

LEARNINGS ON LINKING HUMANITARIAN CASH & SOCIAL PROTECTION

Synthesis Note



March 2021

The Grand Bargain Sub-Group
on Linking Humanitarian Cash
and Social Protection

Prepared by

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May 2021

Visual Communication Design:
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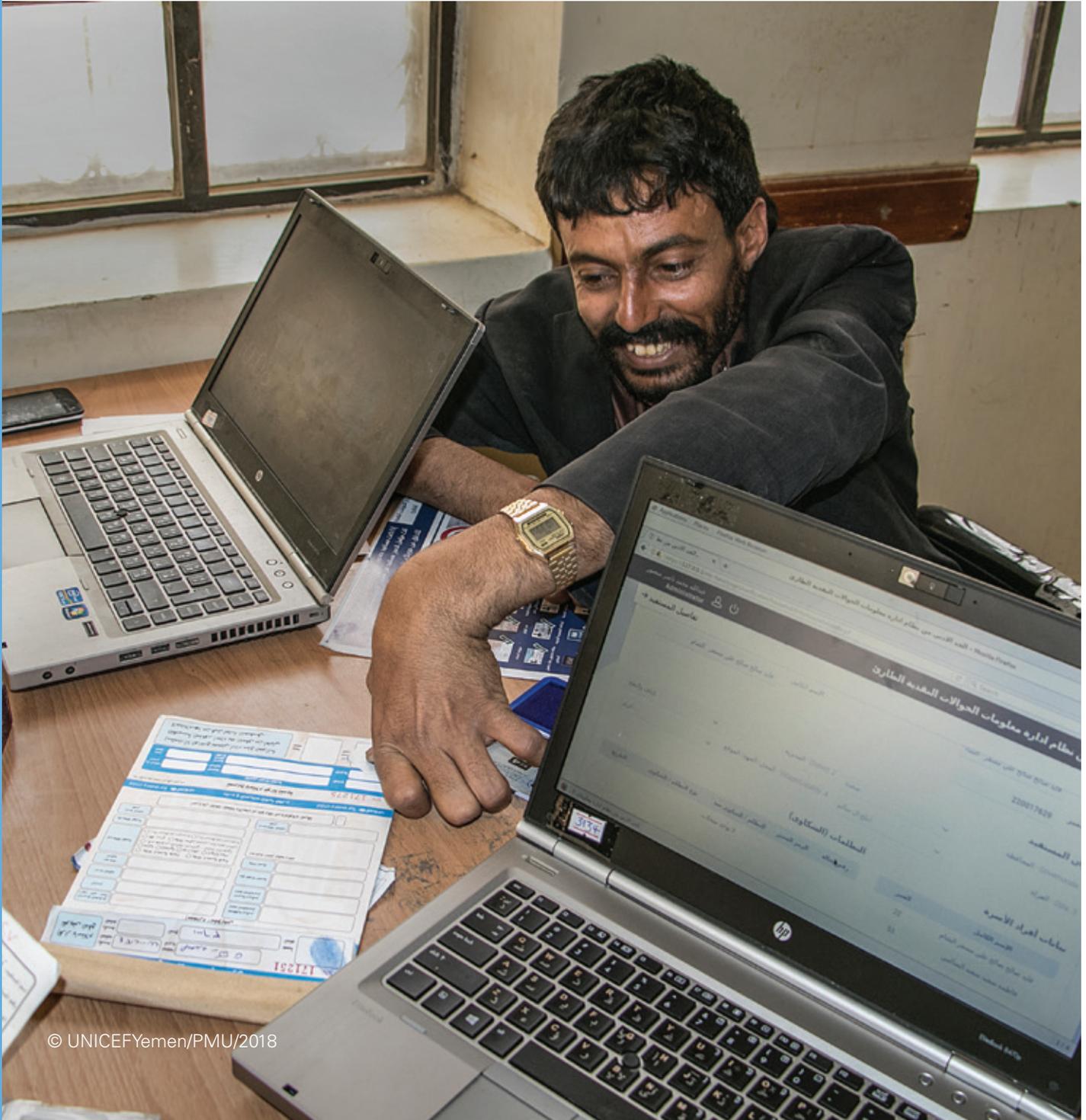


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Introduction



Introduction

In order to share learning from the COVID-19 pandemic, the Grand Bargain Cash Workstream Sub-Group on Linking Humanitarian Cash (HC) and Social Protection (SP)¹ has drawn up a series of case studies that offer practical examples of how actors in a range of different contexts have aligned or linked elements of existing and/or nascent humanitarian and social protection approaches in cash-based responses to the 2020 COVID-19 pandemic.²

Using concepts that have been captured in a combination of different theoretical frameworks, the case studies bring to life examples that show how a variety of stakeholders have linked different elements of HC and SP in COVID-19 responses and the successes and challenges faced in doing so.

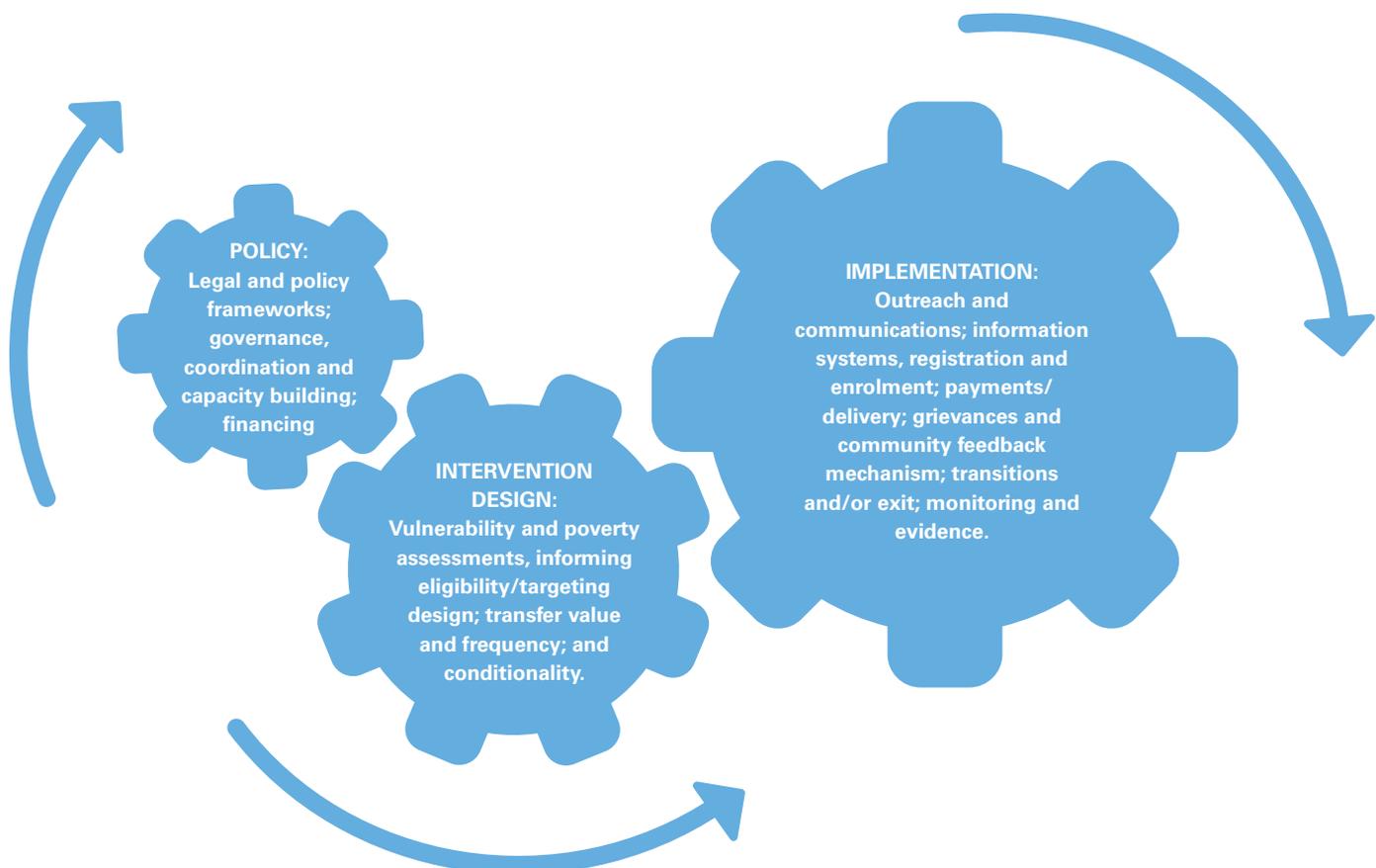
The case studies are organised around a combination of the humanitarian project cycle and the building blocks of the delivery chain.³ Learnings presented in this note have been drawn from

the experience of sub group member agencies in several different countries. These are presented as case studies and form a part of the annex of this synthesis note.

The case studies cover the following interlinked topics:

- **Policy:** Legal and policy frameworks; governance, coordination and capacity building; financing (Annex 1).
- **Intervention design:** Vulnerability and poverty assessments, informing eligibility/targeting design; transfer value and frequency; and conditionality (Annex 2).
- **Implementation⁴:** Outreach and communications; information systems, registration and enrolment; payments/delivery; grievances and community feedback mechanism; transition and/or exit; monitoring and evidence (Annex 3).

All the case studies intend to be concise and light-touch whilst also signposting readers to places where they will be able to find further information and detail on the issues covered that are of most interest to them. They were developed



1 This Sub-Group is co-lead by FCDO, IFRC and UNICEF.

2 The case studies were compiled by Lois Austin and Valentina Barca with the support of ACF, GIZ, ILO, Kenya Red Cross Society, Oxfam, Mercy Corps, Turkish Red Crescent, UNICEF, UNFPA, UNHCR, USAID, WFP and World Vision.

3 This builds on the “unbundled” framing introduced by Seyfert et al [here](#) and further developed by SPACE [here](#).

4 On this topic see also the recently published “Adaptive Social Protection: The delivery chain and shock response” document [here](#). Although not specific to COVID-19 interventions this document provides helpful detail on various elements of implementation.



throughout the pandemic and are therefore almost ‘live’ documents that would still benefit from further detail and depth, corrections and emerging learning. Each case study has been led by a different sub-group member agency, relying on key informant interviews and contributions from sub-group members and a review of relevant literature to inform their content.

This synthesis note shares the emerging learning and key messages derived from all case studies. It is organized around the topics of the case studies and includes overall learning for each of the three topics while at the same time presenting sub topic specific learnings.

Policy – Emerging Learning

Overall

- While social protection systems in the countries under consideration are still characterized by significant systemic gaps, the fact that they have been developing over time with the support of technical (both social protection and humanitarian) and financial partners involved in joint discussions, offers a strong foundation to enable large scale emergency cash transfer responses.
- Long-term, collective, centralized and decentralized efforts to advocate for developing and strengthening social protection systems, which are built on learning and inputs from humanitarian and development partners alike, are an essential starting point: the stronger and more institutionalized the social protection systems, the more links can be made with humanitarian cash approaches which will facilitate systems’ ability to be shock-responsive.
- Different models to link humanitarian cash to social protection systems can co-exist as long as they are well-coordinated, with humanitarian assistance being primarily used in times of crisis to address humanitarian needs that are not or cannot be covered by existing social protection systems (in terms of targeting criteria, objectives, caseloads, capacities, or the respect of humanitarian principles).

Legal and policy frameworks

- Legal and policy frameworks, as well as guiding principles, need to be reciprocally understood and abided by when working together in a more ‘linked’ way across sectors.
 - Formalizing this via specific Memoranda of Understanding, partnership agreements, SOPs, and joint operational manuals (even when partners do not provide funding but play a key role in decision-making

ing and or implementation) should be routinely considered.

- In the COVID-19 response, it has been critical to align short term emergency responses with medium to long-term national visions (embedded in policy and strategy) – while ensuring emerging learning is feeding into future policy priorities, ensuring sustainability over time. This has been easier to do where cooperation across sectors had already been embedded before the pandemic.
- In the medium to long-term, legal frameworks allowing for adaptability/flexibility of social protection schemes and defining contingency funding within national budgets are necessary to address unpredictable humanitarian needs through Social Protection systems when appropriate.

Governance, coordination, capacity

- At a strategic level, coordination between HC and SP stakeholders is needed to develop a common vision – with a distinct preference given to existing coordination mechanisms. This will facilitate the building of a coherent and systemic approach across sectors and will promote a full appreciation of the trade-offs involved in different options and negotiated compromises and approaches to jointly mitigate emerging risks. Any vision must include adherence to standard humanitarian principles.
- Operationally, coordination is required to support a joint understanding of poverty and vulnerability (via data collection and analysis/assessments), system interoperability, harmonized programme design and avoiding duplication and gap filling.⁵
- Coordination between humanitarian and social protection stakeholders in the COVID-19 response was particularly strong where strong relationships and trust had been built before the shock.
 - All relevant sectors should consider investing in coordination and alignment mechanisms (including potentially funding explicit coordination positions) in the medium-term that enable the linkage between HC and SP systems, without diverting lifesaving resources from their purpose.
 - Consider that different levels of definition of partners’ roles and responsibilities and governance might be required, ranging from flexible to more structured with stronger definition, depending on the context, caseload and scope of the response, timeframe and relationship between partners.
- A common ‘success factor’ was a joint focus on ultimate outcomes (supporting those in need), leveraging the strength of each humanitarian assistance and social protection systems and creating a coalition of allies working towards a common goal.

5 Adapted from State of the World’s Cash 2020 (Social Protection section).



- Consider developing collaborative models operating as a single team and using single approaches and systems. These clearly offer potential efficiency, effectiveness and accountability gains, particularly in contexts characterized by small or medium response, and high operational costs.
- Consider extending the collaborative network to ensure that all those in need of increased support are involved e.g. representation of workers and employers' organizations (including informal workers) and other civil society groups.
- Building on learning from HC experience, consider developing public-private partnerships with IT and mobile phone companies to reduce the delivery costs.
- Having government leadership fulfilling its role in relation to SP coordination has also helped to align and enhance coordination across several non-government actors.
 - Where this is feasible and appropriate (e.g. government not party to conflict), consider a governance model whereby the government has a central role in decision-making and coordinating development and humanitarian partners. This model would need to take into account the different models of humanitarian/SP linkage based on contextual specificities.

Financing

- Routine SP funding and humanitarian funding are raised very differently and have different constraints on their use, posing opportunities and challenges in terms of 'linkages'. When addressing humanitarian needs in different humanitarian response settings and of various scales, diversified, layered and flexible funding might be an advantage. Lessons emerging from the COVID-19 responses are pointing towards creative approaches to maximize funding by leveraging funding across sectors and pooling or aligning investments to the extent possible (e.g. addressing different caseloads in a coordinated way).
- In both cases, close donor-government relationships due to long term support to the national social protection system made it easier for existing budget funding to be repurposed to fund a shock response including supporting caseloads in locations to which humanitarian actors have access – and new funding leveraged (progressively mobilizing additional resources thanks to trusted relationships and government ownership).
- The experiences recounted are still far from a fully 'joined up' (comprehensive and integrated) approach to costing and financing an emergent shock across sectors (e.g. beyond individual programmes) – as well as financing future preparedness. However, the evidence reviewed here demonstrates that flexible funding combined with strong SP coordination structures and relationships can lead to a more cost-efficient and timely scale-up to address the emergency than starting anew.

Intervention Design – Emerging Learning

Overall

- None of the collaborative approaches discussed in this case study result in rapid change (or rarely so). Linking HA (Humanitarian Action) and SP systems often takes several years, based on the establishment of continued and positive relationships between humanitarian actors and government stakeholders.
- Coordination plays a major role in ensuring alignment, sharing and/or mutual learning across sectors on this topic: both HA and SP agencies are often tied to their own established systems and cautious or simply unaware of others that are designed for similar purposes. Sharing and demystifying each other's approaches is an important first step. Advocacy and negotiation can play a role in this process, together with pilots, contributing to building an evidence base. Practice shows that steps such as integrating humanitarian staff into government social protection departments to help to understand each other's systems and approaches can result in positive impacts. Having information systems across sectors that can 'speak to each other' (share data and analysis – even if not fully interoperability) can also provide opportunities for alignment if designed to address risks that emerge.
- Even in the short term, such as in the COVID-19 response, a long-term perspective is needed (act short term, think long term) to think through how short term 'fixes' can inform/strengthen social protection systems over time.
- Having clarity on the joint outcomes that HA and SP actors are collectively trying to achieve can be useful to enhance coordination, for example in relation to effective 'coverage' of those affected/in need and 'adequacy' of that coverage.

Vulnerability and poverty assessments, informing eligibility/targeting design

- The different approaches to defining, measuring and interpreting vulnerability and poverty across humanitarian and social protection sectors – reinforced by different mandates – has historically led to different programmatic decisions on who should receive the benefit (targeting design). The more joined-up these processes can become, the better – to avoid overlaps and, most importantly, gaps (who is falling between the cracks).
- To maximize coverage and inclusion of those in need across programmes and fill gaps, approaches to assessing poverty and vulnerability - informing targeting within social protection and the wider humanitarian response - can be jointly discussed, and strategies aligned: who is currently being covered, how approaches could be aligned, who is likely to be left out, and how additional caseloads could be covered



complementarily. A detailed assessment thus needs to take into account the socio-economic conditions and other needs (such as medical needs). Targeting should consider not only household vulnerability but other vulnerability factors (gender, social status, immigration status, disability).

- There is a clear need for stronger coordination and communication between the several governmental actors involved in the response to a crisis such as COVID-19, to streamline response activities and target the most vulnerable. The silo-mentality of many concerned governmental agencies hinders cooperation even in times of crisis and leads to fragmented and selective response actions.
- “Working together” can be operationalized in many different ways, depending on country context and the capacities/strengths of HA and SP stakeholders in-country.

Examples include:

- *intentionally coordinating and complementing each other’s caseloads (focusing on different needs, by design)*, especially regarding a) migrant/refugee/IDP caseloads; b) conflict-affected areas of a country where government social protection systems may have less reach; c) urban areas where government programmes often have low coverage.
- *aligning criteria and methodologies for defining needs/vulnerability and informing eligibility/targeting*. While these do not necessarily need to be the same (as each is designed for a different objective), there is a value in alignment/harmonization as it can support scaled-up programming and facilitate referrals across sectors. Robust and shared assessment methodologies that are grounded in empirical evidence can ensure buy-in from humanitarian and social protection actors alike.
- *sharing and working off the same criteria and data to inform eligibility decisions*. This starts with coordination efforts to bring those who have developed different tools to assess vulnerability/poverty together, to reflect on where information/data already exists, and where they overlap and/or complement - to avoid duplication and enhance synergies.
- *capacity building, the promotion of good governance and provision of technical assistance to inform short/medium/longer-term approaches to social protection eligibility determination, increasing the focus on vulnerability (beyond chronic poverty) and addressing exclusion by-design*. Humanitarian and development stakeholders have significant expertise that can be combined to help facilitate more strongly linked HCT and SP interventions that are inclusive and needs-based.
- Achieving this is not always easy of course and can be compromised by many factors including high staff

turnover, short funding cycles, actors being tied to their own established systems (without trusting others that may be as good if not better), disincentives for sharing data and systems as well as legitimate fears over data protection.

- In the *long term*, strategies for joint engagement may vary, focused on helping to build a social protection system that is ‘risk-informed’: ensuring routine eligibility criteria and qualifying conditions (across the range of social protection programmes on offer) are based on a solid understanding of the risks, shocks and stressors that a country and its regions typically face.

Transfer value and frequency

- Although not covered in detail in the case study a challenge has been that the transfer value under national social safety nets is often insufficient to cover basic needs, especially in a crisis such as COVID-19. This conflicts with the approach that humanitarian agencies take to defining appropriate transfer values. Strategies have therefore focused on coordinating efforts and ‘harmonizing’ but not necessarily ‘homogenizing’ transfer values.

Conditionality

This topic was not explicitly addressed in the current case studies. However, it is worth referring to the literature highlighted in case study 2 for relevant insights.

Implementation – Emerging learning

Overall⁶

- When linking is undertaken from the perspective of aligning humanitarian cash with social protection, to ensure that the potential to ultimately contribute to building national SP systems remains feasible, operational design decisions need to be informed by discussions with government social protection actors and development partners. If HCT approaches, linking to SP systems, are designed to be transferrable to the government, the design should be appropriate to the operational and technological context and existing capacities and include a plan for how this transfer will be supported.
- Technically, linking different systems can be challenging, particularly in the absence of clearly defined roles and

6 A number of emerging lessons have benefitted from the analysis included in the SPACE document: Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response.



responsibilities from the outset. Establishing a 'technical working group' (or leveraging existing coordination forums) to facilitate and better understand the potential for linking HCT and SP information systems could support more robust linking processes.

- Whatever the situation, practical options for 'linking' will strongly depend on the strength of specific existing systems for each sector. Sharing information on what capacity, data, and systems exist at each stage of the 'delivery chain' or 'project cycle' and how those could be leveraged will be a critical starting point, without starting from the assumption that one 'system' is stronger than the other as a whole. Breaking it down is more useful.
- Think of 'linkages' as developing collaborative models which operate as a 'single team' and using joint or aligned approaches and systems.
 - Focus on potential efficiency, effectiveness and accountability gains, particularly in contexts characterized by small or medium responses, and high operational costs.
 - Also, focus on the trade-offs of working jointly and how those can be mitigated.
 - Recognize In some contexts it will not be possible for humanitarian systems to work with all the social protection operational processes and systems and some parallel processes may still be needed. For example, where SP systems are inaccessible for humanitarian agencies and the need to implement a rapid cash-based response necessitates using humanitarian agency own systems.

Outreach and communications

- Strong outreach and communications are critical to successful programming – and leaving no-one behind – in both sectors. There is a particular need for collaborative work on this as: a) the social protection sector does not always take a comprehensive and coherent approach to outreach and communications (these are often under-budgeted); b) the sector does not have experience communicating in emergency settings (e.g. tailoring to the needs of new caseloads and the complexities of emergency situations).
- How this is operationalized can vary, including the following options for humanitarian practitioners:
 - leveraging HCT capacities and systems to share messages relating to social protection responses.
 - aligning key messages across government social protection and humanitarian programmes, to the extent possible.
 - providing technical support and capacity to ensure inclusive and accountable outreach approaches (focused on leaving no-one behind and catering to the needs of new caseloads).

- layering further behavioral change messaging into the communications strategy – working alongside Government actors from the social protection sector and beyond.
- There is also a lot of potential for leveraging government social protection structures (local offices, social workers) to communicate in emergencies, as these are trusted actors.
- More generally, the COVID19 responses have further reinforced the importance of ensuring 'outreach' goes beyond initial awareness-raising, becoming a continuous action throughout linked HC/SP interventions and providing consistent messaging on all aspects of programme design and implementation. It has also showcased some useful experiences of multi-channel messaging, which allow recipients to communicate directly with implementors, and other technology-driven approaches to communicating (without removing more traditional approaches, most appropriate for some audiences).

Information systems, registration and enrolment

- When responding to a shock, the selected approach to registration and enrolment (and how an underlying information system is set up to support this) is just as important as the setting of eligibility criteria and targeting design in terms of impacting targeting *outcomes*. In fact, with COVID-19 (and other shocks before it), social protection targeting design was often highly impacted by what was ultimately feasible to implement. This is where the opportunities in terms of 'linkages' emerge, to help fill reciprocal capacity, financing, data and other gaps.
- In the COVID-19 response, linkages across HCT and SP analyzed within this case study took two main shapes:
 - leveraging each other's data to *inform* registration – making sure any new data collected is coordinated with the national information system. The result of coordination and joint systems-building process over time, including significant efforts to address emerging data protection concerns and other risks emerging from data-sharing.
 - supporting *new registration and/or validation* efforts (including via dedicated capacity and the sharing/creation of tailored software) to fill-in data-gaps, feeding those into the national social protection information system.
- Over time, capacity for rapid registration, while ensuring accountability to affected populations and safeguarding, can be built.
- As humanitarian actors aiming to support social protection systems, working on 'linking' underlying information systems is increasingly seen as a crucial area of action going forwards, yet one that requires considerable analysis.



Payments/delivery

- The capacity of social protection delivery systems/partners (and their payment service providers) to be able to provide payments and adapt payment schedules for the COVID-19 response varies widely depending on the strength of routine systems and the broader country context/preparedness. The social protection response worldwide has taken many different and innovative approaches to providing payments to new caseloads. Any HC decision on 'linking' has to be based on an understanding of existing social protection payment systems to inform choices as to the *extent* to 'align' and *how* to do this most effectively.
- Depending on these factors HC-SP 'linkages' could be operationalized in different ways. For example:
 - HC actors supporting government responses with complementary capacity (including capacity building), expertise (technical assistance) and guidance.
 - where existing government capacities are high yet overwhelmed by the scale of the response, providing HC support to specific populations in close alignment with government counterparts – testing innovative payment solutions and sharing learning with SP actors over time.
 - where the existing foundations for digital payments are less solid (e.g. posing fiduciary risks), HC actors can play a direct role in contracting and managing financial service providers for social protection responses (to ensure accountability).
 - Over time, it is critical that short term decisions feed into longer-term strategic outcomes. For example, even if parallel/aligned, HC support can act as 'proof of concept' and 'appraisal' of electronic payment systems, informing long term programming decisions in the SP sector. HC actors can also play a role in advocating and negotiating with financial service providers.

Grievances and community feedback mechanisms

The case study was not able to gather significant evidence on HCT/SP 'linkages' concerning grievances and community feedback. Nevertheless, there is a clear rationale for complementarity, capacity building and lesson-sharing to ensure accountability to affected populations. What did emerge was that working together, HC and SP actors can raise the level of protection for vulnerable households, rather than introducing the potential for people to fall between the cracks.

Transition and/or exit

- The issue of transition and/or exit is critical and one that challenges both HC and SP actors, with many unresolved questions to date. The COVID-19 crisis has exacerbated

the issue: the coverage of emergency support has been very high globally (meaning the scale of potential transitioning/exit is unprecedented), while the prolonged recession that is a direct result of the pandemic has emphasized the need for ongoing rather than one-off support to affected households.

- In terms of HCT/SP 'linkages', working together in the medium-term will require a joint effort to transition humanitarian caseloads that are still in need of ongoing support into government systems, where relevant and possible (this may prove more complex for refugee caseloads).
- In the prolonged COVID-19 recession it will be important to start thinking of transition strategies from emergency and humanitarian cash transfers towards income support and/or emergency public works schemes in connection with social partners (employers and workers representatives) and labour market institutions. For certain sections of the population, economic inclusion programming alongside government counterparts could be considered.

Monitoring and evidence

Given that many COVID-19 interventions are still being developed, not enough examples were found within the case study to draw any meaningful lessons/conclusions on this topic. Nevertheless, it is critical that monitoring and the collection of evidence cuts across both HCT and SP to ensure progress against joint outcomes is comprehensively captured. Government capacity to achieve this could be supported by HCT actors e.g. via capacity-building (for example with data analysis) and sharing of processes/systems (e.g. approaches/tools, indicators, software, etc.). Separate monitoring activities can also be implemented to fill gaps in data without overburdening the existing social protection system.



Annex 1

CASE STUDY 1:

The role of policy in creating the conditions of Humanitarian Cash and Social Protection linkages





1. Policy

1.1 Introduction

This case study from the series is co-led by **ILO** and **UNICEF** with contributions from **ACF**, **Oxfam**, **USAID** and **WFP**. It looks at the opportunities and challenges from a policy perspective in Ethiopia, Haiti, Madagascar and Nigeria.

Additional information on the countries referenced in this case study can be found in Annex 4.

1.2 Legal and Policy Frameworks

Countries' legal and policy frameworks outline governments' statements of intent and sectoral priorities, providing the legal authority for institutions to carry out their tasks and responsibilities whether it is to respond to the humanitarian crisis or to alleviate poverty. For the SP sector, many countries have strategy and policy documents setting out the medium-long term objectives of the system, as well as who the key rights and responsibility holders are.⁷ These are often operationalized through regulations, agreements, and standard operating procedures (SOPs). This is also the case for **Humanitarian assistance with disaster response and human rights framework, not only as it is guided by different legal frameworks depending upon the crisis, but also because it can include international humanitarian law and refugee law, as well as internationally established humanitarian principles.**

Legal and policy framework provides the regulatory framework for national or humanitarian agencies to carry out their tasks and responsibilities and need to be reciprocally understood and abided by when working together in a more 'linked' way⁸ - sometimes formalized via specific Memoranda of Understanding, partnership agreements, letters of intent, and SOPs.

In the COVID-19 response, it has been critical in many humanitarian operating environments to align short term emergency responses with medium-term national visions – while ensuring emerging learning is feeding into future policy priorities, ensuring sustainability over time whilst simultaneously addressing **immediate pandemic-related needs.** For example:

- In **Madagascar**, social protection is fragmented with expenditures spread across small-scale, isolated, and low impact programmes, underpinned by a new National

Social Protection Strategy (NSPS) for 2019-2023 and a new National Employment Policy. Based on prior strong collaboration between humanitarian and social protection actors (e.g. focused on drought response), the Cash Working Group (CWG) – under the joint leadership of the Ministry of Population, Social Protection and Promotion of Women (MPPSPF), the National Office of Risk and Disaster Management (BNGRC) and UNICEF (co-lead for the development partners) – has coordinated the elaboration of a national cash emergency response to the COVID-19, aligned with this vision: *Tosika Fameono* (filling the gap). The strategy has been led by the MPPSPF and implemented jointly by the Government with the support of UNICEF and the World Bank who have channeled their funds through the "Fonds d'Intervention pour le Développement" (FID), a national agency implementing social protection programmes. Owing to limited logistical capacities in FID, humanitarian/development partners including WFP, UNDP and INGOs have directly implemented their (aligned) response.

Having one unique strategy aligned with the Government strategy helped humanitarian actors progressively mobilize additional resources and join together new partners aligning with the national strategy in the subsequent months (for example, CRS and the Madagascar Red Cross). There were also benefits in terms of **timeliness**, with the first payment made four weeks after the beginning of the lockdown: extremely fast considering that no cash transfer or social registry existed in urban areas before the pandemic. Importantly from a 'sustainability' perspective, insights from this process are feeding into policy priorities moving forwards, including joint work on a 'national recovery strategy'.

In another example, an adaptation of a pre-COVID-19 national manual to coordinate the response of humanitarian and social protection actors that was developed under UNICEF's leadership in 2019 (focused on drought response) is now being adjusted for other types of crisis (including epidemics and cyclones).

- In **Ethiopia**, USAID has supported the evolution of the Ethiopian Productive Safety Net Program (PSNP) since its beginning in 2005. The Fourth PSNP (2014-2020) has an objective to increase access to safety net and disaster risk management systems, complementary livelihoods services and nutrition support for chronically food-insecure households in rural Ethiopia. This established relationship and the PSNP's shock responsive contingency budget facilitated the pivoting, adapting and negotiating of the alignment when linking humanitarian assistance with SP. In April 2020, USAID began a review and rapid approval process for pivots of existing awards to cover some of the

7 If social protection plays a role in shock response (alongside disaster risk management institutions), this is reflected within these documents and frameworks.

8 These paragraphs draw on [TRANSFORM's Shock Responsive Social Protection Module](#).



financing needs for the roll-out of the Ethiopia “COVID-19: National Emergency Response Plan” through the PSNP. By the end of April, over 2.4 million USD was pivoted through 4 of BHA’s cooperative agreements to respond to the emerging humanitarian needs of the 1.3 million PSNP clients already supported by USAID via the SP platform with new programming.

- **Haiti** provides another example of the importance of long-term investment in capacity strengthening. Here, WFP’s involvement in providing technical support for the country’s National Social Protection and Promotion Policy (NSPPP) since 2017 (and previous work to support the development of the government’s vulnerability database since 2013), has laid the groundwork for the adoption of the policy in June 2020. When the COVID-19 pandemic reached Haiti, the NSPPP, which aims to consolidate existing social protection programmes into a coherent institutional system with expanded coverage, provided an institutional framework that enabled social protection efforts to be adapted to respond to the pandemic. Factors that facilitated the provision of technical support by WFP include its long-term presence in the country and its multi-disciplinary team of staff with experience across economics, social protection, capacity strengthening, and policy development, positioning them as a key resource for government. There was strong collaboration with donors and government partners, including the creation of the social protection stakeholder coordination group early in the policy development process and this was critical.

1.3 Governance, coordination and capacity building

The issues of governance, coordination and broader capacity building are linked to policy and strategy.

In all the examples reviewed, inter-sectoral coordination and governance in the COVID-19 response were particularly strong where long-term relationships and trust had been built over time – before the shock. The ways in which governance was operationalized vary depending on country context, with the common ‘success factor’ being a joint focus on ultimate outcomes (supporting those in need), leveraging the strength of each sector. Having government leadership in the ‘driver’s seat’ has also helped to align and enhance coordination across several non-government actors. For example:

- As touched on above, in **Madagascar** social protection has gained increased support from development partners in recent years (UNICEF, WHO, WFP, ILO, World Bank, GIZ, INGO). To provide a coordinated social protection response to COVID-19, the CWG was set up under the leadership of the Government (the Ministry in charge of SP and the national agency for disaster risk management), with the facilitation of UNICEF and with additional technical support

from WFP and the World Bank. This ensured the ability to develop a unified social protection strategy, jointly validated by the government and its partners. Such coordination was not effortless, although weekly meetings of the CWG ensured continuous dialogue and coordination in each step of intervention, design and implementation.

As a result, the distribution of cash assistance to vulnerable households under the new ‘*Tosika Fameno*’ initiative began just four weeks after the Government of Madagascar had declared the need for a temporary safety net to support vulnerable households whose income and food security had been affected by the containment measures put in place to combat the spread of the coronavirus in ten major cities: Antananarivo, Moramanga, Toamasina and Fianarantsoa. The record-breaking speed with which this safety net was designed and implemented is impressive considering that this was the first time Madagascar implemented a social protection programme in an urban environment.

It is worth noting that the rapid collaborative effort (SRSP pilot, development of operational manual, MoU etc.) led by UNICEF through the CWG, built on earlier work to strengthen inter-agency coordination for shock-responsive social protection responses in the country. In 2018, the Prime Minister, with technical support from WFP, UNICEF and the World Bank, convened partners to explore the relevance of the national social protection system to shock response and develop a roadmap for harmonizing the work of various stakeholders including government bodies, UN agencies, international financial institutions and NGOs. The roadmap stood its ground, when drought hit southern Madagascar in 2019, pushing 900,000 people into crisis levels of food insecurity. UNICEF together with WFP, the World Bank, and FID, assisted the Ministry of Population to expand the national social protection system in response to the drought. Following the success of the social protection drought response (in terms of adequacy, timeliness and cost-effectiveness), WFP assisted in the drafting of a memorandum of understanding between the Ministry of Population and the National Office for Risks and Disasters Management and provided technical support to the development of standard operating procedures outlining roles and responsibilities in delivering an emergency response through the national social protection system. These same agreements and procedures laid the foundation for the synergetic urban social protection response to COVID-19.

- In **Ethiopia**, several different forms of coordination between government, donors, humanitarians and SP actors have been strengthened in response to the pandemic.
 - The PSNP has a robust donor coordination platform and NGO framework that pre-dates the pandemic, which provides fora for the GoE, the World Bank, donors, and direct implementer safety net NGOs supported by USAID to come together and discuss operational issues.



- Together with social protection partners, the government has an established National Social Protection Platform to develop social protection policies and strategies. To implement the “COVID-19: National Emergency Response Plan”, the PSNP Donor Coordination Team (DCT) enabled coordination between donors, but also between the SP platform and humanitarian aid (HA) and implementing partners as part of the Humanitarian International NGO network (HiNGO) and the Social Protection Working Group.
- The Collaborative Cash Delivery Network (CCD) has been actively involved in promoting coordination mechanisms between humanitarian cash and voucher assistance (CVA) actors and social protection government departments.
- On top of this, USAID launched new urban HA programming that worked in parallel and in coordination with the Government of Ethiopia (GoE)’s national, rural and urban safety net programmes. Despite very strong coordination, when the expansion of humanitarian assistance within the social protection programme was not appropriate, nor feasible, it demonstrated that parallel but coordinated humanitarian assistance is still necessary for a timely, scaled, appropriate, needs-based and humanitarian principles-driven response.
- At the same time humanitarian implementing partners like Save the Children, USAID’s largest cash transfer partner for the COVID-19 response, signed SOPs to coordinate with the GoE urban safety net programme and continued to participate in the standing coordination platforms.
- In **Nigeria**, despite an overall lack of coordination (especially across federal, state and local government levels) and very clear gaps emerging in terms of routine social protection systems, important progress was made in the North East. Here, the work of ACF provides an example whereby consistent **advocacy efforts** since May 2018 with the Abuja Cash Working Group to ensure that recipients of humanitarian cash could ultimately be linked to the state social protection system resulted in the creation of an HCT-SP Task Team comprised of donors, UN agencies, INGOs, the National Social Safety Nets Coordinating Office (NASSCO), National Cash Transfer Office (NCTO), the Federal Ministry of Budget and National Planning (MBNP) and the Office of the Special Adviser to the President on Social Investments. During the pandemic, the results of this sustained advocacy effort have seen the government asking ACF to assist in reaching recipients that were previously unregistered, with the aim that they will transition into the formal SP system in the future. Similarly, the ILO with EC/DEVCO is supporting NASSCO to strengthen and expand the National Social Registry (NSR) as a shock-responsive social protection system,

designed primarily to increase access to social assistance for the extreme poor affected heavily by the pandemic.

- Recognizing that much of the discussion in the humanitarian/social protection space has focused on how governments can scale-up their systems during crises, there has been less operational focus on what humanitarian implementing NGOs should do. Realizing the importance of engaging with social protection actors, a group of 15 NGOs collaborating on delivering humanitarian cash created the Collaborative Cash Delivery (CCD) Network to improve the delivery of humanitarian cash. From the start, a social protection working group for the network was established to explore the challenges of engaging with social protection in humanitarian work. Key challenges for the group included:
 - How to ensure the humanitarian principles of impartiality and independence when engaging with governments to support delivery and improved social protection.
 - How humanitarian cash interventions engage with social protection on the ground and how do operational teams explore this.
 - What key roles NGOs can play to strengthen the effectiveness and accountability of social protection, to benefit those most in need.

The CCD has adopted a threefold approach: (i) To articulate and demonstrate their contribution to this area of work to ensure that organizational priorities around the inclusion of affected people and their differing needs are recognized as the broader agenda of social protection/humanitarian linkages moves forwards. (ii) To build technical capacity within CCD organizations to identify, implement and strengthen linkages between cash programming and social protection to improve humanitarian impact on the ground. (iii) To create space at the discussion table for civil society and NGOs to engage in the discussions from national to international level about linking humanitarian response and social protection and in all this, to show how as a group of INGOs there is a common approach.

1.4 Financing

Routine SP funding and humanitarian funding are raised very differently and have different constraints on their use, posing both opportunities and challenges in terms of ‘linkages’. Lessons emerging from the COVID-19 responses are pointing towards creative approaches to maximize funding by leveraging funding pots across sectors and pooling or aligning investments to the extent possible (e.g. addressing different caseloads in a coordinated way). For example:

- In **Madagascar**, the expansion of social assistance programmes under FID received funding from the World Bank and UNICEF (e.g. UNICEF repurposed 500,000 USD from its routine funding). Other UN agencies (WFP, UNICEF, UNDP), the European Union through NGOs (ACF, CARE,



SOS Village d'Enfants, Humanity and Inclusion) and the Red Cross (through the IFRC) – coordinated via the CWG – **mobilized and pooled humanitarian funds** through other channels to **complement the Government response** for an overall envelope of 14 million USD, aligned to the country's National Social Protection Strategy (NSPS).

- **In Ethiopia**, the Government's PSNP pooled resources from 11 donors before the pandemic, with an increasing number of resources from the GoE. By the end of April 2020, USAID pivoted resources worth 2.4 million USD from existing awards to cover some of the new financing needs for COVID-19, which was more cost-efficient and timely than scaling up new emergency activities. However, despite the pivoting and adaptation of the existing SP platform, there were limitations in the SP platform's capacity, budget and level of flexibility to expand to address new, urgent humanitarian needs that led USAID to launch a parallel, but coordinated, FY 2020 HA programme with an additional 15 million USD⁹ to address COVID-19 needs across multiple sectors from food security to WASH. The Ethiopian government with the ILO is implementing a further emergency cash transfer programme of 4.5 million USD as income support to some 45,000 workers in the garment sector who have been adversely affected by the pandemic. This was funded by the Federal Ministry for Economic Cooperation and Development (BMZ). Other donors are expected to contribute to that call.

In both cases, close donor-government relationships, due to long term support to the national social protection system, made it easier for funding within existing budgets to be repurposed to fund a shock response. Additionally, new funding that was leveraged was able to be linked to the government programme due in part to trusted relationships and government ownership.

1.5 Policy – Emerging Learning

Overall

- While social protection systems in the countries under consideration are still characterized by significant systemic gaps, the fact that they have been developing over time with the support of technical (both humanitarian and SP) and financial partners involved in joint discussions, offers a strong foundation to enable large scale emergency cash transfer responses.
- Long-term, collective, centralized and decentralized efforts to advocate for developing and strengthening social protection systems, which are built on learning and inputs from humanitarian and development partners alike, are an

essential starting point: the stronger and more institutionalized the social protection systems, the more links can be made with humanitarian cash approaches which will facilitate the systems' ability to be shock-responsive.

- Different models to link humanitarian cash to social protection systems can co-exist as long as they are well-coordinated, with humanitarian assistance being primarily used in times of crisis to address humanitarian needs that are not or cannot be covered by existing social protection systems (in terms of targeting criteria, objectives, caseloads, capacities or respect of humanitarian principles).

Legal and policy frameworks

- Legal and policy frameworks, as well as guiding principles, need to be reciprocally understood and abided by when working together in a more 'linked' way across sectors.
 - Formalizing this via specific Memoranda of Understanding, partnership agreements, SOPs, and joint operational manuals (even when partners do not provide funding but play a key role in decision-making and/or implementation) should be routinely considered.
- In the COVID-19 response, it has been critical to align short term emergency responses with medium to long-term national visions (embedded in policy and strategy) – while ensuring emerging learning is feeding into future policy priorities, ensuring sustainability over time. This has been easier to do where cooperation across sectors had already been embedded before the pandemic.
- In the medium to long-term, legal frameworks allowing for adaptability/flexibility of social protection schemes and defining contingency funding within national budgets are necessary to address unpredictable humanitarian needs through Social Protection systems when appropriate.

Read more:

- TRANSFORM (2020) [Shock Responsive Social Protection Module, section 3.3](#). See also the [foundational 'Legal Frameworks' Module](#).
- World Bank (2020) [Adaptive Social Protection, Chapter 4](#).
- UNICEF (2019) [Programme Guidance: Strengthening Shock Responsive Social Protection Systems](#), Chapter 3
- O'Brien et al. (2018) Shock Responsive Social Protection Systems Toolkit, [Section C3 'The institutional environment'](#).

9 The 15 million USD in COVID IDA, provided to implementing partners.



Recommendations: Governance, coordination, capacity

- At a strategic level, coordination between HCT and SP stakeholders is needed to develop a common vision – with a distinct preference given to existing coordination mechanisms. This will facilitate the building of a coherent and systemic approach across sectors and will promote a full appreciation of the trade-offs involved in different options and negotiated compromises and approaches to jointly mitigate emerging risks. Any vision must include adherence to standard humanitarian principles.
- Operationally, coordination is required to support a joint understanding of poverty and vulnerability (via data collection and analysis/assessments), system interoperability, harmonized programme design and avoiding duplication and gap filling.¹⁰
- Coordination between humanitarian and social protection stakeholders in the COVID-19 response was particularly strong where strong relationships and trust had been built before the shock.
 - All relevant sectors should consider investing in coordination and alignment mechanisms (including potentially funding explicit coordination positions) in the medium-term that enable the linkage between HA and SP systems, without diverting lifesaving resources from their purpose.
 - Consider that different levels of definition of partners' roles and responsibilities and governance might be required, ranging from flexible to more structured with stronger definition, depending on the context, caseload and scope of the response, timeframe and relationship between partners.
- A common 'success factor' was a joint focus on ultimate outcomes (supporting those in need), leveraging the strength of each humanitarian assistance and social protection systems and creating a coalition of allies working towards a common goal.
 - Consider developing collaborative models operating as a single team and using single approaches and systems. These clearly offer potential efficiency, effectiveness and accountability gains, particularly in contexts characterized by small or medium response, and high operational costs.
 - Consider extending the collaborative network to ensure that all those in need of increased support are involved e.g. representation of workers and employers' organizations (including informal workers) and other civil society groups.
 - Building on learning from HCT experience, consider developing public-private partnerships with IT and mobile phone companies to reduce the delivery costs.

- Having government leadership fulfilling its role with Social Protection coordination has also helped to align and enhance coordination across several non-government actors.
 - Where this is feasible and appropriate (e.g. government not a party to conflict), consider a governance model whereby the government has a central role in decision-making and coordinating development and humanitarian partners. This model would need to consider the different models of humanitarian/ SP linkage based on contextual specificities.

Read more:

- See some of the documents cited in the legal and policy frameworks section above as they are also relevant here.
- To understand the challenges of routine social protection coordination, see the TRANSFORM [coordination](#) and [Governance](#) modules.
- [CALP \(2020\) Tip sheet](#) for cash working groups (CWG) and inter-cluster coordination groups (ICCG) on supporting the linkages between humanitarian cash and voucher assistance and national social protection systems.
- SPaN [Operational Note N.3: Stakeholders](#) (plus tackled in the body of the main report too)
- Shock Responsive Social Protection Systems Toolkit, [Section D6 Coordination](#).

Financing

- Routine SP funding and humanitarian funding are raised very differently and have different constraints on their use, posing opportunities and challenges in terms of 'linkages'. When addressing humanitarian needs in different humanitarian response settings and of various scales, diversified, layered and flexible funding might be an advantage. Lessons emerging from the COVID-19 responses are pointing towards creative approaches to maximize funding by leveraging funding across sectors and pooling or aligning investments to the extent possible (e.g. addressing different caseloads in a coordinated way).
- In both cases, close donor-government relationships due to long-term support to the national social protection system made it easier for existing budget funding to be repurposed to fund a shock response including supporting caseloads in locations to which humanitarian actors have access – and new funding leveraged (progressively mobilizing additional resources thanks to trusted relationships and government ownership).
- The experiences recounted are still far from a fully 'joined up' (comprehensive and integrated) approach to costing and financing an emergent shock across sectors (e.g.

10 Adapted from State of the World's Cash 2020 (Social Protection section).



beyond individual programmes) – as well as financing future preparedness. However, the evidence reviewed here demonstrates that flexible funding combined with strong SP coordination structures and relationships can lead to a more cost-efficient and timely scale-up to address the emergency than starting anew.

Read more:

- To better understand ‘routine’ social protection financing approaches and challenges see: [TRANSFORM Base Doc Finance and Ortiz et al \(2017\) Fiscal Space for Social Protection and the SDGs: Options to Expand Social Investments in 187 Countries](#).
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.4](#).
- SPaN Guidance (2019) - [Operational Note 5: Integrated Financing](#).
- World Bank (2020) [‘Adaptive social protection’ Chapter 3](#).
- O’Brien et al (2018) [Shock Responsive Social Protection Systems Toolkit, Section C6 ‘The financial/budgetary context’ and D1 ‘Finance’](#).
- SPACE (2020) [Value for Money](#) in the COVID 19 response.
- Also, see several COVID-19-specific resources within the “Financing: section of [SPACE Useful COVID-19 and Social Protection Materials](#).



Annex 2

CASE STUDY 2:**Designing linked Humanitarian Cash and Social Protection interventions in response to COVID-19**



2. Intervention Design

2.1 Introduction

This case study has been co-led by Save the Children and Lois Austin (Grand Bargain Sub group KML consultant) with additional contributions provided by **GIZ, Mercy Corps, Oxfam, the Collaborative Cash Delivery network (CCD), UNFPA and UNICEF**. The focus countries in this study include **Bangladesh, Iraq, Jordan, Libya, Niger, the Philippines**. References are also made to **Kenya, Mali and Pakistan**. Additional information on the countries referenced in this case study can be found in Annex 4.

2.2 Vulnerability and poverty assessments, informing eligibility/targeting design

The different approaches to defining, measuring and interpreting vulnerability and poverty across humanitarian and social protection sectors – reinforced by different mandates – has historically led to different programmatic decisions on who should receive the benefit (targeting design). The more joined-up these processes can become, the better.¹¹

The COVID-19 pandemic has triggered many interesting experiences in this respect, some of which are briefly outlined here – many building on medium/long-term strategic engagement of humanitarian actors in the country highlighting that **these are not changes that happen overnight**.

Firstly, intentionally coordinating and complementing each other's caseloads (focusing on different needs, by design).

There have been many examples of this during the COVID-19 response, especially regarding a) migrant/refugee/internally displaced persons (IDP) caseloads; b) conflict-affected areas of a country where government social protection systems had less reach; c) urban areas where government programmes often had low coverage. For example:

- In **Jordan**, where **targeting approaches** between UNICEF's humanitarian cash programmes and the government's National Aid Fund (NAF) social protection schemes are different but **intentionally complementary**. On one hand, UNICEF delivers humanitarian cash transfers and targets a caseload that consists of mostly Syrian registered refugees, Iraqis, Yemenis, Sudanese, Palestinians (non-UNHCR), a small number of Jordanian nationals (6%) and some Egyptian economic migrants, while the government strictly targets Jordanian nationals. While the information systems across the two programmes are not

interoperable, a **collaborative approach to data sharing** allows for both entities to ensure that there are no recipient overlaps or duplications between both programmes. See also [here](#) for thinking on this before COVID-19.¹²

- In **Pakistan**, Relief International is providing multisector (food and COVID-19-specific hygiene items) vouchers/kits to the most vulnerable Afghan refugees and host communities whose socio-economic situation was affected by COVID-19 movement restrictions (Pakistan hosts more than 1.4 million registered Afghan refugees, with the majority living in Khyber Pakhtunkhwa province located along the Afghan border). The programme has **supported households that have not been able to access critical emergency aid and services**, including the government-led Ehsaas emergency cash assistance programme designed to support vulnerable households during the COVID-19 crisis.¹³ In **Libya**, GIZ, in cooperation with the Ministry of Health as well as humanitarian and SP stakeholders, conducted an assessment to identify the most pressing pandemic-related needs. Also, GIZ reviewed what resources and ongoing projects already exist, that would allow for an immediate response. The demand for locally produced personal protective equipment (PPE) to allow for supply on short notice was consequently identified. In addition, the dialogue with the Ministry of Local Governance led to the identification of the need for employment promotion at a local level. A final project concept was subsequently developed in exchange with the Women Development and Training Centres (already supported by GIZ pre-pandemic) and their respective municipalities, to benefit from their first-hand experience in the production of fabric goods. A cash for work approach was adopted to allow for the active integration of women and marginalized groups into the Libyan labour market while allowing them fair compensation for their work. While GIZ is supporting the cash payments in the initial phase of the project, the compensation was set at a competitive rate to allow for additional orders from local health care institutes once they are aware of the locally available production capacities.
- In **Mali**, as part of the COVID-19 response, World Vision and Action Contre la Faim (ACF) coordinated with the government to ensure **synergies in the identification of caseloads**, with a specific focus on conflict-affected areas in Central and Northern Mali. Data is also being fed into the national Unified Social Registry.
- In **Madagascar**, the Tosika Fameno emergency programme coordinated by the government and the Cash Working Group (CWG) jointly led by UNICEF, was designed to provide support to the most vulnerable households affected by the partial lockdown of the economy, particu-

¹¹ See SPACE document.

¹² Roth, H. Nimeh, Z. and Hagen-Z., J. (2017) [A Mapping of Social Protection and Humanitarian Assistance Programmes in Jordan](#).

¹³ See [RI](#) and [collaborative cash](#).



larly in the informal sector. **Caseloads were shared out geographically** across implementing partners, adopting the **same criteria and registration approach**.

- In the **Philippines**, CRS, ACF and Relief International closely coordinated with the government to target households that were not already receiving government assistance. This included displaced families who were not included in the 2015 social registry data which was used for the government's social protection support. Focusing on these households was recommended by the local government, highlighting the importance of local-level coordination. In the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM), UNFPA has several activities with humanitarian cash which is then linked to social protection services of the government at the sub-national (BARMM) level. At the beginning of the pandemic, UNFPA conducted **a gender and inclusion assessment** to identify which groups were being left behind and what their barriers to accessing social protection services were. Assessment data was shared with the Ministry of Social Services and Development, so they could sharpen their services.
- In **Bangladesh**, GIZ has supported the provision of multi-purpose cash grants (MPCG) to address the need for immediate livelihood support for those affected by the pandemic in slum settlements in five partner cities, where GIZ is already supporting the *Urban Management of Internal Migration due to Climate Change (UMIMCC)/Urban Management of Migration and Livelihood (UMML)*. The recipients of this COVID-19 response measure (MPCG) must explicitly not be recipients of any other governmental or non-governmental safety net programme in relation to COVID-19, to reach those left out this far. The MPCG are provided to households, as emergency relief intended to meet their basic needs for food and non-food items, or services essential for the recovery of their livelihoods during the crisis. As such, the MPCG builds a bridge to the activities of the UMIMCC/ UMML project for the structural improvement of the living conditions of poor and vulnerable households. The MPCG are unconditional to enable recipients to decide how to use the cash received, based on their individual needs for assistance. The recipient selection process is based on a **community-based participatory approach**, in cooperation with local authorities, municipalities, and other stakeholders. Thereby, close cooperation with Community Development Committees (CDC) takes place. The CDCs consist of democratically elected representatives from the respective slum communities. The CDCs have proven to be a well-functioning mechanism for the cooperation with slum dwellers and can be an efficient means to represent and channel the voice of the slum dwellers in decision-making processes. The financial contribution, duration as well as the beneficiary selection criteria for this temporary cash-assistance measure are designed in line with the *National Guideline of the Cash Working Group in Bangladesh*, which coordi-

nates the activities of the government and international donors and organizations.

- In **Kenya**, humanitarian responses were focused in urban areas where social protection caseloads were very low or entirely missing, via coordination with Ministry counterparts. Those targeted included people who were not receiving any government support and women affected by gender-based violence (GBV). The Cash Working Group agreed that 50% of the COVID-19 revised urban minimum expenditure basket (MEB) should be provided, so for those in urban informal settlements receiving government social protection transfers, they received a top-up to receive 50% of the agreed transfer. Ensuring needs were met for a specific group – in this case victims of GBV – was an additional approach, which was important to several agencies including Oxfam and partners, enabling the combination of both with income support and transfers to meet basic needs with social service support/delivery, mirroring the transfer and service side of an SP system. Targeting challenges were faced in the verification process as lists provided by local officials needed to be checked and registered by one agency and verified by another agency. Those on the government safety net also had to be verified. This approach ensured that the money was delivered to the intended household and that they were legitimate/do exist. Verification calls take on average 12 minutes – so this was a huge time cost when reaching 20,000 households.

Secondly, aligning criteria and methodologies for defining needs/vulnerability and informing eligibility/targeting.

While these do not necessarily need to be the same (as each is designed for a different objective), there is a value in alignment/harmonization as it can support scaled-up programming and facilitate referrals across sectors. However, ensuring this can take several years. For example:

- In **Iraq**, the Cash Consortium for Iraq (CCI) including the DRC, IRC, NRC, Oxfam, and led by Mercy Corps, developed **evidence-based selection criteria** to identify vulnerable households that required cash assistance to meet their critical basic needs. This targeting was informed by regression analysis of household data including a broad range of demographic and socio-economic information, coping mechanisms, and consumption. It was developed in mid-2016, shared with the wider community, and adopted by the entire CWG later that year. This was then followed by the development of a more rigorous and up-to-date Proxy Means Test (PMT) in late 2018, again adopted by the CWG the same year. As an initial benefit, the common use of the PMT by CWG members has been key in **facilitating the use of standard assessment tools and monitoring and evaluation frameworks** – while also ensuring the quality, accuracy and consistency of targeting for basic needs cash assistance at scale. In addition, the approach served as a



basis for alignment with the Ministry of Labour and Social Affairs (MoLSA) cash transfer programme and, in collaboration with the World Bank, enabled an **overlap analysis of the PMT used by the government and the PMT used by the harmonized humanitarian community**. This was made possible due to the methodological alignment of targeting approaches; even though certain selection criteria were different. The end goal is to use the overlap analysis to facilitate targeted referrals of households likely eligible for government assistance from the humanitarian community's caseload, where feasible and based on consent, to facilitate the integration of the humanitarian and government systems and enable a more rapid and efficient horizontal expansion of the Social Protection System in Iraq. The humanitarian PMT was used to target vulnerable households for cash assistance throughout the Covid-19 pandemic, laying the foundations for strong HCT-SP alignment. The overlap analysis and opportunity for integrated referrals are being field-tested with the World Bank, and learning will be shared as soon as it is available.

- In **Jordan**, UNICEF has also supported adding a **child-lens to the NAF vulnerability and poverty assessments**. The COVID-19 poverty targeting was led by the World Bank and done in coordination with NAF, UNICEF and WFP.
- In **Pakistan**, UNHCR aligned its COVID-19 cash assistance for Afghan refugees with the social assistance of the government. Apart from targeting refugees, the eligibility criteria of UNHCR's project reflects the eligibility criteria of the Government of Pakistan Benazir Income Support Programme (BISP)/Ehsaas. The target recipients are jointly identified by UNHCR and the Chief Commissionerate for Afghan Refugees based on these mutually agreed criteria.

Thirdly, increasingly sharing and working off the same criteria and data to inform eligibility decisions. This starts with coordination efforts to bring those who have developed different tools to assess vulnerability/poverty together, to reflect on where information/data already exist, and where they overlap and/or complement - to avoid duplication and enhance synergies. There are cases where development partners and humanitarian counterparts can play an important role by feeding data and analysis to government social protection actors, to refine/inform their understanding of vulnerability and exclusion – and ultimately targeting decisions. For example:

- In the **Philippines**, UNFPA's **gender and inclusion assessment** (referenced above) helped to identify which groups were being excluded from HCT and SP and what their barriers to accessing social protection services were using a purposive sampling approach. Five regional clus-

ters and three constituency clusters were formed, and eleven categories of vulnerability were identified (e.g. persons with disabilities; young people; solo/indigent parents; IDPs; migrant workers; LGBT persons;). Twenty-seven agencies participated in the assessment and assessment data was shared with the Ministry of Social Services and Development (MoSSD) in order to assist them in refining their social protection services to include those most in need of support. UNFPA has also supported the Ministry with capacity building of social workers and policy and technical guidance around safety. The assessment was critical in ensuring local government endorsement of a response that ensured the inclusion of marginalized groups. Linking HCT and SP in response to the pandemic has been greatly facilitated not only by UNFPA's **long relationship** with the MoSSD but also due to have a staffer embedded within the Ministry – an approach which has been critical in influencing the design and implementation of MoSSD activities since the outset.

- In **Kenya**, the EU Delegation and partners' COVID-19 Social Safety Nets initiative¹⁴ targeting vulnerable households living in informal settlements of Nairobi verifies against the lists of households enrolled in the National Social Protection system. Further coordination with the Ministry of Labour and Social Protection, has the aim of including identified vulnerable households into the National 'Single Registry'.¹⁵ Using local targeting systems, based in the community, has also been beneficial. Households already pre-identified by local community/administration were targeted so that locally accepted systems were used, this would also save time rather than instituting a new targeting process.

Fourthly, capacity building and technical assistance to inform short/medium/longer-term approaches to social protection eligibility determination, increasing the focus on vulnerability (beyond chronic poverty) and addressing exclusion by-design. Humanitarian and development stakeholders have significant expertise that can be combined to help facilitate more strongly linked HCT and SP interventions. For example:

- In **Jordan's** COVID-19 response, as mentioned above, UNICEF also supported the NAF by giving a **child-lens to its vulnerability and poverty assessments** (e.g. by ensuring age and gender-disaggregated data). Poverty targeting was led by the World Bank and done in coordination with NAF, UNICEF and WFP.
- In **Niger**, Save the Children has been exploring how Household Economy Analysis (HEA)¹⁶ could contribute to the design of a social protection system that includes

14 This is implemented through a consortium led by Oxfam, with ACTED, Concern, the Center for Rights Education and Awareness (CREAW), IMPACT initiatives, the Kenya Red Cross Society, and the Wangu Kanja Foundation.

15 See more [here](#).

16 A livelihoods (analysis) framework which details and quantifies different types of households' food, income and expenditure sources. Heacod.org



a shock responsive element. **Conducting the baseline during a non-shock period** is a preparedness action in itself, as the baseline can then be used to model projected shocks or changes to understand their impact on households' abilities to meet basic food needs and protect their livelihoods. The recommendations from the analysis can inform the government and the humanitarian and development communities on possible next steps in preparation for equipping Niger's SP systems to be more responsive to shock. This is an ongoing process that has started with a historical analysis of HEA data (2012-2020). An exceptional HEA analysis was carried out by the Système d'Alerte Précoce et de Gestion des Catastrophes (System for Early Warning and Disaster Management – SAP) and the HEA working group (led by Save the Children) in May 2020, to assess the economic impact of COVID-19 on households. The HEA data was then used by the government in the estimation of the numbers of people impacted by the pandemic. For example, for Niamey, the government use exactly the same number of people provided by the HEA analysis.

2.3 Transfer value and frequency

The topic of transfer values – and 'aligning' these across HA and SP - is a long-standing and controversial one. Within this case study, it was not possible to dig too deeply, unfortunately, but a couple of experiences and insights are still worth noting. Overall, the key challenge for HA actors has been that the transfer value under national social safety nets is often insufficient to cover basic needs, especially in a crisis such as COVID-19. Strategies have therefore focused on coordinating efforts and 'harmonizing' but not necessarily 'homogenizing' transfer values.

- In **Mali** UNICEF exchanges and workshops with the national programme, Jigisemejiri and other key actors are ongoing to define a **harmonized approach to transfer values** under the lead of the National Dispositif of Social Protection and Economic Solidarity (DNPSES) and with the support of the Cash Working Group platform.
- In **Kenya**,¹⁷ the EU Delegation and partners (Kenya Red Cross Society, Concern, ACTED, IMPACT Initiatives, the Center for Rights Education and Awareness, and the Wangu Kanja Foundation) recognized an opportunity as a result of the pandemic to work more effectively in support of the social protection system and launched a COVID-19 Social Safety Nets initiative targeting vulnerable households living in informal settlements of Nairobi. This project targets 17,550 households with three monthly cash transfers that cover 50% of the minimum expenditure basket, as agreed with the Kenya Cash Working Group.

Importantly, it includes a top-up to existing social protection transfers, while providing the full amount to vulnerable households not included in existing social protection schemes. The transfer value took account of utility fees and mobile phone fees. The intention was to meet a gap in needs recognizing that these households need long-term support, which the government should then take on. And bring those not already in its system into the SP system. Transfers were provided digitally to ensure that they were delivered in as Covid-safe a way as possible.

For more on this topic, see also this two-part blog series ([part I](#) and [part II](#)) and the relevant section within the SPACE 'linkages' guidance [here](#).

2.4 Conditionality

Obtaining detailed information on conditionality has been difficult within the timeframe of this case study. However, the core feature in the COVID-19 response has been the pivot by most government social protection programmes to temporarily lift any existing conditions from routine programmes, acknowledging the additional direct/indirect/opportunity costs (or physical impossibility) faced by recipients to meet these in the pandemic context. This has gone beyond traditional conditions (school enrolment/attendance, health monitoring etc.) and has included lifting the requirement to work in some public works programmes (de-facto turning these into cash transfers), including those implemented by humanitarian agencies.

Where any 'conditions' were requested, these have tended to be 'soft' (i.e. not monitored/enforced) and focused on suggested behavior linked to COVID-19 (stay at home, wash hands frequently, etc.).

2.5 Coordinating to ensure robust linkages at the earliest stages

Recognizing that much of the discussion in the humanitarian/ social protection space has focused on how governments can scale-up their systems during crises, there has been a less operational focus on what humanitarian implementing NGOs should do. Realizing the importance of engaging with social protection actors, a group of 15 NGOs collaborating on delivering humanitarian cash created the Collaborative Cash Delivery (CCD) Network to improve the delivery of humanitarian cash. From the start, a social protection working group for the network was established, to explore the challenges of engaging with social protection in humanitarian work. Key challenges for the group included:

17 [Oxfam - Stepping up CVA with COVID-19 - Paving the way we respond to future crisis](#)



- How to ensure adherence to the humanitarian principles of impartiality and independence when engaging with governments to support delivery and improved social protection.
- How humanitarian cash interventions engage with social protection on the ground and how do operational teams explore this.
- What key roles NGOs can play to strengthen the effectiveness and accountability of social protection, to benefit those most in need.

The CCD has adopted a threefold approach: (i) To articulate and demonstrate their contribution to this area of work to ensure that organizational priorities around the inclusion of affected people and their differing needs are recognized as the broader agenda of social protection/humanitarian linkages moves forwards. (ii) To build technical capacity within CCD organizations to identify, implement and strengthen linkages between cash programming and social protection to improve humanitarian impact on the ground. (iii) To create space at the discussion table for civil society and NGOs to engage in the discussions from national to international level about linking humanitarian response and social protection and all this, to show how, as a group of INGOs, there is a common approach.

2.6 Intervention Design – Emerging Learning and additional resources

Overall

- None of the collaborative approaches discussed in this case study results in rapid change (or rarely so). Linking HA and SP systems often takes several years, based on the establishment of continued and positive relationships between humanitarian actors and government stakeholders.
- Coordination plays a major role in ensuring alignment, sharing and/or mutual learning across sectors on this topic: both HA and SP agencies are often tied to their own established systems and cautious or simply unaware of others that are designed for similar purposes. Sharing and demystifying each other's approaches is an important first step. Advocacy and negotiation can play a role in this process, together with pilots, contributing to building an evidence base. Practice shows that steps such as integrating humanitarian staff into government social protection departments to help to understand each other's systems and approaches can result in positive impacts. Having information systems across sectors that can 'speak to each other' (share data and analysis – even with no interoperability) can also provide opportunities for alignment if designed to address risks that emerge.
- Even in the short term, such as in the COVID-19 response, a long-term perspective is needed (act short term, think

long term) to think through how short term 'fixes' can inform/strengthen social protection systems over time.

- Having clarity on the joint outcomes that HA and SP actors are collectively trying to achieve can be useful to enhance coordination, for example with effective 'coverage' of those affected/in need and 'adequacy' of that coverage.

Vulnerability and poverty assessments, informing eligibility/targeting design

- The different approaches to defining, measuring and interpreting vulnerability and poverty across humanitarian and social protection sectors – reinforced by different mandates – has historically led to different programmatic decisions on who should receive the benefit (targeting design). The more joined-up these processes can become, the better – to avoid overlaps and, most importantly, gaps (who is falling between the cracks).
- To maximize coverage and inclusion of those in need across programmes and fill gaps, approaches to assessing poverty and vulnerability, informing targeting within social protection and the wider humanitarian response, can be jointly discussed, and strategies aligned. For example: who is currently being covered, how approaches could be aligned, who is likely to be left out, and how additional caseloads could be covered complementarily. A detailed assessment thus needs to take into account the socio-economic conditions and other needs (such as medical needs). Targeting should consider not only household vulnerability but other vulnerability factors (gender, social status, immigration status, disability).
- Fast at scale or tailored to specific needs? Launching fast interventions to get transfers to people as quickly as possible is challenging. This can be compounded when not everyone can receive transfers in the same way (e.g. mobile money) for example if they're isolating, or elderly, or have physical abilities that prevent them from leaving the house or accessing markets and shops. This results in the need to find other ways to use the cash/rely on others, potentially limiting impact and be an invitation to fraud. There seems to be a very real trade-off between avoiding fraud/misuse and designing a transfer that is appropriate to differing needs.
- Including different components in targeting, such as trying to reach those affected by GBV, can be challenging. However, including partners who focus on different needs can successfully be delegated out to different relevant organizations as seen in Kenya.
- There are real concerns around the potential for fraud, absenteeism or registration of ghost households. There is a need to focus on minimizing inclusion errors and this is a laborious exercise. There is an important question as to whether agencies should be more concerned with exclusion errors, rather than focusing on inclusion errors, and consequently, whether there should be any targeting at all.



Finally, whether to save lives, particularly in communities where so many are vulnerable (such as in informal urban settlements) blanket distribution would be faster, reduce incentives for fraud and provide the most equal response.

- There is a clear need for stronger coordination and communication between the several governmental actors involved in the response to a crisis such as COVID-19, to streamline response activities and target the most vulnerable. The silo-mentality of many concerned stakeholders hinders cooperation even in times of crisis and leads to fragmented and selective response actions.
- “Working together” can be operationalized in many different ways, depending on country context and the capacities/strengths of HA and SP stakeholders in-country. Examples include:

- *intentionally coordinating and complementing each other’s caseloads (focusing on different needs and population groups, by design), especially concerning migrant/refugee/IDP caseloads as well as the extremely poor.*
- *intentionally coordinating and complementing each other’s caseloads from a geographical perspective,* a) in conflict-affected areas of a country where government social protection systems may have less reach; b) in urban areas where government programmes often have low coverage.
- *aligning criteria and methodologies for defining needs/vulnerability and informing eligibility/targeting.* While these do not necessarily need to be the same (as each is designed for a different objective), there is a value in alignment/harmonization as it can support scaled-up programming and facilitate referrals across sectors and can also contribute to the development of synergies for a social registry. Robust and shared assessment methodologies that are grounded in empirical evidence can ensure buy-in from humanitarian and social protection actors alike.
- *sharing and working off the same/similar criteria and data to inform eligibility decisions.* This starts with coordination efforts to bring those who have developed different tools to assess vulnerability/poverty together, to reflect on where information/data already exist, and where they overlap and/or complement - to avoid duplication and enhance synergies.
- *capacity building through, for example, the promotion of good governance and provision of technical assistance to inform short/medium/longer-term approaches to social protection eligibility determination, increasing the focus on vulnerability (beyond chronic poverty) and addressing exclusion by-design.* Humanitarian and development stakeholders have significant expertise that can be combined to help facilitate more strongly linked HCT and SP interventions that are inclusive and needs-based.

- Achieving this is not always easy of course and can be compromised by many factors including high staff turnover, short funding cycles, actors being tied to their own established systems (without trusting others that may be as good if not better), disincentives for sharing data and systems as well as legitimate fears over data protection.
- In the *long term*, strategies for joint engagement may vary, focused on helping to build a social protection system that is ‘risk-informed: ensuring routine eligibility criteria and qualifying conditions (across the range of social protection programmes on offer) are based on a solid understanding of the risks, shocks and stressors that a country and its regions typically face.

Read more:

- Mercy Corps (2020): [Cash Transfers and Social Protection at Mercy Corps.](#)
- CCD Network (2020): [Responding to the COVID-19 crisis: Linking humanitarian cash and social protection in practice.](#)
- Oxfam (2020): [Stepping up CVA with COVID-19 – Paving the Way We Respond to Future Crisis.](#)
- IASC (2020): [Covid-19 - Resources relating accountability and inclusion.](#)
- WFP (2020): [COVID-19 Food Security Response.](#)
- Irish Aid and IDS (2020): [Integrating Humanitarian Response with Social Protection Systems: Limits and Opportunities.](#)
- IFPRI (2020): [Gender Sensitive Social Protection: A critical component of the COVID-19 response in low- and middle-income countries.](#)
- SPACE (2020) [Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response.](#) Sections on Vulnerability/poverty Assessment and Targeting design.
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section 2. Programme Design).
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.5.2. See also the foundational Selection & Identification module.](#)
- UNICEF (2019) [Programme Guidance: Strengthening Shock Responsive Social Protection Systems.](#)
- SPAN (2019) [Operational Note 2: Targeting.](#)
- O’Brien et al (2018) [Shock Responsive Social Protection Systems Toolkit, Section D2 ‘targeting’.](#)

Transfer value and frequency

- Although not covered in detail in this case study, a challenge has been that the transfer value under national social safety nets is often insufficient to cover basic needs, especially in a crisis such as COVID-19. This conflicts with



the approach that humanitarian agencies take to defining appropriate transfer values. Strategies have therefore focused on coordinating efforts and 'harmonizing' but not necessarily 'homogenizing' transfer values.

Please refer to the literature below for relevant insights.

Read more:

- IFPRI (2020): [Gender Sensitive Social Protection: A critical component of the COVID-19 response in low- and middle-income countries.](#)
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.5.3.](#)
- SPACE (2020) two-part blog series on setting transfer values ([part I](#) and [part II](#)).
- SPACE (2020) [Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response.](#) Section on Transfer Value, Frequency, modality.
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section 2. Programme Design).
- SPaN (2019) [Operational Note No 1: Benefit Modalities.](#)
- OPML (2018): [What role can social protection systems play in responding to humanitarian emergencies.](#)

Conditionality

This topic was not explicitly addressed in this Case Study. However, it is worth referring to the literature below for relevant insights.

Read more:

- TRANSFORM [Administration base document](#), the section on 'conditionality'.
- SPACE (2020) [Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response.](#) The section on conditionality.
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section 2. Programme Design).
- UNICEF(2017) [Evidence over ideology: Giving unconditional cash in Africa.](#)



Annex 3

CASE STUDY 3:

Implementation of linked Humanitarian Cash and Social Protection interventions in response to COVID-19





3. Implementation

3.1 Introduction

This case study has been co-led by **UNHCR, UNICEF** and Lois Austin (Grand Bargain sub group KML consultant) with additional contributions provided by **GIZ (Deutsche Gesellschaft für Internationale Zusammenarbeit), the Kenya Red Cross Society, the Turkish Red Crescent and World Vision**. The focus countries in this study include **Bangladesh, Jordan, Malawi, Turkey, and Zambia**. References are also made to **Iraq, Kenya,**

Madagascar, Mali, St. Lucia, Senegal, Serbia and Pakistan.
[Add hyperlink to case study country annex]

When it comes to implementation, there are many areas within the humanitarian project cycle and along the “delivery chain”¹⁸ where humanitarian actors can share and contribute their expertise with government and social protection actors and vice versa, playing on reciprocal strengths.

Discussions during case study research highlighted the following differences during the pandemic between humanitarian and government actors:

Operational humanitarian actors ¹⁹	Government actors
<ul style="list-style-type: none"> • Implement on a small scale. • Pilot and test to identify potential risks. • Be flexible in terms of intervention design, with access to dedicated funds for ‘innovation’. • Access very highly qualified staff and scale capacity where/when needed. • Build on learning from the global experiences of their agencies or of their peers, including adapting existing standard operating procedures, tools and delivery mechanisms developed in different emergency contexts. • Have experience of communicating with crisis-affected populations, who can often be difficult to reach, and experience in operating in difficult humanitarian contexts. • Abide by international protocols and standards, including humanitarian principles. 	<ul style="list-style-type: none"> • Operate at scale (nationally). • Leverage and coordinate capacity, data and systems from other sectors if needed. • Align actions with a national vision and social protection policy, and medium-term strategy and action plan instruments, increasing sustainability. • Understand and navigate the political economy of response. • Build on local/national knowledge and address local/national administrative, legal, cultural barriers and constraints.

3.2 Outreach and communications

Ensuring the existence of robust communication strategies and mechanisms in linking (for example, aligning and complementing) HC and SP responses during the pandemic has been essential to avoid exclusion and misinformation and potential conflict between those that are and are not covered by responses. This is particularly the case as: a) the social protection sector does not always include sufficient budgets to ensure a comprehensive and coherent approach to outreach and communications; b) where SP systems are nascent, there is little experience of communicating in emergency settings (e.g. tailoring to the needs of new caseloads and the complexities of emergency situations), and (c) budgets are unable to cover all and may focus on specific groups or regions in a country threatening social cohesion. In other words, the needs for linkages are particularly strong at this stage. Continuous messaging has been critical in ensuring integrated approaches that

strengthen the mitigation of conflict and disharmony between different population groups who have been impacted differently by the pandemic and who are receiving different levels of assistance across HC and government programmes.

For humanitarian and social protection actors, COVID-19 has also imposed a need for outreach to comply with (new) safety and hygiene guidance that mitigates risks of COVID-19 propagation, posing additional challenges and calling for innovative solutions.

How have the ‘linkages’ between HC and SP sectors and between different social protection programmes been operationalized specifically? Evidence from COVID-19 responses has started to emerge, showcasing the multiple ways in which these are operationalized in practice depending on the country context and the comparative strengths of each sector.

18 Note: this is how SP practitioners refer to the various phases of delivery – as extensively discussed in this flagship World Bank publication: [“Sourcebook on the Foundations of Social Protection Delivery Systems.”](#)

19 Operational humanitarian actors here refer to agencies that are involved in directly implementing humanitarian cash responses. This includes NGOs, UN agencies and the International Red Cross and Red Crescent Movement. They are supported by other humanitarian actors including donors.



Firstly, leveraging HC capacities to share messages relating to social protection responses using innovative approaches. For example:

- In **Jordan**, UNICEF was able to link its humanitarian cash Management Information System (MIS) (which includes a communication component using a platform called 'RapidPro'²⁰) with the government's National Aid Fund (NAF) programme that was supported by UNICEF since 2017, facilitating the rapid scale-up of the NAF to new caseloads of informal workers in response to the pandemic (the Emergency Cash Assistance Programme to Daily Wage Workers programme). Following online registration on a web based system (based on revised eligibility criteria), a new caseload of 240,000 recipients was able to receive emergency cash quickly, remotely and safely with text messages being sent through the RapidPro system, confirming the ID of targeted recipients to help determine whether they had an active mobile wallet. UNICEF was also able to provide instructions on how to open a new mobile wallet if necessary (see [here](#) for more details).
- In **Serbia**, UNICEF is supporting the national social protection response to the COVID-19 pandemic, implementing a programme supporting households that are vulnerable but cannot be covered by the government's schemes. The Red Cross is providing the outreach as they have strong links with communities and social welfare offices.

Secondly, aligning key messages across government social protection and humanitarian programmes, to the extent possible. For example:

- In **Turkey**, the Turkish Red Crescent has enhanced its use of communications tools to ensure that people's knowledge of their cash transfers is updated and that they are also aware of preventative measures with regards to COVID-19 propagation – aligning key messaging with the Ministry of Health and safeguarding against the proliferation of rumors and misinformation.
- In **Madagascar**, the leadership of the Cash Working Group (CWG) alongside the Government – working under a common strategy – ensured the use of common tools across all actors (humanitarian and social protection), including a common communication strategy with key harmonized messages to the population.

Thirdly, ensuring inclusive and accountable outreach approaches (focused on leaving no-one behind). This is a long-standing area of expertise for many humanitarian actors that is often not sufficiently embedded in government systems. For example:

- In **Bangladesh**, vulnerable individuals and communities (who are national citizens as opposed to refugees who do not have access to national systems and for whom humanitarian agencies struggle to provide multipurpose humanitarian cash assistance) often do not have access to the right information for how they can access social protection assistance. World Vision has been using a social accountability approach through a Citizen Voice and Action project, to raise awareness of and therefore better access the government's social protection system. programme. The approach, which has led to significant improvements in social protection uptake, follows a process of informing, educating and then organizing a dialogue between local communities and local government to ensure access to the government services that they have the right to receive. During COVID-19 this approach was used to provide information on multipurpose cash assistance for those not yet included in the government's system.

Finally, layering additional behavioral change messaging into the communications strategy – working alongside Government actors from the social protection sector and beyond. For example:

- In **Mali** UNICEF and WFP introduced behavioral change messaging to the government social protection response programme: key family practices (including growth promotion and interventions for improved diet quality, immunization, insecticide-treated nets, breastfeeding, child discipline, life skills, etc.); general COVID-19 awareness and prevention; and gender-sensitive life skill activities and psychosocial support for adolescents (girls and boys) to build their resilience capacities and empower them against violence and exploitation.

3.3 Information systems, registration and enrolment

While 'information systems', 'registration' and 'enrolment' are three distinct topics and stages, within the COVID-19 response it is useful to analyze these together as they are intertwined.

The core challenge during the COVID-19 pandemic has been to rapidly scale up support to very different caseloads from the poorest and most vulnerable 'usual recipients' of social assistance and humanitarian aid to other groups not traditionally covered. For example, recently impacted individuals and households include informal workers who have seen their livelihoods swept away, as well as people living in urban areas heavily affected by lockdowns and often uncovered by social assistance systems. Non-nationals and forcibly displaced

20 RapidPro is a two-way communication system that supports SMS and other digital communication (such as WhatsApp and Viber) for multiple reasons, including data collection and awareness-raising.



populations may also not be included or eligible for government programmes due to their legal status and may not be sufficiently covered by humanitarian actors.

In many countries, this has led to innovative approaches for reaching new caseloads, involving the use of existing data and information systems as well as digital and remote approaches to collecting new data on socio-economic impacts and for registration and enrolment. A useful typology of such approaches - focused on government social protection responses primarily – can be found [here](#).²¹

In this context, linkages across HC and SP appear to have evolved in two ways.

Firstly, leveraging each other's data to inform registration – making sure any new data collected is coordinated with the national information system. In the countries analyzed below this has been the result of a coordination and joint systems-building process over time and ensuring interoperability between data systems, including significant efforts to address emerging data protection concerns and other risks emerging from data-sharing through the signature of data-sharing agreements. For example:

- In **Senegal**, both humanitarian actors and the government are using the existing Unified Social Registry (USR) for registration (and eligibility determination). The USR has been supported by the World Bank and designed through a joint effort to ensure that beneficiaries of seasonal safety nets implemented by NGOs are included.²²
- In **Jordan**, UNICEF's HCT information system is not interoperable with the government NAF system, but a collaborative approach to data sharing (embedded in a formal agreement) allows for both entities to ensure that there are no recipient overlaps or duplications between programmes.
- In **Kenya**, UNHCR works with the World Bank and the Kenyan National Bureau of Statistics to include four refugee sites in urban areas (Nairobi) camps/settlements Kalobeyei, Kakuma and Dadaab) and one stateless population group (the Shona) alongside nationals in Kenya for measuring the socio-economic impact of COVID-19. The joint data collection is led by a data collection firm that interviews a list of families provided by UNHCR. Monthly datasets and a dashboard for key indicators will be produced for 6 months from June to December 2020. The results are used to inform socio-economic responses, including social protection measures by the government and international actors and sets a global precedent for including refugees into national statistical surveys.

- Also in **Kenya**, GIZ has funded several different cash for work programmes to support those affected by the pandemic. One intervention, implemented by IRC, supported the training of Community Health Volunteers (CHVs) on COVID-19 using Ministry of Health (MoH) facilitators. The CHVs identified 300 vulnerable households in their area of jurisdiction and supplied them with face masks and soap as they carried out house-to-house awareness campaigns. GIZ and the MoH verified the selection.

Secondly, supporting new registration and/or validation efforts (including the sharing/creation of tailored software) to fill in data-gaps, and consequently, feeding those into the national social protection information system. These joint efforts were often possible due to trusted relationships and joint systems-building efforts between HC and SP actors over time. For example:

- In **Malawi**, GIZ and other development partners such as WFP, World Bank and UNICEF were supporting the government before the pandemic to build a social registry for social protection beneficiaries – called the Unified Beneficiary Registry (UBR). During COVID-19, the main gap identified by government and development partners was that the UBR did not include data for populations in the four major cities in Malawi, which were most heavily impacted by the COVID-19 pandemic. The gap in social protection programmes in SP coverage in urban areas triggered the Government to design the COVID-19 Urban Cash Intervention (CUCI) which will be implemented with the support of various development partners and seeks to protect the livelihoods of the urban poor and cushion the socio-economic effects of COVID-19. It targets approximately 185,000 households in the four concerned cities for three months with regular cash transfers. To date, registration was completed in the four cities with a largely geographical targeting approach, targeting specific “poverty hotspots” within the major urban areas and people without formal employment who are the most affected by COVID-19. The Protection and Social Support Cluster, in coordination with the Food Security Cluster and the Cash Working Group, have been critical in supporting the design and preparation for the CUCI. For the registration of target households, the CUCI, with the support of GIZ, builds upon the existing UBR structures. It included the development of rapid digital data collection tools and a mobile app to quickly collect household data, as well as the development of an Application Programming Interface (API) to enable communication between the UBR and CUCI's MIS. Overall, it should be noted that this new cash intervention leveraged capacities from all development partners and the government of Malawi.

21 Barca (2020) Options for rapid expansion of social assistance caseloads for COVID-19 responses. SPACE.

22 [The Collaborative Cash Delivery Network](#).



- In **Jordan** and in response to COVID-19, the Jordanian government NAF requested UNICEF's operational support and technical expertise in relation to recipient registration and enrolment in its Emergency Cash Transfer programme. This included using tools developed by UNICEF for its humanitarian programmes such as RapidPro. This has been operationalized via a technical working group to work through issues identified in using the humanitarian-focused RapidPro system and extending it for use by the government NAF.
- In **Zambia**, as part of the regular Zambia Humanitarian Response Plan pre-COVID-19, two Emergency Cash Transfer (ECT) programmes were implemented by the Government of the Republic of Zambia (GRZ) through the Ministry of Community Development and Social Services (MCDSS) and the Disaster Management and Mitigation Unit (DMMU) with support of the three agencies in the UN Joint Programme in Social Protection (UNJPSP-II), namely UNICEF, WFP and ILO. The ECT was an extension of the regular Social Cash Transfer (SCT) Programme, which is the flagship national social assistance programme with national coverage. Donors contributing to humanitarian assistance in Zambia conditioned their funds to the ECT, requesting that UNJPSP-II partners, led by UNICEF, strengthen the registration and verification mechanisms of the SCT registry (which would be used for the ECT programme). Recipient primary listings under the food security component of COVID-19 ECT were obtained from the MCDSS-managed Zambia Integrated Social Protection Information System (ZISPIS), the sector's information system, complemented by lists of vulnerable households provided by Faith-Based Organizations. The ZISPIS was set up pre-pandemic with support from the UN Joint Social Protection Programme and, based on previous experience, was used in the COVID-19 response to enroll new ECT recipients as part of a horizontal expansion of the SP mechanism.
- Additional households were included based on information provided on the informal sector by ILO and the Ministry of Labour and Social Security (MLSS). These were further supplemented by fresh registrations conducted by Community Welfare Assistance Committees (CWACs) and WFP-trained monitoring assistants and in collaboration with the Provincial and District social welfare officials. MCDSS through the CWACs facilitated WFP monitors to confirm the authenticity of the beneficiaries, making this humanitarian/SP collaboration an essential element of the horizontal and vertical expansion. Moreover, to strengthen the social protection-focused expansion of the SCT, UNICEF supported the GRZ to conduct a large-scale physical household verification exercise of 97,000 households in 22 priority districts to ensure that all information in ZISPIS was accurate. Existing SCT community structures including local government, community volunteers and payment managers, the house-to-house verification exercise was undertaken to confirm demographic information and update record. It was then possible to use this data for the expanded pandemic-related SP ECT.
- In **Madagascar**, WFP and the government Fonds d'Intervention pour le Développement (FID) collaborated during the COVID-19 registration process, registering almost 200,000 households in 12 days. Under the leadership of the CWG, common tools were developed and used by all actors (government and non) including a common registration questionnaire and common targeting criteria.
- In **Nigeria**, the registration of new caseloads for support is happening via a Rapid Response Registry (RRR), with a simpler screening process than used on the regular social protection schemes (via the national Social registry). Development partners have provided technical assistance to inform this design. Implementation will rely on staff in the State Operation Coordinating Units as well as survey firms to register households. Humanitarian partners will support through hiring survey firms and providing technical assistance for consistent and quality data collection and analysis.

3.4 Payments/delivery

The capacity of social protection delivery systems/partners (and their payment service providers) to be able to provide payments and adapt payment schedules for the government COVID-19 response varies widely

depending on the strength of routine systems and the broader country context/preparedness. The social protection response worldwide has taken many different and innovative approaches for providing payments to new caseloads – based on existing government capacities (for a typology of how this was done, see [here](#)). Any HCT decision on 'linking' has therefore been based on understanding existing social protection payment systems to inform choices as to the *extent* to 'align' and *how* to do this most effectively.

In some cases, this has involved supporting government responses with complementary capacity (including capacity building), expertise and guidance

– especially regarding compliance with COVID-19 safety measures and digitization. One concern in the pandemic response has been the heightened potential for corruption and fraud (especially as many COVID-19 responses focused on 'pay now, verify later' approaches). It is the combination of different forms of support from humanitarian agencies to the government (not just delivering transfers but the important additional elements that ensure this is done safely) that has been critical in the COVID-19 response. For example:

- In **Nigeria**²³, ACF and Save the Children, with funding from FCDO, are supporting the government's social protection response to COVID-19 by developing and rolling

23 [The Collaborative Cash Delivery Network](#).



out new governmental standard operating procedures (SOPs) for cash transfers under the National Conditional Cash Transfer programme. The new SOPs include guidance on pay-point setup and management, health checks, physical distancing, hygiene, and suspension of biometric authentication, as well as prioritization of at-risk groups, including the elderly, pregnant women, women with children, and persons with disabilities. Save the Children and ACF also trained government cash transfer payment and community mobilization staff for all 36 states on safety during payments. Members of the Collaborative Cash Delivery Network (CCD) members also provided support to last-mile digitization of the CVA payment system, mapping segmentation and planning and setting up a rapid response register to target non-traditional poor using existing databases, mobile records, and banking information market associations. Save the Children has also supported the expansion of the National Social Register in its four focal states and will be supporting the development of the rapid response register that will be used to provide COVID-19 related support, particularly in urban areas. Similarly, UNICEF is supporting the federal government and 4 states to move forward with the digitization of the government National Social Safety Nets Project cash payment mechanism.

with a view to potential linkages in the future. Having institutionally-agreed and pre-signed agreements with a range of different financial service providers has been critical for the rapidity of KRCS' COVID-19 pandemic response.

In other situations, where the existing foundation for digital payments was less solid (e.g. posing fiduciary risks), accountability requirements have led non-government actors to play a direct role in contracting and managing financial service providers for social protection responses.

For example:

- In **Zambia**, donors contributing to humanitarian assistance conditioned their funds to the ECT, requesting that UNJSP-II partners, led by UNICEF, also set up a temporary parallel payment system to the government's social protection programme. This request was made due to some observed corrupt practices in the programme during 2017 that resulted in the alleged misapplication of funds by one of the payment providers used by the government. As such, financial service providers (FSPs) were contracted directly by UNICEF to carry out the ECT payments. UNICEF conducted financial strength assessments (micro-financial assessments) to assess FSP capacity to effectively and efficiently deliver the transfers as well as associated risks. Strict financial controls for ECT delivery were also established. UNICEF and the GRZ established procedures to use the SCT MIS to generate payment lists for the ECT, which were verified by UNICEF and then shared with the FSPs to mitigate payment risks. UNICEF implemented data privacy agreements with the FSPs to safeguard beneficiary data. Detailed payment procedures were developed and agreed upon with FSPs and GRZ community structures, including pay-point managers. The training was organised with all existing SCT community structures (district authorities, community volunteers) to familiarize them with the ECT programme and the modified payment procedures. UNICEF also partnered with the University of Zambia to establish an independent third-party monitoring and payment verification system for the ECT.

In other cases, where existing capacities were high yet overwhelmed by the scale of the response, HA partners have provided support to specific populations in close alignment with government counterparts – testing innovative payment solutions and sharing learning with SP actors over time.

- In **Kenya**, where a conducive environment for cash transfers has developed over the years – meaning government payment systems for routine social protection programmes are fairly advanced (and mostly digital) – the scale and impact of the COVID-19 pandemic has meant that the government has sought collaboration from humanitarian agencies, including the Kenya Red Cross Society (KRCS), to vertically and horizontally expand its support. Using its in-depth knowledge of delivering rapid cash-based assistance in times of crisis, the KRCS is supporting the government by providing cash top-ups to existing government social protection recipients as well as identifying new recipients based on established vulnerability criteria. Alongside more traditional delivery mechanisms such as banks, mobile money and vendors, KRCS and its partners have been working on blockchain-based community currencies. Also, KRCS has used the RedRose integrated platform to manage cash transfers, offering functionalities of online and offline recipient registration, compliance with privacy certifications, assets delivery and monitoring and evaluation. The platform has not yet led to linking KRCS humanitarian cash transfers to social protection, but it is in close coordination with the government

3.5 Grievances and community feedback mechanisms

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Examples illustrating collaborative efforts between HA and SP actors on information sharing and ensuring accountability are not common.

Mechanisms that ensure the channeling of feedback, grievances/complaints and appeals/grievance redress are an essential element of all humanitarian and social protection interventions. This is particularly the case in times of crisis when new approaches are being adopted and additional people facing acute and urgent needs are eligible for support (with the cost of 'non-response' or 'mis-response' much higher than



in routine times). This is proving even more critical during the COVID-19 pandemic, where a) targeted caseloads by routine government social protection programmes are often very different from 'usual recipients' who may face new barriers to access assistance/benefits); b) where registration, enrolment and onboarding channels have used innovative and largely 'untested' approaches (e.g. fully digital systems); c) where the safety risks involved in delivery are also heightened – including issues of corruption, safeguarding and protection.

Additionally, many government social protection systems have under-funded and under-developed mechanisms for ensuring accountability using inclusive and accessible feedback and grievance mechanisms that have very little capacity to scale up and/or adapt these systems to the expanded needs during the COVID-19 pandemic. What 'ideally' should be in place in government social protection systems is comprehensively addressed in other literature.²⁴ Ultimately, there is a clear rationale for complementarity, capacity building and lesson-sharing in grievance redress and complaints mechanisms. This should be done across government and humanitarian actors to ensure accountability to affected populations and maximize social cohesion between those that do and don't receive assistance. It is imperative that working across sectors raises the level of financial and non-financial protection for vulnerable households, mitigating the risk for people to fall between the cracks in government and HC coverage.²⁵

The few examples collected of linkages between HC and SP for this part of COVID-19 responses focused on the leveraging of HA capacities and systems to provide a system for lodging feedback, complaints and appeals for a government response. For example:

- In **Malawi** UNICEF, GIZ and the government are jointly working on developing a grievance redress mechanism for the CUCI COVID-19 Urban Cash Intervention (which extended the government's existing social protection scheme to some of the most COVID-19-affected urban populations). The creation of a **toll-free phone line** in this emergency cash-based response (which will last for four months) will ensure the management of grievances during COVID-19 for the short-term. This is also designed as the foundation for a long-term grievance redress mechanism for social protection programmes in the country, highlighting a clear link between UNICEF's emergency cash mechanisms and longer-term, government-led approaches. As a side effect, the CUCI GRM contributed to the discussions on setting up a permanent and nationwide GRM toll-free phone line.
- In **Nigeria**, Save the Children (via their work on the Child Development Grant programme) is funding and supporting

the development of civil society platforms in four states to engage with the government, monitor implementation of the planned response to COVID-19 and ensure assistance is reaching those in need, especially excluded groups such as people with disabilities and women. In Nigeria, the Open Government Partnership has also been supporting transparency and accountability in the COVID-19 social protection response, involving HC actors alongside local civil society.

3.6 Transition and/or 'exit' approaches

'Transitioning' caseloads (to another form of support) and or 'exit' (terminating support) in the aftermath of an emergency response ensuring families can regain control of their lives and livelihoods involve complex issues that HC actors have grappled with for years. Social protection actors have struggled with a similar challenge: supporting people to build resilience to widespread shocks over the whole lifecycle, whilst overcoming chronic poverty through their self-reliance, where they are not dependent on non-contributory social assistance and able to actively contribute to social insurance.

The COVID-19 crisis has refocused attention on these issues: the coverage of emergency support and the investment in government COVID-19 social protection responses (primarily through cash and in-kind transfers) has been important, offering many opportunities for transitioning humanitarian caseloads to government systems. The prolonged economic recession resulting from COVID-19 has emphasized the need for ongoing rather than one-off support to affected households and bears similarities to a long-onset disaster.

The partnership between HC and SP actors focused on government social protection programmes are required over the medium-term to reinforce joint efforts to transition humanitarian caseloads that are still in need of support to government systems. Often, the ability to do this is related to the degree of partnership between HC, SP and government actors that had been set up before the COVID-19 pandemic. The inclusion of marginalized, excluded and non-national groups in government social protection programmes, particularly for forcibly displaced people, is particularly challenging where there are restrictive government policies and legal frameworks in place. Despite these challenges, there are opportunities to pursue, particularly in countries that have scaled up the inclusion of people to national health responses to COVID-19, to mitigate against uncovered clusters, and where inclusion and scale-up of social protection coverage were being actively pursued before the onset of COVID-19. For example:

²⁴ For example: [here](#)

²⁵ See also TRANSFORM SRSP Module (2020) [here](#)



- In **Iraq**, the Terms of Reference (ToR) for the CWG include a specific responsibility to promote the linking of HC and SP as follows: “Provide strategic insight on the conceptualization of an exit strategy from cash transfer programming, with special emphasis on referrals and alignment with the social protection floor.” This led to a common roadmap between the Ministry of Labour and Social Affairs with the CWG, the World Bank and a set of donors that set out specific technical working groups and an action plan to transition IDPs from Multi-Purpose Cash Assistance to the national social assistance programme. Although rolling this out has been hampered by elections and then the COVID-19 pandemic, this is a good example of partnership between HC, SP and government actors to transition a protracted humanitarian caseload to a government social assistance programme.
- In **Saint Lucia**, in response to the socio-economic impacts of COVID-19, the government is expanding the Public Assistance Programme from approximately 2,600 to 3,600 households for six months with support from the India UN Development Partnership Fund and the World Food Programme. This initial expansion/temporary transfers will be linked to a permanent expansion under the World Bank-supported Human Capital Resilience Project. This intervention is unique in Saint Lucia, resulting in the sustained inclusion of new beneficiaries into the social assistance programme.

In some cases, HC programmes have been explicitly designed to consider the preconditions for transition and/or exit. For example:

- UNHCR’s COVID-19 response in **Jordan** included an exit strategy to ensure that the population does not fall into dependency and efforts on self-reliance are not eroded and it can rapidly resume economic opportunities once the economy opens up and restrictions on access to jobs ease. This exit strategy **defines indicators** for monitoring and triggering adjustments for the expansion/retraction/withdrawal of emergency humanitarian cash. The indicators reflect the status of global and national economic recovery. In the absence of socio-economic data, the Basic Needs Task Force has defined proxy indicators to track this progress and enable humanitarian actors to make decisions on expanding or reducing assistance. The indicators are as follows:
 - **Removal of restrictions by the Government of Jordan** - removal of curfew and lockdown restrictions imposed by the Government. With the lifting of restrictions and the opening of business and access to transportation, people can move and engage in economic activities, reducing some of their basic needs resulting from COVID-19 restrictions.

- **Withdrawal of the Government of Jordan’s assistance package for COVID-19 response** - The Basic Needs Assistance provided by UNHCR and partners is aligned to the Government of Jordan’s assistance to its citizens. The exit of the assistance for refugees will coincide with the Government of Jordan’s exit of the assistance for the general population as it considers the improved access to economic activities for all.
- **Full resumption of NGO-led activities** - Another indicator that would be considered would be the resumption of income-generating activities that are carried out by different stakeholders. Livelihood programmes, cash for work programmes and so on, are all designed to create economic activities for the target population with the assumption that most of the population assisted under this response would be engaged in such activities. The resumption of these activities also indicates that the economic situation in Jordan is slowly moving back to normal.

3.7 Monitoring and evidence

Given that many COVID-19 interventions are still being developed, there has been little information available on linked approaches to monitoring and evidence between HC and SP actors. Examples include:

- In **Turkey**, COVID-19 containment measures had a direct impact on the way TRC conducts its work – relying on remote monitoring approaches instead of focus group discussions. Outreach activities focused on the innovative use of technology – with households being provided with tablets to carry out surveys (for the duration of the survey only). To respect social distancing measures during the pandemic, TRC staff pass the tablet to respondents and wait outside until the survey is completed, at which point the respondent hands it back.

3.8 Implementation – Lessons Emerging

Overall²⁶

- When linking is undertaken from the perspective of aligning humanitarian cash with government social protection programmes, to ensure that the potential to ultimately contribute to building national SP systems remains feasible, operational design decisions need to be informed

26 A number of emerging lessons have benefitted from the analysis included in the SPACE document: [Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response](#).



by discussions with government social protection actors and development partners. If HCT approaches, linking to SP systems, are designed to be transferrable to the government, the design should be appropriate to the operational and technological context and existing capacities and include a plan for how this transfer will be supported.

- Technically, linking different systems can be challenging, particularly in the absence of clearly defined roles and responsibilities from the outset. Establishing a ‘technical working group’ (or leveraging existing coordination forums) to facilitate and better understand the potential for linking HCT and SP information systems could support more robust linking processes.
 - Whatever the situation, practical options for ‘linking’ will strongly depend on the strength of specific existing systems for each sector. Sharing information on what capacity, data, and systems exist at each stage of the ‘delivery chain’ or ‘project cycle’ and how those could be leveraged will be a critical starting point, without starting from the assumption that one ‘system’ is stronger than the other as a whole. Breaking it down is more useful.
 - Think of ‘linkages’ as developing collaborative models which operate as a ‘single team’ and using joint or aligned approaches and systems.
 - Focus on potential efficiency, effectiveness and accountability gains, particularly in contexts characterized by small or medium responses, and high operational costs.
 - Also, focus on the trade-offs of working jointly and how those can be mitigated.
 - Recognize In some contexts it will not be possible for humanitarian systems to work with all the social protection operational processes and systems and some parallel processes may still be needed. For example, where SP systems are inaccessible for humanitarian agencies and the need to implement a rapid cash-based response necessitates using humanitarian agency own systems. This is also the case where a humanitarian caseload is not eligible to access the government system or where legislation actively excludes certain groups.
- an caseloads (e.g. tailoring to the needs of new caseloads and the complexities of emergency situations).
- How this is operationalized can vary, including the following options for humanitarian practitioners:
 - leveraging HCT capacities and systems to share messages relating to social protection responses.
 - aligning key messages across government social protection and humanitarian programmes, to the extent possible.
 - providing technical support and capacity to ensure inclusive and accountable outreach approaches (focused on leaving no-one behind and catering to the needs of new caseloads).
 - layering further behavioral change messaging into the communications strategy – working alongside Government actors from the social protection sector and beyond.
 - There is also a lot of potential for leveraging government social protection structures (local offices, social workers) to communicate in emergencies, as these are trusted actors. Local civil society and traditional networks can also be leveraged alongside government actors as these are other ‘trusted’ sources, particularly where the social contract between the government and caseloads is weak or strained.
 - More generally, the COVID-19 responses have further reinforced the importance of ensuring ‘outreach’ goes beyond initial awareness-raising, becoming a continuous action throughout linked HC/SP interventions and providing consistent messaging on all aspects of programme design and implementation between all HC, SP and government actors. Experiences of multi-channel messaging include allowing recipients to communicate directly with implementors, and other technology-driven approaches to communicating (without removing more traditional approaches, most appropriate for some audiences). This continuous messaging is key to ensuring an integrated approach and maintaining social cohesion and mitigating risks of conflict between different population groups who have been impacted differently by COVID-19 and who are receiving different levels of assistance across HC and government programmes.

Outreach and communications

- Strong outreach and communications are critical to successful programming, as well as focusing on inclusivity, doing no harm and leaving no-one behind – in both sectors. There is a particular need for collaborative work on this as: a) the social protection sector does not always take a comprehensive and coherent approach to outreach, and communications and different messaging may be spread across different programmes (these are often under-budgeted); b) the sector does not have experience communicating in emergency settings and to humanitari-
- Read more:**
- IASC (2020): [Covid-19 - Resources relating accountability and inclusion.](#)
 - MicroSave Consulting (2020): [Strategic Communications in Social Protection Programmes.](#)
 - TRANSFORM (2020) [Shock Responsive Social Protection](#), Section 3.6. See also the [Administration base document](#), Section on ‘communications’.
 - World Bank (2020) [Sourcebook on Social Protection Delivery Systems, Chapter 3](#) (focused on routine SP programming).



- Smith, G. and Bowen, T. (2020). [Adaptive Social Protection: The Delivery Chain and Shock Response](#) (Section 1 Phase 1 - Outreach). World Bank Social Protection and Jobs Discussion Paper.
- SPACE (2020) [Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response](#). (Section on outreach and communications).
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section on outreach and communications).

Information systems, registration and enrolment

- When responding to a shock, the selected approach to registration and enrolment (and how an underlying information system is set up to support this) is just as important as the setting of eligibility criteria and targeting design in terms of impacting targeting *outcomes*. This is relevant for both humanitarian and SP responses. In fact, with COVID-19 (and other shocks before it), social protection targeting design was often highly impacted by what was ultimately feasible to implement. This is where the opportunities in terms of 'linkages' emerge, to help fill reciprocal capacity, financing, data and other gaps.
- Joint socio-economic COVID-19 impact assessments and/or the inclusion of humanitarian caseloads into government-run SP systems can be a starting point for data sharing.
- In the COVID-19 response, linkages across HCT and SP analyzed within this case study took two main shapes:
 - leveraging each other's data to *inform* registration – making sure any new data collected is coordinated with the national information system. The result of coordination and joint systems-building process over time, including significant efforts to address emerging data protection concerns and other risks related to the sharing of data with the government.
 - supporting *new registration and/or validation* efforts (including via dedicated capacity and the sharing/creation of tailored software) to fill-in data-gaps, feeding those into the national social protection information system.
- Over time, capacity for rapid registration, while ensuring accountability to affected populations and safeguarding, can be built. This includes joint efforts that scale up access to civil documentation and electronic IDs that are part of basic eligibility criteria for government programmes.
- As humanitarian actors aiming to support social protection systems, working on 'linking' underlying information systems is increasingly seen as a crucial area of action going forward, yet one that requires considerable analysis. The starting point is often joint socio-economic data collection and sharing, which not only covers all population groups in need but also sets the template for positive collaboration

and demonstrates concretely the value-added of humanitarian cash transfers to the government.

Read more:

- IDS and Irish Aid (2020): [Integrating Humanitarian Response with Social Protection Systems: Limits and Opportunities](#).
- Barca and Beazley (2019) [Building on government systems for shock preparedness and response: the role of social assistance data and information systems](#).
- Schoemaker (2020) [Linking Humanitarian & Social Protection Information Systems in the COVID-19 Response and Beyond](#). SPACE.
- SPACE (2020) [Options for rapid expansion of social assistance caseloads for COVID-19 responses](#) (registration).
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.6](#) and 3.7.
- Smith, G. and Bowen, T. (2020). [Adaptive Social protection – the Delivery Chain and Shock Response](#)(Section 1 Phase 2 – Intake and registration + Section 2). World Bank Social Protection and Jobs Discussion Paper.
- SPACE (2020) [Identifying practical options for linking humanitarian assistance and social protection in the COVID-19 response](#) (Sections on information systems, registration & enrolment).
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Sections on information systems, registration & enrolment).

Payments/delivery

- The capacity of social protection delivery systems/partners (and their payment service providers) to be able to provide payments and adapt payment schedules for the government COVID-19 response varies widely depending on the strength of routine government systems and the broader country context and levels of preparedness. The social protection response worldwide has taken many different and innovative approaches to providing payments to new caseloads – based on these existing capacities (for a typology of how this was done, see [here](#)). Any HCT decision on linking must be based on an analysis of existing social protection payment systems to inform choices as to the *extent* to align and *how* to do this most effectively.
- Depending on this analysis, HC-SP 'linkages' could be operationalized in different ways. For example:
 - HC actors supporting government responses with complementary capacity-building (including capacity building), expertise (technical assistance) and guidance.
 - where existing government capacities are high yet overwhelmed by the scale of the response,



providing HCT support to specific populations in close alignment with government counterparts – testing innovative payment solutions that help to mitigate the propagation of COVID-19 and sharing learning with SP actors over time that can provide the evidence base for scaling up inclusion in government social assistance programmes over the long-term.

- where the existing foundations for digital payments are less developed or involve important fiduciary risks, HCT actors can play a direct role in contracting and managing financial service providers for social protection responses (to ensure accountability).
- Over time, short-term decisions must feed into longer-term strategic outcomes. For example, even if parallel/aligned, HCT support can act as ‘proof of concept’ and ‘appraisal’ of electronic payment systems, informing long-term programming decisions in the SP sector. It can also contribute to strengthening the existence of building blocks for future social protection systems. HCT actors can also play a role in advocating and negotiating with financial service providers.

Read more:

- WFP 2020: [COVID-19 Food Security Response](#).
- CGDEV (2020): [COVID-19 – Pakistan’s black swan event – digital payments](#).
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.6](#).
- SPACE (2020) [Options for rapid delivery \(payment\) of cash transfers for COVID-19 responses and beyond](#).
- Smith, G. and Bowen, T. (2020). [Adaptive Social Protection – the Delivery Chain and Shock Response](#) (Section 3 Phase 7).
- SPACE (2020) [Identifying practical options for linking humanitarian assistance and social protection in the COVID-19 response](#) (Section on payments).
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section on payments).
- See more COVID-specific resources within the ‘payments’ section of ‘[SPACE Useful COVID-19 and Social Protection Materials](#)’.
- World Bank (2020) [Sourcebook on Social Protection Delivery Systems, Chapter 6](#).

Grievances and community feedback mechanisms

The case study was not able to gather significant evidence on HCT/SP ‘linkages’ in relation to grievances and community feedback. Nevertheless, there is a clear rationale for complementarity, capacity building and lesson-sharing to ensure accountability to affected populations across HA and government

programmes. What did emerge was that working together, HCT and SP actors can raise the level of protection for vulnerable households, rather than introducing the potential for people to fall between the cracks.

Read more:

- MicroSave Consulting (2020): [Strategic Communications in Social Protection Programmes](#)
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.6](#).
- Smith, G. and Bowen, T. (2020). [Adaptive Social Protection: The Delivery Chain and Shock Response](#) (section 4, Phase 8).
- SPACE (2020) [Identifying practical options for linking humanitarian assistance and social protection in the COVID-19 response](#) (Section on Grievance/complaints and accountability mechanisms).

Transition and/or exit

- The issue of transition and/or exit is critical and one that has challenges with both HCT and SP actors, with many unresolved questions to date. The COVID-19 crisis has exacerbated the issue: the coverage of emergency support has been very high globally (meaning the scale of potential transitioning/exit is unprecedented), while the prolonged recession that is a direct result of the pandemic has emphasized the need for ongoing rather than one-off support to affected households.
- In terms of HCT/SP ‘linkages’, working together in the medium-term will require a joint effort to transition humanitarian caseloads that are still in need of ongoing support into government systems, where relevant and possible (this may prove more complex for refugee caseloads).
- In the prolonged COVID-19 recession it will be important to start thinking of transition strategies from emergency and humanitarian cash transfers towards income support and/or emergency public works schemes in connection with social partners (employers and workers representatives) and labour market institutions. For certain sections of the population, economic inclusion programming alongside government counterparts could be considered.

Read more:

- UNHCR: [Cameroon: Transitional Safety Net for Central African Refugees](#).
- Smith, G. and Bowen, T. (2020). [Adaptive Social Protection: The Delivery Chain and Shock Response](#) (section 4, Phase 9 on Exit decisions, notifications, and closing cases).
- SPACE (2020) [The Potential Role of Economic Inclusion Programmes to Respond to Those Affected by COVID-19](#).



Monitoring and evidence

Given that many COVID-19 interventions are still being developed, not enough examples were found within the case study to draw any meaningful lessons/conclusions on this topic. Nevertheless, it is critical that monitoring and the collection of evidence cuts across both HCT and SP to ensure progress against joint outcomes is comprehensively captured. Government capacity to achieve this could be supported by HCT actors e.g. via capacity-building (for example with data analysis) and sharing of processes/systems (e.g. approaches/tools, indicators, software, etc.). Separate monitoring activities can also be implemented to fill gaps in data without overburdening the existing social protection system.

Read more:

- UN Women (2020): [Violence against women and girls data collection during COVID-19](#).
- Oxfam (2020) [Stepping up CVA with COVID-19 – Paving the Way We Respond to Future Crisis](#).
- The SPACE [Strategy decision matrix](#) offers a framing to evaluate COVID-19 responses against, while the SPACE [Guidance for Framing Case Studies on Social Protection Responses to COVID-19](#) may also be useful.
- SPACE (2020) Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response. (Section on M&E).
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section on M&E).
- SPACE (forthcoming) M&E of the COVID-19 responses.
- O'Brien et al (2018) [Shock Responsive Social Protection Systems Toolkit, Section D8 on M&E](#).



Annex 4

Country Annex





This annex to the case studies provides more detail on each of the countries covered by the studies. A brief overview of the historical humanitarian/social protection context is provided for each country, followed by points on specific aspects of the humanitarian programme cycle and delivery chain that have been covered in the studies and are relevant in relation to links between humanitarian cash and social protection. Where feasible, COVID-19-specific links are also highlighted.

The country overviews primarily reflect the perspectives of the Sub-Group member agencies who have contributed to the associated case studies and do not intend to provide the full picture of pre-and-post pandemic humanitarian cash transfers (HCT) and links with social protection (SP) nor to reflect the activities of all stakeholders involved in the interventions referenced.

Bangladesh

Overview

Bangladesh has a long history of implementing social safety net programmes to reduce poverty and vulnerability for specifically targeted groups. Despite this, during the pandemic (as well as at other times) some socially marginalized communities and vulnerable groups faced hurdles in accessing their rights to health care and social protection (SP). Urban populations have also been traditionally underserved by formal SP support and this remained an issue during COVID-19 interventions.

Measures such as the movement restrictions and the general “Government Holiday” declared by the government, which were taken to reduce the spread of infections, are associated with serious socio-economic consequences for the particularly vulnerable groups in the country due to the restrictions imposed on them to generate income. Consequently, many slum dwellers have lost their income and do not have sufficient means to compensate for its loss. Vulnerable slum populations, including extremely poor households, climate migrants, women-headed families, elderly slum dwellers, persons with disabilities, are particularly affected. The occurrence of floods and storms during the cyclone and monsoon seasons, the consequences of which many slum dwellers face in addition to the pandemic, further constrain their ability to cope with the impact of the pandemic.

The supply of hygiene products and measures and sanitary installations is very limited and information campaigns are usually not sufficiently adapted to the specific information needs of particularly vulnerable slum dwellers. Hence, slum dwellers lack sufficient access to reliable and accurate information on how to prevent COVID-19 infection and on what to do in case of infection. Additionally, they do not have the means available to undertake preventive measures.

In Cox’s Bazar the pandemic has exacerbated the needs of the refugee population who do not benefit from the government’s expanded social protection approaches.

COVID-19 adaptations

In the course of the COVID-19 pandemic, numerous support measures (e.g. distribution of basic foods, unconditional cash transfers, information campaigns) were provided by the government and NGOs. However, these measures do not reach urban slum dwellers and, as noted above, access to government support services is often not transparent, linked to long and bureaucratic applications processes, during which the vulnerable poor require assistance. Personal networks are often necessary to successfully apply for social services. One part of the large-scale social assistance-based financial stimulus package issued by the Bangladesh Government consists of different initiatives including one-off cash assistance to five million poor households. Less than half of those who were targeted by these measures, however, had received this assistance by the end of July 2020.

Outreach/communication

As highlighted by World Vision in Bangladesh, vulnerable individuals and communities need to have access to the right information to ensure that they are aware of access criteria, the application processes, and available assistance. Using the World Vision’s social accountability approach through the organization’s Citizen Voice and Action project, awareness of and therefore access to the government’s social safety net programme increased significantly. The approach follows a process of informing, educating, and organizing a dialogue between local communities and their government to attain access to the services to which they are eligible. The Citizen and Action Project showed that even in those cases where government officials intend to reach the most vulnerable citizen, corruption remains a considerable access barrier to vulnerable people, as well as the complex administrative processes. Ensuring that those eligible to receive social protection support (a) have the information they need and (b) can contribute to discussions on cash transfers and additional services is key to guiding government efficiency and effectiveness in resource allocation. The Government’s Social Protection Programme was scaled-up in response to the pandemic. This has been complemented by World Vision’s Multipurpose Cash Assistance to address COVID-19 related needs. World Vision collaborated with bKash to transfer money to recipients via mobile banking accounts into recipient accounts. World Vision issued payment orders to the bank, the bank transferred funds to the mobile banking agent (bKash) for payment, and ultimately, the beneficiaries received the funds in their accounts. This allowed transactions of cash to over 18,000 families within only two days. The re-



recipients were given guidance on how to register with bKash. Using this context-appropriate client-focused tool ensured that recipients were rapidly able to access cash assistance. Work undertaken before the pandemic through this approach ensured wider access to government safety nets to those in need, ensuring better access for women and the most vulnerable, allowing them to understand their entitlement to government social protection payments. Target recipients accessing safety nets significantly increased, highlighting that although the roll-out of safety nets is important, ensuring that this is done in a way that ensures the increased provision of and access to information and providing a platform for citizen feedback can help ensure the inclusion of those who should be included.

Separately, GIZ also acted to address both the information gap as well as the need for immediate livelihood support. This includes short-term income-generating measures through multipurpose cash grants (MPCG) for the highly vulnerable population within the slums in the five partner cities, as well as a comprehensive information campaign implemented in the framework of the *Urban Management of Internal Migration due to Climate Change (UMIMCC) / Urban Management of Migration and Livelihood (UMML)*. Accordingly, the GIZ support the implementation of information and awareness-raising measures adapted to the specific information needs of the target group, to improve hygiene measures. The beneficiaries of this COVID-19 response measure (MPCG) must explicitly not be recipients of any other governmental or non-governmental safety net programme in relation to COVID-19.

The UMIMCC projects support the setting up of information hubs (IH) through the decentral structures of the Ministry of Social Welfare, which disseminate information on the available public social services and the required application procedures. In all five partner cities, such information hubs are operational already and a link to the COVID-19 information campaign funded by the GIZ has been made. There is scope to further strengthen the link between similar structures and the dissemination of information on the prevention of infection with the COVID-19 also in other cities in the country.

Coordination

The GIZ-supported MPCG runs the risk of mayors and local administrations of the cities addressed feeling that they are not sufficiently involved and are unable to influence the orientation and implementation of the measures in slum communities in the five cities addressed. To avoid this, transparent communication with multiple influential local actors is necessary for all implementation phases.

Ethiopia

Overview

A National Social Protection Platform is set up to develop social protection policies and strategies, including the National Social Protection Policy (2014) and the National Social Protection Strategy (2016) focusing on a life-cycle approach to social protection based on contributory and non-contributory schemes. Long-term financing is a challenge. Social insurance was extended to the private sector in 2011, covering the full range of pensions and work injury. Ethiopia's large informal economy presents challenges to extend social insurance beyond the 2 million current members (2019). The Productive Safety Net Programme (PSNP) is the referral point for social protection in the country: it reaches 8 million vulnerable households with cash or food transfers and includes a public work component focused on environmental restoration and climate resilience.

COVID-19 adaptations

Since March 2020, the "COVID-19: National Emergency Response Plan" called upon actors to extend the PSNP to people affected by the secondary impacts of COVID-19 on food security. From April to September 2020, the Prime Minister also declared a state of emergency under Article 93 of the constitution, which allowed it to forbid layoffs by private employers. USAID, in addition to the pivots of existing programming, including its support to the PSNP, launched a new COVID-19 Humanitarian Assistance (HA) to reach out to uncovered populations. The Collaborative Cash Delivery Network (CCD) actively supported coordination mechanisms between humanitarian CVA actors and social protection government departments. Additionally, the Ethiopian government with the ILO through social dialogue and social security institutions, implements the "Call to Action", a cash transfer programme of 4.5 million USD as income support or wage subsidy to about 45,000 workers in the garment sector intending to develop in the long-term unemployment insurance.

A National Social Protection Platform is set up to develop social protection policies and strategies, including the National Social Protection Policy (2014) and the National Social Protection Strategy (2016) focusing on a life-cycle approach to social protection based on contributory and non-contributory schemes. Long-term financing is a challenge. Social insurance was extended to the private sector in 2011, covering the full range of pensions and work injury. Ethiopia's large informal economy presents challenges to extend social insurance beyond the 2 million current members (2019). The Productive Safety Net Programme (PSNP) is the referral point for social protection in the country: it reaches 8 million vulnerable households with cash or food transfers and includes a public work component focused on environmental restoration and climate resilience.



Iraq

Overview

Despite an officially declared end of war with the Islamic State group (ISg) in 2017, the region's volatile security conditions have kept Iraq in the throes of unrest and displacement. In neighboring Syria, violent conflict continues to rage on, displacing scores of people each day. As the protracted crisis continues, Iraq remains one of the most fragile states in the world.²⁷

Continued cycles of unrest and displacement have added to the complexities of the humanitarian response in Iraq. Recurring crises have meant that conversations on potential transitions to durable solutions get sidelined as soon as a new emergency occurs. This has limited humanitarian actors' ability to deliberate on and engage themselves in a solutions-centric paradigm, instead of being forced to focus on the immediate needs of the displacement-affected population in the short term. There is however a growing recognition that the humanitarian response in the country needs to take a long-term approach in its strategic planning, one that can at least enable, if not facilitate, solutions for the country's vulnerable population, as well as create exit pathways for international humanitarian actors. The Government of Iraq has a social protection network that provides families with in-kind and cash assistance, through the Ministry of Labour and Social Affairs.

Initially focused on refugees, humanitarian cash transfer programming has been in use in the Iraq humanitarian response since 2014. Humanitarian cash actors however lacked a common understanding of how to accurately identify and assist the most vulnerable households. As a result, the Cash Consortium of Iraq²⁸ developed the Multi-Purpose Cash and Sectoral Outcomes (MPCS) assessment, scoring, and verification tools which have subsequently been endorsed by the Cash Working Group (CWG) and widely used by other Multi-Purpose Cash Assistance (MPCA) actors. A core tool used by MPCA actors in Iraq is the Vulnerability Assessment (VA). The tool was designed around a vulnerability model that uses socio-economic indicators to arrive at an overall vulnerability score.

Recently, MPCA has been adopted by a large number of NGOs and UN agencies to support the most vulnerable. However, MPCA has remained short-term in nature, designed basically as an emergency response support. And while widely accepted to be impactful in enabling households' basic needs, its impact is seen to be temporary at best.²⁹ As a result, MPCA programming has been lacking a long-term perspective that may help contrib-

ute to durable solutions for the country's displacement-affected populations, especially the most vulnerable among them.

To improve the quality, accuracy and transparency of targeting approaches, the Cash Consortium for Iraq (CCI), led by Mercy Corps, led the development of a rigorous proxy means test (PMT) as part of its Vulnerability Assessment approach. The first PMT was developed in mid-2016 and adopted by the entire CWG later that year. This was then followed by the development of a more rigorous PMT in late 2018, again adopted by the CWG the same year. The common use of the PMT by CWG members has been key in facilitating the use of standard assessment tools as well as for monitoring and evaluation and price monitoring.

The new vulnerability assessment model developed for determining eligibility for humanitarian MPCA is methodologically aligned with poverty assessment models used by the World Bank. This alignment has helped **create a humanitarian assessment method that can be used to identify vulnerable households for potential referrals to various social protection schemes**, including those administered by the government for poverty reduction.³⁰ One notable difference between the approaches was that the Mercy Corps analysis for the vulnerability assessment looked at negative coping strategies whereas the Government considered asset ownership in the analysis. The Government relied on its household (HH) survey and had its own eligibility criteria relying on different formulas. The Mercy Corps approach had a baseline that was established with regular monitoring and updates to the datasets. The methodology was evidence-based, context-specific, and identified socio-economic vulnerability. The approach was recognized by donors, UNHCR, WFP and eventually the World Bank who adopted it for the new Safety Net programme. The cash community was very well positioned to provide recommendations to the Government. There were areas of overlap in targeting with the two methodologies. As a result, referral processes were established, joint registration, and the overall expansion of the Government of Iraq (GoI) safety net.

Targeting - general

There are two key issues with a social safety net (SSN) targeting in terms of design: (i) the corruption of the database as a result of government's discretionary transfers following protests, whereby around 600,000 households were added as beneficiaries who were not eligible as per the SSN targeting criteria; and (ii) the actual SSN criteria and process, in that those who are the highest priority as per the PMT may not be those most affected by COVID shocks. This is true for both existing beneficiaries (eligible for the larger transfers as part of the ver-

27 The Fund for Peace, 2019.

28 Comprised of the Danish Refugee Council (DRC), the International Rescue Committee (IRC), the Norwegian Refugee Council (NRC), and Mercy Corps.

29 Currently, the maximum length of MPCA for IDPs in Iraq is 3 months; see Khan, et al., 2019.

30 Extracted from *Humanitarian Assistance and Social Safety Nets in Protracted Crisis: A Case Study of Iraq*, February 2020.



tical scale-up) as well as the new households who were on the waiting list, as the information provided in both cases would have been pre-COVID. Therefore, based on the previous poverty assessment on which the PMT was based (from 2011), the PMT is likely to be skewed more rural than urban, not those who are more likely to have the greatest needs right now in urban areas. With an urban population at 70%, and 45% of the population informal workers, there is an acute need to look at the 'missing middle' that will now be affected by COVID-19 due to not receiving remittances or lockdown.

Humanitarian transfers had developed a targeting system based on a crude PMT to make it more 'aligned' with the SSN (although with different indicators, the extent to which it was aligned in practice is fairly limited). Also, there were concerns that there was a risk that the harmonization of approaches across the SSN and CCI's humanitarian cash transfers while a good idea for the long term, may amplify any gaps in targeting for COVID-specific shocks.

Pre-COVID-19 MPCA Targeting

Pre-COVID-19, MPCA aimed to target 61,465 HHs. 36,270 HHs are considered 'catastrophically vulnerable' and therefore received three months of cash assistance. The remaining 25,195 HHs are considered 'extremely vulnerable' and received a package of two months cash support. With the MPCA sector currently just 8% funded fewer HHs will receive cash support than anticipated.

Demographically, the caseload comprises i) acutely vulnerable returnee HHs and ii) acutely vulnerable out of camps IDP HHs. There are five tiers of vulnerability listed in the CWG MPCA Vulnerability Assessment Guidelines. The two caseloads listed above are deemed the most vulnerable. The revised humanitarian MPCA assessment model, called SEVAT, developed by the task force, redefined 'vulnerability' in terms of consumption, bringing the notion closer to the concept of poverty used in social protection schemes. Methodologically, it applied a Proxy Means Test approach, the same methodology that the World Bank has been working on with government actors for improving poverty targeting in Iraq. HH targeting criteria have been relaxed due to COVID-19. A HH with a monthly per capita income of 110,000 IQD qualifies.

COVID-19 MPCA

Iraq has an existing social protection architecture, but significant humanitarian needs combined with continued political uncertainty and the ongoing economic crisis has compromised

the ability of the government to expand its social protection approach to respond to the pandemic. In acknowledgement of the absence of a government-led social protection response to COVID-19, the CCI³¹ recognized the need to prioritize the economic needs of vulnerable communities and has pursued the rapid implementation of humanitarian Multi-Purpose Cash Assistance (MPCA). The MPCA aims to support the immediate needs of households and communities and ensure that markets remain functional. As the government-led response developed, the CCI focused on the provision of humanitarian MPCA to act as a complementary mechanism that could also facilitate the transition of the most vulnerable into the government-led response for sustained support.

As a result of the pandemic, one group in Iraq at particular risk are migrant workers who are often found to be living in crowded conditions with barriers to accessing health services and social protection systems.

Transition

The Terms of Reference (ToR) for the CWG include a specific responsibility to promote the linking of HC and SP as follows: "Provide strategic insight on the conceptualization of an exit strategy from CTP, with special emphasis on referrals and alignment with the social protection floor." Although this action has to an extent been hampered by the pandemic, its inclusion in the ToR is a positive example of ensuring a lead for helping to define approaches to transition and potential exit.

Jordan

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Overview

Jordan has been significantly impacted by the refugee crisis caused by the civil war in neighboring Syria in recent years. The rapid and ongoing influx of refugees has strained physical and social infrastructure, taking a toll not only on refugees themselves but also on their host communities. Jordan has over 670,000 Syrian refugees, and while over 80 percent of them live outside camps, just one camp, Zaatari, has become the equivalent of the fourth largest city in Jordan. Most refugees live below the poverty line.³² Local economies are strained because of limited infrastructure and service access and an increase in supply of informal labour. This has placed great urgency on finding resilience-building interventions for both refugees and low-income host communities. The distribution of HC and potential linkages with SP in Jordan are facilitated by the following:

31 Comprising the Danish Refugee Council, the International Rescue Committee, the Norwegian Refugee Council, Oxfam, and Mercy Corps.

32 Verme, 2016.



- Well-developed financial infrastructure, including distribution networks for digital payments, such as automated teller machines (ATMs).
- Availability of goods and accessibility of local markets.
- Successes in digitizing HCT, with the widespread use of cards and biometrics to deliver cash and vouchers.
- Well-used models of interagency collaboration focused on HCT delivery.

Jordan's population of 10.7 million includes some 2.9 million non-citizens, including refugees. The pandemic has seen an increase in food insecurity across the population and unemployment on the rise. At the start of the pandemic, the government began implementing social protection responses for its citizens through the existing National Aid Fund (NAF). Refugees are not however entitled to access this system requiring the development of a parallel HC transfer system. For Jordanian nationals, several emergency cash transfer interventions were put in place to help respond to pandemic-related needs including:

- The Emergency Cash Transfer programme' (ECT) targeting daily wage workers by using a formula that calculates eligibility based on deprivation, vulnerability and living standards indicators.
- Expansion of the government's 'Takaful'³³ by increasing the number of transfers to existing recipients (to align with ECT payments) and increasing the number of recipients in total. between 2018-2021
- A 'Bread Subsidy' which assisted around 1.2 million families with one-off payments.

It is expected that communities with low coverage of social services and high levels of vulnerability will be particularly at-risk (Syrian refugees living in informal tented settlements, Dom communities and Jordanians living in hard-to-reach areas, etc.). In refugee camps, risk factors are exacerbated by high population density and socio-economic vulnerability. Agencies are working under the coordination of the Government, to intensify prevention and response efforts in sectors of concern.³⁴

Needs/targeting

While **targeting approaches** between UNICEF's humanitarian cash programmes and the government's National Aid Fund (NAF) social protection schemes are different, they are complementary. Whilst the government and humanitarian agencies have different target populations (a refugee focus for the latter and Jordanian nationals for the former) they also have different interpretations of need and vulnerability. For example, UNICEF delivers humanitarian cash transfers and targets a caseload that consists of mostly Syrian registered refugees,

Iraqis, Yemenis, Sudanese, Palestinians (non-UNHCR), fewer Jordanian nationals (6%) and some Egyptian economic migrants, while the government strictly targets Jordanian nationals. Although UNICEF's beneficiary management information systems (MIS) and NAF's MIS are not yet interoperable, a collaborative approach to **data sharing** allows for both entities to ensure that there are no recipient overlaps or duplications between both programmes.

In 2018, UNICEF developed the NAF's modular MIS which is now a government-owned database focused on targeting, registration, communication, grievances and monitoring. The NAF MIS was built based on UNICEF's experience in humanitarian cash transfers and included tools, such as RapidPro, used by UNICEF in its humanitarian programmes. In response to COVID-19, UNICEF is helping NAF add modules to its MIS to expand coverage of multiple governmental SP interventions including COVID-19-related emergency cash responses. Using experience from its humanitarian cash MIS, UNICEF has facilitated the NAF capacity to enroll 240,000 COVID-19 affected households into a government emergency cash transfer throughout the country's lockdown period

UNICEF also supported NAF by giving a child-lens to its vulnerability and poverty assessments (e.g. by ensuring age and gender-disaggregated data). Poverty targeting was led by the World Bank and done in coordination with NAF, UNICEF and WFP.

Given that many COVID-19 interventions are still being developed, there has been little information available on approaches to monitoring and evidence concerning HC/SP linked responses. The example provided in this case study comes from **Jordan**. Here, UNICEF has established a two-way SMS system, RapidPro, which is used not only to create awareness for recipients but also to collect data and monitoring programme implementation. It is however limited to contexts with good cell-phone coverage. Using the system in response to COVID-19 allowed UNICEF to expand its Hajati cash transfer programme to 200,000 vulnerable households, including Syrian refugees, with text messages confirming the identification of intended recipients, providing instructions on how to open a new mobile wallet without having to physically visit a service provider.

Information systems

In **Jordan**, UNICEF has built a strong relationship over previous years with the government due to its presence in the country for decades, its pre-existing (pre-COVID-19) relationship since 2016 on social protection programming, its ongoing implementation of humanitarian cash transfer programmes and a well-es-

33 Takaful is part of the country's national social protection strategy through the National Aid Fund.

34 [UNICEF Jordan COVID-19 Response Funding Appeal \(March 2020\)](#).



established information management system (MIS) to deliver cash assistance. A key aspect of linking humanitarian cash and social protection has been the establishment of technical working group to work through issues identified in using the humanitarian-focused RapidPro system and extending it for use by the government NAF. An important aspect of the collaboration between UNICEF and its humanitarian MIS and the government's NAF MIS is the data-sharing agreement they have which allows both entities to ensure that there are no recipient duplications in either cash-based responses.

Outreach and communication³⁵

UNICEF was able to use learning from its humanitarian cash management information systems (MIS) (which is also a communications platform called RapidPro) with the government's NAF, facilitating the rapid scale-up of the NAF in response to the pandemic. This enabled the provision of emergency cash support to an additional 240,000 households. RapidPro can be used for two-way SMS and other digital communication (such as WhatsApp and Viber) for multiple reasons including data collection and awareness-raising. UNICEF Jordan reports that RapidPro is highly trusted by recipients who value the opportunity to communicate directly. In the pandemic response, the 240,000 new recipients were able to receive emergency cash quickly, remotely and safely with text messages being sent through the RapidPro system, confirming the ID of targeted recipients to help determine whether they had an active mobile wallet. UNICEF was also able to provide instructions on how to open a new mobile wallet if necessary.

Registration/enrolment

In response to COVID-19, the Jordanian government agency NAF requested UNICEF's operational support and technical expertise concerning recipient registration and enrolment in its Emergency Cash Transfer programme. This included using tools developed by UNICEF for its humanitarian programmes such as RapidPro.

Adopting other approaches applied by UNICEF in its humanitarian cash programming, included adding a child-lens to the NAF vulnerability and poverty assessments. The poverty targeting was led by the World Bank and done in coordination with NAF, UNICEF and WFP. While targeting approaches between UNICEF's humanitarian cash programmes (which focus on non-Jordanian nationals) and NAF's social protection schemes (which focus on Jordanian nationals) are different, they are purposely complementary to supplement assistance and avoid overlaps.

Transition

UNHCR's COVID-19 response in Jordan included an exit strategy to ensure that the population does not move into a "welfare status" but can continue to work towards self-reliance once the economy opens up and restrictions on access to jobs ease. The purpose of the exit strategy is to assist the sector in **defining indicators** to consider when judging the stages for expansion/retraction/withdrawal of the emergency HC. The indicators are designed to reflect the global and national economic recovery. In the absence of solid data on this, the Basic Needs Task Force has defined proxy indicators that will allow for expansion or retraction of the emergency response which tracks the reality on the ground in Jordan. The indicators are as follows:

- **Removal of restrictions by the Government of Jordan** - removal of curfew and lockdown restrictions imposed by the Government. With the lifting of restrictions, opening of business and access to transportation, the population would be able to move and engage in economic activities, thus removing the need to be provided with additional assistance.
- **Withdrawal of the Government of Jordan's assistance package for COVID-19 response** - The Basic Needs Assistance provided by UNHCR and partners is aligned to the Government of Jordan's assistance to the population. The exit of the assistance for refugees will coincide with the Government of Jordan's exit of the assistance for the general population as it considers the improved access to economic activities due to the change in the situation.
- **Full resumption of NGO-led activities** - Another indicator that would be considered would be the resumption of income-generating activities that are carried out by different stakeholders: livelihood programmes, cash for work programmes etc. These are all designed to create economic activities for the target population with the assumption that most of the population assisted under this response would be engaged in such activities. The resumption of these activities also indicates that economic life in Jordan is slowly moving to normalcy.

Kenya

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Of Kenya's population of 51.4 million, approximately 1.7 million people living in informal settlements and urban areas are projected to face food insecurity due to the impact of the COVID-19 pandemic on the economy, increased food prices and decreased incomes or job losses. Following intense rainfall, multiple lakes in Kenya and waterways are at record-high levels, causing displacement and loss of livelihoods for surround-

35 More details can be found [here](#).



ing communities.³⁶ As of 31 May 2020, Kenya hosts 494,649 refugees and asylum-seekers in Kakuma and Dadaab refugee camps, as well as urban areas (84% live in camps and 16% urban areas). In addition, an estimated 18,500 stateless persons live in the country.³⁷ The *Inua Jamii* is the Government's flagship National Safety Net Program (NSNP) targeting orphans and vulnerable children, older persons, persons with severe disabilities and includes the Hunger Safety Net Programme (HSNP). The objective of *Inua Jamii* is to uplift the lives of poor and vulnerable citizens of Kenya through regular and reliable bi-monthly cash transfers.

Payments and delivery

The Kenya Red Cross Society (KRCS) began implementing cash transfers as early as 2011, using cash assistance in response to multiple crises since then. Kenya provides a conducive environment for cash transfers for multiple reasons as it has a vibrant, market-based economy that has shown the capacity to recover from disaster quickly. Kenya has an advanced private sector and financial institutions which provide innovative delivery mechanisms such as M-Pesa, a mobile money transfer mechanism, which has become a recognized, popular and efficient form of cash e-transfer. Banks (Equity Bank, KCB and Cooperative Bank) have a presence at the community level and the payment service provision is competitive. Finally, the Government of Kenya is very supportive of innovation and promotes public-private partnerships.

In response to the pandemic, the Government of Kenya has used cash transfers to deliver support to the existing recipients of social protection support. However, the scale and impact of the pandemic has meant that the government has sought collaboration from humanitarian agencies, including the KRCS, to both vertically and horizontally expand its support. As a result, and using its in-depth knowledge of delivering rapid cash-based assistance in times of crisis, the KRCS is supporting the government in the form of providing cash top-ups to existing recipients as well as identifying new recipients based on established vulnerability criteria. KRCS has used the Red Cross and Red Crescent Movement of building its HCT capacity by developing enabling systems (e.g. including HCT in key institutional strategies and policies; signing agreements with a range of financial service providers; local vendors; telephone and mobile money transfer companies; and establishing standard operating procedures); ensuring updated programme tools and templates; strengthening its resources by undertaking an initial capacity assessment which it used to prioritize focus cash preparedness activities; and coordination activities such as co-chairing the national and county level Cash Technical Working Group.

Alongside more traditional delivery mechanisms such as banks, mobile money and vendors, KRCS and its partners have been working on blockchain-based community currencies. Also, KRCS has used the RedRose integrated platform to manage cash transfers. The system offers functionalities of online and offline recipient registration, compliance with privacy certifications, assets delivery and monitoring and evaluation. This platform has not yet led to linking KRCS humanitarian cash transfers to social protection, but it is in close coordination with the government with a view to potential linkages in the future. Using such innovative and technological tools to distribute life-saving assistance in response to COVID-19, the government is interested, engaged and watching. Through using different payment mechanisms there has been a dramatic increase in the speed at which cash is delivered. Having institutionally-agreed and pre-signed agreements with a range of different financial service providers has also been critical for the rapidity of KRCS' pandemic response.

Lebanon

Similar to Jordan, the Lebanese government responded to the pandemic through the expansion of its existing social protection approaches for its citizens. It is estimated that there are some 1.9 million refugees living in Lebanon making it the country with the highest ratio of refugees to population in the world. Humanitarian actors have spent the last five years trying to harmonize HC transfers provided to refugees to help address their food and basic needs. At the same time, the poverty of the Lebanese population has increased, and the national social protection system has struggled to support those in need. For both citizens and refugees, the pandemic has created a deeper vulnerability. The Lebanon Crisis Response Plan (LCRP) highlights the need for humanitarian actors to support affected Lebanese as well as refugees. Refugees are not able to benefit from the national social protection system and particularly the National Poverty Targeting Programme (NPTP). However, in an effort to better align HC and SP, on behalf of the government of Lebanon, WFP provides a monthly food e-voucher to NPTP recipient households, using WFP's refugee distribution systems, to achieve efficiencies and economies of scale. In addition, the transfer values for the two population groups are aligned.

Grievance mechanisms

Efforts to overcome the challenges identified have centered on the continued use of well-known systems such as telephone hotlines. For example, the jointly run UNHCR and WFP

36 [Kenya Situation Report, 20 October 2020](#)

37 [UNHCR Kenya COVID-19 Response Update July 2020](#).



call center has provided increasingly vital assistance during the pandemic as many face-to-face humanitarian activities have had to resort to remote implementation approaches, highlighting that innovation is not always necessary to ensure that information is both given and received. Other approaches in addition to such toll-free communication mechanisms include the use of SMS and smartphone communications (WhatsApp; Viber; Messenger) and social media. There is a desire to use the joint call center to support the Ministry of Social Affairs recipients but this is not taking place yet. Where technology is limited or not well-used, an initial understanding of information flows is essential to ensure that information is accessible and feedback routes are well understood. Working with community focal points and equipping them with communication tools (such as phones and radios) is one approach. The key point has been to develop and use multi-channel messaging approaches which are suitable for context and which are accessible by all.

Transition

A previous (not COVID-specific) pilot by Oxfam saw a scaled-up HC response to households to overcome short-term socio-economic shocks, such as loss of job or illness. The Temporary Cash Assistance project targets Lebanese households already under the government's social protection system, the National Poverty Targeting Programme, as well as Syrian households. The scheme works through the Ministry of Social Affairs' Social Development Centres, which oversees social protection in the country. The aim is that by working with the government over a period of time and supporting appropriate targeting approaches, the increased caseload will be taken on by the government. In the context of the recent social unrest in Lebanon, compounded by COVID-19; the government is showing much more openness to such interventions.

Libya

Overview

As a result of the ongoing conflict and the fragile government system in the country, there is a severe shortage of imported goods. Long bureaucratic processes, a scattered financial system and logistical challenges all contribute to this problem. Moreover, the already overburdened health system lacks both the physical and human capacities to deal with the pandemic. A high unemployment rate, especially among women, is expected to further increase as a result of Covid-19.

Madagascar

Overview

In Madagascar, social protection is fragmented with expenditures spread across small-scale, isolated, and low-impact programmes. The National Social Protection Strategy (NSPS) for 2019-2023 defines a set of priority programmes (Education, Health) and a roadmap to develop an integrated national system around four pillars: social cash transfers, basic social services, livelihood support, and contributory social insurance schemes. In the context of the new National Employment Policy, unemployment insurance is being developed with the "Caisse Nationale de Prévoyance Sociale" (CNAPS) as well as a mechanism to expand social protection to workers in the informal economy.

Covid-19 adaptations

The government response to the pandemic has included several social protection measures e.g. food distribution. A cash transfer programme, TOSIKA FAMENO, was launched in collaboration with development partners (UN, IFIs, EU, IFRC, NGOs) providing nearly 368,000 households across eight regions with a one-off payment of 26 USD. Resources mobilization, response implementation and system strengthening were facilitated by the Cash Working Group (CWG) under the leadership of the Government and the alignment of the response to the NSPS. The C-19 crisis has highlighted the necessity to reform, extend and shockproof the Social Protection system in Madagascar.

Malawi

Overview

The COVID-19 pandemic is negatively impacting the economic outlook of **Malawi's** population of 18.14 million people, with short-run effects associated with the disruptions in trade, investment and remittance flows.³⁸ Government measures to control the spread of the disease have led to slow economic activity and labour mobility which are disproportionately affecting urban residents and the most vulnerable, who are often dependent on daily incomes, causing food insecurity and income gaps for the urban poor.³⁹ Markets are experiencing supply chain disruptions, which lead to shortages or increased cost of basic goods. Malawi has one of the lowest Gross National Incomes (GNI) per capita in the world and an economy that is

38 [Short-term impacts of COVID-19 on the Malawian economy: Initial results.](#)

39 [Malawi Key Message Update: Impacts of COVID-19 cause food and income gaps for the urban poor, July 2020.](#)



heavily reliant on rain-fed agriculture.⁴⁰ Around 70% of the population live below the poverty line and 89% of the workforce are part of the informal economy. To address the economic impact of the pandemic, the government expanded one of its five ongoing social protection programmes, the Social Cash Transfer Programme (SCTP, known locally as *Mtukula Pakhomo*) which is an unconditional cash transfer programme targeting 163,000 ultra-poor, labour-constrained households, in 18 rural districts but not urban areas. Malawi also hosts 46,296 refugees, mostly from Congo (DRC) and 450 asylum-seekers monthly,⁴¹ none of which receive social protection assistance.

Coordination

The Humanitarian Country Team (HCT) has provided inputs into the country's multi-sectoral National COVID-19 Preparedness and Response Plan. In addition to the Clusters, the United Nations Country Team (UNCT) has put in place technical working groups (health coordination, socio economic impact, communication, financing and information management) to support the coordination mechanism. UNICEF is leading the Communication for Development and Communication working group and is a member of the other working groups.

Grievance and redress mechanisms

UNICEF and the government jointly developed a grievance and redress mechanism for the CUCI COVID-19 Urban Cash Intervention, which extended the government's existing social protection scheme (which focused on rural areas) to some of the most affected urban populations. The creation of a **toll-free phone line** in this emergency cash-based response (which will last for four months) will ensure the management of grievances during COVID-19 for the short-term, but is also designed as the foundation for a long-term grievance and redress mechanism for social protection programmes in the country, highlighting a clear link between UNICEF's humanitarian cash mechanisms and longer-term, government-led approaches.

Information systems

With no social protection interventions in urban areas to build on, the implementation of the entire CUCI programme required GIZ and development partners to leverage existing IT and information systems and provide technical support around information systems, registration and enrolment of eligible households in pre-identified hotspots. In addition, an e-payment delivery mechanism needed to be built and contracted and, working with UNICEF and the government, a new grievance and redress

system developed. This included the development of rapid digital data collection tools and an app, as well as the development of an Application Programming Interface (API) to enable communication between the UBR to the intervention's Management Information System (MIS). Technically, linking three IT systems (the Unified Beneficiary Registry, the MIS and a call center), was a challenge due to limited clarity on roles and responsibilities, which were not clearly defined at the initial design of the programme.

Registration

GIZ and other development partners have been supporting the government since before the pandemic to build a single registry for social protection beneficiaries - the Unified Beneficiary Registry (UBR). The UBR is currently used in 18 out of 28 districts and supports the identification of beneficiaries for the Social Cash Transfer Programme (SCTP) and the Public Works Programme (PWP), two of the five main programmes delivered under the umbrella of the Malawi National Social Support Programme II (2018-2023). During COVID-19, the main gap identified was that the UBR did not cover data for urban populations in the four major cities in Malawi - cities which were most heavily impacted by the pandemic. The SCTP was designed to target the ultra-poor and labour-constrained segments of the population in rural areas through regular cash transfers largely distributed through manual systems.

This significant gap, which excluded some of the most affected, triggered the Government to design the COVID-19 Urban Cash Intervention (CUCI) which aims to be implemented with the support of various development partners and seeks to protect the livelihoods of the urban poor and cushion the socio-economic effects of COVID-19. It targets approximately 185,000 households in the four concerned cities for four months with regular cash transfers. The ILO and WFP have supported the government in defining the target beneficiaries, and in the design of the selection mechanism that identified which neighborhoods need support the most. This is done using a mix of data analysis, consultations with local councils and the use of high-resolution satellite data to create a map of the cities "hotspots" for families living in poverty and depending on work in the informal sector. Within the hotspots identified, all households will be registered to benefit from CUCI for four months. To ensure the safety of communities and government workers, the ILO provided Occupational Safety and Health guidelines for the registration process. To date, targeting has begun in two of the four cities. The CUCI intervention uses a largely geographical targeting approach, targeting specific "poverty hotspots" within the major urban areas, but targeting only people without formal employment that are the most affected by COVID-19. GIZ cur-

40 [Malawi Emergency Appeal \(May - October 2020\)](#).

41 [Malawi Emergency Appeal \(May - October 2020\)](#).



rently supports the government with the validation of hotspots, actual data collection and enrolment of beneficiaries in two cities in Malawi, whereas the World Bank supports the other two major cities.

There was however limited government capacity to steer and coordinate a new cash intervention, resulting in huge delays in the implementation. This includes the absence of a clear roadmap guiding the preparation and implementation of the COVID-19 Urban Cash Intervention. Delays were further exacerbated by the 2020 presidential elections, creating fears over a political capture of the response. The government has requested support from the Food Security and Nutrition cluster.

Payments

The absence of a comprehensive digital payment infrastructure and clear government e-payment strategy results in a prolonged preparation phase to create a basis for the delivery of payments in the COVID-19 Urban Cash Intervention.

Niger

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Overview

Situated in the Sahel, Niger experiences recurrent slow onset shocks, with pockets of flooding, animal and pest attacks, and conflict. COVID-19 led the government to implement lockdown measures which included restricted movement, closed schools, curfew, border closures. The government's current safety net scheme provides 15,000 FCA per household per month for 50,000 very poor households across 23 communes in 8 regions. Currently, there is no shock responsive component within the government social protection system, although the government does have a Covid-19 emergency response project that covers 8,500 households for 12 months. The social protection scheme targets poor households for 24 months and the idea is that in 5 years the country will cover the entire 266 communes in the country.

Save the Children is exploring how Household Economy Analysis (HEA)⁴² could contribute to the design of a social protection system that includes a shock responsive element. Conducting the baseline during a non-shock period is a preparedness action in itself, as the baseline can then be used to model projected shocks or changes to understand their impact on households' abilities to meet basic food needs and protect their livelihoods. The recommendations from the analysis can inform the govern-

ment and the humanitarian and development communities on possible next steps in preparation for equipping Niger's SP systems to be more responsive to shock.

To explore if HEA could contribute to the design of the ongoing social protection scheme in Niger, and to determine how likely it would be that vertical or horizontal expansion of the scheme would be required during an average or shock year, Save the Children commissioned a **historical analysis of the country's HEA data**. The analysis used eight years of HEA data (from 2012-2020) from five livelihood zones in the country.

The analysis determined whether the monthly transfer that the government provides (15,000 FCA) through its social protection scheme is enough to cover all of the food and income deficits that have been experienced by the very poor and poor wealth groups during the previous eight years, including in the most severe years. Households in the poor wealth group likely receive nothing from the current government scheme. Six years across the eight years were identified during which poor households experienced a deficit. Under the current social protection scheme, an emergency expansion or scale-up would be required during these years to ensure poor households could meet their basic food and livelihoods needs.

The HEA historical analysis provided insight into the adequacy of the transfer amount and who the government might consider targeting over the year, based on vulnerability, livelihoods and seasonality. The analysis highlights that the existing government scheme is providing enough cash (in terms of transfer size) to very poor households to cover any food or income deficits from the previous eight years. However, households from the poor group do not benefit from the scheme and would require increased support (e.g. through the expansion of the government scheme) in certain years (the analysis showed that poor households in some livelihood zones experienced deficits in six of the previous eight years).

Expanding to respond to shocks

Within the context of COVID-19 (or any other shock), the same principles that were used within the historical analysis can be applied each year to identify if there are any additional needs outside of what is provided through the scheme. The outcome analysis that is run by the HEA working group twice per year⁴³ identifies if any wealth groups in any livelihood zones face current, or will face future, food and income gaps. These gaps can then be compared to the transfer values being supplied through the government scheme and identify if any scaling up or out is required.

42 [A livelihoods \(analysis\) framework](#) which details and quantifies different types of households' food, income and expenditure sources.

43 Note that an exceptional HEA analysis was carried out by the SAP and the HEA working group (led by Save the Children) in May, to assess the economic impact of COVID-19 on households.



The historical analysis was completed in September 2020 and specific recommendations for action are being shaped at the time of writing. It is hoped, however, that the results will influence the existing scheme as well as humanitarian cash actors to prioritize groups of households and geographic areas for humanitarian cash; and to use HEA results to be more proactive by providing anticipatory support before families feel the impact of a shock to better cope (forecast-based shock responsive social protection).

To design a shock responsive safety net with the HEA, it requires:

1. An up-to-date set of HEA baselines covering all areas benefitting from the safety net programme, and ideally covering the whole country.
2. A monitoring system that generates data on crop production, livestock production, market prices and (ideally) other components of the household economy, in a timely fashion.
3. The data analysis tools required to run the HEA outcome analysis.
4. People with a good understanding of HEA who can run the outcome analysis season by season.
5. Buy-in to the system from all relevant stakeholders, including government and NGO implementing agencies and donor organizations.

Monitoring

From a monitoring perspective, HEA requires data on “key parameters” – that is, the most important food and income sources for households in a specific livelihood zone. Examples include food prices, crop and livestock production, and casual labour wages. This data is currently collected twice per year through a combination of government monitoring systems (mostly for price and production data) and direct collection by the HEA working group. This data needs to be collected in each livelihood zone.

North-East Nigeria

Overview

In Nigeria, the social security system is limited to the formal sector, only 3% of the population is registered to the National Health Insurance Scheme (2018) while 80% of the labour force is in vulnerable employment with no access to social protection. Despite the National Social Protection Policy (2017), systemic gaps remain, including a lack of coordination at federal and local levels leading to the fragmentation of social protection programmes throughout the country.

Covid_19 adaptations

In Nigeria, the Federal Government has been proactive in introducing several measures to stem the adverse effects of the pandemic on the country’s economy including the expansion of social protection packages for the most vulnerable. This was done using a World Bank loan, providing 20,000 Naira (52 USD)/month for 4 months to vulnerable households on the National Social Register under the National Social Safety Nets Project (NASSP). Despite an aid increased from 2.6 million households to approximately 4 million households, it remains far fewer than the 90 million people living in extreme poverty. Other measures included food packages, access to credit, tax rebates for employers who agreed not to fire employees in 2020.

With limited coverage in the North East of the country, the government turned to humanitarian agencies, connecting through the CWG to deliver cash transfers to those not already covered by the system. This approach was possible due to existing relationships and collaborative action in relation to linking HC and SP in the years preceding the arrival of COVID-19. The work of ACF provides an example whereby consistent advocacy efforts with the Abuja Cash Working Group, to ensure that recipients of humanitarian cash could ultimately be linked to state social protection. The ILO with EC/DEVCO supports the National Social Safety Nets Coordination Office (NASSCO) to strengthen the National Social Registry (NSR) as a shock-responsive social protection system to increase access to social assistance for the extreme poor affected by the COVID-19 crisis.

The payment process on the NASSP is still essentially ‘cash in hand’ as full e-payment services do not have coverage in rural areas. On the government’s planned COVID-19 social protection response in urban areas, however, there are other, more accessible channels available. The government is seeking to make transfers through mobile money accounts and UNICEF is supporting the federal government and 4 states to move forward with the digitization of the NASSP cash payment mechanism.

Pakistan

Overview

COVID-19 has created societal and economic disruption in Pakistan. Humanitarian agencies are working within the five pillars of the government’s ‘COVID-19 Socio-Economic Framework’ which focuses on the health of essential health workers, new-borns, women and the elderly, social protection and basic services around nutrition, food security, continuity of education, learning and social services, shelters and uninterrupted services to victims of sexual and gender-based violence (SGBV), as well as the economic recovery to protect the jobs of at-risk workers of small-scale farmers and daily wage labourers and also provide urgent aid for small and medium-sized enterprises and vulnera-



ble productive actors hit hard by the pandemic as well as on social cohesion and community resilience nationwide.⁴⁴ Pakistan's flagship national safety net programme, the Benazir Income Support Program (BISP) provides income support through predictable 15 USD monthly cash transfers to more than 5.2 million families of the country's nearly 20 million poorest people out of a total population of over 212 million. Over 3.5 billion USD has so far been disbursed to beneficiaries and the programme aims to reach 5.3 million families by the end of the current financial year. Since the BISP delivers cash transfers to female family members, this has significantly contributed to women's empowerment and promoting financial inclusion. Pakistan also hosts 1.4 million registered Afghan refugees, of which approximately 68% live in urban and semi-urban areas alongside Pakistani host communities. At least half live hand-to-mouth, most of those who had employment before COVID-19 were daily wage earners. UNHCR provides emergency cash assistance since mid-2020 to vulnerable refugee families with disabilities, medical conditions and daily workers and does so in collaboration with the Ministry of States and Frontier Regions (SAFRON).⁴⁵

Payments

Delivery mechanisms of existing government-led and run social protection programmes became more efficient and accountable due to the response to the COVID-19 emergency leading to horizontal and vertical expansions and scale-ups of those. For example, eligible beneficiaries with CNICs (IDs) were sent to partner banks which carried out due diligence and know-your-customer checks. Bank accounts were then opened and applicants received an SMS with instructions relating to the date of delivery. Biometrics have also been used at ATMs for recipients to access their transfers. This variety of delivery mechanisms are well known and tested by several humanitarian organizations, so their use to support government expanded social protection approaches during the pandemic has been critical in terms of facilitating increased and rapid access to cash for those in need.

The Philippines

Overview

There is a strong social protection system in the Philippines although for some populations, such as the indigenous/displaced, accessing social protection benefits is fraught with difficulty. Blighted by cyclical natural disasters and with ongoing conflict and violence in the Bangsamoro Autonomous Region in Muslim Mindanao (BARMM), the humanitarian response to this protracted crisis is complex. Targeting and registration of at-risk and hid-

den households for both humanitarian and social protection support is an ongoing struggle with the local government acting as a barrier for political and cultural reasons. Concerning gender and inclusion, there is a legal and policy framework for gender-based violence (GBV) in the Philippines which has been developed over the last decade. However, with changing political climates the importance of local and political leadership is extremely influential in terms of enabling an environment for inclusion. Amongst others, UNFPA (which is co-lead, with the Ministry of Social Services and Development (MoSSD), of the GBV sub-cluster at national and sub-national levels) delivers HCT with a focus on cash for protection, cash for health and cash for work. At the beginning of the pandemic, UNFPA worked closely with other humanitarian and development actors, using its knowledge of at-risk communities through existing HCT programmes to identify barriers to accessing social protection support for pandemic-related needs.

COVID-19 inclusion

At the beginning of the pandemic, UNFPA conducted a **gender and inclusion assessment** to identify which groups were being left behind and what their barriers to accessing social protection services were using a purposive sampling approach. Five regional clusters and three constituency clusters were formed, and eleven categories of vulnerability were identified (e.g. persons with disabilities; young people; solo/indigent parents; IDPs; migrant workers; LGBT persons;). Twenty-seven agencies participated in the assessment and assessment data was shared with the MoSSD in order to assist them in refining their social protection services to include those most in need of support. UNFPA has also supported the Ministry with capacity building of social workers and policy and technical guidance around safety. The assessment was critical in ensuring local government endorsement of a response that ensured the inclusion of marginalized groups. Linking HCT and SP in response to the pandemic has been greatly facilitated not only by UNFPA's long relationship with the MoSSD but also due to have a staffer embedded within the Ministry – an approach which has been critical in influencing the design and implementation of MoSSD activities since the outset.

Saint Lucia

Overview

The government of Saint Lucia had in place a national social protection system before the pandemic. In response to COVID-19, WFP signed a Memorandum of Understanding (MoU) with the Government to support an expansion to the existing Public Assistance Programme by 1,000 households.

⁴⁴ [United Nations Response to COVID-19 in Pakistan \(5 June 2020\)](#).

⁴⁵ [UNHCR rolls out emergency cash assistance in Pakistan to help refugees impacted by COVID-19](#).



Transition

In **Saint Lucia**, in response to the socio-economic impacts of COVID-19, the government is expanding the Public Assistance Programme from approximately 2,600 to 3,600 households for six months with support from the UN India Fund and the World Food Programme. This initial expansion/temporary transfers will be linked to a permanent expansion under the World Bank-supported Human Capital Resilience Project. This intervention is unique in resulting in the sustained inclusion of new beneficiaries into the social assistance programme.

Turkey

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Overview

Turkey hosts more than 4 million registered refugees, of whom 90% are Syrian. The ESSN was launched in December 2016 to meet the basic needs of the most vulnerable out-of-camp refugee households. ESSN was designed in conjunction with the Government of Turkey and implemented through a partnership with Turkish Red Crescent (TRC), WFP (ESSN I and II), IFRC (ESSN III), the Ministry of Family, Labour and Social Services and Halkbank.

In order to meet the formidable and unprecedented challenge presented by COVID-19, the ESSN programme reallocated its resources to provide additional cash assistance to 1.7 million vulnerable refugees – with households receiving two instalments totaling 1,000 TRY in addition to regular monthly assistance. Great efforts were undertaken by TRC and IFRC to ensure coordination with NGOs and UN agencies and ensuring alignment in terms of transfer values with national social welfare system allowances for Turkish citizens.

Outreach and communication

COVID-19 containment measures had a direct impact on the way TRC conducts its work – relying on remote monitoring approaches instead of focus group discussions. Outreach activities focused on the innovative use of technology – with households being provided with tablets to carry out surveys (for the duration of the survey only). To respect social distancing measures during the pandemic, TRC staff pass the tablet to respondents and wait outside until the survey is completed, at which point the respondent hands it back. Critically, COVID-19 has also demonstrated the value of investing in localization – with TRC being the sole actor on the ground with dedicated staff still carrying out operations. Normally staff from the government local social assistance office (Social Assistance and Solidarity Foundations- SASFs)

are present and whilst their focus is on the national social assistance programme for Turkish citizens, they undertake household verification visits to ensure that assistance is given to families who meet the eligibility criteria in the same way as they do for the national programmes. However, with safety precautions in place, this approach has been hampered. As a result, during the pandemic, TRC has provided support to the SASFs through TRC Service Centres by taking applications not only for the ESSN but also for the national social assistance programme. TRC also provides translators and vehicles to support the daily activities of the SASFs if asked to do so by the Ministry of Family, Labour and Social Services (MoFLSS).

TRC has continued to improve and enhance its use of communications tools to ensure that people are not only updated on their cash transfers but are also aware of preventative measures with regard to COVID-19 – aligning key messaging with the Ministry of Health and safeguarding against the proliferation of rumors and misinformation.

Whilst TRC's Kizilaykart Platform is not involved with communication for government caseloads, communication activities for the Kizilaykart programmes are closely coordinated with the MoFLSS to ensure accuracy and integrity of the information shared with both host and refugee communities. This is particularly important for Kizilaykart programmes as they mirror the national programme in terms of the transfer amount; payment cycle; and conditionality.

Transition and exit

A key challenge in the implementation of the ESSN since 2017 has been sustainability and exit strategy, namely how ESSN should transition from a humanitarian-type to a development-type response to promote a sustainable exit from poverty and vulnerability. Thinking around this has required a concerted effort and investment of time to design strategies geared towards providing opportunities for recipients to transition towards income-generating opportunities.

Zambia

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Overview

As a result of the pandemic, **Zambia** has suffered an economic slowdown, disruptions to international trade and depreciation of the kwacha. The Government of the Republic of Zambia (GRZ) estimates that 7.6 million people in 43 districts, out of a population of 17.35 million, are at risk. The COVID-19 related movement restrictions and measures taken by the government are impacting the macro-economic conditions,



resulting in job losses in several sectors of the economy⁴⁶ and are having devastating impacts on livelihoods for vulnerable populations, particularly those working in the informal sector which consists of 65.4% of the entire population and are mostly women. Other vulnerable groups who rely on the informal sector to meet their basic needs, such as persons living with HIV/AIDS, children/adolescent girls and the elderly are being adversely affected. The pandemic is also likely to have a lasting impact on the country's socio-economic conditions with an estimated 1.2 million households that could fall further behind, including nearly 230,000 female-headed households. The government-led Social Cash Transfer (SCT) is the country's flagship social protection programme that provides unconditional cash transfers and targets 239,000 extremely poor households, starting with the poorest districts. The pandemic is unfolding at a time when the country is struggling with recent drought and floods which resulted in increased food insecurity in over 58 districts, leaving more than 2.3 million people in need of humanitarian assistance. Also, Zambia hosts 88,064 refugees which have limited access to health, basic services or government social protection within settlement areas.

Registration and enrolment

As part of the regular Zambia Humanitarian Response Plan pre-COVID-19, two Emergency Cash Transfer (ECT) programmes were implemented by the Government of the Republic of Zambia (GRZ) through the Ministry of Community Development and Social Services (MCDSS) and the Disaster Management and Mitigation Unit (DMMU) with support of the three agencies in the UN Joint Programme in Social Protection (UNJPSP-II), namely UNICEF, WFP and ILO.

The ECT was an extension of the regular Social Cash Transfer (SCT) Programme, which is the flagship national social assistance programme with national coverage. Donors contributing to humanitarian assistance in Zambia conditioned their funds to the ECT, requesting that UNJPSP-II partners, led by UNICEF, strengthen the registration and verification mechanisms of the SCT registry (which would be used for the ECT programme). Recipient primary listings under the food security component of COVID-19 ECT were obtained from the MCDSS-managed Zambia Integrated Social Protection Information System, complemented by lists of vulnerable households provided by Faith-Based Organizations. Additional households were included based on information provided on the informal sector by ILO and the Ministry of Labour and Social Security (MLSS). These were further supplemented by fresh registrations conducted by Community Welfare Assistance Committees (CWACs) and WFP trained monitoring assistants and in collaboration with the Provincial and District social welfare officials. **MCDSS through the**

CWACs facilitated WFP monitors to confirm the authenticity of the beneficiaries, making this humanitarian/SP collaboration an essential element of the horizontal and vertical expansion.

In order to strengthen the social protection-focused expansion of the SCT, UNICEF supported the GRZ to conduct a large-scale household verification exercise of 97,000 households already on the registry to ensure that all information in the MIS was accurate. It was then possible to use this data for the expanded SP ECT.

Payments

Donors contributing to humanitarian assistance conditioned their funds to the ECT, requesting that UNJPSP-II partners, led by UNICEF, also set up a temporary parallel payment system to the government's social protection programme due to some observed corrupt practices in the programme in 2017, which resulted in the alleged misapplication of funds by one of the parastatal payment providers. As such, financial service providers (FSPs) were contracted directly by UNICEF to carry out the ECT payments. UNICEF conducted financial strength assessments (micro-financial assessments) to assess capacity and risk, as well as to establish strict financial controls for delivery. UNICEF and the GRZ established procedures to use the SCT MIS to generate payment lists for the ECT, which were verified by UNICEF to support risk mitigation and then shared with the FSPs. UNICEF implemented data privacy agreements with the FSPs to safeguard beneficiary data. Detailed payment procedures were developed and agreed upon with FSPs and GRZ community structures, including pay point managers. Training were organised with all existing SCT community structures (district authorities, community volunteers) to familiarize them with the ECT programme and the modified payment procedures. UNICEF also partnered with the University of Zambia to establish an independent third-party monitoring and payment verification system for the ECT.

46 [United Nations COVID-19 Emergency Appeal Zambia \(May - October 2020\)](#).







March 2021

The Grand Bargain Sub-Group on Linking
Humanitarian Cash and Social Protection