THE EXTENT TO WHICH THE LESOTHO GOVERNMENT'S SOCIAL WELFARE PROGRAMMES ARE RESPONSIVE TO THE NEEDS OF RURAL RECIPIENTS

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ABSTRACT

This paper examines the extent to which government social welfare programmes meet the needs of individuals in the rural areas in Lesotho. Data were collected from 100 social welfare recipients through a semi-structured questionnaire. The study was guided by four hypotheses using chi-square as a test of significance. The major results show that the government was providing a number of social welfare programmes that had a significant impact on lives. These notwithstanding, the insufficient transfers are discussed in the light of the African cultural values of sharing and reciprocity. The impact of the financial/economic crisis on recipients and the government in the area of social welfare is discussed. It is concluded that the government has not been able to provide sufficient social welfare benefits to its citizens. The weaknesses of the Department of Social Welfare and the unregulated nature of social work practice are highlighted and recommendations are suggested.

Key words: responsive, government, Lesotho, social welfare programmes, needs, rural recipients

INTRODUCTION

Most African governments are focused on devising strategies for improving their citizens' living conditions and quality of life, but many are undermined by social and economic problems. Poverty and under-development constitute the target of the majority of the government's policy directions in Africa (United Nations Development Programme (UNDP), 2009). With most of the African countries having poverty eradication as their highest priority, the government of Lesotho is aligning itself with a number of international standards and tools such as the Millennium Development Goals, the Poverty Reduction Strategies, the National Vision and African peer review processes. However, considering the magnitude of the problem of poverty and its multidimensional nature, there is a need to implement a broad-based improvement in the welfare of the whole population. Alongside the problem of poverty are the issues of living conditions and peoples' quality of life, which often become the central national priorities for most governments. There is a challenge in assessing the progress in any war against poverty or measuring the improvement in the people's living conditions (Kamanou, 2004). For Lesotho to accomplish the Millennium Development Goal (MDG) of halving the incidence of poverty by 2015, the economy has to grow by an estimated 7.5% per annum (Government of Lesotho, 2004). With the present growth trends of 3% to 4% per annum, it is only through more extensive efforts that this target can be attained (May, Roberts, Mogasa and Woolard, 2002). The economy of Lesotho has met with immense challenges that have affected the vast majority of individuals in rural households, namely, drought and food insecurity, poverty, chronic underemployment, HIV and AIDS and related problems, as well as retrenchments of migrant workers from South African mines. A number of studies have consistently shown that the mountain areas of Lesotho, which are home to approximately one-third of the population, are significantly poorer on all but two out of 30 indicators. This is confirmed by the 2002 Core Welfare Indicator study, which used an assets approach (Government of Lesotho, 2002). It shows that extreme poverty is concentrated in the rural areas not only as a proportion of the population but also in absolute numbers.

One of the broad objectives formulated by the Lesotho government under its Poverty Reduction Strategy is to improve access to social welfare services (Manyeli, 2007). However, government services cannot reach out to all vulnerable groups due to limited resources. In an attempt to address the social catastrophes faced by vulnerable members of society, the government established the Department of Social Welfare in 1976 with the main mandate to alleviate human suffering through minimising the impact of deteriorating

socio-economic conditions on marginalised groups, especially poverty among the vulnerable groups such as older people, persons with disability and children (Government of Lesotho, 2002). In the late 1980s, the Department introduced food parcels as a way of responding to the common problems prevalent among these groups, which were poverty and hunger. The Department later introduced monthly public assistance stipends, which were set at M100. Complementary to these, there are provisions of clothing and other in-kind forms of assistance. To cater for older people, the government of Lesotho introduced an old age pension in November 2004 for those aged 70 and over. The pension then increased from M150 to M400 per month in 2010. In an effort to alleviate poverty amongst children, a child grant was introduced in 2009 in some pilot centres around the country. It was believed that a combination of these social welfare programmes provided at the cost of M8 453 217 for the 2006/2007 financial year would provide good quality of life to people in the rural areas. Unfortunately, this seems not to have been the case, especially with the lack of job creation and opportunities in the rural areas and the current, unsustainable cost of living. In the face of these, it behoves this study to examine how responsive government social welfare programmes are to the needs of the rural populace who are recipients. It is believed that this study will have implications for policy and practice. The main objective of this study was to find out the extent to which government social welfare programmes address the needs of individual recipients in the rural areas. The study is guided by four hypotheses:

- There are no significant forms of social welfare assistance from the government.
- Government social welfare programmes in the rural areas do not significantly meet the needs of the individual recipients.
- Government social welfare programmes do not have any significant impact on the lives of individual recipients in the rural areas.
- There is no significant trickle-down effect of social welfare programmes to other rural household members.

According to this study, social welfare services are government programmes whose aim is to provide a minimum level of income, service or other types of support to marginalised groups such as the poor, older people, children and people with disabilities. These services normally place a high value on keeping families together in their local communities (Tanga, 2007). In the context of this study, social welfare programmes will include only those provided by the Department of Social Welfare and include public assistance, family allowance benefits, medical care programmes and family welfare programmes. Social welfare needs refer to those things that people in the

rural areas require in order to improve their quality of life and this includes the need for cash and in-kind services such as food, clothing, shelter, counselling services and medical care provision, amongst others.

METHODS

This study utilises data collected from a cross-sectional survey carried out in two districts (Leribe and Mohale's Hoek) in Lesotho, which are both rural in nature. These districts are in the northern and southern parts of the country. Each of the districts has a Social Welfare Office, which is responsible for rendering social welfare services to people residing in that district. There are no precise data on the number of social welfare recipients who are receiving social services in these districts. Therefore, the population consists of all recipients of social welfare services in the two districts. However, records of these recipients were obtained from the district office of social welfare, where the sample of 100 recipients (50 from each district), made up of 38 males and 62 females from both districts, was selected for this study. Care was taken to include both sexes in the sample through a stratified random sampling method. The sample for each sex was selected using simple random selection procedures. With the help of the district social workers, 20 communities were randomly selected, 10 in each district with a high concentration of welfare recipients. These 20 communities were spread among 8 community councils out of the 129 community councils in Lesotho.

A semi-structured questionnaire was designed and administered to social welfare recipients. The questionnaire was translated from English to Sesotho. The questions included areas such as demographics, socio-economic information, household and individual needs, government services/programmes, other forms of assistance from other sources and how they are responding to their needs, ownership and sale of assets, trickle-down effect of programmes, and living conditions. A pilot study was also undertaken to pre-test the instruments. Two research assistants were trained and engaged to administer the questionnaires under the supervision and guidance of the principal researchers

The quantitative data were analysed descriptively using means and standard deviations for continuous data in order to provide more insight into the nature and distribution of the data. Frequency distribution tables were used to summarise pertinent key variables. Inferential statistics (chi-square test of significance) were also used. Regarding inferential statistics, crosstabulations with chi-square were employed to determine the level of significance of differences and relationships among key variables. Overall,

the analyses were performed using the Statistical Package for the Social Sciences (SPSS).

When undertaking this study, ethical issues like anonymity, privacy and confidentiality were assured and observed. Voluntary informed consent was acquired from all participants before the commencement of the administration of the study instrument.

RESULTS

The results are presented according to the demographics of the recipients followed by the postulated hypotheses. Table 1 shows the demographic characteristics of the respondents where a total of 100 recipients were interviewed. Generally there were more females than males, respectively represented by 62% and 38%. The highest number of recipients (44%) was never married followed by 23% who were married, while the lowest in that category were either divorced and/or separated (13%). Other groups within this marital status made up 20%.

Table 1: Demographic characteristics of respondents

VARIABLE	PERCENTAGE			
Sex				
Male	38			
Female	62			
Total	100			
Marital status				
Never married	44			
Currently married	23			
Divorced/separated	13			
Other	20			
Total	100			
Age				
14-19	19			
20-24	13			
25-29	10			
30-34	4			
35-39	11			
40-44	5			

45-49	6			
50-54	5			
55-59	5			
60-64	1			
65-69	3			
70-74	7			
75-79	7			
80-84	1			
85-89	2			
90-94	1			
Total	100			
Education				
Standard 1-2	11			
Standard 3-4	10			
Standard 5-6	11			
Standard 7	9			
Form A-B	7			
JC	11			
Form D	3			
COSC	3			
Degree or better	-			
Still attending school	24			
None	7			
Other	4			
Total	100			
Employment status				
Unpaid family worker	9			
Employer	2			
Home maker	11			
Students	21			
Retired/pensioner	8			
Job seeker	7			
Not employed	35			
Other	7			
Total	100			

According to Table 1, the majority of the respondents seem to be clustered in the age groups below 30 with others in the age group 35-39. The numbers are fewer from 40 years downwards with the fewest being over 70 years. In accordance with the results in Table 1, more than 50% of recipients have

gone up to at least junior certificate level. However, only a few (6%) of the recipients were able to get at least Cambridge Overseas School Certificate (COSC). Also, according to the table, many respondents (35%) were not employed. Seven per cent were looking for job opportunities while 21% were students. Finally, there were 11% who were homemakers and 9% who were unpaid family workers.

Table 2 presents data regarding the kind of services that were provided to the recipients. It shows that the majority of the recipients (46%) got a monthly public assistance of M100 followed by 44% receiving food parcels. Twentynine per cent of recipients were given educational support which may come in the form of fees, books/stationery and school uniforms. This was followed by 24% who received a monthly old age pension of M400. Eighteen per cent and 15% of the respondents got assistance in the form of clothing and medical care respectively.

Some hypotheses were postulated to guide the study and the first hypothesis concerns the forms of social welfare assistance from the government. Testing the hypothesis using chi-square test of significance, X^2 is 237.02 with 11 degrees of freedom (Df) at $P \leq 0.05$ and a critical value of 19.7. Therefore, the null hypothesis is rejected. This shows that there were statistically significant forms of social welfare assistance from the government to the Basotho, especially the rural poor.

Table 2: Forms of social welfare assistance respondents receive from government (all in percentages)

Tyme of assistance	Response		
Type of assistance	Yes	No	Total
Shelter	9	91	100
Clothing	18	82	100
Food parcel	44	56	100
Education	29	71	100
Medical care	15	85	100
Counselling	3	97	100
Preventive educational talks	1	99	100
Personal family allowance	0	100	100
Monthly Public Assistance (M100)	46	54	100
Monthly Old Age pension (M300)	24	76	100
Other personal family welfare benefits	1	99	100
Other in-kind assistance	4	96	100

Table 2 also indicates that it is only an insignificant percentage of the respondents that has at some point received assistance in the form of shelter (9%), other in-kind assistance (4%) and counselling (3%). Only 1% of the respondents had benefited from any preventive educational talks. Notably only 1% of the recipients had also received any personal family allowance.

Table 3 presents the recipients' views on the extent to which they felt that the social welfare services were responding to their perceived needs as well as the impact of these responses. As presented in Table 3, 47%, constituting the highest percentage, indicated that government provides the kind of social welfare services that are to a great extent responsive to their needs while 27% felt that the services are to a very great extent quite responsive. Responses further reveal that 25% felt that the benefits brought no change in their lives at all. That government social welfare programmes in the rural areas do not significantly meet the needs of individual recipients is another hypothesis of the study. Chi-square analysis shows that $X^2 = 56.74$, Df = 3 at $P \le 0.05$ and a critical value of 7.32. Consequently, the null hypothesis is rejected. Therefore, there is a significant responsiveness of government provisions in meeting the needs of individual recipients in these rural communities in Lesotho. Respondents' perceptions were also sought on the impact of government social welfare services in meeting their individual needs. Fortyfive per cent were of the opinion that they experienced the impact of government services in meeting their needs. Thirty-seven per cent, as opposed to 18% who felt no change at all, indicated that they felt a great impact of the services in meeting their individual needs. Chi-square analysis was performed with regards to the hypothesis – government social welfare programmes do not have any significant impact on the lives of individuals in the rural areas. It indicates that $X^2 = 17.4$, Df = 2 at P ≤ 0.05 and a critical value of 6. Therefore, the null hypothesis is rejected, revealing a significant perceived impact of government provisions in the lives of recipients.

Table 3: Responsiveness and impact of government provisions in meeting needs

Responsiveness/impact perception assessment	Percentage				
	Yes	No	Total		
Extent of meeting needs					
Very great extent Great extent No change at all Don't know	27 47 25 1	73 53 75 99	100 100 100 100		
Extent of impact					
Very great extent Great extent No change at all	18 45 37	82 55 63	100 100 100		

Most of the respondents, while giving their opinion on how they perceive the impact of government social welfare services in meeting their individual needs, also gave reasons to that effect. They mentioned that the provisions were too little and could not accommodate their basic needs. Some mentioned that due to the large number of dependents they have, the provisions prove to be too little. On this point they showed that in the end the benefit cannot even meet their personal needs let alone those of the entire family/households.

The trickle-down effect of government programmes to other household members was assessed. Since in most cases the social assistance benefits the whole household, the information obtained will assist in determining the extent to which the assistance provided also trickles down to the rest of the household members. As Table 4 shows, all the respondents indicated that some of their household members have benefited from some of the government social welfare programmes. The majority of the respondents' household members that had benefited from these government social welfare programmes were grandchildren who constituted 28%. This is followed by 26% of respondents' children who had benefited from these social welfare programmes. Twenty per cent showed that their domestic employees also benefited from the programmes. Six per cent, 4% and 2% mentioned that their other relatives, parents/parents-in-law and spouses respectively also benefited from government programmes. Fifteen per cent also stated that other members of their households who were neither their relatives nor

employees were also receiving some form of assistance. Another hypothesis states that there is no significant trickle-down effect of social welfare programmes on other rural household members. The analysis reveals that $X^2 = 58.3$, Df = 6 at $P \le 0.05$ and a critical value of 12.6. Therefore, the null hypothesis is rejected, revealing a significant number of members of recipients' households benefit from government support.

Table 4: Household members who have benefited from government support

Response	Percentage		
	Yes	No	Total
Spouse	2	98	100
Children	26	74	100
Other relatives	5	95	100
Parent or parent-in-law	4	96	100
Grandchildren	28	72	100
Domestic employee	20	80	100
Others	15	85	100

All respondents felt that community income-generating projects can serve as more responsive social welfare services. However, most of them also felt that semi-formal social welfare schemes like burial schemes and savings clubs can be more relevant. The majority (90%) also suggested that grants be introduced as they can best respond to the needs of other groups, namely children's grants and disability grants. A few also suggested the revival of indigenous social welfare schemes and, more specifically, share-cropping. There were some additional suggestions that government should also consider building houses or shelter for selected destitute persons.

DISCUSSION

Although the results of this study show that there are significant forms of government social welfare programmes, which had a positive impact on the welfare of the recipients, Lesotho is facing insurmountable challenges on the social welfare front. First, the Kingdom of Lesotho has an estimated population of 1.8 million inhabitants (51% are females) (Government of Lesotho (GOL), 2009) with a predominantly agricultural economy, which was adversely affected by drought some decades ago (Braun and Dreiling, 2010). Second, most of Lesotho's population (77%) resides in the rural and mountainous areas where there are no employment opportunities (National

AIDS Commission, 2010). Third, because of increasing retrenchment from the South African mines and the textile industry at home (Lesotho), the level of poverty is very high, with an estimated unemployment rate of 45%. Youth unemployment is put at 33.5% and there is 53.6% unemployment for women (United Nations Statistics Division, 2010). Furthermore, Lesotho is ranked the third highest prevalence HIV and AIDS rate (23%) country in the world after Botswana and Swaziland, with an orphan population of 221 403 and a consequent substantial effect on the country's social structure, livelihoods and food security (National AIDS Commission 2010:15). All these factors have resulted in 43% of the population living on less than USD 1.25 per day (UNDP, 2009).

Given these formidable challenges facing the social welfare sector, it is expected that social work intervention through the Department of Social Welfare (DSW) should have been deeply involved in solving many of Lesotho's social problems. Unfortunately, there are enormous challenges facing social work in Lesotho as well, especially as the profession is relatively new, having only started in 1976 with the establishment of the DSW. No doubt the Lesotho Social Welfare Policy of 2002 which came into effect very late "marks the emergence of deliberately planned, organised systems of service to deal with individual needs, which have emerged to supplement the traditional forms of social welfare security systems" (Ministry of Health and Social Welfare, 2005:1, cited in Nono and Tanga, 2011:2). This late recognition for organised efforts towards the social welfare of its citizenry is compounded by the lack of sufficient trained social workers. As of September 2010, the country could boast approximately 150 qualified social workers to serve the whole population (Tanga, 2011). The respondents suggested income-generating activities that could help boost living conditions in the long run. The sustainability of social welfare programmes is dependent on income-generating and other economic activities being undertaken by the recipients so that they avoid a culture of dependency and the difficulty of not being able to do without government grants and other forms of assistance. This should be the responsibility of the Department of Social Welfare (DSW), which is grossly understaffed and underfunded.

Since the inception of the public assistance of M100 in late 1978, it not been increased to cater for inflationary trends, except for the old-age pension, which is adjusted yearly and stands at M400 as of 2010/2011 financial year, benefiting more than 75 000 old people (Tanga, 2008). This does not seem to augur well for recipients who depend solely on grants for the survival of their entire families. Another form of assistance that has been in existence in the

country for decades is the medical assistance, where the government absorbs all the expenses of its citizens who cannot be treated locally and are treated in Bloemfontein, South Africa. It is unfortunate that rather than treating its people in its own hospitals, the government has continued to drain its financial resources in the payment of huge medical bills to South African hospitals. However, this is because of the chaotic state of hospitals in Lesotho.

The global financial and economic crisis of 2008/2009 as well as the 2011 economic meltdown of the Eurozone did not spare the government of Lesotho or its inhabitants. The expiration of preferential trade agreements (PTAs) and the Africa Growth and Opportunity Agreement (AGOA) of which Lesotho has been a beneficiary as a result of the global economic/ financial crisis of 2007/2008 has hit the country so badly that its national income declined drastically (Lesotho Review, 2008). This perhaps explains why the government has not been able to adequately provide for its citizens through increased cash and other social welfare benefits. The sustainability of its social welfare programmes seems to be threatened by these crises. It can convincingly be argued that the government does not have the political will. The crisis began in 2007/2008, but many social welfare grants, such as the public assistance of M100 and food parcels were instituted around 1978, have remained unchanged despite the high inflationary trends. With the exception of the old-age pension, which is M400 a month, all other cash benefits are not up to the poverty threshold of M150 per adult per month set by the government. This poverty index has not been reviewed for decades and does not represent the reality in Lesotho.

The situation of the recipients has been worsened by recent food price instability on the international market. As Galtier (2011) maintains, experts described the situation in the late 2000s in developing countries as one that is characterised by instability in food prices. Basic food prices have continued to skyrocket, especially with the incessant increases in fuel prices on the international market despite the subsidisation by the government to keep prices reasonable. These factors have eroded the meagre social welfare benefits provided by the government. This is made worse by the fact that social welfare benefits are provided on the basis of solely benefiting the recipients. This does not take into consideration the fact that African cultural values and norms require sharing whatever one has with members of nuclear and extended family, whether vulnerable or rich. The results of this study showed exactly this phenomenon – that the social welfare benefits received from government trickled down to other family members. This corroborates the results of Tanga's study (2008) that, in Lesotho, old-age pensioners

contribute to not only the education of orphans and children of relatives, but also to their upkeep. However, the influence of the western style of life is beginning to corrode this much cherished African style of sharing and reciprocity among the youth.

CONCLUSION AND RECOMMENDATIONS

Although some of the provisions from government such as public assistance of M100 monthly, food parcels and old-age pension are perceived as being very small, the recipients appreciate them in the spirit of these being 'half a loaf is better than none' as the African adage holds. These provisions are able to cater for the educational needs of children as well as the purchasing of monthly groceries, which, according to the recipients, have had a positive impact on their lives. To show the extent to which recipients appreciate the efforts of their government, Tanga (2010:2) summed up the role played by one of the government's social welfare programmes, the old-age pension, as follows:

The abject poverty and hunger vulnerability existing before the introduction of old age pension in November 2004 have been halved. Pensioners play an increasing role in the care of orphans and vulnerable children. All these have boosted pensioners' self-esteem and strengthened the respect from their households and communities. Although the pension is seen as meagre, voters' intentions in the 2007 election show the efforts of the government continue to be highly appreciated.

Despite this appreciation, the recipients were of the view that these cash benefits were small and should be increased. However, there is never any social welfare assistance either in developed or developing countries that can satisfactorily meet the needs of the recipients. In keeping with the African solidarity of being one's keeper irrespective of age or lineage, the recipients in Lesotho have continued to be the primary source of care and support to other needy household members. This is seen through the trickle-down effects of the welfare benefits, which are jointly shared and used by family members. The needs of individual recipients would have been better met if these social welfare grants and food parcels were to serve only the recipients but this is not possible within the African context. Overall, the Lesotho government has not been able to adequately respond to the increasing social needs of its citizens through its Department of Social Welfare. This is most likely because of its relative 'newness' and poor funding as well as its underresourced nature. The poor service delivery may also be explained by the fact that social work practice in Lesotho is not regulated nor is there any functional organisation of social workers that could better provide direction to the profession.

It could also be argued that the economic and financial meltdown has contributed to the inability of government to adequately provide for its citizens, especially by increasing cash and other social welfare benefits vis-a-vis yearly inflation and other socio-economic circumstances. Another important factor is Lesotho's tardiness in recognising the important role social work could play in solving some social problems. Its policies are rather too little and too late. In the light of the above, it is important for the government to overhaul the DSW, which should begin to initiate and implement more policies towards different members of vulnerable groups in society, such as older people, physically challenged persons, orphans and vulnerable children, children and women. Some of the social welfare policies are still draft bills and are not enforceable. There is a need for a strong national body to regulate social work practice and education in Lesotho. In addition, the National Association of Social Workers should be revived. These two bodies would help enhance social welfare service delivery in a country that desperately needs them.

The miniscule cash grants such as M100 public assistance and other cash grants (old-age pension of M400 and child grant of M120) should urgently be revised, taking into consideration the fact that these are grants to families rather than to individual recipients. If African value systems are considered in determining these grants and other social welfare benefits such as food parcels, there would be better allocations that would cater for inflation and other family members even if they are not recipients. It is also important that the DSW should encourage recipients of government welfare cash transfers to invest in income-generating activities either as individuals, families or other groupings for the purpose of sustaining their livelihood and survival. Finally, poverty could be alleviated through government initiative in diversifying employment opportunities, especially as the country has abundant natural resources such as mohair and wool, mineral and water resources.

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