Responding to the COVID-19 crisis: Linking humanitarian cash and social protection in practice

This paper seeks to demonstrate practical ways in which NGOs are linking their humanitarian work to social protection and the added importance of this in the context of COVID-19, following from the earlier work of CCD outlining the role of NGOs to improve the access to and delivery of social protection in crises and the COVID-19 advocacy paper. This is written for signatories of the Grand Bargain, particularly those engaged in the cash sub-working group on social protection and humanitarian cash. This paper highlights that there is much more to be done but that NGOs have a crucial role to play and what follows are some of the ways in which CCD can engage.

In April 2016, the Grand Bargain recommended that the cash and voucher assistance (CVA) responses of humanitarian organisations consciously align with, build on, complement, and fill gaps in national social protection programmes and systems, where appropriate, taking into account humanitarian principles.

COVID-19, which began as a small, localised outbreak, developed into a global pandemic in the early months of 2020. COVID-19 has caused economies to grind to a halt due to devastating lockdowns that forced many to lose their livelihoods. COVID-19 continues to have a devastating impact on people, doubling the number of acutely food insecure to one quarter of a billion and pushing an additional half a billion into poverty. It is now estimated that at least 100 million people are being pushed into extreme poverty due to lost income and the lack of access to essential services.

During this global crisis, social protection has emerged as a primary instrument to respond to the food security, economic, and livelihood impacts on households, which are immediate or secondary effects of the pandemic. Most countries have some form of social protection systems, including registries and social assistance (including CVA) programmes. In some cases, social insurance, for poor, disabled, elderly, women, and children is available but coverage is sporadic, with 55% of people globally lacking any form of government social protection. Formal social protection coverage globally fell short of addressing the pressing needs of the out of work, unemployed, and underemployed persons.

At present, the focus is on how the international community (e.g. donors, humanitarian and development actors, civil society, multilaterals) as a collective can prevent the direst scenarios. The discussion around promoting linkages between humanitarian responses and social protection CVA has come to the fore. Social protection is emerging as one of the key means of reaching vulnerable individuals at scale, with over 1,000 interventions worldwide, reaching 1.7 billion people, to the tune of over US$540 billion. How do humanitarian responses, with a global response plan of US$10.26 billion, best engage with social protection systems to protect the world’s poorest 10% of the population from the worst effects of the pandemic with only US$90 billion?

Humanitarian actors are driven by the humanitarian imperative outlining and advocating for the right to receive and offer humanitarian assistance where needed. While not shying away from this principle, civil society and non-governmental organisations (NGOs) have a responsibility to ensure that the positive investment in social protection in the context of COVID-19 is sustained. Collaborative Cash Delivery Network1 (CCD) has advocated that all actors have a role to support governments to deliver effective, inclusive, and accountable assistance to individuals during COVID-19 and beyond. CCD strongly emphasises the potential role of NGOs to strengthen the engagement of affected populations. CCD reiterates ours and other humanitarian actors’ commitments to the Grand Bargain and its localisation agenda and commitment to supporting fast and effective responses to those in need through linking CVA with social protection interventions and sharing the experiences and lessons learnt.

Through our collaboration as a network, many CCD members, as a collective or as individual agencies, with the support of donors and partnering with civil society, have already taken on board the Grand Bargain’s principles over recent years and aligned their humanitarian programming with social protection programmes in their respective countries of intervention. CCD has identified the following five areas as critical to linking humanitarian CVA responses with social protection in general, which are even more pertinent in the context of the COVID-19 response.

---

1 CCD is comprised of Action Against Hunger (ACF), ACTED, Adeso, CARE, Concern Worldwide, Catholic Relief Services (CRS), Danish Church Aid (DCA), Danish Refugee Council (DRC), International Rescue Committee (IRC), Mercy Corps, Norwegian Refugee Council (NRC), Oxfam, Relief International (RI), Save the Children, and World Vision.
These include:

1. Strengthening coordination between humanitarian actors and government social protection entities
2. Filling gaps in governments’ social protection responses to COVID-19
3. Allowing continuity of existing social protection delivery during crises through improving preparedness
4. Supporting the capacity of governments in social protection (e.g. to design, adapt, strengthen, scale up, and provide technical support and technological integration)
5. Encouraging social accountability in social protection programming

The following examples illustrate where CCD member organisations have applied these concepts in our work.

**Strengthening coordination between humanitarian actors and government social protection entities**

During the COVID-19 crisis, CCD member organisations have been actively involved in promoting opportunities for leveraging humanitarian response to reinforce social protection throughout global clusters and through contributions to guidance documents on the use of cash and its integration into social protection in the response led by CALP. Moreover, CCD member organisations are strengthening coordination between humanitarian CVA actors and social protection government departments by co-leading working groups that coordinate CVA in many countries (e.g. Philippines, Iraq, occupied Palestinian Territories (oPT), Ethiopia, Colombia), promoting discussions on aligning value of cash transfers, harmonising targeting methodologies and systems, and facilitating the participation of governments and private sector actors in cash working groups. Examples include:

- In oPT, Mercy Corps, CRS, DCA, and ACF, under the umbrella of the cash working group, advocated for the representation of NGOs within the social protection working group in order to reinforce linkages between humanitarian CVA and social protection.

Discussion is now ongoing with the Ministry of Social Development to harmonise vulnerability targeting by applying the revised proxy means test (PMT) methodology in humanitarian CVA response. Multipurpose cash assistance (MPCA) transfer values were also developed, starting from the minimum expenditure basket (MEB), to be in line with the social protection assistance amounts of the Ministry of Social Development.

- The Ethiopia Cash Working Group, including ACF, CRS, Oxfam, Save the Children, CARE, DRC, and World Vision, promoted harmonised technical approaches, advocating for increased coordination with the government, including the Productive Safety Net Programme (PSNP). CCD Ethiopia (in its ECHO-funded consortium) led a review, in collaboration with Global System for Mobile Communication Association (GSMA), scoping the potential for increased use of mobile payment solutions to deliver CVA in the country, including by the PSNP.

**Filling gaps in governments’ social protection responses to COVID-19**

In principle, agencies implementing cash and in-kind transfers should support and seek to align with the government’s social protection response to COVID-19 where feasible and appropriate. Ensuring that everyone has access to the appropriate support when they need it and that no one is left behind is a common objective to humanitarian NGOs and social protection. In fact, half of the world’s population is not covered by social protection, with women and children being most affected.

Many people supported by humanitarian action during acute shocks actually are chronically poor or vulnerable. This section highlights examples of
approaches that demonstrate how to reach groups that are vulnerable to shocks or are generally vulnerable but may not be covered adequately or at all by government support. In line with the humanitarian imperative, CCD member organisations are covering gaps resulting from these exclusions by implementing programming that incorporates social protection approaches targeting individuals, such as refugees, migrants, or marginalised populations. Examples of our ability to respond to these exclusions are:

- In Pakistan, RI will provide multisector (food and COVID-19-specific hygiene items) vouchers to the most vulnerable Afghan refugees and host communities whose socioeconomic situation was affected by COVID-19 movement restrictions. The programme will support 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.

In other cases, they ensure the level of support is appropriate either through advocacy or top-ups (either horizontal or vertical expansion), including in fragile settings, to ensure the most vulnerable areas can be reached. This type of contribution is often seen during major crises such as COVID-19.

- In the Philippines, CRS, ACF, and RI are currently expanding the social protection scheme to cover specific populations affected by the COVID-19 crisis. That has been coordinated closely with the government for the response to COVID-19 to ensure households not receiving support under the government’s social assistance programme are able to receive cash transfers during the pandemic. In most areas, recipients of social protection schemes were selected based on the 2015 census list, and as such, displaced families were not included or targeted systematically. These families were recommended by local government units to CRS, ACF, and RI to be included in their responses. In some areas, the CVA provided by NGOs complements the government’s efforts through increasing the transfer value (e.g. increase from the survival MEB set by the government to meet the required dietary needs of the targeted families). Assistance provided by NGOs also includes provision of resilience tips, linkages to other social protection programmes, and other risk transfer initiatives options, such as microinsurance.

- In Kenya, Oxfam, Concern Worldwide, and ACTED, alongside other organisations, including the Kenya Red Cross, IMPACT Initiatives, women’s rights organisation, Centre for Rights Education and Awareness (CREAW), and Wangu Kanja Foundation, are piloting cash transfers in informal urban settlements in Nairobi and beyond to support social assistance for vulnerable households.

This is funded by Danida, the German Federal Foreign Office and the European Union (EU). The dual targeting of this project identifies those already receiving government assistance and tops up their social transfers so that they receive 50% of the COVID-19-adjusted MEB through local administration vulnerability lists. It targets those most at socioeconomic and
gender-based violence risks during COVID-19 but not receiving any government support and provides a monthly cash transfer worth 50% of the MEB. This is reaching 20,000 households in Nairobi and 10,000 in Mombasa.

- In Mali, as part of the COVID-19 response, World Vision and ACF coordinate with the government to ensure synergy through MPCA social protection assistance by intervening in programme areas, which include different beneficiaries within conflict-affected areas in Central and Northern Mali. This is because the government, with limited resources, cannot provide assistance to all the vulnerable in the country. Therefore, World Vision and ACF work with the Social Development Department, (Government of Mali), to update and complement data of vulnerable households not covered by the national safety nets programme. This database will serve other partners and help avoid duplication of assistance through the establishment of the single registry. Moreover, working with NRC, households are facilitated with identity documents which can pose a barrier to accessing social protection.

Allowing continuity of existing social protection delivery during crises through improving preparedness

Allocating resources for early action is crucial, but this also requires coordinated preparedness amongst humanitarian CVA actors and governmental social protection actors for building shock-adaptive social protection. Working in disaster-prone contexts, CCD member organisations have been engaged for many years on strengthening national early warning systems and ensuring linkages between early warning and early action, including piloting new funding mechanisms. Thanks to extensive efforts on preparedness and shock-adaptive social protection, plans are ready to be deployed in case of a crisis.

- In Senegal, ACF, CRS, OXFAM, Save the Children, and World Vision with Plan International, under the Start Network, have been actively participating since 2015–16 in the set-up of the African Risk Capacity replica insurance covering risk of drought, with the objective to improve timeliness of provision of basic assistance in times of crisis. Joint contingency plans were developed and pre-approved by the government and NGOs, allowing for rapid decisions on which activities to implement, who to target, which modalities to consider, who will manage the response resources, etc. Both humanitarian actors and the government are using the existing Unified Social Registry for targeting which has been supported by the World Bank and designed through a joint effort to ensure that beneficiaries of seasonal safety nets implemented by NGOs have been included.

- In Lebanon, Oxfam piloted and then scaled-up a CVA response to households to overcome short-term socioeconomic shocks, such as loss of job or illness. Through funding from the Agence Française de Développement and Belgian Development Cooperation, the Temporary Cash Assistance project targets Lebanese households already under the government’s social protection system, the National Poverty Targeting Programme, in addition to 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, that this 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.

• Save the Children’s shock response social protection pilot in Somaliland pilot had 150 households on a long-term safety net, funded by the Finnish MFA, and ECHO has funded a top-up for those beneficiaries as well as expanded to 300 additional beneficiaries during a recent shock. The pilot learning will inform a government-led shock responsive social safety net to respond to shocks faster and more effectively. The objectives are to:
  o promote a learning on coordination mechanisms with the Somaliland government and other stakeholders, including donors, implementing partners, financial service providers, agencies providing early warning early action data, and beneficiaries
  o provide comparisons between existing sets of early warning early action triggers
  o produce learning on social accountability systems and feedback mechanisms
  o examine processes and protocols for beneficiary registration systems and cash delivery systems used by various actors.

• In Madagascar, the social protection working group, including ACF and CARE, has been participating in the elaboration of a shock-adaptive social protection plan led by UNICEF, the World Bank, and the government (both the Ministry of Social Protection and Disaster Risk Management Bureau). ACF and CARE actively contributed to this strategy, and mobilised EU DevCo funding, with social safety nets with complementary health and COVID-19 prevention services delivered by their partners MDM and ASOS. ACF and CARE are piloting vertical and horizontal expansion of social safety net schemes (monthly transfers of 100,000 ariary per household), covering at least 15,000 households in the poorest urban area of Antananarivo in close cooperation with the urban community, which has assisted in the timely transfers during lockdown. The second transfer is ongoing during the current lockdown and increase of the COVID-19 pandemic.

Supporting the capacity of governments in social protection (e.g. to design, adapt, strengthen, scale up, and provide technical support and technological integration)

Almost all governments committed in 2012 to develop a social protection policy in their respective countries. Despite a massive response of government social protection systems to the impacts of COVID-19, the scale, scope, and quality of these systems have been inconsistent, with coverage in low-income countries still only around 18%. From the early stages of the COVID-19 epidemic, there have been widespread advocacy to encourage actors to support the efforts of governments to respond to the crisis; however, CCD members have expressed concern that the capacity to roll out social assistance in these countries may fall short of the funding they receive to deliver through their systems. Various national systems are at different stages of design and implementation depending on the country context in question. CCD members have actively sought to influence the quality and adaptability of governmental assistance to better meet emerging and evolving needs. Capacity building can also be about demonstrating the appropriate use of technology or introducing, improving, or monitoring information systems for effective implementation. Those elements, which are operational strengths of CVA actors, can benefit governmental social protection systems when properly shared, as illustrated through the below examples.

Aisha* with her then 2-year-old daughter, Ifrah*, at a mother and child health post in 2018. Their family is just some of the beneficiaries of Save the Children’s cash transfer and feeding programme in Somaliland. © GCCU, Save the Children

CVA beneficiaries in Madagascar. © Action Against Hunger
In Nigeria, ACF and Save the Children, with funding from DFID, are supporting the government’s social protection response to COVID-19 by developing and rolling out new governmental standard operating procedures (SOPs) for cash transfers. The new SOPs include guidance on pay point set up and management, health checks, physical distancing, hygiene, and suspension of biometric authentication, as well as prioritisation 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 mobilisation staff for all 36 states on safety during payments. CCD members also provided support to last-mile digitisation 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. Lastly, a rapid analysis of targeting approaches was conducted to inform government engagement.

In Vanuatu, a consortium led by Oxfam, partnering with World Vision, Vanuatu Red Cross, ADRA, Save the Children, World Vision, Vanuatu Christian Council, Vanuatu Business Resilience Council (Chamber of Commerce), Barrett & Partners (trust fund management and financial reporting, payments to vendors); National Bank of Vanuatu (financial service provider), Sempo (blockchain payments platform) and local civil society partner, ViewPX, developed the first example of cryptocurrency in remote regions to deliver e-vouchers for the common CVA approach in the region. Funding from the Australian Department of Foreign Affairs and Trade (DFAT) and the New Zealand government have enabled CVA to be delivered in contexts where there is no robust banking system or a lack of technical capacity to deliver cash. Moreover, the payment app for the electronic transfers is being updated to include a COVID-19 symptom check at the point of payment and contactless (tap and pay) cards are used. As part of this, the consortium has established a multi-donor trust fund situated with the National Bank of Vanuatu through which CVA is disbursed. It is currently funded by the Governments of Australia and New Zealand and the Vanuatu Business Resilience Council. This platform can accommodate disbursement from a variety of assistance systems, from NGO humanitarian responses, to government social protection transfers, as well as informal social protection sources, such as remittances. This is a model to demonstrate proof of concept that can be scaled up to be adopted across humanitarian responses, as well as formal and informal social protection across the Pacific region.

CCD Colombia (ACF, DRC, NRC, World Vision, Save the Children, Mercy Corps, ACTED, and IRC – with funding from OFDA and OCHA) is a precursor in terms of data sharing amongst CCD members.
Assisted by CCD members operating under the consortia CUA (Cash for Urban Assistance) and VenEsperanza, a common digital system, which includes a large, majority migrant population constantly on the move, manages beneficiary information to avoid duplication. CCD members are now exploring how to further expand the system to establish a de-duplication system and ensure data sharing with non-CCD members, such as WFP and UNHCR. Memoranda of Understanding have been established by each consortia member with local municipalities on the terms of engagement of Colombian nationals based on referred cases from the municipality.

Encouraging social accountability in social protection programming

Social accountability in the delivery of social protection is essential to improving the effectiveness, inclusiveness, and appropriateness of such support. Participation of communities – particularly women and marginalised groups – is particularly important in contexts of conflict and fragility. That is the reason why CCD member organisations are committed to facilitating such processes to guarantee social accountability. In the context of COVID-19, with a large volume of money channelled through national social protection systems, governments are and will continue to be under scrutiny.

- In Bangladesh, World Vision, working with local partners, Pollisree and Pumdo, evidenced through an EU-funded evaluation, how NGOs can help to effectively strengthen active engagement of the most vulnerable communities and children with government social protection commitments and policies by enhancing community information, which led to an increase of access to and enrolment in the Government of Bangladesh’s social safety net transfers and services from 5% to 74%. Expanding social accountability facilitates constructive dialogue between local governments and communities regarding cash transfer support. It is also key to effectively implementing child-sensitive social protection in Bangladesh and elsewhere to improve both the quantity and quality of basic social services while enhancing child well-being. Noting that Bangladesh and India are amongst the countries with the highest prevalence of forced child marriage, which has been further exacerbated by the dire socioeconomic situation for parents during COVID-19, in Bangladesh, World Vision and local partners are focusing and aligning efforts with the national social safety net, and providing MPCA for those not yet included in the government’s system, leveraging social accountability mechanisms and holistically addressing socioeconomic impact of COVID-19 and recovery needs.

- In Zambia, funded by the Finnish MFA, Save the Children has a five-year programme facilitating access for children and their families to social protection and relevant services, while promoting transparency and accountability via public hearings, social audits, and interface meetings. With these interventions, community members are able to demand social protection benefits and basic services entitlements, provide feedback to service providers on the timeliness and quality of services provided, and allow service providers to respond to the concerns and gaps raised with regards to service provision and delivery. The activities result in increased overall programme accountability and citizens’ trust and involvement, regular solutions to operational issues (complementary to monitoring and evaluation), and reduction of the cost of addressing them; thus, curbing corruption and standardising programme implementation and performance.

- In Sierra Leone during the Ebola crisis, Oxfam supported the government in the recovery of health and education services with a mechanism to address complaints from citizens and monitor how services are delivered. Designed with local leaders (i.e. chieftains) and policymakers (i.e. members of parliament), Oxfam is now adapting the system to the COVID-19 response to ensure that these essential services are responsive to needs in crises, specifically how effectively education services are delivered in COVID-19 and options for distance learning (online and by radio). The system will look at how health services adapt to the new service protocols for patient safety. The aim is to identify gaps and challenges and help the government identify solutions and referral pathways for citizens.

A beneficiary confirms receipt of the mobile money transfer she received during the COVID-19 response. © World Vision
CONCLUSION

As evidenced through the above examples, CCD and humanitarian actors are key players in the social protection realm throughout the world. It is difficult to point to one entry point, method, or approach as context matters. What these examples show is that there is room and need to find solutions that meet the needs of crisis-affected populations with a range of actors. Today’s challenge is to expand the involvement of humanitarian actors, such as CCD, in the development of a government-led social protection system. Such involvement will only come to fruition if humanitarian actors:

- systematically integrate government social protection systems and processes in their needs analyses and response design, whether it be in the type of data collected, monitoring, community engagement, etc.

- continue to align humanitarian response with and complement existing governmental social protection programmes to fill the gaps in coverage as per the humanitarian imperative

- engage in government coordination mechanisms on preparedness, planning, response, and system design, particularly in the realm of shock responsive and adaptive social protection

- strengthen the social protection systems by piloting different approaches, documenting and sharing lessons, with the full engagement of governments, communities, civil society, and donors and include processes for lessons learning, capacity building, and eventual uptake

- work with civil society actors and communities to advocate for accountability and inclusion within social protection systems and processes for more effective, appropriate, and inclusive programmes

- sustain gains beyond humanitarian responses and ensure uptake of technology, engagements, and learnings by governments to improve coverage and effectiveness of social protection programming.

Recognising that cash and vouchers are cross-cutting modalities, non-sectoral and can be used for a range of goods and services in response to a crisis is one important step. MPCA and delivery systems can be vehicles to build, leverage, and transition to social protection, addressing people’s basic needs. At the same time, CCD members with national partners, because of their CVA experience and field presence, can help better reflect community dynamics, advocate for marginalised segments, and strengthen accountability mechanisms to ensure more robust social protection systems are developed. This can include understanding how individuals access traditional non-formal social protection through social networks, such as engagement in burial societies or savings groups; the contribution of remittances to their lives are an important part of this and frequently neglected in social protection discussions.

The global COVID-19 pandemic demonstrates that a crisis at that level of magnitude demands an immediate response that can only be reached through a coordinated and collaborative effort between civil society, donors, communities, and governmental systems. These examples show critical gap-filling in times of rapid social assistance scale up in fragile contexts – NGOs, such as CCD members, strengthen further social assistance programmes supporting and complementing government efforts during the COVID-19 crisis response. The challenge is then to ensure that these changes are sustained and that the households supported then have permanent access to social protection in crisis times and beyond. Social protection is one key area where the collaboration of donors, humanitarians and government actors was proven to be essential to mitigate the worst impacts of the crisis. As recently urged by the United Nations’ Secretary-General, the joined efforts of governmental social protection schemes and humanitarian actors are the “nexus” in action working to address further gaps and inequalities more holistically.

CCD GLOBAL MEMBERS

CCD is a global network of international NGOs who operate in every global humanitarian crisis that provides cash programming. CCD’s partners are estimated to deliver 80% of the “last mile” cash assistance. The collaborative cash partners are committed to transforming the delivery of cash programming through the collective impact of cash programme delivery.

www.collaborativecashdelivery.org