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Assessing Asnaf Readiness for Conditional Cash Transfer Adoption in Malaysia: A Descriptive Analysis

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ABSTRACT

This study aims to descriptively analyse the perceptions of asnaf regarding their readiness for Conditional Cash Transfer (CCT) adoption in Malaysia. Its originality lies in examining zakat cash recipients' perspectives, representing the first attempt to develop a CCT model within zakat distribution and integrate behavioural conditionalities including religiosity, education, health, and employment. The study surveyed 369 heads of households classified as poor or needy asnaf who received cash assistance from zakat institutions in the Federal Territory, Kedah, and Terengganu, selected to reflect variations in governance structures and zakat distribution practices. Data were analysed using descriptive statistics, frequency analysis, cross-tabulation and Pearson's Chi-square test to check compliance trends across states and asnaf categories. Findings indicate strong overall acceptance of behavioural conditionalities, with the highest compliance observed in religious practices and the greatest challenges in employment. The findings highlight the need for differentiated strategies in zakat-based CCT programs, combining soft conditionalities for generally compliant recipients and hard conditionalities for those requiring stricter enforcement. The study demonstrates the potential of zakat-based CCT models to enhance asnaf compliance, promote human capital and spiritual development, and support socio-economic empowerment and long-term poverty alleviation.

1. INTRODUCTION

Zakat distribution for consumptive support (self-sustenance) in Malaysia is primarily delivered through cash transfers [1]. These transfers are commonly implemented as Unconditional Cash Transfers (UCTs) [2]. For example, in the Federal Territory, MAIWP disbursed RM275.42 million in cash assistance in 2022 to 174,166 recipients, representing 49.54% of its total zakat distribution of RM555.92 million across 30 assistance schemes. These beneficiaries accounted for 78.16% of all registered asnaf, totalling 222,823 individuals [3].

However, the provision of zakat through UCTs has not been sufficient to address persistent behavioural challenges among some asnaf. Previous studies report that certain recipients remain reluctant to work, depend heavily on continued assistance, and show limited motivation to pursue productive or sustainable livelihoods [4]. These issues are further reinforced by gaps in religious knowledge and weak engagement in essential religious practices [5]. Strengthening these behavioural and spiritual dimensions is therefore necessary to enhance the long-term impact of zakat support.

At the global level, cash transfer mechanisms have become a central tool for delivering assistance to low-income populations. Cash transfers account for approximately 26% of all social protection interventions worldwide, implemented across 203 countries and reaching an estimated 1.36 billion beneficiaries between 2020 and 2021 [6]. Among these mechanisms, Conditional Cash Transfer (CCT) programs are recognised as one of the most effective approaches due to their dual focus on financial support and behavioural change.

CCT programmes provide financial assistance to poor households on the condition that they comply with specific behavioural requirements, typically related to education, health, and employment. Examples include ensuring children attend school, completing vaccination schedules, or participating in training programmes. The dual objective of CCTs is to reduce immediate poverty through financial support while fostering long-term human capital development by shaping behaviours that improve education, health, and productivity outcomes [7].

Extensive evidence shows that CCTs have contributed to poverty reduction and human capital development, including improvements in school attendance, academic performance, and health indicators. However, not all CCT programs have achieved consistent impacts, and mixed results have been reported in several contexts [8]. For instance, Bergolo et al. [9] reported that participation in CCT programs in Uruguay was associated with a 13% reduction in formal labour-market engagement overall, and a 19% reduction among single mothers. Past studies suggest that these limitations arise because CCTs primarily emphasise external behavioural

conditionalities, those related to formal services such as schooling, healthcare, or labour market engagement [10].

In this study, internal behavioural conditionality refers to personal behavioural attributes shaped by intrinsic values particularly religiosity that influence self-regulation and decision-making [11]. In contrast, external behavioural conditionality refers to observable behavioural requirements imposed by programmes, such as education, health, and employment-related compliance. These distinctions are necessary to understand how both internal and external factors jointly shape recipients' responses to CCT interventions.

To date, no CCT programme has systematically incorporated internal behavioural factors such as religiosity, despite substantial research demonstrating that religious practices and values can promote positive behaviour change, strengthen self-discipline, reduce poverty, and support human capital development [12]. This gap highlights the need to explore how internal dimensions like religiosity could complement existing external conditionalities to enhance the overall effectiveness of CCT interventions.

Considering the limitations of both ineffective zakat distribution and CCT programmes with inconsistent or unsustained impacts, a CCT instrument for zakat distribution has been developed encompassing four dimensions of behavioural conditionality: religiosity, education, health, and employment. This integrated framework aims to enhance the effectiveness of zakat support by addressing both internal (religiosity) and external (education, health, employment) factors influencing recipients' behaviour.

However, CCT is a newly introduced program within zakat distribution. Therefore, understanding the perceptions and readiness of recipients (asnaf) is crucial to ensure the programme's effectiveness. Most cash assistance recipients are asnaf categorized as fakir (poor) and miskin (needy), receiving monthly financial support as well as emergency aid [3].

The objective of this study is to descriptively analyse the perceptions of poor and needy asnaf regarding their readiness for Conditional Cash Transfer (CCT) adoption in Malaysia. The originality of this study lies in its focus on zakat cash recipients' perceptions of CCT programs, representing the first attempt to develop CCT models within zakat distribution and explore the integration of behavioural conditionalities, including religiosity, education, health, and employment, into faith-based social protection. The potential contributions of this study are twofold. For policymakers, it provides feedback from zakat cash recipients to inform the design and implementation of effective CCT-based policies. For the body of knowledge, it advances understanding of the role of religious conditionality alongside CCT adaptation within zakat distribution models.

2. LITERATURE REVIEW

The administration of zakat institutions in Malaysia operates under a decentralised structure. This is because zakat falls under state jurisdiction as part of Islamic affairs, in line with the provisions of the State List in the Ninth Schedule of the Federal Constitution. As a result, zakat governance is determined by the authority of each state's ruler (Sultan), except in the Federal Territories, where zakat legislation and administration fall under the authority of the Yang di-Pertuan Agong. Accordingly, the State Islamic Religious Councils (MAIN), or in the case of Kedah, the State Zakat Board, are responsible for determining the governance structure for zakat administration [13]. Consequently, the governance structure differs across states depending on the policies and directives set by their respective authorities.

Zakat funds in Malaysia are distributed to asnaf through various mechanisms to meet their essential needs, including livelihood, education, health, and protection [3]. The main distribution channels include cash or digital transfers, in-kind support such as food and medical supplies, programs and training, physical asset development, and other forms tailored to socio-economic needs. Cash assistance represents the largest share of zakat distribution, both in terms of funds and number of recipients, and is predominantly provided as Unconditional Cash Transfers (UCTs) [2].

Zakat distribution has improved over time through institutional restructuring, digital technology adoption, separation of distribution and development functions, and targeted allocation for productive and consumptive purposes [14, 15]. Despite increased zakat collection, the number of poor and needy asnaf continues to grow annually [16], indicating limited effectiveness in lifting recipients out of poverty. Although there are eight categories of asnaf, only two categories, poor and needy, fall below the poverty threshold as determined by the had kifayah (sufficiency line). The long-standing poverty issues within the asnaf population are therefore concentrated primarily within these two categories [17].

Evidence from state-level programs demonstrates these limitations. In Terengganu, only 6–15% of asnaf entrepreneurs were classified as high-performing between 2016 and 2021 [18]. Similarly, in Selangor, only 34% of monitored asnaf entrepreneurs in 2022 had an 80% or higher likelihood of escaping poverty [19]. Entrepreneurship-focused programs reach only a small fraction of asnaf compared to cash assistance. for example, only 658 asnaf entrepreneurs received business support in the Federal Territory in 2022, representing 2.41% of the 27,255 cash transfer recipients [3]. These data indicate that current zakat distribution methods remain insufficient in addressing poverty among asnaf, leaving existing beneficiaries in need while the number of new asnaf continues to rise.

Previous studies highlight that Conditional Cash Transfer (CCT) programs are a significant social policy tool for reducing poverty and wealth inequality, particularly in Latin American countries [20]. Notable examples include Brazil's Bolsa Familia, which reduced extreme poverty by 19% between 2003 and 2005 [21] and, over ten years, lowered extreme poverty by more than 50% while reaching 13.5 million families, or 25% of the population [22]. In Mexico, the Progresa program increased school enrolment by 6% [23]. The success of these programs has led to CCT adoption in over 70 countries worldwide [24].

Behavioural conditionalities are central to CCT effectiveness, ensuring that cash transfers are linked to actions such as children's school attendance or participation in health programs. Such requirements incentivize households to invest in education and health, enhancing human capital while addressing poverty [25]. Only household members meeting the behavioural criteria receive benefits, for example, children attending school or mothers ensuring vaccination compliance. Some countries have introduced flexible CCT models; in Egypt, the Takaful and Karama programs combine CCT for education and health with Unconditional Cash Transfers for

the elderly and persons with disabilities, broadening coverage to multiple vulnerable groups [26].

To ensure that the design of behavioural conditionalities in CCT programs delivers effective impact, prior studies have also examined the factors that contribute to beneficiaries' non-compliance with these requirements. Studies consistently show that non-compliance with CCT behavioural requirements is influenced by several interrelated factors. Satisfaction with public services is a key determinant. Delays in health service delivery and continued reliance on traditional medicine reduce satisfaction with formal healthcare, which contributes to non-compliance with health-related conditionalities [27]. Several CCT programs have reported low levels of compliance with behavioural conditionalities. In Tanzania, compliance rates were notably low for education (24%) and health (12%) conditionalities [28]. In Brazil, monitoring the behavioural conditionalities under the Bolsa Família program increased the financial burden on the health sector and imposed additional time-related workload on officers responsible for monitoring compliance [29]. Evidence from Chile shows that compliance also varies by poverty category, with behavioural conditionalities being more effectively met by households that are less vulnerable compared to those experiencing deeper deprivation [30]. The higher cost of complying with conditionalities poses significant challenges for the most vulnerable groups. A similar pattern is observed in Brazil, where women engaged in unpaid work and living in severe poverty face heightened pressure to meet conditionalities. This compliance burden has been shown to negatively affect their health, contributing to increased anxiety, depression, and fear of losing benefits if they fail to comply [31].

From a programme impact perspective, empirical evidence shows that Conditional Cash Transfers (CCTs) outperform Unconditional Cash Transfers (UCTs). In India, CCT recipients experienced significant increases in farm income (0.27 Hedges' g), while UCT recipients saw no effect [32]. Similarly, in Mexico, CCT programs reduced poverty more effectively than UCTs, demonstrating that behavioural conditionalities can enhance household income, reduce intergenerational poverty, and strengthen human capital development [33]. The comparison between Conditional Cash Transfers (CCTs) and Unconditional Cash Transfers (UCTs) is presented in Table 1.

This comparison highlights that while CCTs demonstrate stronger and more sustained development outcomes than UCTs, existing models do not incorporate internal behavioural drivers such as religiosity. This gap provides a compelling rationale for developing a zakat-based CCT instrument that integrates both internal and external behavioural conditionalities.

Table 1. Comparative analysis of UCT and CCT programs: Effects, limitations, and evidence gaps

Dimension	Unconditional Cash Transfers (UCTs)	Conditional Cash Transfers (CCTs)	Evidence Gaps
Impact on Income / Poverty	Mixed results; short-term gains, limited long-term impact	Stronger and more sustained poverty reduction	Limited evidence from Muslim-majority and zakat-based contexts
Human Capital Outcomes	Little effect on education/health	Significant improvements in schooling and health	Role of internal behavioural factors (e.g., religiosity)
Behavioural Mechanisms	No behavioural requirement; high autonomy	Compliance-based behavioural change; incentivises human capital investment	Compliance costs for vulnerable groups underexamined
Limitations	May create dependency; weak long-term capability impact	Compliance burden; monitoring costs; unequal compliance	Lack of models integrating internal and external behavioural conditions
Relevance to zakat	Aligns with current practice (mostly unconditional)	Provides structured pathway for capability-building and poverty exit	No CCT model incorporates religiosity as behavioural conditionality

3. METHODOLOGY

3.1 Research design

This study employs a quantitative descriptive survey design to profile the demographic characteristics of zakat recipients (asnaf) and assess their readiness and compliance with proposed Conditional Cash Transfer (CCT) conditionalities, including religious, educational, health, and employment dimensions. The study was conducted as a cross-sectional survey to capture a snapshot of respondent perceptions at a single point in time [34]. Prior to data collection, the research instrument underwent content and face validity assessment by a panel of experts, who evaluated each item for clarity, relevance, and appropriateness in measuring the intended constructs [35]. Feedback from the experts was used to refine and finalize the questionnaire, ensuring its suitability for the target population.

Data were collected via a structured questionnaire and analysed using SPSS. Descriptive statistics were used to summarize respondents' demographic profiles and mean readiness scores for each conditionality. Frequency analysis examined the distribution of responses for individual items, while cross-tabulation explored associations between demographic variables and compliance/readiness levels [36]. This approach ensures a systematic and rigorous assessment of asnaf readiness for CCT adoption.

3.2 Population and sampling

The study population comprised poor and needy zakat recipients in the Federal Territory, Kedah, and Terengganu, Malaysia, who have received cash assistance from zakat institutions. These states were selected to capture differences in governance structures and zakat distribution practices [37]. The target respondents were heads of households classified as poor or needy. A total of 369 respondents were selected, exceeding the minimum requirement of 85 participants as determined by G*Power analysis [38]. The sample was drawn from individuals actively involved in zakat cash aid programs across three states. A cluster sampling technique was employed, which divides a heterogeneous population into

groups, or clusters, based on characteristics such as location, ethnicity, or household composition [39]. This method is suitable for large populations and practical when a complete list of all population elements is unavailable [40].

3.3 Research instrument

Data were collected using a structured questionnaire comprising two main sections. Section A captured respondents' demographic and socioeconomic information, including gender, age, education level, income, asnaf category, and type of zakat assistance received. Section B assessed respondents' perceptions of behavioural conditionalities, including religious, educational, health, and employment, using Likert-scale items ranging from 1 (very difficult) to 5 (very easy). Higher scores indicated greater willingness and perceived ability to comply with the proposed conditionality requirements. The codes and number of items for each behavioural conditionality construct are shown in Table 2.

Table 2. Codes and number of items for each behavioural conditionality construct

Constructs	Number of Items
Religious Conditionality	SA1-SA14
Education Conditionality	SP1-SP10
Health Conditionality	SK1 - SK11
Employment Conditionality	SE1 - SE6

3.4 Data collection

Data on asnaf behaviour were collected using a face-to-face questionnaire survey. In Terengganu and Kedah, trained enumerators facilitated data collection, ensuring adequate sample coverage, higher response rates, and improved data quality through direct clarification and rapport-building with respondents [41]. In the Federal Territory, zakat counter officers from the zakat Distribution Division of the Federal Territory Islamic Religious Council assisted with the process. All respondents were informed about the study's objectives, and written consent was obtained before participation.

3.5 Reliability and validity assessment

Instrument reliability was assessed using Cronbach's alpha, which evaluates internal consistency; values above 0.70 are considered acceptable, while values above 0.90 indicate excellent reliability [42]. Construct validity was examined through the Kaiser–Meyer–Olkin (KMO) Measure of Sampling Adequacy and Bartlett's Test of Sphericity. A KMO value above 0.60 indicates that the data are suitable for factor analysis [43], while Bartlett's test should be significant ($p < 0.05$) to confirm that item correlations are adequate for extracting underlying factors.

3.6 Data analysis

Data were analysed using SPSS. Descriptive statistics summarized respondents' demographic profiles and mean readiness scores for each behavioural conditionality, while frequency analysis examined the distribution of responses across individual items, highlighting overall perceptions of asnaf regarding compliance with behavioural conditionalities. Cross-tabulation explored associations between demographic variables (state and asnaf category) and readiness or compliance levels, providing insights into why certain groups may face greater or lesser challenges in meeting conditionalities. Pearson's Chi-square test was used to assess whether behavioural conditionalities differed across states and asnaf categories. This non-parametric test is appropriate for nominal variables and does not require normality or equal variances, making it well-suited for analysing categorical behavioural outcomes [44]. For this analysis, one representative item from each dimension was selected, reflecting priorities commonly emphasized in global CCT programs: school attendance (education), regular health check-ups (health), and employment participation by heads of households [25]. For religious conditionality, the item focused on performing the five daily obligatory prayers. Findings are presented in tables and percentages to illustrate key trends and variations across respondent groups [45].

4. RESULTS

The reliability and validity tests demonstrate that the instrument is statistically robust (Table 3). Cronbach's alpha was 0.967, which exceeds the recommended threshold of 0.90 for excellent internal consistency [42]. The Kaiser–Meyer–Olkin (KMO) value was 0.951, placing it in the "superb" category according to Kaiser's (1974) criteria and confirming that the data are highly suitable for factor analysis. Bartlett's Test of Sphericity was significant ($p < 0.001$), indicating that the correlation matrix is sufficiently patterned to justify the extraction of underlying factors. Together, these metrics confirm that the dataset satisfies both reliability and construct validity requirements, and that the instrument is appropriate for subsequent quantitative analyses.

Table 3. Reliability and validity statistics of the instrument

Measure	Result
Sample Size (N)	369
Cronbach's Alpha (α)	0.967
Kaiser–Meyer–Olkin (KMO)	0.951
Bartlett's Test of Sphericity	$p < 0.001$

A total of 369 asnaf respondents participated in the survey across three Malaysian states. More than half were from Wilayah Persekutuan (52.8%), followed by Terengganu (23.8%) and Kedah (23.3%). Gender distribution was balanced, with 53.7% male and 46.3% female respondents.

In terms of age, the sample was largely middle-aged, with 41–50 years (24.9%) and 51–60 years (24.4%) forming the largest groups. Respondents aged 31–40 years constituted 19.2%, while those 65 and above represented 17.1%.

Educational attainment remains low among respondents. The majority completed SPM (40.1%), followed by SRP/PMR (22.0%) and those who did not complete school (15.4%). Only 2.2% had a bachelor's degree.

Employment patterns indicate economic vulnerability. A significant proportion were self-employed or running micro-businesses (38.8%) and unemployed (37.4%), while 19.0% worked in the private sector. Monthly income levels were similarly low; 34.1% earned RM500 or below, and 23.6% earned RM501–RM1,000, aligning with their classification as asnaf. Most respondents (77.5%) were categorised as needy, with 22.5% classified as poor.

Regarding zakat assistance, monthly financial aid was the

most common support received (72.6%). Other notable forms of assistance included Ramadan/Aidilfitri aid (22.5%), business capital (7.3%), and education-related support such as school pocket money (6.2%) and scholarships (10%). Monthly zakat assistance typically ranged between RM251–RM500 (49.9%), while only a small share received more than RM1,000 (4.8%).

Overall, the demographic profile reflects a population of asnaf experiencing persistent socio-economic challenges, underscoring the importance of structured, targeted, and sustainable zakat-based interventions for asnaf households (Table 4).

Table 4. Demographic profile of respondents

	Category	N	%
State	Wilayah Persekutuan	195	52.8
	Kedah	86	23.3
	Terengganu	88	23.8
Gender	Male	198	53.7
	Female	171	46.3
Age	16-23	4	1.1
	24-30	23	6.2
	31-40	71	19.2
	41-50	92	24.9
	51-60	90	24.4
	61-64	26	7.0
	65 and above	63	17.1
Education	Uneducated	22	6.0
	Did not complete school	57	15.4
	SRP/PMR	81	22.0
	SPM	148	40.1
	STPM/Diploma	35	9.5
	Vocational Skills Certificate	18	4.9
	Bachelor's degree	8	2.2
Employment status	Public sector	18	4.9
	Private sector	70	19.0
	Self-employed/Business	143	38.8
	Unemployed	138	37.4
Monthly salary	RM 500 and below	126	34.1
	RM 501-RM 1000	87	23.6
	RM 1001-RM 1500	72	19.5
	RM 1501-RM 2000	49	13.3
	RM 2001-RM 2559	23	6.2
	RM 2560-RM 3439	5	1.4
	RM 3440-RM 4309	5	1.4
	RM 4309	2	0.5
Asnaf category	Poor	83	22.5
	Needy	286	77.5
Category of cash assistance provided by the zakat institution	Monthly financial assistance	268	72.6
	Emergency aid	15	4.1
	Marriage assistance	8	2.2
	Business capital assistance	27	7.3
	School pocket money assistance	23	6.2
	School-level scholarship	27	7.3
	General higher education assistance	33	8.9
	Higher education scholarship	10	2.7
	Ramadan/Aidilfitri assistance	83	22.5
	Other cash assistance	31	8.4
Total monthly financial assistance from the zakat institution	RM 250 and below	84	22.8
	RM 251-RM 500	184	49.9
	RM 501-RM 750	66	17.9
	RM 751-RM 1000	17	4.6
	RM 1001-RM 1250	7	1.9
	RM 1251-RM 1500	2	0.5
	RM1501 and above	9	2.4

The frequency analysis shows that respondents reported high levels of agreement across all four-conditionality domain consists of religious, education, health, and employment (Table 5). The results indicate strong overall acceptance of behaviour-based requirements in a zakat-supported CCT model. For religious conditionality, most items demonstrated high mean scores ranging from 3.82 to 4.53, reflecting positive attitudes toward core religious practices and participation in faith-based developmental activities. The highest levels of agreement were recorded for SA1 and SA3 (M = 4.53), while only one item, SA14 (M = 3.48), fell within the moderate range, suggesting varied perceptions toward that specific requirement. Similarly, education conditionality items showed consistently high agreement, with mean scores between 3.97 and 4.26. Items SP3 and SP2 were rated the highest, indicating strong support for conditions related to school attendance, academic monitoring, and children's educational participation.

In the area of health conditionality, respondents again reported high levels of agreement, with mean values ranging from 3.71 to 4.25. The strongest support was observed for SK1 and SK10, suggesting readiness to comply with requirements such as health screenings, vaccinations, and regular medical check-ups. Finally, employment conditionality also demonstrated high agreement, with mean values between 3.72 and 3.95. Items SE1 and SE6 recorded the highest means, indicating acceptance of conditions that promote job-seeking efforts, skills development, and participation in income-generating activities.

Overall, the findings indicate that asnaf respondents are generally receptive to the inclusion of behavioural conditionalities in zakat-based assistance. This strong level of acceptance provides an encouraging foundation for the development and implementation of a CCT framework tailored to the socio-economic and religious realities of zakat beneficiaries.

The cross-tabulation analysis of asnaf perceptions regarding compliance with behavioural conditionalities shows generally high readiness across religious, education, and health dimensions, with lower ease for employment. Most respondents reported that complying with religious conditionality was easy, with 83.6% in Wilayah Persekutuan (163/195), 93.0% in Kedah (80/86), and 95.5% in Terengganu (84/88). Moderate compliance was observed among a smaller proportion, including 14.4% in Wilayah Persekutuan, 5.8% in Kedah, and 3.4% in Terengganu, while difficult compliance remained minimal across all states.

Table 5. Frequency analysis on respondents' perceptions of each behavioural conditionality

Construct/Items	Min	Max	Mean	Level
Religious Conditionality				
SA1	1.00	5.00	4.53 [.769]	High
SA2	1.00	5.00	4.34 [.865]	High
SA3	1.00	5.00	4.53 [.737]	High
SA4	1.00	5.00	3.95 [.978]	High
SA5	1.00	5.00	3.82 [.971]	High
SA6	1.00	5.00	3.89 [.942]	High
SA7	2.00	5.00	4.46 [.747]	High
SA8	1.00	5.00	4.16 [1.100]	High
SA9	1.00	5.00	4.06 [1.135]	High
SA10	1.00	5.00	4.06 [.947]	High
SA11	1.00	5.00	4.36 [.778]	High
SA12	1.00	5.00	4.17 [.874]	High
SA13	2.00	5.00	4.47 [.741]	High
SA14	1.00	5.00	3.48 [1.251]	Moderate
Education Conditionality				
SP1	1.00	5.00	4.18 [.914]	High
SP2	2.00	5.00	4.24 [.857]	High
SP3	2.00	5.00	4.26 [.836]	High
SP4	2.00	5.00	4.19 [.851]	High
SP5	1.00	5.00	4.09 [.898]	High
SP6	1.00	5.00	4.10 [.906]	High
SP7	2.00	5.00	3.97 [.889]	High
SP8	1.00	5.00	4.04 [.953]	High
SP9	1.00	5.00	4.23 [.874]	High
SP10	1.00	5.00	4.07 [.925]	High
Health Conditionality				
SK1	1.00	5.00	4.25 [.816]	High
SK2	1.00	5.00	4.22 [.781]	High
SK3	2.00	5.00	4.17 [.818]	High
SK4	1.00	5.00	4.05 [.914]	High
SK5	2.00	5.00	4.00 [.913]	High
SK6	1.00	5.00	3.93 [.956]	High
SK7	1.00	5.00	3.71 [1.073]	High
SK8	1.00	5.00	3.95 [.963]	High
SK9	1.00	5.00	4.15 [.922]	High
SK10	1.00	5.00	4.21 [.894]	High
SK11	1.00	5.00	4.16 [.916]	High
Employment Conditionality				
SE1	1.00	5.00	3.95 [.924]	High
SE2	1.00	5.00	3.78 [.984]	High
SE3	1.00	5.00	3.72 [1.006]	High
SE4	1.00	5.00	3.81 [1.047]	High
SE5	1.00	5.00	3.91 [.977]	High
SE6	1.00	5.00	3.95 [.938]	High

Note: Level of Agreement Scale; < 2.33; Low; 2.34-3.67; Moderate; > 3.68 High (Landell, 1977) standard deviation value

Compliance with educational requirements showed more variation across states. Ease of compliance was highest in Terengganu at 88.6% (78/88) and Wilayah Persekutuan at 84.6% (165/195), but notably lower in Kedah at 33.7% (29/86). Moderate levels dominated in Kedah (66.3%) and were lower in Wilayah Persekutuan (13.3%) and Terengganu (11.4%), while difficult compliance remained negligible.

Regarding health conditionality, the majority found attending regular health check-ups easy, particularly in Terengganu (92.0%, 81/88) and Wilayah Persekutuan (81.5%, 159/195), with Kedah reporting lower ease at 59.3% (51/86). Moderate compliance ranged from 6% to 35%, and difficult compliance was minimal across all locations.

Participation in employment activities presented greater challenges. Ease of compliance was 78.4% in Terengganu (69/88) and 75.9% in Wilayah Persekutuan (148/195), but only 25.6% in Kedah (22/86). Moderate compliance ranged from 18.6% to 70.9%, and difficult compliance peaked in Wilayah Persekutuan at 9.7% (19 respondents), highlighting employment as the most challenging dimension among the four behavioural conditionalities.

Cross-tabulation by asnaf category shows that perceptions of ease in complying with behavioural conditionalities vary between needy and poor recipients. For religious conditionality, many needy respondents (258 of 286; 90.2%) found compliance easy, compared to 69 of 83 poor respondents (83.1%). However, for education, health, and employment conditionalities, poor respondents reported higher ease of compliance than needy recipients. Specifically, 78.3% of poor respondents versus 72.4% of needy respondents found ensuring children's school attendance easy. For regular health check-ups, 86.7% of poor respondents versus 76.6% of needy respondents perceived compliance as easy. Employment conditionality was the most challenging overall, yet 73.5% of poor respondents reported ease of participation compared to 62.2% of needy respondents. These findings suggest that while religious obligations are generally attainable for needy recipients, poor recipients perceive

greater ease in meeting education, health, and employment requirements, highlighting the need for differentiated support strategies across asnaf groups (Table 6).

The chi-square analyses revealed significant variation in behavioural conditionality performance across states and asnaf categories (Table 7) and (Table 8). At the state level, all four conditionalities—religious practice (SA1), school attendance (SP4), health check-ups (SK1), and work participation (SE5)—showed statistically significant differences ($p < .001$), indicating that compliance is strongly influenced by state-level contexts such as service accessibility, local governance, and socio-economic conditions. In contrast, differences between Fakir and Miskin were more selective. Significant variation emerged for religious practice ($\chi^2 = 11.161$, $p = .025$) and work participation ($\chi^2 = 12.118$, $p = .016$), with Fakir reporting greater difficulty. However, no significant differences were found for education ($p = .573$) or health ($p = .138$), suggesting that these conditionalities are uniformly experienced across poverty categories. Overall, the results highlight that state institutional environments exert a stronger influence on conditionality performance than the asnaf classification itself.

Table 6. Cross-tabulation analysis

Construct/Item	Scale	State			Asnaf Category	
		Wilayah Persekutuan	Kedah	Terengganu	Poor	Needy
Religious Conditionality/ Performing the five daily obligatory prayers (SA1)	Difficult	4	1	1	3	3
	Moderate	28	5	3	11	25
	Easy	163	80	84	69	258
	Total	195	86	88	83	286
Education Conditionality/ Ensuring that children attend school (SP4)	Difficult	4	0	0	0	4
	Moderate	26	57	10	18	75
	Easy	165	29	78	65	207
	Total	195	86	88	83	286
Health conditionality/ Attending regular health check-ups (SK1)	Difficult	1	0	1	0	2
	Moderate	35	35	6	11	65
	Easy	159	51	81	72	219
	Total	195	86	88	83	286
Required work participation for heads of households (SE5)	Difficult	19	3	2	6	18
	Moderate	28	61	17	16	90
	Easy	148	22	69	61	178
	Total	195	86	88	83	286

Table 7. Chi-square tests for behavioural conditionalities

Behavioural Conditionality	Chi-square (df)	P-Value	Interpretation
Performing five daily prayers (SA1)	38.951 (8)	< .001	Significant differences across states
School attendance (SP4)	105.776 (6)	< .001	Strong state-level variation
Health check-ups (SK1)	40.220 (6)	< .001	Significant difference across states
Work participation (SE5)	108.780 (8)	< .001	Marked variation across states

Table 8. Chi-square tests by asnaf category

Behavioural Conditionality	Chi-Square (df)	P-Value	Interpretation
Performing five daily prayers (SA1)	11.161 (4)	.025	Significant difference
School attendance (SP4)	1.995 (3)	.573	No significant difference
Health check-ups (SK1)	5.507 (3)	.138	No significant difference
Work participation (SE5)	12.118 (4)	.016	Significant difference

5. DISCUSSION

The frequency analysis indicates that asnaf generally demonstrate strong acceptance and compliance across all four behavioural conditionalities, with the highest agreement observed for religious practices. Item SA14, which involves saving cash for Hajj or Umrah, received a moderate score ($M = 3.48$), likely due to competing living expenses. This underscores the need for targeted support initiatives, such as the Umrah assistance program in Melaka for asnaf Muallaf (for the cause of Allah), to enhance compliance with this particular religious conditionality [46].

Based on the cross-tabulation results, several critical insights emerge regarding asnaf readiness and compliance with behavioural conditionalities across the three states. Overall, compliance with religious and health conditionalities is high across all states, indicating that these dimensions are generally well-understood and accepted by recipients.

Educational conditionality demonstrates notable variability, particularly in Kedah, where only 33.7% of respondents reported ease of compliance. This suggests potential gaps in school attendance or limitations in parents' capacity to ensure regular participation. Similar challenges have been observed in previous CCT programs, where children from low-income households were required to work to support family needs, making it difficult to comply with school attendance requirements [30]. In such cases, the cash transfers provided were insufficient to allow families to prioritize education over income-generating activities. Religious and health conditionalities, in contrast, consistently exceeded 80% ease of compliance in Wilayah Persekutuan and Terengganu, highlighting stronger adherence in these states.

Employment conditionality appears to be the most challenging, particularly in Kedah, where only 25.6% of respondents reported compliance as easy. This low compliance may reflect structural and socioeconomic barriers, including limited local employment opportunities and difficulties in balancing work with family responsibilities. Similar challenges have been observed in Brazil, where CCT beneficiaries receiving training and career skills support were unable to secure adequately paid employment [47]. Single-parent household heads may also face constraints in participating in the workforce due to childcare responsibilities [31]. To address these challenges, zakat institutions could implement targeted interventions such as small business grants, job-matching programs, collaboration with the Ministry of Human Resources under Active Labour Market Policies, and flexible or part-time work arrangements for single-parent household heads [48, 49]. Continuous monitoring and supportive guidance are essential to ensure that employment conditionalities are achievable and do not function as punitive measures.

When comparing overall readiness, Terengganu emerges as the state with the highest ease of compliance across most conditionalities, followed closely by Wilayah Persekutuan. This pattern may relate to differences in governance structure. In Terengganu, zakat collection and distribution are managed under a single Islamic Religious Council, potentially facilitating better coordination, program communication, and monitoring. Wilayah Persekutuan operates under a corporate zakat collection model, which may allow for structured administration and standardized program delivery. Based on the study findings, zakat institutions in Kedah should evaluate the readiness of asnaf in the state to comply with educational and employment conditionalities. Regarding educational conditionality, if low compliance is due to insufficient cash assistance, the amount of zakat support for low-income families should be reconsidered. However, if non-compliance with school attendance is due to other factors, such as truancy, stricter enforcement measures may be necessary. This is supported by previous studies indicating that absenteeism among asnaf children is often linked to behavioural issues [50].

The combined cross-tabulation and chi-square results indicate that behavioural compliance among asnaf is shaped less by individual characteristics and more by structural conditions. Cross-tabulation shows that needy recipients report greater ease in performing religious duties, while poor recipients demonstrate higher compliance in education, health, and employment behaviours. This pattern contradicts widely established CCT findings that deeper poverty typically reduces compliance [30]. A more convincing interpretation is that poor beneficiaries rely more heavily on institutional support and therefore have greater contact with zakat programmes, which may enhance their awareness and adherence to behavioural expectations [51]. This suggests that compliance cannot be viewed solely as a function of personal motivation.

The chi-square results strengthen this interpretation. Significant differences across states for all conditionalities ($p < .001$) show that local service environments such as school access, clinic availability, labour market opportunities, and zakat operational capacity strongly influence whether beneficiaries can meet programme requirements. The absence of differences between poor and needy in education and health conditionalities indicates that both groups face similar structural barriers, regardless of poverty depth.

Taken together, these findings show that uniform behavioural conditionalities are not suitable for zakat-based CCT models. Behavioural outcomes vary substantially across states and socio-economic groups due to differences in opportunity structures. Effective implementation therefore requires context-sensitive conditionalities with tailored support and monitoring that reflect each beneficiary group's structural constraints. Without such adjustments, behavioural requirements risk being unrealistic and may unintentionally reproduce existing inequalities.

5.1 Theoretical and practical implications

The findings highlight the need for differentiated approaches in zakat-based CCT programs across states. In Kedah, where compliance with education and employment conditionalities is lower, policymakers should consider targeted interventions after examining the underlying factors contributing to asnaf's limited readiness to comply with these program conditionalities. Soft conditionalities are appropriate for generally compliant needy recipients by providing guidance, reminders, and supportive monitoring without punitive measures. In contrast, hard conditionalities are better suited for poor recipients who require stricter behavioural reinforcement through regular verification and stronger accountability mechanisms. This differentiation aligns with global best practices, as demonstrated by major CCT programmes such as Bolsa Família in Brazil and Progresa in Mexico, both of which apply varying levels of conditionality intensity to match household vulnerability and compliance behaviour [52]. In Terengganu and Wilayah Persekutuan, higher readiness allows focus on supportive monitoring rather than stringent enforcement. Academically, this study advances the development of a CCT model within zakat distribution, showing its potential to enhance asnaf compliance, human capital, and spiritual development through behavioural interventions. For the Islamic economics sector, the results emphasize zakat's role in promoting socio-economic empowerment and wellbeing, while asnaf benefit from tailored support that strengthens participation, compliance, and long-term poverty alleviation.

5.2 Limitations and suggestions for future studies

This study is limited by its descriptive design, which does not allow for the examination of causal relationships between compliance with behavioural conditionalities and outcomes of the CCT model, such as poverty reduction and human capital development. Future research should adopt inferential analysis to evaluate the effects of adherence to CCT conditionalities on poverty alleviation and human capital enhancement.

6. CONCLUSION

In conclusion, this study examined the perceptions of needy and poor asnaf regarding their readiness to comply with behavioural conditionalities within a zakat-based Conditional Cash Transfer (CCT) framework in Malaysia. Overall, the findings indicate high acceptance across religious, educational, health, and employment domains, with religious compliance strongest and employment conditionality most challenging, particularly in Kedah. Cross-state differences further highlight the influence of governance structures, where

integrated or corporatised zakat systems in Terengganu and Wilayah Persekutuan are associated with higher readiness, while Kedah requires more targeted institutional support. Differences between asnaf categories suggest the relevance of differentiated behavioural requirements.

To enhance the practical value of the model, the study proposes an operational framework for "soft" and "hard" conditionalities. Soft conditionalities, suitable for generally compliant groups, should involve periodic self-reporting, automated reminders, and quarterly monitoring by zakat officers, with no penalties but continued guidance. Hard conditionalities, appropriate for recipients requiring stronger reinforcement, should involve bi-monthly verification (e.g., school attendance records, health check-up logs, business activity reports), structured coaching, and proportionate sanctions such as temporary suspension of non-essential benefits for repeated non-compliance, subject to clear appeals processes. These mechanisms can be assessed by the district-level zakat offices, supported by digital tracking systems to ensure consistency and fairness.

Overall, this study contributes to the literature by developing and testing a CCT model tailored for zakat distribution, demonstrating its potential to enhance human capital, strengthen spiritual behaviour, and support long-term socio-economic empowerment. By integrating behavioural insights with operational guidance, the findings offer a practical pathway for zakat institutions to implement more effective, accountable, and development-oriented poverty alleviation strategies.

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