverty reduction are Ehsas program, Relative/neighbors, and Family, followed by other minor contributions from friends, BISP, Zakat, Other trusts, NGOs etc.

It is pertinent to mention here that Ehsas COVID-19 program was a time bound social safety program specifically constructed at that time for the people severely affected by the COVID curse. Otherwise, this program is not essentially available all the time to help the people falling under any vulnerability. If we separate the efforts reaped from Ehsas program, the remaining contributors are all from private platforms available to support the vulnerable segments of the society.

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6. Discussions

The family network is the chief welfare institution prevailing in the society that the policy makers can target for effective policy making. Moreover, in Pakistan being the traditional south Asian society where the family institution is deeply penetrated in the society, execution of family oriented and family driven policies may be much easier and associate reduced operational costs as well.

It is worth mentioning that Ehsas Program alone contributed around 89% of the total welfare activities by all Public Sector Programs. Thus, if this program is excluded, the remainder of public sector programs could not show as much significant and impactful welfare orientation for the vulnerable households as desirable. Therefore, heavy reliance of public sector welfare on one particular and time-bound social security program (Ehsas COVID-19) cast serious concerns over the efficiency of remaining public sector welfare initiatives. In case where the scale of calamity is not as large as the COVID-19 and impromptu availability of public sector programs such as Ehsas is not possible, the vulnerable segments have no

major public sector program at their disposal and solely rely on Private social security platforms available in their networks.

On similar lines if we talk about private social security platforms, the most impactful performance is shown by family networks which include family, relative/neighbors and friends. Family networks are by far the largest social protection available for vulnerable segments of the society, and casts substantial impact on their welfare by eradicating the poverty of networking family members.

The results also reveal that in presence of vulnerability (health emergency, unemployment, food insecurity), private social safety net programs (family, friends relatives/neighbors, deeni welfare trust, other welfare trust, NGO, Others) provide/ensure more impactful social support to the vulnerable/needy segments of the society than the public social safety net programs (BISP, Ehsaas-COVID, Zakat/Baitulmal, Workers Welfare/Social Security/EOBI) as illustrated.

7. Conclusion

The study examined the role of prevailing social safety net for the vulnerable segments of the society. Using the survey data from Pakistan Bureau of Statistics (2020), this research particularized the existing social safety net in Pakistan. It operationalized the debate on the role of welfare through family networks through poverty eradication. Public Social Security Programs and Private Social Security Platforms are two broader categories of social safety net which are playing their part for the welfare of the society. Based on the results of this study, it is concluded that family networks (family, relatives/neighbor, friends) are the most prevalent and impactful components of the overall social safety net available for the vulnerable segments of the society. Moreover, in case of any vulnerability, private social security platforms such as family networks are readily available for the welfare of vulnerable segments whereas public social security programs have to be effectively orchestrated in case of COVID like calamity i.e. Ehsas COVID-19 program. In terms of poverty elevation of households, if the contribution of Ehas Program is excluded from Public Sector Social Security Programs, the magnitude of remaining all public sector programs is

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reduced to 11% of the total social safety net helping households out of poverty which alarms the bell regarding the effectiveness of public sector programs as a whole.

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