



Adaptive social protection and decentralisation: a conceptual framework

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Introduction

The purpose of this paper is to provide an entry point for discussion of -and practical engagement with- the potential for linking the Adaptive Social Protection and Decentralisation agendas, in the first instance by technicians and practitioners within the German Development Cooperation. The need to clarify the linkages and areas of convergence between these is evident for two key reasons.

- First, these are two areas of strategic priority for German Development Cooperation. For example, while
 decentralisation is not specifically mentioned in the BMZ 2030 Reform Strategy, the core areas of BMZ
 intervention linked to SDG 16 (the promotion of peaceful and inclusive societies) that are cited in this
 strategy include democracy, local authority structures and social protection. Moreover, a related BMZ
 document, A Sustainable Path to the Future: The 2030 Implementation Initiative, sees decentralisation
 and municipal development as central to the implementation of initiatives to achieve the SDGs.
- Second, more broadly, understanding the institutional underpinning for successful adaptive social protection will be crucial to ensuring outcomes that guarantee increased ownership, responsiveness, equity, coordination, value for money and resourcing.

The paper endeavours to establish how decentralisation, localisation, and social protection – most specifically *adaptive* social protection – relate to each other conceptually. Building on that foundation, it seeks to outline a practical approach that might assist practitioners in engaging meaningfully with each other, and in dialogue with partner governments at different levels, about the scope for linking these agendas.

One major challenge that this paper must address at the outset, before proceeding further, is that (adaptive) social protection and decentralisation are both complex fields, serving as broad headings which cover several different types of programmes and underlying systems. In addition, it is necessary to understand the relationship between what is sometimes called "routine" social protection and adaptive social protection (ASP); the close connections between ASP, climate change adaptation and disaster risk management (DRM); and the concept of localisation as it has been applied both to DRM and to the achievement of the Sustainable Development Goals (SDGs).

It is not possible to draw simple connections between these fields, or to answer the question "does decentralisation help or hinder (adaptive) social protection?" The proper response to that question must take the form of some further questions: "what kind of – and what dimension of – an (adaptive) social protection programme?", "What kind of decentralisation" and "in what context?".

Any practical guidance must, therefore, do justice to this complexity and to the wide range of different circumstances which practitioners might encounter in any particular country or subnational setting. This paper thus creates the outline of a diagnostic instrument, to help characterise accurately the scope of existing social protection and ASP provision and the institutional framework through which it is delivered, and the potential impacts of proposed changes. These might reflect either the implications of decentralisation initiatives for the delivery of social protection/ASP, or, vice versa, the interaction between interventions to strengthen social protection and a wider public sector governance reform agenda. Based on that contextual analysis, it is then possible to propose some principles which should guide action in different circumstances. Before all this can be done, the next Section unpacks the key terms with which we are concerned. In particular, what is implied by decentralisation, localisation, social protection and adaptive social protection?

Conceptual clarity: framing the issue

Decentralisation

Support for decentralisation has played a prominent part in international development cooperation, including Germanys', for many years. Generally, decentralisation is linked, by many donors, with good governance and democratisation – it is perceived to increase and diversify popular participation in government decision-making and operations, to improve the equitable distribution of resources between geographical areas and ethnicities, to make the implementation of services and programmes more responsive to local social and physical conditions, to provide a counter-weight to the influence of metropolitan elites in the direction of national development, and to speed up public administration by shortening lines of communication, command and accountability. Nevertheless, it has been recognised for more than 40 years that there are different modes of decentralisation with very different characteristics and different strengths and weaknesses (see for example Rondinelli 1981, Rondinelli et al 1983).

The principal modes of decentralisation are usually defined as deconcentration, delegation and devolution.¹ The important broad distinction is between decentralisation as an aspect of managerial or administrative reform – as in deconcentration or some forms of internal delegation – and decentralisation which transfers responsibility to another authority with its political mandate and accountability.

Three key modes of decentralisation

Deconcentration refers to the delivery of a central government service through a network of geographically dispersed offices, which remain directly accountable to the national headquarters in a single organisational structure, with local operational management but little or no discretion as to the nature of the services that are provided. Deconcentration may be coupled with internal managerial delegation to a varying extent, depending on the degree of authority and freedom of action accorded to the heads of subordinate offices.

Note: Similar to, but distinct from, deconcentration is Dispersal. Dispersal refers to the geographical removal of all or part of a central government body's headquarters and/or back-office functions to another location outside of the national capital. It should not be regarded as decentralisation in any meaningful sense. Dispersal programmes may stimulate local economic development and provide employment opportunities in relatively disadvantaged regions and may thus relieve political tensions arising from a popular perception that wealth and power are unfairly concentrated in one part of the country. They do not, however, bring service delivery closer to beneficiaries or improve the responsiveness or accountability of public services, except insofar as they might make senior civil servants better acquainted with social and economic conditions outside the metropolis.

Delegation refers to the transfer by a central government ministry or department of responsibility for decision-making and management control of services to a semi-autonomous administrative agency or statutory body within the central government structure, or to local government authorities. Entities with delegated responsibility may have a degree of discretion in decision-making in carrying out these services on behalf of central government, usually coupled with an obligation to report on performance of delegated tasks against agreed performance measures and targets, but this discretion can be withdrawn or overruled by the delegator.

Devolution refers to the transfer by the state of authority for decision-making and management from central government to autonomous sub-national government bodies with legal personality and their own democratic political legitimacy. The transfer is intended to be irreversible and allows for no retained authority to override devolved decisions and no concurrent exercise of powers. Accountability of entities exercising devolved powers, for example elected mayors and councils or ministers in a provincial assembly, is generally directly to the local electorate.

¹ See for example Transform (2017).

Localisation

Localisation enters the discussion in relation both to humanitarian action and to achieving the SDGs (achieving long term 'developmental' outcomes, including via social protection). This paper focuses on the

Localisation in humanitarian action

Localisation in relation to humanitarian action is enshrined in the UN's Grand Bargain process, which from 2016 onwards has brought donors and humanitarian organisations together with a commitment to improve the effectiveness and efficiency of humanitarian action. The Grand Bargain process focuses on localisation as one of two "enabling priorities", recognising that local actors are generally the first to respond to crises and often have access to communities that international actors cannot achieve. Signatories, including Germany, have therefore committed to "making principled humanitarian action as local as possible and as international as necessary," while continuing to recognize the vital role of international actors. Specific commitments include:

- Increased investment in the institutional capacities of local as well as national responders, including preparedness, response and coordination capacities;
- Support for national coordination mechanisms;
- Development of a 'localisation' marker to measure direct and indirect funding to local and national responders.

second, with a particular focus on the role of local government actors. However, it is useful to understand the important drive for localisation emerging from the humanitarian sector, briefly discussed in the Box below. It is also important to stress that while the humanitarian focus is on a shift from international to national as well as to sub-national actors, the Grand Bargain explicitly includes sub-national government structures in localisation efforts. To that extent, it can be seen as supportive of decentralised (adaptive) social protection and Disaster Risk Management efforts in response to crises.

In relation to achieving the SDGs, localisation as a concept has been linked to the argument that subnational governments' proximity to local communities should make them the key actors in delivering services, economic development and public investment and that they are therefore central to inclusive and sustainable development. This should in turn involve a holistic and systems-oriented approach to multilevel governance, with decentralisation processes based on the clear assignment of functions, a coherent policy and legal base and corresponding allocation of resources, and recognition of the interdependence of governance levels and policy sectors. These issues were, for example, explored in a series of virtual roundtables held in 2021.²

In either instance, the concept of localisation does not tell us enough about the institutional forms involved, although it inherits the long-established presumption in favour of decentralisation. The discourse around multilevel governance implies (while it does not insist on) devolution and the acceptance of a pluralistic approach to the diversification and dispersal of political authority and accountability in the state. To that extent, the localisation agenda offers the possibility of a more nuanced approach to decentralisation that goes beyond a binary centralised versus decentralised opposition.

Overall, the subsidiarity principle of "as local as possible" does not help to answer the practical question of how local that is for different elements of social protection, or through what institutional structure the principle is best achieved.

² Report of the Virtual Roundtables on "Localising SDGs" Jointly Conducted by ADB, OECD, UNDP and DeLoG, at <u>https://www.delog.org/news/details/report-of-the-virtual-roundtables-on-localising-sdgs-jointly-conducted-by-adb-oecd-undp-and-delog</u>

Social protection

This section looks at the broad category of social protection, as a foundation for consideration in the next section of ASP as a specific area of focus within this wider field.

The Social Protection Inter-Agency Cooperation Board (SPIAC-B) has defined social protection as "**a set of policies and programmes aimed at preventing or protecting all people against poverty, vulnerability and social exclusion throughout their life-course, with a particular emphasis towards vulnerable groups**" (SPIAC-B, n.d.). There is no universally agreed list of precisely which policies and programmes fall within this definition. However, despite variations in detail, there is a broad convergence around:

 What can be seen as the principal 'pillars' of social protection: social insurance, social assistance, social services (sometimes classified as part of social assistance) and active labour market policies (see Box) – with a wide range of programmes under each pillar.

Four pillars of social protection

- 1. **Social insurance**: contributory schemes which mitigate the risks associated with unemployment, ill-health, disability, work-related injury, and old age, such as health insurance or unemployment insurance;
- 2. **Social assistance**: non-contributory programmes which transfer resources, either cash or in-kind, to vulnerable individuals or households which are labour-constrained or otherwise lack the means of adequate support, including single parents, orphans and vulnerable children, the homeless, and people with disabilities;
- 3. **Social services**: services for vulnerable groups of the population such as children, the elderly, people with disabilities and women at risk of domestic violence, including a wide range of residential, domiciliary and community-based care services, psycho-social support and other services.
- 4. Active labour market policies, which promote participation in productive employment by directly increasing the access of unemployed workers to the labour market, through employment services, job training and direct employment generation (including through public works programmes).

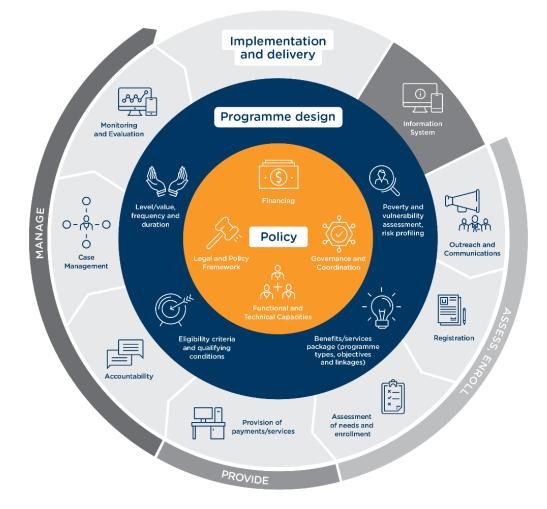
It should be noted that:

- Many low- and middle-income countries will de-facto have very low-coverage social insurance and labour market measures, and under-developed social services – leaving social assistance to play a disproportionate role.
- Social protection may also extend to measures (scholarships, fee waivers) to ensure access to education and healthcare for the poor or socially excluded, as well as a wide range of subsidies;
- Terminology varies greatly, between development partners and between governments. For example, social
 protection is sometimes understood to be synonymous with social assistance (or 'social safety nets'), and some
 government officials may associate it exclusively with conditional/unconditional cash transfer programmes.
 - Given the lack of consensus or a common terminology, it is always advisable to a) start from national definitions as embedded in sectoral policy and strategy documents; b) begin a dialogue with government partners, whether national or sub-national, by clarifying what they understand social protection to comprise.
- 2. What the underlying 'systems' serving the sector are (see Figure 1):
- At the *policy level*, the sectoral strategic vision is embodied in policy and legislation, backed by financing, governance and coordination arrangements, as well as functional and technical capacities.
- At the *programme design level*, evidence-informed processes for assessing needs (poverty, vulnerability) feeding into decisions on the benefits/services package, as well as the design of eligibility criteria and transfer value, frequency and duration.
- At an *implementation level*, all the functions along the delivery chain often supported by data and information systems from outreach to registration, enrolment, provision of payments or services, accountability, case management and monitoring and evaluation.

Most recently, the outer ring of this diagram has been referred to as the 'delivery chain', in the *Sourcebook on the Foundations of Social Protection Delivery Systems*, published by the World Bank (Lindert et al 2020). There, this sequence of different stages is subsumed under the four main phases of

Assess, Enrol, Provide and Manage. It is argued that all social protection interventions, of whatever type, are broadly implemented through these stages and phases.





Social protection and decentralisation – four key considerations

For this paper, four key considerations are worth noting with regard to social protection and its linkages with decentralisation.

1. Diverse and fragmented institutional structures

First, institutional structures for the design and delivery of social protection are diverse – and often fragmented. It is not necessarily the case that, even if a country provides programmes and services under all of the social protection pillars, they will all be under the direction of a single entity or even a single level of government. It is common to find, for example, social insurance being managed by a single ministry or agency at the national level while social services are a function of sub-national or local government. Social assistance is particularly prone to fragmentation, with a variety of ministries, departments and agencies possibly active in delivering programmes for different beneficiary groups and/or geographical areas, alongside non-governmental organisations and multilateral and bilateral aid agencies. It should not be assumed that coordination is good across the pillars either. A single organisation may be charged with attempting to harmonise social protection policy and coordinate delivery across this range of providers, or at the other extreme, there may be little or no conception of social protection as an integrated field of action.

So what? The current institutional and organisational structure for the delivery of social protection often depends on historical trajectories, broader national institutional reforms and political economy factors, more than a focus on 'effective delivery of social protection. These dynamics need to be understood if any reform process is being considered.

2. Diverse characteristics and capacity requirements of different types of programmes

Second, the diversity of institutional structures – and most appropriate level of decentralisation – also reflects the characteristics and local capacity requirements of different types of programmes, under each pillar. For example, personal social services (such as psychosocial support for families in crisis), domiciliary social care for the elderly or people with disabilities, public works programmes and programmes aimed at delivering training, livelihood support and economic inclusion, require much higher capacity (personnel, physical resources, etc) at local levels of implementation compared to other programmes.

So what? Decisions on appropriate levels and approaches to decentralisation will also vary depending on programme type, meaning different approaches will need to coexist. A very rough table providing some stylised examples is provided below (noting there will be variations across country contexts and programme designs).

Table 1: Decentralisation and different types of social protection programme: some considerations

| Examples | Example considerations | |
|--|---|--|
| Social insurance (e.g. unemployment insurance, pensions) | Can involve little face-to-face interaction with scheme members or beneficiaries, especially where contributions can be collected automatically by payroll deductions from those in formal employment and payments similarly made by post, bank transfer or through mobile money services (with a minimal 'point of contact' local role). In these circumstances efficiencies of scale are likely to accrue from centralising operations – particularly as these are increasingly digitalised – whether these are in autonomous entities such as the Zanzibar Social Security Fund or an integral part of the relevant central ministry such as the UK Pensions Service. There are also likely to be fiscal advantages to managing the investment of a single large fund on a national scale, responsibility for which may lie with the finance ministry rather than in the social protection sector. | |
| Social care services | Require the presence of employees (social workers) to deliver them locally, in direct and continuous contact with service-users. With this kind of geographically distributed workforce, a corresponding degree of decentralisation of supervision and management is inevitable, but this may occur under any of the forms of institutional decentralisation listed above. The question remains to be answered of where <i>ownership</i> of the service lies, and who is accountable to whom for its performance. | |
| Livelihood support and economic inclusion programmes | Cover a wide range of different types of intervention but are often implemented through outreach or extension workers providing expert advice and training; this will typically be delivered face-to-face, but the workforce may be peripatetic, responsible for an extensive geographical area. | |
| Cash transfers | Vary greatly in the mode of delivery, but also depending on the phase of the delivery chain (as discussed further below). For example, outreach and registration may require the quite intensive presence of a decentralised workforce, sometimes supported by local volunteers, while assessment and enrolment may be more or less centralised. There is a wide range of means managing the disbursement of cash, from mobile money transfers relying on encashment by local merchants, to distribution at local payment points by officials of volunteers, to the use of existing network services such as post offices. | |
| Public works | Vary greatly in execution but can lend themselves to outsourcing of supervision and payment to third parties such as private contractors or NGOs, requiring the minimal local | |

| | presence of social protection personnel – but extensive presence 'on the ground', as well as supervision. |
|-------------------|--|
| School feeding | Is an example of a social protection intervention most likely to be implemented on the ground by school staff and/or local volunteers (to manage food growing and/or procurement, preparation and distribution), with minimal decentralised oversight by social protection personnel, possibly accompanied by centralised targeting of schools for support and distribution of funding. Similar considerations apply to other school-based programmes such as the provision of free textbooks or winter clothing, and to health-related social protection interventions (such as user fee waivers or childhood vaccination incentives) which may be delivered wholly by clinical staff and administrators. |

Source: authors

3. Diverse requirements at each stage of the delivery chain

Third, despite these differences across the range of social protection programmes and services, they are all implemented through a similar delivery process (the outer layer of Figure 1 discussed above) - each stage requiring a different level of centralisation/decentralisation. Using this lens to consider social protection in relation to decentralisation enables a fine-grained analysis of, first, whether any given programme or service can most effectively be delivered through centralised or decentralised structures, and secondly whether each stage must necessarily be undertaken at the same level of government. For example, for a cash transfer programme, the initial steps under the assessment phase might be carried out by deconcentrated local offices or delegated or devolved to local government authorities, with enrolment decisions and management of the payroll handled centrally. In other words, the principle of subsidiarity - that functions should be discharged at the lowest level of governance at which they can effectively be performed - has different effects at different stages of the delivery chain. It is important to remember that the need for a decentralised workforce to carry out certain functions does not in itself determine how that workforce is to be employed and managed, and to whom it is to be accountable. For example, in Kenya, where large swathes of public service provision have been devolved to county authorities, social protection remains the responsibility of the national government, delivered through deconcentrated offices at county and sub-county levels.³

So what? The relevant question is not just what types of social protection intervention are best suited to decentralised provision, but to which stages in the delivery of the intervention is decentralisation most appropriate and how? Where different parts of a process are the responsibility of different levels of government, practical problems or harmonisation, coordination and data exchange have to be addressed (sometimes in the face of political tension and reluctance to cooperate).

A table providing some stylised examples is provided below (noting there will be variations across country contexts and programme designs). A similar exercise could also be conducted for design considerations outlined in Figure 1.

Table 2: Decentralisation at different stages of the delivery chain: some considerations for routine social protection

| Delivery system | Example considerations | |
|------------------------|---|--|
| Underlying information | The increasing use of integrated information systems serving the social protection sector (integrated beneficiary registries, social registries, etc ⁴) has implications for decentralisation. | |
| systems | Such systems and their registries have, almost by definition, to be centrally designed and administered as a single platform. They have significant advantages in reducing the number of times that the same information has to be collected from individuals and processed (thus | |

³ This arrangement has in practice led to some friction between officials of national government and the county officials alongside whom they work, with at least some counties keen to set up their own social protection programmes in competition with the national programmes.

⁴ See Chirchir and Barca (2020)

| | reducing the burden on beneficiaries and administrators), in managing entitlements to different social assistance benefits (and reducing multiple claims), in identifying gaps and overlaps in programme coverage nationally – informing inclusive policy and planning, etc. However, they also pose several challenges to decentralised governance that need to be tackled explicitly, for example: |
|-----------------------------------|---|
| | They can, especially where they are used to inform targeting/eligibility decisions, fully replace local decision-making processes, and thus create tensions; Appropriate arrangements and operating procedures between centralised and decentralised authorities need to be developed to ensure that the service provider locally is able both to input or submit updates (where relevant and subject to suitable controls) and to have access to the database for administrative and planning purposes. |
| Outreach and communications | These activities are likely to benefit from a combination of local and centralised activities. On the one hand, local knowledge and familiarity with communities will be invaluable in building understanding and trust; on the other, centrally managed press and broadcast campaigns can reach wider audiences and centrally designed publicity and communication materials can help to ensure consistency of messaging. Challenges can often arise: |
| | In disseminating centrally-designed messages down to local actors – whether district offices or local authorities – and ensuring that they are equipped to communicate them to the public; In communicating clearly, for example about eligibility criteria, in settings where social protection programmes and humanitarian actors are working side by side but using different targeting methodologies. |
| Registration | Data collection (especially for on-demand registration or the reporting of changes in household circumstances) requires local points of access for the public, which implies a decentralised presence or cooperation with a decentralised service provider. Census survey registration is sometimes tackled via national rotating teams, but also requires complementing with local capacity. Emerging online registration approaches can be managed centrally yet require local reinforcement to avoid last-mile exclusion. A major challenge in this respect is finding the optimum balance between the desirability of up-to-date, accurate household data and the costs of re-registration. It is particularly important to have current data about vulnerable households in emergency response situations. As well as drawing on information from centrally held social protection registries, centralised or decentralised disaster management agencies and NGOs may also be able to contribute to their updating with information gathered in the course of crisis response, if systems exist for these data to be captured. |
| Assessment of needs | Provided that registration data have been appropriately collected and communicated, the assessment of needs for routine social protection interventions lends itself to be a centralised operation, typically through the application of an appropriate algorithm such as a proxy means test – or a check on categorical eligibility criteria and qualifying conditions. In humanitarian response settings, however, although targeting processes may be designed at the central level, the urgent need for household assessments in real-time is likely to call for a more localised approach. |
| Enrolment | Many systems for routine social protection interventions combine centralised assessment with some form of community validation before the completion of enrolment for benefits, which again requires a local presence to manage the process. Enrolment also often encompasses additional onboarding of beneficiaries, which similarly requires local presence. |
| Provision of payments/services | The degree of decentralisation that is necessary or appropriate depends on the type of payment service. Many social services need very close engagement with clients. Cash transfers may to varying degrees have centralised, digitalised disbursement systems but ultimately getting money into the hands of beneficiaries requires local systems. These may however be existing networks such as banks or post offices, or local merchants acting as payment agents, rather than decentralised social protection staff. |
| Accountability and grievances | In most circumstances, the ability of beneficiaries to bring grievances and seek redress depends on having public access points very close to where they live. Where decision- making and accountability for errors that are made, lie is central to the decentralisation question. If centralised, lines of communication may be long, slow and unresponsive. If |

| | the system is devolved or highly delegated, decision-making will be closer to the complainant, and accountability may be to local representatives, but there is a concomitant risk of lack of consistency across the country and possibly of bias and loss of objectivity in localised decisions. | |
|---------------------------|--|--|
| Case management | Like grievance redress mechanisms, case management requires at the minimum accessible means for beneficiaries to report changes in circumstances and life events. May be wholly decentralised if system design, standard operating procedures and data security requirements permit local updating of central databases. | |
| Monitoring &Evaluation | The collection and analysis of some monitoring data may be satisfactorily managed centrally, where programmes are driven by centralised registries and payment systems; other more personalised social services may require a more localised and qualitative approach to monitoring. Decentralised structures can play an important role in gaining first-hand, multidimensional, community-specific and disaggregated data (for example on poverty), even in rural areas. However, in devolved systems, the challenge will be to find means of aggregating monitoring data to inform national-level planning and resource allocation. | |

Source: authors

4. Under-resourced local capacity

Fourth, social protection capacity at local levels is notoriously under-resourced in many countries – from human resources to physical assets such as vehicles and fuel. As noted in Transform (2017), in Sub-Saharan Africa "[o]ne of the often-cited challenges of delivering social protection programmes is capacity constraints, especially at lower levels of governance"; similar problems are experienced in other global regions. These include acute shortages of specialist staff and staff with formal social work qualifications (even where these are statutorily required). Moreover, as the UNDP and African Union's report on The State of Social Assistance in Africa (2019) pointed out, "[m]any governments do not have adequate basic material resources such as office space, computers and vehicles to run social assistance programmes". This has been borne out in many capacity assessments of social protection in diverse countries: examples extend from donor-provided vehicles that are unusable because of lack of budgeted funds for fuel or tyres, to (in a former Soviet Union country) lack of winter shoes to enable social workers to visit clients.

These shortages are unlikely to be alleviated by increased decentralisation (though the involvement of local actors in budgeting would be a welcome improvement) and maybe intensified if there is any loss of economies of scale. At the very least it is essential to ensure that any devolution or delegation of functions is accompanied by a proportionate, transparent, equitable and socially inclusive reallocation of resources; it is too easy for these to be retained at the centre, or unfairly distributed to more favoured regions, and for rural areas to be disadvantaged in comparison with cities.

It is also important for any planned devolution initiative to recognise that distributing responsibilities over a larger number of sub-national authorities is likely to increase the demand for some relatively scarce skills, for example in policy analysis, strategic planning budgeting, that may previously only have been needed at a single central point.

So what? Any effort to decentralise any function will need to go hand in hand with significant redistribution of resources to strengthen capacity at local levels of implementation/accountability, including physical assets as well as skilled and qualified workers.

Adaptive social protection

While understanding 'routine' social protection is essential to frame the discussion on conceptual linkages with the decentralisation and localisation agendas (i.e. all the points above need to be kept in mind), this paper's primary focus is 'Adaptive Social Protection'.

Adaptive social protection (ASP) is concerned with how social protection systems can be enhanced to support the capacity of vulnerable households to prepare for, cope with and adapt **to shocks** (Bowen et al 2020)⁵. More simply, ASP can be seen as having the dual aims of building the resilience of households to shocks and responding to those shocks when they occur. While 'routine' SP often primarily focuses on idiosyncratic lifecycle shocks afflicting individuals or single households (such as the injury or death of a breadwinner), ASP widens the focus to covariate shocks affecting entire communities. These may be natural (such as flooding, earthquake or drought) or of human origin (conflict, displacement), and maybe either slow- or sudden-onset in nature. In pursuing this objective, ASP aims at better using existing programmes, processes and systems to channel additional resources and services to at-risk and affected communities, households and individuals.

A strong ASP system will therefore be contingent on:

- A range of programmes and services under all four social protection pillars can be leveraged. "A stronger, more comprehensive system with a mix of social insurance, social assistance, and labour market programs better position a country when a shock hits. This enables a country to draw from a larger toolbox and facilitates diverse points of access to support vulnerable households to cope with the impacts" (Bowen et al 2020).⁶
- Strong underlying delivery systems (see above), including adaptations to better pre-empt and respond to shocks (e.g. early warning systems and triggers).
- Strong capacity at local levels of implementation, as emergency response requires 'boots on the ground' at the local level. Given the capacity constraints of routine SP discussed above, this is a major area of concern constraining the ability of the system to flex and adapt in an emergency. Moreover, local community (volunteer or paid) structures may well be disrupted by shocks impacting their communities, further reducing capacity.
- Strong coordination across all relevant actors including across sectors and across all levels of government: not only multi-stakeholder involvement but also multi-level coordination and dialogue.

Adaptive social protection and decentralisation – three further considerations

When considering the linkages between ASP and decentralisation all of the points on routine social protection need to be kept in mind, while adding three further considerations.

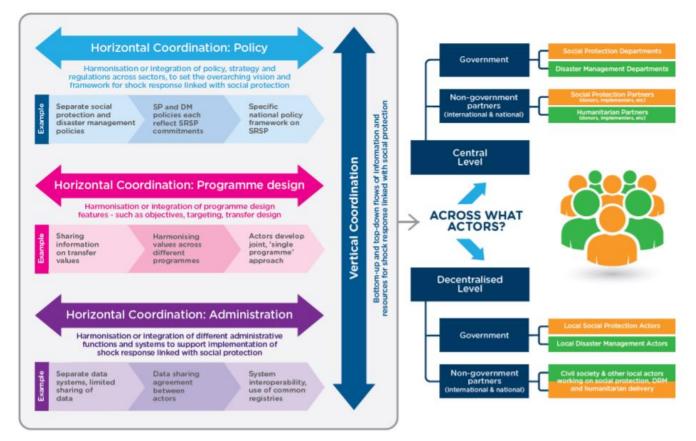
1. Coordination across a broader set of actors

First, coordination for ASP is required across a broader set of actors. While routine social protection already has a complex institutional geometry (discussed above), focusing on covariate shocks introduces new challenges in terms of bringing together a "multiplicity of actors, from different disciplines, and with different mandates, guiding principles, visions, and interests" (see Smith, 2021 for more on this topic) – including across different levels of governance. Specifically, coordination will be required not just across the field of social protection programmes and services, but also between the structures responsible for these and with other parts of government – notably the agencies responsible for disaster risk management (DRM) – and with national and international humanitarian organisations (including those focused on Climate Change Adaptation (CCA) and Anticipatory Action. As Kardan (2018) says, "ASP requires coordination (...) both horizontally and vertically, and across policy, administration and programmatic domains (see Figure 2). Moreover, coordination has to have a firm institutional foundation: "ASP requires different sectoral strategies and policies to be consistent and complementary with one another in how they describe the mandates, roles and responsibilities of various actors" (ibid.), and if social protection strategies articulate a role in relation to shocks, these need to be endorsed or acknowledged in other relevant sector strategies.

⁵ There is a vast literature on this topic, and on the 'sister' topic of shock responsive social protection (very similar to ASP but with more of a focus on shock response rather than ex-ante resilience building). See, for example Bowen et al (2020) for a very extensive listing or relevant sources.

⁶ For completeness, social services should also be added to this list.

Figure 2 Coordination for ASP, across social protection, DRM and humanitarian partners



Source: Smith (2021)

So what? This coordination has to have a firm institutional foundation, across all levels of coordination: "ASP requires different sectoral strategies and policies to be consistent and complementary with one another in how they describe the mandates, roles and responsibilities of various actors" (ibid.). For example, if social protection strategies articulate a role concerning shocks, these need to be endorsed or acknowledged in other relevant sector strategies and operationalised at all levels of implementation.

Also, while noting that the resilience-building dimension of ASP is harder to distinguish from some aspects of "routine" social protection⁷, an enhanced focus on resilience has institutional implications. First, resilience-building requires the involvement of all the line ministries and other non-governmental actors (e.g. civil society organisations) involved in developing the livelihoods of households and resilience of communities – beyond the scope of routine programmes (e.g. cash transfers). Second, tailored resilience building requires very high levels of local knowledge (e.g. an understanding of local livelihoods, labour markets, skills, etc) and capacities (coaching, training, etc). Third, investments in ex-ante resilience-building initiatives may in some contexts be more politically contentious and challenging (not offering immediate gains and visibility) than the deployment of resources on shock response and disaster relief, where there is an obvious and immediate humanitarian imperative. Championing measures of this kind is likely to require a significant degree of political leadership and commitment; if responsibility for resilience-building ASP has been devolved, it will vital be for its sustainability that this commitment is found at a local and sub-national as well as at national level levels of government.

So what? The political economy and capacity implications of resilience-building activities will need to be carefully weighed, especially given the high levels of capacity required at the local level.

2. Asymmetries of decentralisation across relevant actors

Second, given the range of different actors involved in emergency response, the symmetry of decentralisation across actors also becomes an important factor. In addition to the problems of

⁷ Social protection strategies that include promotive and transformative elements "are implicitly aiming to build the resilience of households to future shocks and thus capture the resilience dimension" of ASP (Kardan 2018).

harmonisation and competition that are likely to arise between national and subnational authorities in decentralised systems, coordination is likely to be more complicated if different sectors – such as social protection, DRM and humanitarian (among others) – are working with differing degrees of decentralisation, and thus with differing scope to make joint operational decisions at the local level, and with different accountability routes. An example can be seen in Lesotho, where the Disaster Management Authority (DMA) is responsible for the coordination of response across the country, supported by the District Disaster Management Teams (DDMT), but the DDMT is chaired by the District Commissioner and sees its formal accountability route as being to the Ministry of Local Government. Moreover, while the district leads response in the country, the social protection ministry operates through a deconcentrated model where most decision making is centralised, posing challenges for coordination and sharing of information such as beneficiary lists (Kardan 2018).

Issues of relative status and influence in government also affect whether an institution has the authority to play a coordinating role in emergencies. In Mozambique, for example, the DRM sector has a high level of political support, while the ministry responsible for social protection is perceived as weaker, but in the Philippines, both DRM and social protection are recognised as having an important role to play in dealing with vulnerabilities that are exacerbated by climate-related shocks; in Chile too, the Ministry of Social Development plays a central role in shock response (Kardan 2018).

So what? Any assessment of the benefits of improved decentralisation of the bodies responsible for ASP cannot be made in isolation but must take a system-wide view of how the various organisations concerned will be able to work together most effectively, especially in shock response.

3. Changes in processes along the delivery chain, and further pressure to localise

Third, the delivery of assistance in emergency contexts requires some minor changes and enhanced flexibility compared to routine social protection processes along the delivery chain – with implications for institutional arrangements. Overall, the arrangements for the delivery of shock-responsive ASP will be based on the institutional structures for routine social protection (as discussed in Table 2) and will be centralised or decentralised to a similar degree. However, there are also important differences, sketched out in Table 3.

A key enabler of 'shock responsive' programmes is flexibility in processes and delivery systems: "the ability to modify and adapt design features, business processes, systems, and mechanisms and to have the capacities to implement ad-hoc variations to the delivery chain based on the post-shock context" (Smith and Bowen, 2020). While centralised and standardised processes/protocols and contingency plans play a very important role in this, there is also a heightened need for local adaptations and contextual decision-making.

More broadly, there is increasing pressure to further 'localise' preparedness and response to shocks to tap into local knowledge and offer a more rapid local response than routine centralised systems. One recent example is the use of Village Funds in Indonesia, which were able to provide immediate support during the COVID-19 pandemic for vulnerable people who fell outside the patchwork of uncoordinated national social protection programmes. These also benefitted from a 'village information system' data designed to serve village stakeholders (Satriana et al, forthcoming).

So what? When thinking about 'ideal' institutional structures for ASP it will be important to balance the benefits of a more decentralised system, in terms of local knowledge and more rapid and flexible local response, with the capacity and convening power needed to coordinate implementation across all relevant government actors (e.g. SP, DRM) and non-government actors (civil society and NGOs, humanitarian partners – both national and international), while also maintaining policy coherence and consistency in programme design.

| Delivery system | What may be different/enhanced for the provision of ASP? | |
|--------------------------------------|---|--|
| Underlying information systems | The critical importance of swift local access to nationally held data, to inform targeting The critical importance of interoperability (or swift data sharing) with other locally held sources of data Enhanced relevance of up-to-date data and approaches for integration of new data | |

Table 3: Institutional differences along the delivery chain for adaptive social protection

| Outreach and communications | Communication is particularly challenging in settings where SP and humanitarians are complementing each other, e.g. if using different targeting methodologies – higher risks of generating confusion and social tension, which requires strong area-based (local) coordination | |
|-----------------------------------|--|--|
| | • Higher risk of break-down for national/centralised communications strategies (e.g. lack of electricity) and higher relevance of community-based approaches (through village committees, local authorities, etc) and tailoring to local needs (e.g. different language for IDPs and refugees, etc) | |
| | internal communications across layers of implementation crucial | |
| Registration | • The critical importance of having current data about vulnerable (and not just 'poor') households in emergency response situations. To ensure this, as well as drawing on information from centrally held social protection information systems, centralised or decentralised disaster management agencies and NGOs may also be able to contribute to updating with information gathered in the course of crisis response (see above too) | |
| | The potential need for surge capacity, either bringing in extra personnel from other regions, government agencies, or government levels to support the registration process or recruiting and training new teams and administrators to undertake data collection – while streamlining/simplifying processes and systems for data collection and management | |
| Assessment of needs | Not resource intensive or logistically challenging to implement (unlike registration) – yet controversial in terms of design | |
| incous | In humanitarian settings, although targeting processes may be designed at the central level, the urgent need for household assessments in real-time is likely to call for a more localised approach – either revisions to centralised eligibility/targeting guidelines or complementary approaches to fill the gaps | |
| Enrolment | Given the urgency of delivery, registration and enrolment may happen contextually – or be simplified compared to routine programming, e.g.: | |
| | Waiving of home visits and certain documentation requirements, | |
| | Waiving of other capacity-intensive activities and concentrating efforts (e.g. enrolment camps in affected communities, SMS-based enrolments, etc) | |
| Provision of payments/services | • The infrastructure of the payment system or the capacity of beneficiaries to access it may be affected and will require last-minute flexibility in terms of payment modality – via e-payments where possible and with local and manual distribution approaches as a backup. If the manual, high likelihood of overburdening local capacity if no surge in place, with subsequent critical delays. | |
| | Centralised negotiation with payment providers can dramatically increase the feasibility and speed of onboarding new beneficiaries (e.g. negotiating simplified KYC) and lower transaction costs (economies of scope and scale) | |
| | Liquidity constraints and flow of funds to local levels require careful management | |
| Accountability and grievances | complexity of rapid and flexible delivery. Local structures - established networks of social workers and other administrative staff, based close to and trusted by communities - critical to maintaining trust. | |
| | Heightened need for 'chain' of accountability to address risks of corruption and fraud | |
| Case management | The revised focus of case management ideally focused on holistically addressing the emergency needs of affected populations. Requires complex skills that may not be held by local social protection actors but could be complemented by civil society and humanitarian counterparts. | |
| Monitoring &Evaluation | Increased focus on monitoring rather than evaluation, to ensure continuous adaptation to emergency context. Requires tight feedback loops and flexible financing to enable insights to translate into actions at the local level. | |

Source: authors, building on Smith and Bowen (2020)

Identifying interconnectivity

Policy choices around decentralisation are always complex – and this holds for the social protection sector and ASP especially. Given the very variable institutional geometry that characterises social protection, it is important in any assessment of the strengths and weaknesses of further decentralisation to consider which specific components of social protection (or ASP) are in question, and where responsibility for them currently rests.

It is important to stress also that those involved in the design or reform of social protection systems and ASP, whether government ministers, their officials, advisers or development partners, seldom if ever face a simple unrestricted choice between a centralised or a decentralised approach, or between modes of decentralisation.

As showcased in the sections above, these policy choices are constrained by a range of endogenous and exogenous factors, which interact in complex ways to determine the boundaries within which decisions can be taken (Wyatt 2021).

- Endogenous factors are those which are intrinsic to the nature of the service itself, for example, the intensity and frequency of face-to-face interaction that is required between employees and beneficiaries or service users for any given programme, or the advantages to be gained from integrating certain delivery functions across programmes and geographies (e.g. a national system for registration and eligibility determination via a 'centralised' social protection information systems).
- Exogenous factors are those which arise from the wider constitutional and institutional environment within which a social protection system is being developed or operated. These may include, for example, a pre-existing constitutional settlement that allocates particular social policy functions to either central or sub-national levels of government, or the principles driving a programme of public sector reform. The distribution of functions between central and local government is a fundamental feature of a country's institutional architecture, and changes to this are likely to be politically highly contested as well as bureaucratically resisted; radical decentralisation measures often emerge as a consequence of (and part of the solution to) periods of conflict and constitutional crisis (as in Nepal in 2010 or Kenya in 2015).
- Having said this, understanding what these endogenous and exogenous factors are in any given context will be a fundamental starting point. The 'so what' sections above and the profiling instrument provided below should be a useful starting point for these considerations.

More broadly, it can also be stated that different modes of decentralisation demonstrate different 'generic' strengths and weaknesses for those social protection and ASP benefits/services for which they are appropriate. These are listed in the table below, with the usual caveat that they will vary across country contexts and programme designs.

Table 3: Decentralisation: opportunities and challenges

| | Opportunities for SP and ASP | Challenges for SP and ASP |
|------------|---|---|
| Devolution | Shorter reporting lines and decision-making processes enable devolved authorities to understand and respond more quickly to emerging community needs and crises than central authorities Maximises democratic legitimacy | Coordination between neighbouring local authorities exercising devolved social protection functions may be difficult – particularly if there is competition for scarce resources – and the number of separate bodies with whom humanitarian operations will have to engage will be increased. |
| | and political participation beyond the arena of national governance, through accountability for service performance and the use of resources to local or sub-national (typically elected) authorities. | Possible increase in the scope for corruption, malpractice, and poor service standards, and the possible loss of nationwide consistency in policy, resource allocation and equitable access to services for all groups in society. Local autonomy means that local majoritarian |
| | Devolved budget control and decision-making power enables | preferences may lead to the exclusion from social protection of certain groups, for reasons of |

| | I | |
|---|--|---|
| | social protection interventions to be tailored more specifically to the needs of the local population | religion, ethnicity or lifestyle, and that local elites may replace national elites in the misuse of public resources. Devolution also has capacity implications, as it |
| | | increases the need for policy, strategic planning and budgeting skills that may previously have been in demand only at the centre. |
| Delegation | Permits greater flexibility and responsiveness both to variations in local conditions and to emerging crises, within the bounds of service standards agreed between the delegator and delegatee. | Central control over the application of service standards and policies is correspondingly reduced, and the necessary mechanisms for reporting, oversight and the management of the principal-agent relationship need to be resourced. |
| | Increases the scope for some possible local participation in the way the service is run. | • Scope for political conflict across levels, particularly if the delegate is an elected local authority with its political mandate which may differ from the policy preferences of the central government. |
| Deconcentration, for example of a central ministry's services into regional or district offices | Supports effective management of a dispersed workforce, Increases the possibility of direct contact between service providers | • Likely to have limited decision-making powers and be bound by long and slow reporting lines to the centre (especially when it comes to authorising unusual or innovative expenditures). |
| district offices | and beneficiaries, while retaining central control over policy, strategy and resource allocation. | May also be subject to strict procedural or legal restrictions on how far they can share data about individuals or households with other organisations |
| | | • On the other hand, compared with a fully centralised service, it increases the risk of variations in the application of service standards and policies, introduces increased costs of coordination, reporting and oversight, while only providing very limited scope for local decision- making or popular participation. |

In addition, under all forms of decentralisation, challenges may arise regarding the extent to which, or ease with which, institutional arrangements:

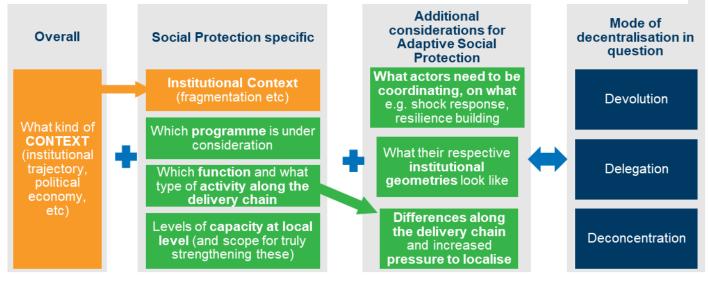
- Allow decentralised structures to call on national resources when they are at risk of being overwhelmed in a crisis;
- Allow organisations to coordinate operations in the field, both vertically (between national and subnational bodies) and horizontally (between government bodies, and between government and NGOs).

In short, the relationship between social protection – and specifically ASP – and decentralisation is therefore dependent on the following factors:

- Overall: the institutional context (governance reform trajectory, political economy considerations, etc);
- SP specific:
 - Institutional arrangements for SP policy and delivery (linked to the above);
 - What social protection programme or service is under consideration;
 - Which social protection function and what type of activity along the delivery chain;
 - The levels of capacity at the local level (and scope for truly strengthening these);
- Additional considerations for ASP:
 - What actors need to be coordinating, on what

- What their respective institutional geometries look like;
- Differences along the delivery chain given the need for a timely response to a different population group, and increased pressure to localise
- The mode of decentralisation that is in question (e.g. the options available).

Figure 3 The relationship between social protection – specifically ASP – and decentralisation



Neither centralised nor decentralised institutions, nor any particular mode of decentralisation, should be regarded as intrinsically better or worse for social protection or ASP in particular.

Rather, each model offers several challenges and opportunities for social protection and ASP that need to be considered. Recognition of these, and a shared analysis of whether and how they apply in a particular country context, will provide a basis for dialogue between practitioners involved in decentralisation initiatives and their colleagues or partners who are concerned with strengthening social protection in general or ASP in particular. Such dialogue is in turn an essential starting point for developing a mutual understanding of how these agendas may be taken forward in ways that support one another – or indeed may, without care and attention, risk contradicting or conflicting with one another.

The question is not so much whether there is a connection between decentralisation and the delivery of social protection: the institutional structure has a profound impact on how social protection programmes and services operate. The dialogue should address the very specific relationships between institutional form and programme and service configuration in the particular country context under consideration.

It is assumed, for these purposes, that these discussions are most likely to arise at the point when practitioners are considering the viability of interventions that would support some significant change in the *status quo* in the country concerned. Proposals of this kind might originate in either the social protection arena or as part of a more general governance and institutional reform initiative that is promoting decentralisation or localisation. This dialogue may also become necessary more belatedly, at the point where interventions are already being implemented and it becomes apparent that they are having undesirable consequences for one another, or are sending contradictory messages to national partners, or simply need to find ways of working better together and leveraging one another.

Relevant questions to begin with include:

- "Given the specific context and configuration of services we are working with, what reason do we have to believe that decentralisation in any particular mode would strengthen or weaken any particular component of social protection (or ASP)?"
- "What are the implications of the current degree of decentralisation for the design of a new or reformed social protection system?"
- "How far would delivery of these (A)SP services or programmes benefit from a greater or lesser degree of decentralisation?"

Careful consideration of questions such as these should help to generate programme designs that complement each other and in which the detailed interconnectivity can be fully recognised.

Some practical tools

The previous sections have focused on establishing the conceptual framework within which to consider the relationships and interactions between decentralisation, social protection and ASP, and the implications for development practitioners.

This section offers some practical aids to support practitioners in carrying out the mutual interrogation of the linkages between their programmes and the institutional context in which they are operating that is proposed above.

The approach to engagement proposed here comprises two stages, which can be described as the static and dynamic phases of analysis. The preceding sections have identified a large number of variables, in terms of the differing types of institutional configuration that may be described as decentralisation, the wide range of different services and programmes collected under the broad heading of social protection, the extent to which these have adopted an adaptive social protection focus, and the scope for different parts of the delivery chain to be the responsibility of different levels of government. On top of these large categories, it must also be emphasised that the details of governance and public administration vary greatly from country to country, as a consequence of the complex interplay of political and social forces and historical accidents which have shaped them; even settings with a nominally similar system will differ greatly from each other in the detail of these arrangements. It follows that the relationship between decentralised governance and public administration must be understood in a specific context; generalisations must be modified by reference to specific local characteristics.

This leads to the **STATIC** phase of analysis. **Table 4 below is suggested as a diagnostic instrument** that can be applied to create a profile of the existing arrangements for the delivery of (A)SP programmes services, and the level of government at which responsibility for them lies. It takes the elements of a social protection system (as shown in Figure 1 above) as the basis of analysis and suggests guide questions as a starting point for the interrogation of existing arrangements. Recording the information gathered to answer these will generate an account of the key characteristics of the current arrangements and the interactions between them and highlight any major gaps or inconsistencies in the current provision.

- The Table can be applied to a single pillar of social protection (e.g. social insurance, or social assistance), or can be applied to specific programmes and services to give a more fine-grained analysis.
- Because this format does not allow for the presentation of information about different pillars in the same table, particular attention should be given – in trying to develop a holistic picture of a national system of social protection in its entirety – to the interactions between centralised and decentralised functions. Inconsistencies between these – for example in the rules of eligibility for national social assistance programmes and locally-run social services – can be a source of dysfunctionality in the system and dissatisfaction amongst beneficiaries.
- Some notes have been added in the third column of the Table for illustrative purposes: these
 represent a purely notional example of how the analysis might be carried out and are a composite of
 prevailing conditions in several countries observed by the authors.

Moving on to the **DYNAMIC** phase of analysis, having completed the profile of the existing social protection system):

- The **first step** will be to map on to the table any proposed institutional/governance *changes* that might be under consideration. Again, some illustrative examples have been entered in the cells filled in orange.
- The **second step** will be to pose several key questions that should be considered to develop the analysis further, as proposed below. These questions are framed to highlight the most critical likely differences between the existing institutional arrangements for the delivery of social protection/ASP and those that would result from any changes that are being contemplated. Not all of the questions may be answerable initially, but where this is the case it may be necessary to consider the possible implications of change in greater depth.

1. Ownership:

- Where (in what part or at what level of government) do ownership and accountability for (A)SP (or this
 aspect of it) currently lie?
- How would this differ under the changes being proposed?

- Would the changes result in improved transparency?
- Would the changes improve the political legitimacy of (A)SP and increase participation in decisionmaking (for example about how (A)SP programmes are targeted)?

2. Value for money:

- · How effective and efficient is the current social protection/ASP system judged to be?
- How would the proposed changes affect this?

3. Responsiveness:

- · How responsive to local needs and emergencies are social protection services perceived to be?
- How would the proposed changes affect this?
- What bottlenecks in service provision would the proposed changes remove?

4. Equity:

- Would the proposed changes safeguard or improve fair and equitable eligibility for and access to programmes and services for all groups in society?
- Would the proposed changes reduce the risk of social exclusion in access to (A)SP programmes and services?
- Would the proposed changes make(A)SP programmes, services and resources more or less susceptible to elite capture than is currently the case?

5. Resources:

- Do current (A)SP programmes and services have the administrative and logistical resources they need to function as intended?
- How would the proposed changes affect this?
- Would decentralisation result in an increased political will to fund resilience-building measures?

6. Coordination:

- What barriers to vertical and coordination would the proposed changes remove?
- Would the proposed changes make coordinated action in response to covariate shocks easier or harder?

This list might be extended further, but as it stands should serve as a starting point for practitioners in assessing proposals for systemic change with a critical eye and developing programming that responds where possible to the needs of both the social protection and decentralisation agendas.

One final point should be stressed, however: it is important not to approach the relationship between decentralisation and social protection as a simple menu of choices, which can be approached on a more or less technocratic basis, but to keep in mind the political economy, the institutional history and the complex web of factors which will constrain governments' choices in these matters.

Table 4 social protection and decentralisation profile notes:

- 1. This table is intended as a means of recording key information about the extent to which responsibility for different aspects of social protection is decentralised in any given national system.
- 2. It can be applied to any of the four pillars of social protection, as identified above: social insurance, social assistance, social services, and active labour market policies. Special attention should be given to the interactions, and any potential lack of coordination, between centralised functions (e.g. a national social insurance fund) and decentralised functions (e.g. social assistance or social services).
- 3. Where a function is observed to be decentralised, the institutional arrangements in place should be noted i.e. is the function being carried out on a deconcentrated, delegated or devolved basis?
- 4. The first column of the table presents the components of a social protection system, as shown in Figure 1 above. The second column provides some guide questions to assist interrogation of the system. The third column is where relevant information should be recorded as it is collected and verified; some sample responses, relating to an imagined social assistance system, have been shown to illustrate the kind of information that might be shown here.

Table 4: Social protection and decentralisation profile

| Social Protection System Component: | Guide questions | Key points (<i>illustrative answers</i>) |
|---|---|--|
| POLICY | | |
| Legal and policy framework | Who is responsible for establishing and maintaining the legal and policy framework? How much freedom or discretion is available to local government authorities in what services are provided, and how? To whom are service providers accountable? Is there separate legislation that applies to the provision of the services in times of crisis/emergency? | National legislation devolves broad powers to district councils to provide a range of social assistance services; legislation is the responsibility of the Ministry of Social Welfare (MSW). District councils are principally accountable to their electorates for the services they provide at their discretion; there are also some rudimentary national programmes (e.g. cash transfers for people with disabilities which they carry out on behalf of MSW under delegated powers, and for which they are accountable to the Ministry). MSW is also responsible for the National Social Protection Policy (NSPP). Once a national or local emergency is declared, powers are given to the National Disaster Management Agency (NDMA) under the National Disaster Management Act to take precedence. |
| Governance and coordination | What arrangements exist for ensuring consistency and benchmarking of service provision across the country? What arrangements exist for ensuring coordination between local government authorities, between local and central government, and between governmental and non-government actors (e.g. NGOs)? | District councils are largely responsible for determining services in their areas, subject to very weak oversight by MSW to promote adherence to standards set in the NSPP. In normal circumstances, formal arrangements for both vertical and horizontal coordination are very weak. In emergencies, the regional structures of NDMA try to enforce coordination. |
| Financing | What are the principal sources of funding for the services? How much freedom or discretion is available to local government authorities in the level of expenditure and the execution of the budget? How involved are they in decision-making over budget priorities? | Very limited support is provided to districts' routine social assistance programmes from the national budget. Districts have very wide discretion in the use of their resources, but the tax base is very narrow, especially in rural areas. Some local programmes are run by or supported by NGOs. |

| Functional and technical capacities PROGRAMME DESIG | Who is responsible for ensuring the development of an adequate capacity to deliver the services? | Small community resilience funds are available for district and village councils to distribute in emergencies. NDMA can provide supplementary funding to support programme expansion in emergencies, through its deconcentrated regional structures. District councils, with some intermittent capacity building support from MSW (mainly funded by development partners). Capacity is very weak in some areas. |
|---|--|---|
| Poverty and vulnerability assessment, risk profiling Benefits/services package (programme types, objectives and linkages) | Who is responsible for this aspect of programme design? How much discretion do local government authorities or local offices have to vary this aspect of programme design? To what extent do vulnerability assessment and risk profiling include an adaptive social protection lens (i.e. allow for shock preparedness and resilience-building)? Who is responsible for this aspect of programme design? How much discretion do local government authorities or local offices have to vary this aspect of programme design? How much discretion do local government authorities or local offices have to vary this aspect of programme design? How much flexibility exists to vary service provision in times of emergency (i.e. in response to covariate shocks)? | District councils have almost complete discretion in all aspects of the design of programmes which they choose to run. MSW exercises some oversight to ensure adherence to the principles of the NSPP (<i>e.g. equity and accessibility</i>) but the capacity for this is weak. In times of emergency, NDMA has statutory powers to override local authority rules on eligibility, duration, etc. and can provide some supplementary funding to support the additional costs. |
| Eligibility criteria and qualifying conditions | Who is responsible for this aspect of programme design? How much discretion do local government authorities have in the exercise of their devolved powers? Are eligibility criteria relaxed to expand access to programmes in times of emergency? Who is responsible for this aspect of programme design? How much discretion do local government authorities have in the exercise of their devolved powers? | |

| | Are rules on the duration of support relaxed in times of emergency | |
|-----------------------------------|--|---|
| IMPLEMENTATION / | AND DELIVERY | |
| Information system | Who is responsible for the maintenance of social protection information systems? | Districts have until now been responsible for their information systems, which in many places have been rudimentary and paper- based |
| | | A National Social Registry is under development by MSW, and all service providers will be strongly encouraged to adopt this. |
| | | Legislation is being prepared to make use of the Registry compulsory. |
| Outreach and communication | Who is responsible for this element of the delivery chain? | District councils, both for their programmes and those carried out under delegated powers. |
| Registration | Who is responsible for this element of the delivery chain? | • District councils, both for their programmes and those carried out under delegated powers. |
| | | • For national programmes carried out under delegated powers, districts are required to follow procedures laid down by MSW. |
| Assessment of needs and | Who is responsible for this element of the delivery chain? | District councils, both for their programmes and those carried out under delegated powers. |
| enrolment | | • For national programmes carried out under delegated powers, districts are required to follow procedures laid down by MSW. |
| Provision of payments/services | Who is responsible for this element of the delivery chain? | District councils, both for their programmes and those carried out under delegated powers. |
| | | • For national programmes carried out under delegated powers, districts are required to follow procedures laid down by MSW. |
| Accountability | To whom are service providers accountable for the performance of the delivery chain? | District councils are primarily accountable to their electorates for their programmes, though MSW may hold them accountable for egregious breaches of the NSPP. |

| | | District councils are accountable to MSW (and hence to Parliament) for their execution of national programmes. The Auditor-General may audit the use of funds provided for national programmes, though this rarely occurs. |
|---------------------------|--|--|
| Case management | Who is responsible for this element of the delivery chain? | District councils, both for their programmes and those carried out under delegated powers. For national programmes carried out under delegated powers, districts are required to follow procedures laid down by MSW. |
| Monitoring and evaluation | Who is responsible for this element of the delivery chain? | In theory, districts should be monitoring and evaluating their performance, and MSW has a statutory duty to maintain oversight of and report on the state of social assistance nationally. In practice, M&E is largely absent at any level. |

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