

# Social protection responses to the COVID-19 pandemic in the Pacific: A tipping point for the sector?

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November 2021

**Suggested citation:** Beazley, R., Gorman, H., Satriana, S., & Attenborough, J. (2021) 'Social protection responses to the COVID-19 pandemic in the Pacific: A tipping point for the sector?', Social Protection Approaches to COVID-19 Expert Advice Service (SPACE), DAI Global UK Ltd, United Kingdom

Implemented by



This document was developed alongside others in the SPACE series (all available [here](#)).

SPACE is a joint initiative of FCDO's Better Assistance in Crises (BASIC) and Gender Responsive Social Protection (GSP) programmes (funded by UKAid); GIZ (funded by the German Federal Ministry for Economic Cooperation and Development); and the Australian Government through the Department of Foreign Affairs and Trade (DFAT). SPACE materials do not necessarily represent FCDO, or GIZ or DFAT's own views or policies or commit FCDO, GIZ or DFAT to any particular course of action.

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# List of abbreviations

ADB	Asian Development Bank
ASPIRE	Atlas of Social Protection - Indicators of Resilience and Equity (World Bank)
AUD	Australian Dollar
DFAT	Department for Foreign Affairs and Trade (Australian Government)
DSW	Department of Social Welfare (Fiji)
FJD	Fijian Dollar
FNPF	Fiji National Provident Fund
FSM	Federated States of Micronesia
GDP	Gross Domestic Product
ID	Identification
ILO	International Labour Organization
IMF	International Monetary Fund
MIS	Management Information System
NDIDS	National Digital Identification System (Samoa)
ODA	Official Development Assistance
PNG	Papua New Guinea
PPP	Purchasing Power Parity
SPACE	Social Protection Approaches to COVID-19 Expert Advice Service
SPC	The Pacific Community
UBC	UnBlocked Cash
UNESCO	United Nations Educational, Scientific and Cultural Organization
USD	United States Dollar
USSD	Unstructured Supplementary Service Data
WST	Samoan Tālā

# Introduction

**The COVID-19 pandemic and its socio-economic effects have led to an unprecedented number of social protection responses worldwide.**<sup>1</sup> The crisis has shown the importance of social protection as a shock response tool, while also exposing gaps in existing social protection systems, and even more so in nascent systems. As such, the crisis is serving as a wake-up call to strengthen social protection systems and make them more flexible and responsive to large-scale shocks.

**The pandemic is exacerbating pre-existing poverty and vulnerability in Pacific Island Countries and Timor-Leste.**<sup>2</sup> Although the region has experienced a lower disease burden associated with COVID-19 compared to other parts of the world, the socio-economic ramifications of the pandemic are hitting countries in the Pacific hard. The shock affects a region where poverty was already high before the pandemic. Poverty levels vary throughout the Pacific, with the highest number of people living below the USD 3.20 international poverty line (2011 PPP) reaching 66% in **Papua New Guinea** (2009) and **Timor-Leste** (2014), 58% in the **Solomon Islands** (2012), and 39% (2010) in **Vanuatu**.<sup>3</sup> Poverty levels are expected to rise due to the socio-economic effects of the pandemic, putting many of the Sustainable Development Goals (SDGs) at even greater risk of not being achieved.

**Despite variations across countries, social assistance systems in the Pacific can be described as emergent.** Global studies show that pre-pandemic, the Pacific spent less on social protection as a whole – and in particular social assistance – compared to Europe, Central Asia, and the Americas, and when compared to high-income and upper-middle-income countries globally.<sup>4</sup> This results in overall lower coverage and administrative capacity. Across the Pacific, social insurance takes the biggest share of social protection spending, with a focus on contributory savings and pension programs. Most countries have provident funds (compulsory retirement savings schemes) in place, covering those in formal employment.<sup>5</sup> As provident funds and contributory pension programs primarily reach people in formal employment, their coverage tends to be narrow, particularly in contexts of widespread informal employment.<sup>6</sup> Complementing fairly developed social insurance systems (with low coverage) with social assistance to reach excluded individuals and groups is a challenge that is not unique to the region – other middle-income regions like Latin America and Eastern Europe face it too.

**The use of social protection to cushion the socio-economic effects of the pandemic and protect people in the Pacific can lead to a shift in the approach to the sector.** The historical focus on contributory social protection was challenged during the crisis, and the need for more comprehensive and responsive systems has become evident. The wealth of social protection responses to COVID-19 in the Pacific is shedding light on the importance of social protection and increasing awareness and interest of governments and partners to invest further in such systems.

**The Pacific is highly vulnerable to disasters. Therefore, learning from the responses to COVID-19 and strengthening social protection systems for future crises is critical.** The World Risk Index<sup>7</sup> 2020 shows that the Pacific is the region most at risk. In fact, **Vanuatu** is at the top of the ranking. **Tonga, Solomon Islands, and Papua New Guinea** also fall within the ten most at-risk countries. Tropical cyclones are the hazard with the highest damage and losses in the Pacific, but the region also experiences droughts, earthquakes, floods, and volcanic eruptions, among other hazards. Moreover, because of climate change, extreme weather events will increase in frequency and severity. Countries in the region are also vulnerable to

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<sup>1</sup> Gentilini et al., 2021

<sup>2</sup> In this note we use the term 'Pacific' to refer to Pacific Island Countries and Territories and Timor-Leste. We exclude Australia and New Zealand.

<sup>3</sup> World Bank, 2021b

<sup>4</sup> ILO, 2021; World Bank, 2018

<sup>5</sup> In some countries, the self-employed, informal employees, and migrant workers are eligible to become voluntary contributors.

<sup>6</sup> Across the region, social insurance coverage as a percentage of intended beneficiaries increased from 3.7% in 2012 to 8.7% in 2015. There is significant variation between countries, with social insurance coverage being less than 1% in Timor-Leste (0.1%), Papua New Guinea (0.2%), and Nauru (0.3%), and highest at 84.3% in Palau. (ADB, 2019)

<sup>7</sup> The World Risk Index is a statistical model for assessing the global risk of disasters that arise directly from extreme natural events such as earthquakes, storms, floods, droughts, or sea-level rise. The 2020 Index provides a disaster risk assessment for 181 countries worldwide. (Bündnis Entwicklung Hilft & Institute for International Law of Peace and Armed Conflict, 2020)

external economic shocks, as they are typically import-oriented economies, with high levels of Official Development Assistance (ODA), remittances, and tourism – although there are important intra-regional differences.

**This paper studies the social protection responses to the COVID-19 crisis in the Pacific.** It focuses primarily on social assistance and cash responses by governments, although it also includes some analysis of social insurance and active labour market programs and major responses by non-government actors. Where relevant and appropriate, the paper discusses how the response to COVID-19 in the Pacific region aligns or differs from the broader global response trends and the experiences of other regions.

**The paper is structured into 7 sections, including this introduction.** Section 2 presents the conceptual framework used for the assessments of social protection responses and the methodology. Section 3 briefly describes the effects of the pandemic in the region. Section 4 provides an overview of how countries in the Pacific used social protection to respond to COVID-19. Section 5 presents key operational insights of the social assistance responses. Section 6 assesses the main social assistance responses in terms of their coverage, timeliness, and adequacy. Finally, Section 7 presents the conclusion and some policy implications for the future of social protection in the region.

## Conceptual framework and methodology

The conceptual framework used in this paper to assess social protection responses to COVID-19 draws on the frameworks developed by [SPACE](#) and [Maintains](#), and focuses on three dimensions: response type, policies and operational procedures, and outcomes.

**Response type:** The following response strategies, adapted by Maintains from the seminal research by OPM,<sup>8</sup> are covered in the analysis:

1. **Social protection responses** are those that involve adapting the design of existing social protection systems to address new needs through enhancement of adequacy, coverage, and comprehensiveness.
  - *Vertical expansions:* These involve increasing the benefit value or duration of an existing programme for existing beneficiaries.
  - *Horizontal expansions:* These involve adding new beneficiaries to an existing program.
  - *New programs:* This refers to launching a temporary ‘emergency’ social protection programme to specifically reach affected individuals and households.<sup>9</sup>
2. **Humanitarian assistance** leverages social protection systems and vice versa. This refers to circumstances where, in addition to a social protection response to the pandemic, the international humanitarian system is delivering institutionally independent support that follows humanitarian principles and is formally coordinated with the social protection sector, including government and other actors. In this paper, major humanitarian responses that are not aligned with national social protection systems are also covered.

**Policies and operational procedures:** This dimension examines in more detail how the response approach is operationalised. It includes how the policies (e.g. legal frameworks, financing, coordination), key programme design features (e.g. eligibility criteria, transfer values), and delivery mechanisms (e.g. information systems, payment mechanisms) were developed and/or adjusted to implement the responses.

**Outcomes of the response:** This dimension assesses the outcomes of the responses, with a focus on coverage, adequacy, and timeliness.<sup>10</sup>

## Methodology and limitations

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<sup>8</sup> OPM, 2021b; O'Brien et al., 2018

<sup>9</sup> Note that these are sometimes referred to as horizontal expansions of coverage via new programs.

<sup>10</sup> Other important dimensions not covered in this paper are: comprehensiveness, cost-effectiveness, accountability, predictability, ownership, and sustainability. See the SPACE Strategy Decision Matrix for all the relevant dimensions. (Barca, 2020b)

Analysis in this paper covers Pacific Island Countries and Territories as well as Timor-Leste. Australia and New Zealand are excluded from this analysis. Throughout the paper, the term 'Pacific' is used to refer to Pacific Island Countries and Territories and Timor-Leste.

COVID-19 related travel restrictions and lockdowns did not allow for primary data collection to be conducted, and therefore this paper relies on desk-based research. It builds on information available online and sourced from development partners, as well as on a few remote key informant interviews. Information about social protection in the Pacific is scarce and this limited the depth of analysis that was possible. Given these constraints, the paper prioritised identifying regional trends and common issues along the dimensions in the conceptual framework. Consistent with that approach, small-scale sub-national initiatives have only been included where they incorporate novel or innovative approaches or are significant in terms of the national social protection response.

Further, it is important to note that this paper reflects a point in time, and that the COVID-19 pandemic and responses in the Pacific continue to evolve. Whilst many Pacific countries continue to remain largely COVID-19 free, others are emerging from significant outbreaks (**Timor-Leste** and **Fiji**), and **Papua New Guinea** is in the midst of a significant surge in cases, associated with the delta strain. Whilst vaccination rates in some Pacific countries are high (80% of the eligible population fully vaccinated in **Fiji**, 96% in the **Cook Islands**) they are very low in others (less than 1% of the eligible population fully vaccinated in **Papua New Guinea**, 4% in the **Solomon Islands**, and 9% in **Vanuatu**).<sup>11</sup> The data collected for this paper focuses on the **Cook Islands**, **Fiji**, **Federated States of Micronesia (FSM)**, **Kiribati**, **Palau**, **Papua New Guinea (PNG)**, **Samoa**, **Solomon Islands**, **Timor-Leste**, **Tokelau**, **Tonga**, **Tuvalu**, and **Vanuatu**. Data was not available for Niue, Nauru, or the Republic of the Marshall Islands.

Whilst every effort has been made to ensure the accuracy and completeness of information in this paper, given the methodological limitations outlined above, there may be gaps and inaccuracies in the analysis presented.

## The effects of COVID-19 in the region

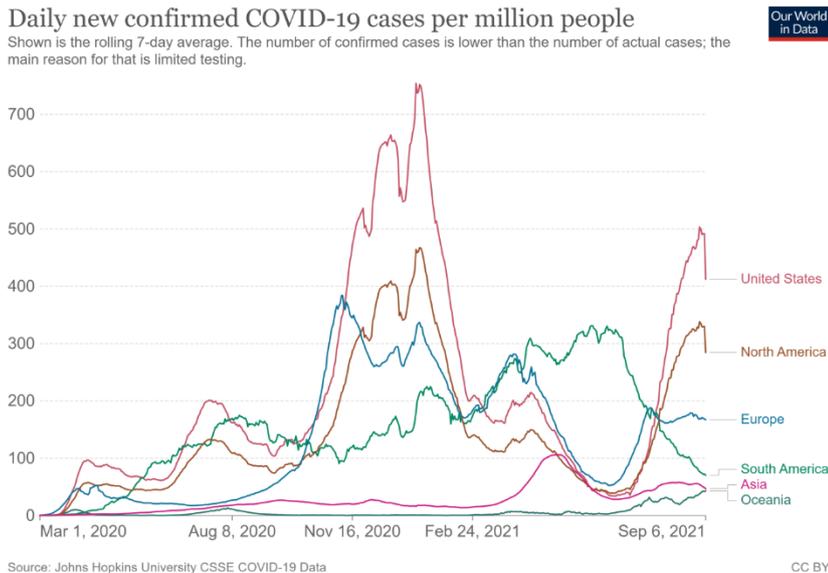
**The Pacific is one of the regions of the world that experienced the lowest number of COVID-19 cases.** As of 13 September 2021, only 12 of the 24 Pacific countries or territories have had COVID-19 cases.<sup>12</sup> Most Pacific countries were not affected in the early stages of the COVID-19 pandemic. The physical isolation of Pacific countries coupled with early responses in some countries (including closing borders to international travel and introducing strict quarantine measures) provided a level of protection. During 2021, however, **Fiji**, **PNG**, and **Timor-Leste** have all experienced significant COVID-19 outbreaks, with case numbers continuing to escalate in **PNG** at the time of writing.

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<sup>11</sup> Our World in Data, 2021b

<sup>12</sup> Pacific Community, 2021

**Figure 1. COVID-19 cases by region<sup>13</sup> (March 2020-September 2021)**



Source: Our World in Data, 2021a

**Despite the region's early success at reducing or delaying the transmission of the virus, the socio-economic effects of the pandemic have been severe.** International travel restrictions and domestic lockdowns curbed the spread of COVID-19 but have had serious impacts on employment, income, international labour mobility, and livelihoods across the region. Countries are experiencing significant declines in GDP growth, and poverty is expected to increase substantially.<sup>14</sup> Moreover, the pandemic is having adverse impacts on access to food by disrupting locally grown and imported supply chains.<sup>15</sup> As discussed in the Methodology above, it is important to note that the COVID-19 situation continues to evolve in the Pacific. Many countries continue to face significant health threats given recent outbreaks in **Fiji**, **PNG**, and **Timor-Leste**, and varying levels of vaccination coverage across countries.

**The socio-economic effects of the crisis show important intra-regional variations.** Some economies and industries in the Pacific have been badly affected by the economic shock. For example, tourism-dependent countries like the **Cook Islands**, **Fiji**, **Samoa**, and **Vanuatu** have seen a major blow to their economies. Impacts on the fisheries industry, a major income for countries like **FSM**, **Kiribati**, **Nauru**, **Tuvalu**, and **Tokelau**, have seen fewer impacts although the situation varies across countries and risks of disruptions remain.<sup>16</sup> The World Bank flagged in 2020 that supply chain disruptions could impact fishing revenues in **Solomon Islands**, **Tonga**, and **Kiribati**, while fishing revenues for **Nauru**, **Tuvalu**, and **Tokelau** have shown to be resilient during 2020 and 2021.<sup>17</sup>

**The responses to the pandemic and the overall economic downturn are leading to fiscal deficits that may affect the capacity of governments to provide longer-term support.** Although the crisis has shown the need to invest more in social protection, tight budgets can lead to difficult policy trade-offs. Some of the adverse effects of the pandemic are likely to require financial support well after borders open, and therefore expenditure cuts can undermine the recovery of economies and vulnerable populations in particular.

**Some countries and territories in the Pacific have also been affected by other shocks, while still grappling with the effects of the pandemic.** For example, in **Timor-Leste** COVID-19 spread rapidly in early 2021 while the country was also affected by Tropical Cyclone Seroja, which brought flooding, landslides, considerable human loss, and economic damage in April 2021.<sup>18</sup> **Fiji** was hit by Tropical Cyclones Harold, Yasa, and Ana in April 2020, December 2020, and January 2021 respectively, causing significant loss of life, property damage, and reduced economic activity, exacerbating the existing crisis.

<sup>13</sup> Note: Data is provided for Oceania and not the Pacific only. Oceania includes Pacific Island Countries and Territories, Australia, and New Zealand.

<sup>14</sup> Shen, 2020

<sup>15</sup> Sherzad, 2021

<sup>16</sup> Carreon, 2020

<sup>17</sup> World Bank, 2020a

<sup>18</sup> World Bank, 2021d

**Remittances continue to provide a critical lifeline for many households in the Pacific.** While the early months of the crisis saw a decline in remittances, remittance inflows have gradually returned to positive growth.<sup>19</sup> Contrary to earlier estimates, World Bank data shows a general increase in personal remittances in Pacific countries between 2019 and 2020, both in nominal terms and as a proportion of GDP. Significant increases occurred in **Fiji, Vanuatu, and Timor-Leste**, while the other countries experienced a stable flow or a slight decrease.<sup>20</sup> Data available in **Fiji** also shows a further increase in 2021, as overseas workers try to help families and friends cope with increasing economic hardship.<sup>21</sup> However, the data may be incomplete, as there is the risk that only remittances sent via quasi-formal mechanisms are tracked, and that informal mechanisms (such as bringing cash when travelling) may not be captured.

## Overview of social protection responses to COVID-19

This section provides an overview of the social protection responses to the COVID-19 pandemic in the Pacific. It includes social assistance, social insurance, and labour market responses, and identifies main trends in the region. Box 1 below summarises the main findings.

### Box 1. Overview of social protection responses to COVID-19 in the Pacific

- Despite variations within the region, most social protection responses to the pandemic consisted of social assistance measures, from which cash transfer programs account for the majority.
- **Social assistance** cash responses consisted mainly of launching new temporary programs or vertically expanding existing programs (giving top ups to routine beneficiaries).
  - **Samoa, Tuvalu, and Timor-Leste** implemented new cash responses with near universal approaches.
  - Vertical expansions of cash transfers were mainly targeted at the elderly, people with disabilities, and children, since they leveraged existing programs targeting those populations.
  - In-kind support was provided as food or agricultural materials.
  - Subsidies were provided to reduce or waive costs for water, electricity, and school fees.
- **Social insurance** measures were also popular in the region, including early withdrawals from contributory provident fund and pension schemes, unemployment benefits, and the provision of paid sick leave.
- The most frequent **active labour market** measure was the lowering or deferring of social insurance contributions, while wage subsidy programs were utilised in five countries, primarily to support formal workers – with important innovation in **Timor-Leste** which extended to informal workers.
- In **Vanuatu** and **Fiji**, collaboration between governments and humanitarian-sector NGOs was fundamental for the delivery of assistance.
- The pandemic has simultaneously acted as a catalyst for reinvigorating informal/traditional social protection, whilst also adding further strain on these systems.

**Social protection measures have been an integral part of the pandemic response across the Pacific. There were 83 social protection measures put in place across 13 countries for which data is available.** All Pacific countries that were included in this review utilised some form of social protection as part of their response. The extent to which social protection was employed was dependent on the scope of the response and the degree to which countries had an established social protection system, as well as on other factors such as political will, fiscal capacity, and donor support. Countries that had comprehensive responses tended to use multiple social protection measures and different types of social protection programs. Those with existing social assistance programs leveraged routine delivery systems to support their response.

**Social protection has been used to varying degrees and in different ways across countries in the Pacific to respond to the COVID-19 pandemic. Most (55%) responses deployed social assistance**

<sup>19</sup> World Bank, 2020b

<sup>20</sup> On average, remittances to Pacific Island Small States increased from 7.8% of GDP in 2019 to 8.2% of GDP in 2020. In that period, Fiji experienced an increase from 5.4% to 8.1%, Vanuatu from 8.1% to 10.2%, and Timor-Leste from 5% to 8.5%, while the other countries experienced a stable flow or a slight decrease. (World Bank, 2021a)

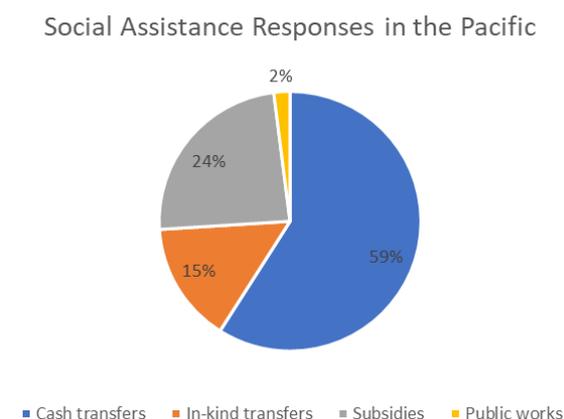
<sup>21</sup> Reserve Bank of Fiji, 2021

**measures** rather than social insurance or active labour market measures. This is consistent with the global experience, where 55% of COVID-19 response social protection programs were based on social assistance (ranging from 39% in Eastern Europe and Central Asia to 75% in South Asia). This alignment of trends in the Pacific to the global experience is also seen in the proportion of programs focused on social insurance and labour market interventions.<sup>22</sup>

## Social assistance responses

**Cash transfers account for the majority (59%) of social assistance responses in the region.** Cash transfer programs have been used mainly as emergency response measures to protect against increased vulnerability and hardship caused by the pandemic. Most were unconditional, one-off or short-term measures provided over a few months.

**Figure 2. Composition of social assistance responses in the Pacific**



Source: Authors, based on Gentilini et al., 2021

**In-kind transfers consisting of food relief or agricultural materials, and subsidies were also provided in some countries.** For example, food relief and/or agricultural and fishing materials to support food security were provided in the **Cook Islands, FSM, Samoa, Timor-Leste, Tonga, and Tuvalu**. Subsidies were also introduced in nine countries, mainly as a waiver for electricity costs for households but also in some cases for businesses, as well as for household water costs and school fees.

**Palau was one of the few countries globally to introduce a cash for work program**, aimed at providing employment for people affected by the downturn in the tourism sector.

**Table 1. Social assistance responses in the Pacific**

Social assistance measures	Number of measures	Number of countries	Countries (Number of measures)
Cash transfers - Emergency, conditional, unconditional	27	8	Cook Islands (4); Fiji (9); FSM (2); Kiribati (3); Samoa (2); Timor-Leste (1); Tonga (4); Tuvalu (2)
In-kind transfers - Food, agricultural/fishing materials	7	6	Cook Islands (1); FSM (2); Samoa (1); Timor-Leste (1); Tonga (1); Tuvalu (1)
Subsidies - Utility and financial obligation waiver/postponement	11	10	Cook Islands (1); FSM (1); Kiribati (1); Palau (1); PNG (1); Samoa (1); Solomon Islands (1); Timor-Leste (2); Tonga (1); Vanuatu (1)
Public works - Cash for work	1	1	Palau (1)
<i>Total</i>	<i>46</i>	<i>11</i>	<i>Cook Islands (6); Fiji (9); FSM (5); Kiribati (4); Palau (2); PNG (1); Samoa (4); Solomon Islands (1); Timor-Leste (4); Tonga (6); Tuvalu (3); Vanuatu (1)</i>

Source: Authors, based on Gentilini et al., 2021

<sup>22</sup> In the Pacific, social insurance accounts for 18% of social protection COVID-19 response measures (compared to 21% globally), and labour market interventions account for 27% (compared to 24% globally). (Gentilini et al., 2021)

**Social assistance cash responses consisted mainly of new programs or vertical expansions of existing programs.** A total of 27 cash transfer programs were implemented by governments in eight Pacific countries. The measures included new programs (63%) and vertical programme expansions (33%).<sup>23</sup>

**New programs were created to reach vulnerable individuals and households affected by COVID-19 restrictions, unemployment, and hardship.** For example, **Fiji**, among other new support, provided cash transfers for households in containment areas who were not receiving another form of benefit. Programs were also established to address the unemployment of informal workers, as formal workers tended to be covered by social insurance and labour market programs. In the **Cook Islands, FSM, Tonga, and Tuvalu**, cash transfers for COVID-19 hardship were provided as part of stimulus packages for those who were not receiving other forms of support. These countries all had some form of existing social assistance in place before the pandemic.

**Near-universal social protection responses were introduced in Samoa, Tuvalu, and Timor-Leste.** Despite **Samoa** and **Tuvalu** having underdeveloped social protection systems before the emergence of COVID-19, they both opted for cash responses with broad coverage, as did **Timor-Leste**. Box 2 below briefly describes the experience in **Samoa, Tuvalu, and Timor-Leste**.

## Box 2. Near-universal cash responses to COVID-19 in Samoa, Tuvalu, and Timor-Leste

**Samoa's** universal one-off payment of WST 50 (USD 19)<sup>24</sup> leveraged the census data collection process, implemented by the Samoa Bureau of Statistics in August 2020. All citizens were eligible, with the qualifying condition of registering for the National ID Card Scheme. Payments were made in cash by census workers. The cash payment acted as an economic stimulus that was estimated to have cost the Government WST 12 million (USD 4.6 million).

Prior to the onset of COVID-19, **Tuvalu** had a very basic social protection system that included a pension and disability support. In response to the pandemic, **Tuvalu** set up several new social protection measures including a temporary Universal Basic Income programme – the Direct Financial Support to Tuvalu Citizens Permanently Residing in Tuvalu program. The programme provided AUD 40 (USD 29) per month to all citizens – approximately 11,500 beneficiaries – for a duration of two months.<sup>25</sup> The programme had a budget allocation of AUD 3.7 million<sup>26</sup> (USD 2.7 million) – around 4.6% of GDP, as part of **Tuvalu's** substantial COVID-19 response package (30% of GDP). The large COVID-19 response budget was made possible by significant donor support, contributing more than half of the package. Australia and New Zealand are among the main donors. The IMF concluded that swift implementation of containment measures, limited spill-overs from tourism, and COVID-19-related fiscal spending allowed **Tuvalu** to avoid a recession in 2020.<sup>27</sup> In October 2020, the programme was scaled down and targeted only those more directly impacted by the crisis, and as of August 2021, approximately AUD 1.2 million (USD 0.87 million) has been expended.

One of the largest COVID-19 response programs in the region was the **Timor-Leste** Uma Kain cash transfer program. Uma Kain provided an emergency one-off payment of USD 200 to 313,000 households – an estimated 95% of families. The programme excluded only households earning more than USD 500 per month. Ineligible households were identified by cross-checking records with the General Social Security Scheme and through self-reporting. The near-universal cash transfer used an existing household registration system to identify its beneficiaries.

**Vertical expansions of cash transfer programs were mainly for programs benefiting the elderly, people with disabilities, and children.** The elderly were the group most widely supported through vertical expansions of social assistance programs, for example in **Fiji, Kiribati, Tonga, Tuvalu, Samoa, and the Cook Islands**. Persons with disabilities were supported in **Fiji, Kiribati, Tonga, and the Cook Islands**. Children received additional support through a universal cash transfer programme in the **Cook Islands** and a targeted conditional cash transfer programme in **Tonga**.

**Horizontal expansions of routine social assistance programs were very rare in the region.** This may be because the type of social protection needed did not previously exist. For example, before COVID-19

<sup>23</sup> As a global comparison, of 734 new cash transfer schemes globally, 69% were new programs, 16% vertical expansions, 5% horizontal expansions, 4% vertical and horizontal expansions together, and 6% administrative adaptations. (Gentilini et al., 2021)

<sup>24</sup> Approximate USD currency conversions throughout the paper are based on exchange rates on [oanda.com](https://www.oanda.com) on 18 November 2021.

<sup>25</sup> Gentilini et al., 2021; ADB, 2021

<sup>26</sup> Government of Tuvalu, 2020

<sup>27</sup> IMF, 2021

there were no unemployment-related social protection initiatives, and very few poverty and hardship relief programs in the Pacific. The pandemic highlighted a need to support the newly unemployed and those experiencing poverty and hardship. Also, the pandemic response measures were intended to be temporary emergency response measures, hence new programs were created rather than expanding existing programs. The oneprogrammethat experienced both vertical and horizontal expansion was the School Closure Support Payment in the **Cook Islands**. It provided additional payments to those who were already receiving the Child Benefit – only available to Cook Islanders and permanent residents and was expanded to include the children of temporary foreign workers.

### Box 3. Tokelau's comprehensive social protection system was not used in the crisis because of limited COVID-19 impacts

**Tokelau**, with a population of approximately 1,500, has one of the region's most comprehensive and generous social protection systems, consisting of universal benefits covering the life cycle of its people. This includes a universal child grant for children aged 0-18 years, a village employment guarantee scheme and unemployment benefits for the working age population, a universal pension, a universal disability benefit, and a carer benefit, as well as free health care and education scholarships.<sup>28</sup>

**Tokelau** is a non-self-governing territory of New Zealand, with more than 7,000 Tokelauans residing in New Zealand. The provision of social protection to the whole population of **Tokelau** is less complex than other Pacific countries, due to it consisting of only three atolls, having a very small population, and the coexistence of traditional social protection.

**Tokelau's** isolation – it has no airport and receives only infrequent passenger ships from Samoa – and resulting limited tourism industry, coupled with an economy reliant on fishing revenues and grants from New Zealand, has protected the small nation from both the social and economic impacts of the virus. As such, it has not needed to implement any economic stimulus packages nor social protection responses to COVID-19.

## Social insurance responses

**There were 15 social insurance measures implemented in nine countries, with three countries introducing more than one measure.** The measures included allowing members to make early withdrawals from the contributory provident fund and pension schemes, unemployment benefits, and the provision of paid sick leave.

**Provisions for early withdrawal from provident funds and pension schemes were introduced in several countries, including Fiji, PNG, Samoa, Solomon Islands, Tonga, and Vanuatu.** Although this type of response is understandable due to the importance of provident funds in the region, it also introduces a significant risk that people's savings and pensions become depleted, leaving limited funds at retirement age – undermining their intended long-term protective function.

**All of the unemployment measures introduced were new programs created to address unemployment caused or exacerbated by the pandemic,** particularly in countries with a heavy economic reliance on tourism, such as the **Cook Islands, Fiji, Palau, Samoa, and FSM**. Before COVID-19, there were no unemployment benefit schemes in the Pacific.

**Paid sick leave measures were introduced in the Cook Islands, Fiji, and Samoa.** However, this measure seems to have been activated only in **Fiji**, where there have been two outbreaks of the virus.

## Active labour market responses

**There were 22 active labour market response measures implemented in 10 countries. Lowering or deferring social insurance contributions** for wage workers and their employers was the most widely implemented measure.

**Wage subsidy programs were also utilised in five countries, primarily to support formal workers, and took different forms.** In **Timor-Leste**, 60% of wages were provided for formal workers, and a wage subsidy was provided for informal workers who registered for contributory social security and continued to make payments for an additional three months. In the **Cook Islands**, a wage subsidy provided businesses with

<sup>28</sup> Satriana & Tavite, forthcoming

reduced incomes with funds to pay their workers the minimum wage, while a sole trader cash grant was put in place for self-employed people who were tax registered or newly tax registered. These important efforts to include or register informal workers were not the norm, with most wage subsidies in the region (and globally) focused on formal workers. Given the formal economy is relatively small in most Pacific countries, this approach has implications for the coverage of these interventions. Wage subsidy programs were also put in place in **FSM**, **Tonga**, and **Vanuatu**. In **Tonga** and **Vanuatu**, wage subsidies targeted workers within the tourism industry.

## Humanitarian assistance: Selected experiences

**This section briefly describes some selected experiences of humanitarian assistance in response to COVID-19, as well as the partnerships between governments and humanitarian actors to deliver support.** Humanitarian actors include national or international non-government organisations and agencies. Humanitarian assistance can be delivered in coordination and/or collaboration with the government, including the social protection sector, as described below.

### **Humanitarian assistance leveraged social protection systems in some Pacific countries.**

Documentation of humanitarian assistance across the region is patchy, but there are some useful examples of how non-governmental organisations (NGOs) worked with governments to provide assistance as either in-kind emergency support or emergency cash transfers. For example, in **Fiji**, the Government of Fiji and other non-government and civil society organisations collaborated with Save the Children Fiji, to identify beneficiaries for Save the Children's digital cash transfer programme for vulnerable households that were not already receiving social assistance. The collaboration between Save the Children and the Government led to wider coverage of responses, with more poor households being included beyond existing beneficiaries, as well as the adoption of new methods and improvements to existing systems. As another example, in the **Cook Islands**, hygiene packs and food packs funded by development partners were distributed to vulnerable households that were identified mainly through the Ministry of Internal Affairs list of social assistance beneficiaries.

**Humanitarian assistance has also utilised new delivery systems and supported the distribution of in-kind support.** The UnBlocked Cash (UBC) programme in **Vanuatu**, created in 2019, provides cash and voucher assistance in the context of geographic challenges and having no government delivery system in place. The UBC was expanded in response to COVID-19 and Tropical Cyclone Harold in 2020. By June 2021, the project supported 35,000 beneficiaries and 351 vendors across 12 islands in **Vanuatu**, injecting over USD 1.2 million into the economy.<sup>29</sup> In **PNG**, small-scale localised humanitarian responses prioritised food distribution. The National Capital District Food Bank distributed 10,000kg of rice donated by a private sector company, reaching an estimated 6,000 people. In the Treaty Villages in Western Province, food was also donated to more than 8,800 beneficiaries. There were numerous similar small-scale food distribution programs supported by the non-government, community, and religious organisations, for example in **Fiji** during the 2021 COVID-19 outbreak.

## Informal social protection

**Informal social protection networks acted as a catalyst for the provision of support during the COVID-19 pandemic.** Culture and values vary across the Pacific region, but tend to include the common aspects of strong social ties between families and communities that support the notion of sharing resources with those in need, which fosters resilience across communities.<sup>30</sup> Before the pandemic, informal social protection systems were in a state of change due to factors such as poverty, migration, and urbanisation, which have put these systems under stress.<sup>31</sup> During the pandemic, informal or traditional social protection systems have also played a role in providing support to people in need. In many Pacific contexts, with the onset of the pandemic, people (particularly the unemployed) returned to their villages for support, and subsistence agriculture and fishing activities.<sup>32</sup> Moreover, the pandemic has provided an opportunity to reinvigorate cultural traditions and customs, and the "social fabric and social bonds within communities have been strengthened and therefore the social capital of communities has been reinforced."<sup>33</sup> For example, the pandemic has provided the opportunity to use traditional social networks, through community groups

<sup>29</sup> Food Security Cluster, 2021

<sup>30</sup> Nanau & Labu-Nanau, 2021; UNESCO Pacific Office, 2021

<sup>31</sup> Calder & Tanhchareun, 2014

<sup>32</sup> Nanau & Labu-Nanau, 2021; UNESCO Pacific Office, 2021

<sup>33</sup> UNESCO Pacific Office, 2021, p. 4

delivering food and other necessities to households that are not being reached through other programs.<sup>34</sup> In the **Solomon Islands**, the Government primarily relied on the *Wantok* system or traditional kin and social networks to support people at the local level.<sup>35</sup>

**The pandemic has reinvigorated informal/traditional social protection but is also putting these systems under strain.** For example, when whole families or communities are affected by the impacts of the pandemic through increased unemployment or lack of business activity, people are left with limited resources to share with others. Remittances, which support informal social protection, have been negatively affected by previous economic crises. As described in Section 3, while remittances declined in the early months of the COVID-19 pandemic, the inflows have gradually returned to positive growth.

## Delivery of social assistance: Key operational insights

This section focuses on the social assistance responses to COVID-19 in the Pacific and presents the key operational factors that enabled the implementation of these responses. The focus is placed on the overall administrative capacity to deliver social protection, particularly on the ability to identify and register beneficiaries and to deliver the transfers. Box 4 below summarises the main findings of the section.

### Box 4. Delivery of social assistance responses to COVID-19 in the Pacific

- Overall, countries that had already committed resources to social protection and developed administrative systems, including the capacity to deliver cash assistance, were in a better position to provide support during the pandemic.
- **Identification and enrolment**
  - Countries in the Pacific relied substantially on pre-existing social assistance and social insurance data. While social registries have been an important source of information for countries in other regions, such registries are lacking in most Pacific countries.
  - Information from sectors such as energy, education, and transport has been used to provide support during the pandemic – mostly for fee waivers or reductions.
  - There were very few experiences in the development of mass registration mechanisms in the Pacific.
    - **Fiji** developed a new on-demand registration mechanism using unstructured supplementary service data (USSD).
    - **Samoa** leveraged the data collection process for the census.
- **Payment delivery**
  - Pre-COVID-19, access to financial institutions in the region was limited, with many countries relying on a combination of manual transfers via local offices/capacity, post office delivery, bank transfers, and local/island councils. This pattern is also seen, to a large extent, in the implementation of COVID-19 responses.
  - Digital innovations were implemented in **Fiji** (mobile money), and **Vanuatu** (blockchain technology).
  - Several countries identified alternative delivery mechanisms in order to assist hard-to-reach populations across the archipelagos, such as food vouchers, delivery through the post office, cash delivery to the most remote islands, or through local government structures.

**Countries in the Pacific that had already committed resources to social protection programs before the pandemic, and have developed administrative systems and existing capacity, were in a better position to expand coverage in response to the crisis.** For example, **Fiji and Cook Islands**, which had relatively developed social protection policies and infrastructure before the pandemic, managed to leverage this existing capacity to implement the responses described in the previous section. Similarly in **Timor-Leste**, the establishment of new programs for COVID-19 response built on existing capacity and previous experience from regular social protection programs. At the other end of the spectrum, **PNG, Palau, and the Solomon Islands** had undeveloped social assistance provisions before the pandemic, and similarly have had minimal social protection responses during the COVID-19 crisis. This is in line with the global

<sup>34</sup> UNESCO Pacific Office, 2021

<sup>35</sup> Nanau & Labu-Nanau, 2021

experience, where countries with higher coverage of routine social protection programs managed to expand coverage faster, through both existing and new programs.<sup>36</sup>

**Countries with established cash delivery systems have been able to expand existing programs to provide swift responses to the crisis.** In **Fiji, Tonga, Cook Islands, and Samoa**, a significant proportion of COVID-19 cash interventions were in the form of top-ups to existing social protection programs, particularly as part of the early interventions. These countries have existing regular cash transfer programs and relatively established transfer mechanisms using bank transfers, post office services, manual payments via local government offices, or a combination thereof.<sup>37</sup>

## Registration and enrolment

The scale of the COVID-19 crisis and the necessary health measures (i.e. mobility restrictions and social distancing) imposed a challenge to the registration and enrolment of new beneficiaries of social protection responses. Based on global experiences, this paper studies the identification and enrolment of beneficiaries across the following non-exclusive strategies: i) using existing data from social protection; ii) using existing data from other sectors; and iii) implementing mass-registration mechanisms.<sup>38</sup>

### Use of existing social protection data

**In the wake of the crisis, countries in the Pacific relied substantially on pre-existing social assistance data.**

- **Fiji, Samoa, Tonga, Kiribati, and the Cook Islands leveraged the beneficiary registries of cash transfer programs** (e.g. social pension and disability benefits) to provide top-ups (vertical expansions), and to determine eligibility for new programs by crosschecking beneficiary lists of other programs to ensure people or households were only receiving one type of benefit.
- In **Fiji, government records of households who had applied for regular social assistance programs but were not eligible at the time** (and were thus rejected)<sup>39</sup> were used to support the beneficiary selection of a Save the Children COVID-19 response program, together with information from non-government and civil society organisations.

**Beyond social assistance data, information from social insurance schemes was also leveraged by some countries.** **Fiji, PNG, Solomon Islands, Vanuatu, and Palau** relied on social insurance coverage and databases, enabling early withdrawal of provident funds. Social insurance data was also used to determine eligibility for new social assistance programs. **Timor-Leste's** Uma Kain near-universal cash response programme excluded only households earning more than USD 500 per month. Ineligible households were identified by cross-checking records with the General Social Security Scheme.

**While social registries have been an important source of information for countries in other regions,<sup>40</sup> such registries are lacking in most Pacific countries.** An interesting exception is **Timor-Leste**, where the existing household registration system, established in 2017, facilitated the implementation of a near-universal cash transfer programme in response to COVID-19 (see Box 2).<sup>41</sup> The system contains information on all households in the country. The Government used this registry to identify beneficiaries for the Uma Kain cash transfer and subsequent Cesta Basica in-kind response program.

### Use of existing data beyond social protection

**Information from sectors such as energy, education, and transport has been used to provide support during the pandemic.** Fee waivers or fee reductions were implemented in many Pacific countries. Fee reductions for electricity were the most commonly applied, followed by water, school tuition, and

<sup>36</sup> Beazley, Marzi & Steller, 2021

<sup>37</sup> The most common expansion is top-ups of old age pension and disability allowance, which are important components of social assistance in these countries.

<sup>38</sup> Barca & Beazley, 2019

<sup>39</sup> Note: This is the same as a typical Social Registry use of data – expanding to registered yet not previously eligible people/households.

<sup>40</sup> Beazley, Marzi & Steller, 2021

<sup>41</sup> Government of Timor-Leste, Ministerial Order no. 49/2017, of 23 August 2017; Government of Timor-Leste, Village Administration Book: Annex 16. (The Asia Foundation, 2020)

transportation. These waivers were provided to all existing users of the services, by automatically eliminating or reducing the amount billed for a certain period.

## Mass-registration mechanisms

Since most responses in the Pacific consisted of vertical expansions of existing programs, and new programs often had limited coverage, few countries developed mass registration mechanisms. There are however two interesting examples where this occurred:

- **Fiji's** new cash transfer scheme was developed with a **digital on-demand registration mechanism using an unstructured supplementary service data (USSD) system**. Applicants applied for the programme by dialling the designated number on their mobile phone, which then presented a form for applicants to provide necessary information such as name, date of birth, applicable identification number etc. The information was forwarded by the service providers to the Government for verification and eligibility assessment, and the Government then instructed the service providers to make payments to the approved beneficiaries.<sup>42</sup> The service was provided by both of the mobile providers operating in the country, Vodafone and Digicel. This method has been used since April 2021 for a series of cash transfers for beneficiaries in the informal sector. The latest round of transfers in August 2021 recorded 260,000 beneficiaries.<sup>43, 44</sup>
- In **Samoa**, the mass-registration mechanism for the universal cash transfer response programme leveraged the **data collection process for the census** (see Box 2).

### Box 5. The status of national ID systems in the Pacific

The limited development of national ID systems in the Pacific is a constraining factor for mass-registration mechanisms, data sharing, and eligibility assessments, among others. The development of such systems is underway in a small number of Pacific countries. For example, **Samoa** and **Fiji** are both in the process of developing a national identification system. **Samoa's** National Digital Identification System (NDIDS) was initiated in 2017. After some delays, a census was scheduled in August 2020 to collect the data needed for the ID system.<sup>45, 46</sup> The establishment of a National ID Card system for **Fiji** was announced in 2019.<sup>47</sup>

The value of a national identification system has become even more apparent in the implementation of COVID-19 social protection responses. Although such systems are not a precondition for the implementation of social protection programs, they are an enabling factor. Aside from the function to authenticate individuals' identity, global experiences show that unique identifiers have enabled cross-checking information in different databases, have been used to allow individuals to check their eligibility status, and to submit digital applications.

## Payment and benefit delivery

As with the identification and enrolment of beneficiaries, the nature and scale of the COVID-19 crisis imposed serious challenges to benefit delivery. Some of the health measures adopted, like social distancing policies and mobility restrictions, made the delivery of social protection benefits more difficult.

**Pre-COVID-19, access to financial institutions in the region was limited, with many countries relying on a combination of manual transfers via local offices/capacity, post office delivery, bank transfers, and local/island councils.** Geographic challenges and limited infrastructure in most Pacific countries comes with a limited presence of financial institutions. While there is good access to banking services in high-income countries such as the **Cook Islands**, it is still very limited in the rest of the region. Even in a relatively developed economy like **Fiji**, its outer island communities are without access to financial institutions. **Fiji's**

<sup>42</sup> Due to a lack of data interoperability across agencies, a lot of data verification was done manually, making it difficult to detect errors.

<sup>43</sup> The Fiji Times, 2021

<sup>44</sup> Due to a lack of data interoperability across agencies, a lot of data verification was done manually, making it difficult to detect errors.

<sup>45</sup> Following the start of the COVID-19 crisis, it was then decided that the Census would be combined with the disbursement of the WST 50 (USD 19) universal benefit.

<sup>46</sup> Samoa Observer, 2020; Samoa Bureau of Statistics, n.d.

<sup>47</sup> Keesing Platform, 2019; The Fiji Times, 2019; Satriana, Robinson & Archibald, 2021

regular social protection benefits are to a large extent delivered via bank transfers but are combined with post office delivery on islands without bank branches, and even manual payments in a small number of communities. These combined approaches are also common in other countries including **Kiribati**, **Timor-Leste**, and **Tuvalu**. This pattern is also seen, to a large extent, in the implementation of COVID-19 responses. For example, in **Kiribati**, the delivery system of the main cash transfer programme has been manual and rudimentary. As a result, delivering benefits to people on outer islands during the pandemic was difficult. While the country managed to provide top-up benefits into beneficiary bank accounts, it had significant challenges implementing a new unemployment benefits programme that used Island Councils to distribute cash. This resulted in lump sum payments covering several months, as well as payment backlogs.

**New digital systems have been developed and/or scaled up in Fiji and Vanuatu with promising results.** To limit the spread of the virus, many countries globally used digital payment mechanisms to deliver social assistance support.<sup>48</sup> These include those using accounts – both bank and mobile money – as well as non-account based digital methods, such as one-time passwords and tokens.<sup>49</sup> While this has been more limited in the Pacific than in other parts of the world, some countries are exploring new digital systems for delivering money, in particular, **Fiji** and **Vanuatu** (see Box 6 below).

### Box 6. Digital innovations for payment delivery: The cases of Fiji and Vanuatu

A new mobile money transfer system has become the main disbursement mechanism for social protection in **Fiji** and may transform disaster responses in the future. Previously introduced by Save the Children to provide cash relief to vulnerable households at the end of 2020, the mobile money transfer has now become the main method of transfer for the Government of Fiji's COVID-19 response for informal sector workers since April 2021.<sup>50</sup> Upon approval of their application via mobile registration, beneficiaries receive the funds in their mobile money platforms – Vodafone's M-paisa or Digicel's MyCash mobile wallet. Benefits can be cashed in local Vodafone or Digicel agents or used for purchases in stores. The cost for mobile money transfers or withdrawal is normally FJD 1 (USD 0.47) for a transaction of FJD 100 (USD 47) (1%). For the COVID-19 programs, however, Vodafone and Digicel have waived all transaction costs.

The UnBlocked Cash (UBC) program, initiated by Oxfam as a crisis response, provides a viable alternative transfer mechanism in **Vanuatu**, given the country's widespread geographic location and minimal financial infrastructure. First piloted in 2019, UnBlocked Cash is a type of digital cash transfer supported by distributed ledger technologies (DLTs) or 'blockchain' technology. Benefits are received through digital vouchers, which can be distributed remotely, making support quick and efficient, including during emergencies. The UBC has been expanded in response to COVID-19 and Tropical Cyclone Harold in 2020. By June 2021, the project had supported 35,000 beneficiaries and 351 vendors across 12 islands in **Vanuatu**, injecting over USD 1.2 million into the economy.<sup>51</sup>

**In several Pacific countries, alternative delivery mechanisms to assist hard-to-reach populations across the archipelagos had been developed before COVID-19, which helped the delivery of support during the crisis.** In the **Cook Islands**, the barrier was overcome by relying on the national bank. In **Fiji**, the barriers have been addressed by using different means of delivery mechanisms, including providing food vouchers, delivery through the post office, or cash delivery to the most remote islands.

**Beyond digital innovations, some countries delivered cash in more traditional ways, for example, the use of local government structures in Tuvalu and Timor-Leste.** The Uma Kain cash assistance in **Timor-Leste** was distributed in cash to heads of households, by government staff and village chiefs at collection sites in each village. For vulnerable people such as the elderly and people with disabilities, payments were delivered directly to their homes. However, the implementation of Uma Kain was supported by a new digital management information system (MIS) that allowed real-time monitoring of payments. Supported by DFAT, the system enabled the Government to register beneficiaries, reconcile payments on payment day, monitor payment progress, and register complaints. Data from the MIS was uploaded daily to a national dashboard which showed the progress of payments.

### Learning from cash vs in-kind benefits

**The experience in Timor-Leste highlighted the additional complexities of delivering in-kind support compared to cash support.** The Uma Kain transfer was distributed over 30 days, to almost 300,000

<sup>48</sup> Gentilini et al., 2021

<sup>49</sup> Beazley, Derban & Barca, 2020

<sup>50</sup> Save the Children, 2021

<sup>51</sup> Food Security Cluster, 2021

households in all 452 villages, for USD 62 million. In contrast, there have been significant logistical challenges in distributing food through Cesta Basica, resulting in the extension of the distribution period. As of February 2021, only 900,000 of the country's 1.5 million population that were registered for the program had been reached.<sup>52</sup> The Minister of Economic Affairs cited "climatic conditions, access difficulties of suppliers to some remote locations, because of the road conditions and the imposition of lockdown in some areas" as "constraints that led to the need to extend the distribution period".<sup>53</sup> Other Cesta Basica challenges include a lack of transparency about the selection criteria and procurement of providers, high use of imported goods and under-utilisation of local companies, goods not arriving in good condition nor at the documented quantity, and a preference for cash over in-kind support in the community.<sup>54</sup>

## Assessment of the main social assistance responses

This section assesses, to the extent possible, the main social assistance responses implemented in the Pacific against core outcome criteria.<sup>55</sup> The assessment focuses on the coverage of the measures, their timeliness, and their adequacy. It is important to mention that a full assessment of these dimensions would require studying in-depth the effects of the crisis on different segments of the population.<sup>56</sup> This goes beyond the scope of this paper. Box 7 below summarises the main findings of the section.

### Box 7. Assessment of the main social assistance responses to COVID-19 in the Pacific

#### Coverage

- The majority of COVID-19 social protection responses in the region had medium to low levels of coverage.
- There is, however, a group of Pacific countries with high coverage responses: **Samoa**, **Tuvalu**, and **Timor-Leste** implemented near-universal responses, while **Fiji**, **Kiribati**, and **Cook Islands** reached high coverage combining several response programs.

#### Timeliness

- Responses were overall timely. Half of the programs were introduced between March and May 2020. A number of new cash transfer programs were introduced between April and June 2021, mostly in response to the second COVID-19 outbreak in **Fiji** in April 2021.
- A key enabling factor for timely responses was relying on strategies that did not require extensive data collection or registration processes.
  - Fee waivers and early withdrawal from provident funds were mostly rolled out in the early months.
  - Vertical expansion of cash transfers (leveraging existing data and payment mechanisms) tended to be made available earlier compared to new cash transfers.
  - Even new near-universal and categorical cash transfers were able to provide benefits in the early months of the crisis because of their very low data-requirements.
- Timely crisis response was also determined by the availability of funds to be disbursed quickly.

#### Adequacy

- Cash transfer interventions, either through vertical expansion or new programs, tended to have very short durations, providing limited protection to beneficiaries.
- Although benefit levels varied, most transfers were likely to be inadequate for achieving their objectives (i.e. protecting people from the effects of the crisis, preventing consumption decreases, compensating for income losses).

## Coverage

<sup>52</sup> Government of Timor-Leste, 2021; Ministry of State Administration and Territorial Operations Ficha de Familia database provided to SPACE Asia Pacific team in September 2021

<sup>53</sup> Government of Timor-Leste, 2021

<sup>54</sup> Summary of monitoring report for Cesta Basica provided to DFAT by Partnerships for Human Development via email correspondence in 2021

<sup>55</sup> See Barca, 2020a; Barca, 2020b; Holmes, Levine & Shakespeare, 2021

<sup>56</sup> See Wylde, Carraro & McLean, 2020

**Reaching and protecting most – if not all – of those in need is one of the main intended outcomes of the COVID-19 responses.** The widespread impacts of the crisis, coupled with the limited coverage of pre-existing social protection systems in the region, highlighted a need to reach people through new emergency programs. Adequate coverage can be reached with a single programme or with the combination of multiple responses.

**Data on coverage of social protection measures throughout the region is limited and patchy.**<sup>57</sup> Whilst comprehensive beneficiary numbers for different programs are available for countries such as the **Cook Islands** and **Fiji**, which have large interventions built upon existing social protection systems, in other countries coverage data is limited and only available for certain programs. In addition, a proper assessment of response coverage should be based on an assessment of the number of people affected (i.e. coverage should be assessed against the effects of the crisis). As this information is not available, coverage has been assessed against national populations, to allow for regional benchmarking.

**There is a group of Pacific countries with high coverage responses.** In addition to the countries with near-universal responses (**Samoa, Tuvalu, and Timor-Leste** – see Box 2), the **Cook Islands**<sup>58</sup> and **Fiji**<sup>59</sup> provided ‘universally leaning’ responses by combining (sequencing and layering) different forms of support to vulnerable groups. **Fiji** reached more than 60% of the population, while the **Cook Islands** reached 70%. However, it is important to note that these figures are only indicative, as they were calculated based on the targeted number of beneficiaries and assume no overlaps. **Kiribati** provided coverage through cash transfers for the unemployed, and some targeted support to vulnerable groups. Assuming that a significant proportion of the approximately 51,000 eligible unemployment support beneficiaries could be reached, **Kiribati** would also have a high level of coverage, reaching approximately half of its population.

**On the other end of the spectrum, the majority of COVID-19 social protection responses in the region had medium to low levels of coverage.** Countries such as **PNG, Solomon Islands, and Vanuatu** provided support to workers through national provident funds. Very limited support was provided to vulnerable populations. This is likely to be at least in part due to not having extensive social assistance programs.

**Humanitarian actors were key to increasing the response coverage in some countries.** For example, despite there being only a nascent social protection system in **Vanuatu**, the UnBlocked Cash programme used blockchain technology to reach more than 35,000 beneficiaries (11% of the population) across 12 islands (see Section 4.4 for further details).

## Box 8. Gender responsive social protection: A missing element of the response

The pandemic has exacerbated existing social inequalities and disproportionately affected women. Globally, rates of violence against women have increased, women’s caregiving responsibilities have increased, and women have tended to be more affected by job losses than men. In June 2020, it was reported that of 195 countries that adopted fiscal measures – mainly in the form of social protection – in response to COVID-19, only 16 made reference to women.<sup>60</sup> Based on the information available, social protection responses in the Pacific were not gender-sensitive.

There are very few examples of social protection responses in the Pacific that incorporated gender considerations, one being the **Cook Islands** School Closure Support program, which acknowledged the additional care responsibilities of women. Another example is from **Fiji**, where the Care and Protection Allowance top-up of FJD 100 (USD 47) per month for two months targeted households with vulnerable children, who in most cases have female caregivers.

<sup>57</sup> There are specific key methodological challenges that should be noted in terms of social protection coverage. One, program-level data needs to be aggregated at the country level and it is difficult to ascertain if the population covered in different programs overlaps or not. Two, some programs target individuals categorically, some target households, and extrapolating comparable data across the two is complex.

<sup>58</sup> Cook Islands reached 70% with the following programs: Welfare Payment to Vulnerable People, School Closure Support Payment, Electricity Subsidy, Wage Subsidy, Training Subsidy, Fees Free Initiative, Unemployment Benefit, Emergency Hardship Fund, Sole Trader Cash Grant, Reduced Superannuation Payments, and Self Isolation Support and Sick Leave.

<sup>59</sup> Fiji reached 60% by vertically expanding Unemployment Assistance, Pension Scheme, Care and Protection Allowance, Poverty Benefit Scheme, and Disability Allowance; by reducing social security contributions; by providing COVID-19 paid sick leave for formal and informal workers; and unconditional cash transfers for informal workers.

<sup>60</sup> Wenham et al., 2020

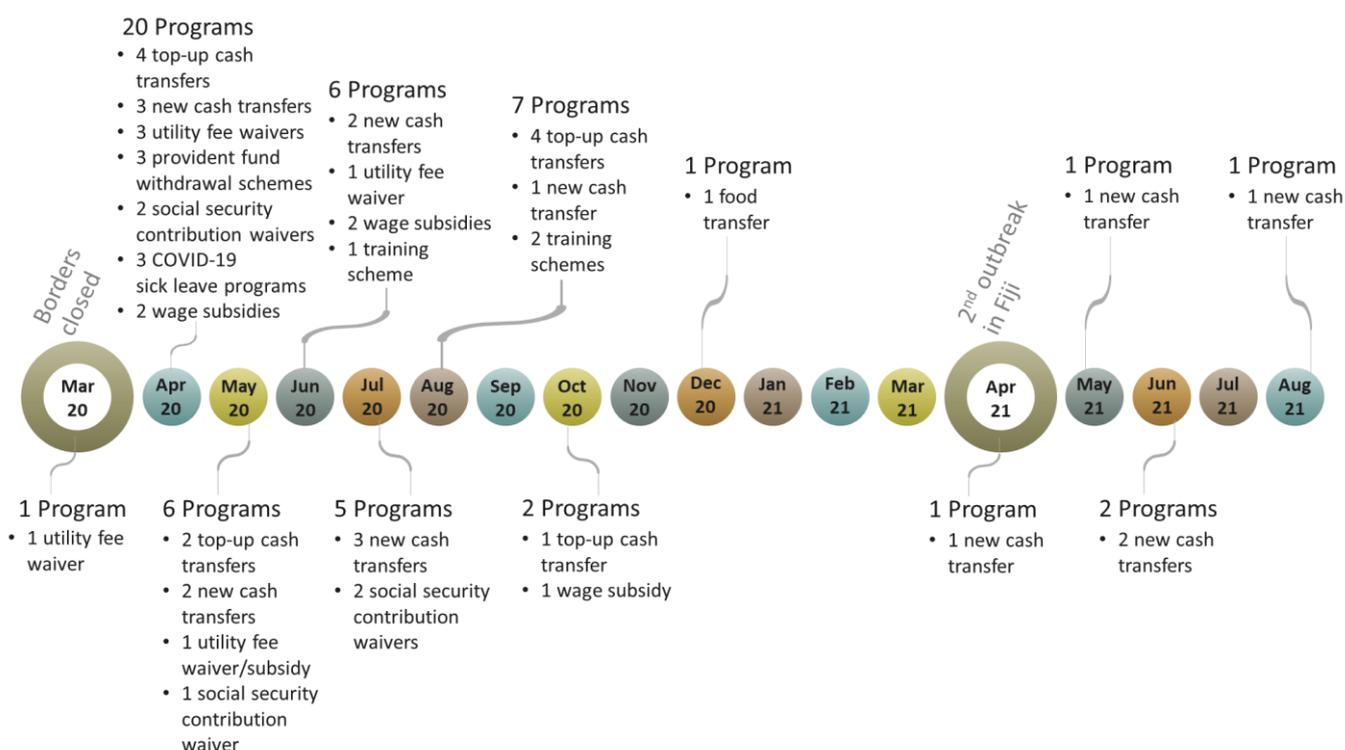
# Timeliness

The timeliness of responses is crucial to protect people from the shock, prevent the adoption of distress strategies, and minimise longer-term adverse effects. This section studies the timeliness of the main social protection responses in the Pacific.<sup>61</sup>

Most countries announced border closures in March 2020, followed by economic stimulus policies – this analysis thus uses March 2020 as a benchmark to measure the timeliness of social protection responses. The timeline of COVID-19 exposure in Pacific countries varies, with many countries having no local transmission of the virus to date (see Section 3). However, countries implemented border closures between mid- to late-March 2020,<sup>62</sup> and many also announced States of Emergency around this time, associated with restrictions such as stay at home orders, school closures, and curfews. Another notable trigger is the outbreak in Fiji in April 2021 (after one year of no community transmission), which prompted strict measures and significant social protection responses in Fiji.

Information on the approximate start dates of social protection responses is available for 53 programs, or around two-thirds of all the programs considered in this paper. The timeline and types of programs rolled out are summarised in Figure 3 below. It is important to note that the rollout dates of the programs, as announced by the respective governments, have limitations. They indicate the start of the disbursement, but not when disbursements were completed or reached all of the beneficiaries.<sup>63</sup> Furthermore, some programs, such as Uma Kain and Cesta Basica in Timor-Leste, were intended to be delivered sequentially over time. As described below, the length of disbursement periods across programs varies.

Figure 3. Timeline of the rollout of COVID-19 social protection programs



Source: Authors, based on multiple sources

Half of the programs (27 of 53) were introduced between March and May 2020, providing relatively rapid responses to the crisis. Only one program, a universal electricity fee waiver in the Cook Islands, effectively provided benefits in March 2020. This fee waiver did not require any registration process as it was automatically made available to all electricity users starting from the 19 March 2020 meter reading.<sup>64</sup> April 2020 saw the highest number of responses, with 20 programs rolled out. A further six responses were rolled

<sup>61</sup> For a global analysis of timeliness refer to Beazley, Marzi & Steller, 2021.

<sup>62</sup> Australia Pacific Security College, 2020

<sup>63</sup> This is problematic as the most vulnerable and marginalised people are often those who are reached last, as they face the highest barriers to access.

<sup>64</sup> Government of Cook Islands, 2020

out in May 2020. These earlier programs consisted of six cash transfer top-up schemes, five new cash transfers, five utility fee waivers, three provident fund withdrawal schemes, three programs reducing social insurance contributions, three special COVID-19 sick leave compensation programs, and two wage subsidy programs.

**Fee waivers and early withdrawal of provident funds were mostly rolled out in the early months, reflecting the fact that they did not depend on the collection of new data nor the development of new registration systems.** Waivers of fees including electricity, water, and school tuition, as well social insurance contributions, generally do not require any registration nor payment processes, as the payment exemptions can be made automatically to all existing users of the service. Withdrawals of provident funds require members to apply mostly through an online form, followed by verification of information already in the system, and payment of benefits made through the existing system. While the benefits of fee exemptions can be effective immediately, receipt of the provident fund benefits can have varying timeframes, depending on the requirements and verification processes. For example, the verification of **Fiji's** FNPF withdrawals took between eight and 30 days before payment to beneficiaries.<sup>65</sup> Delays were also experienced due to the high administrative load from the applications.<sup>66</sup>

**As expected, vertical expansions of cash transfers – leveraging existing data and payment mechanisms – tended to be made available earlier than new cash transfers.** Four of the 20 programs rolled out in April 2020 were top-ups, as were two of the six rolled out in May 2020.

**However, new universal and categorical cash transfers were also able to provide benefits in the early months of the crisis because of their very low data requirements,** with no need for extensive new data collection to target beneficiaries. The universal cash transfer in **Tuvalu** commenced disbursement in April 2020, and the near-universal cash transfer in **Timor-Leste** provided benefits in May 2020. Another new programme available in April 2020 was the cash benefits for street vendors in **Fiji**. Identification of beneficiaries was relatively simple for this program, as only those holding a street vendor license registered before the pandemic were eligible.

**Timely crisis response was also determined by the availability of funds to be disbursed quickly.** Such resources were available in **Timor-Leste** and **Tuvalu**. **Timor-Leste** has a USD 19 billion oil-financed sovereign wealth fund – ten times the value of its GDP – to support national priorities, including its regular social protection programs.<sup>67</sup> The wealth fund was used for the COVID-19 response budget, allowing for high levels of spending in a short time. Similarly, **Tuvalu** has a trust fund valued at AUD 179 million (USD 130.3 million) in 2018 – the equivalent of four times its GDP.<sup>68</sup> **Tuvalu** also swiftly engaged with international donors at the onset of the COVID-19 crisis, leading to the availability of significant funding.<sup>69</sup> On the other hand, **Fiji's** vertical expansion of its cash transfers rolled out later, in August 2020, following support from the Australian Government.<sup>70</sup>

**In the case of Timor-Leste, cash assistance performed much better in terms of timeliness compared to food assistance.** The country implemented two programs using the same targeting mechanism – the Uma Kain cash transfer and the Cesta Basica food distribution programme are both near-universal programs. The Uma Kain cash benefit was delivered over 30 days to almost 300,000 households. Cesta Basica, on the other hand, experienced significant delays, as discussed above (see Section 5.2.1).<sup>71</sup>

**The lack of existing infrastructure not only hinders timely programme rollout, but also the frequency of benefit delivery.** **Kiribati** implemented a new ongoing social assistance initiative as a large cash transfer programme in response to the pandemic and ongoing unemployment. The lack of a payment mechanism to reach new beneficiaries on the outer islands resulted in lump sum payments covering several months, as well as large payment backlogs. Access constraints and COVID-19 lockdowns, among other factors, have been cited as causes of the delays.

**Importantly, the adoption of a new mobile registration and transfer system in Fiji following the 2021 outbreak allowed for the timely delivery of cash benefits** (see Box 6). The mobile registration system

<sup>65</sup> FNPF, 2021a

<sup>66</sup> FNPF, 2021b

<sup>67</sup> World Bank, 2021c

<sup>68</sup> Howes & Surandiran, 2020

<sup>69</sup> Donor contributions account for 53% of the package, consisting of 14% from the World Bank, 13% from Australia, 12% from Taiwan POC, 8% from New Zealand, and 6% from ADB. (IMF, 2021)

<sup>70</sup> Key informant interview with Fiji Department of Social Welfare

<sup>71</sup> Government of Timor-Leste, 2021; Ministry of State Administration and Territorial Operations Ficha de Familia database provided to SPACE Asia Pacific team in September 2021

was first implemented in April 2021, with an eight-day turnaround – three days for applications and five days for processing. The system demonstrated an impressive ability to process information and stands in stark contrast to the cumbersome manual processes that are used for routine social assistance in **Fiji**. Under this scheme, the benefit is provided to residents of the main island, Viti Levu, which was most significantly affected by COVID-19. As of 29 August 2021, FJD 104.2 million (USD 49.2 million) had been paid to 289,489 Fijians, accounting for around 84% of the total applications received (345,289) and around half the population of Viti Levu.

## Adequacy

**A shock can create new needs, and therefore the response measures must take this into account and provide adequate support.** This section assesses, to the extent possible, how well the responses met the needs emerging from the crisis. It is important to note that a full assessment of the adequacy of the responses would require a deep understanding of the effects of the crisis on the different segments of the population in each country. This exceeds the scope of this paper.

**Cash transfer interventions, either through vertical expansions or new programs, tended to have very short durations, providing limited protection to beneficiaries.** Most vertical expansions of existing cash transfers have been provided as a one-off benefit. Social pension top-ups in **Tonga, Samoa, and Fiji**, and the Welfare Payment to Vulnerable People in the **Cook Islands**, were provided as one-off benefits, while **Fiji's** top-up of cash assistance for vulnerable people lasted for two months. As the economic impacts of the COVID-19 crisis have continued for much longer, such short-term benefits provided low-level protection to beneficiaries. An exception to this is **Kiribati's** vertical and horizontal expansion of its social pension, where a benefit increase from AUD 50 to AUD 200 (USD 36 to USD 146) per month, and an expansion of the age of eligibility from 65 to 60 years of age and above, have been adopted as ongoing measures. With regards to new cash transfer programs, our data shows that almost all have had a duration of between one and three months, except for Emergency Hardship benefits in the **Cook Islands** which have been provided on a longer-term basis, and cash transfers for informal workers in **Fiji** which have been provided for more than six months, providing higher levels of protection for these beneficiaries.

**Cash transfers vary significantly in terms of their benefit levels, with some transfers likely to be inadequate for achieving their objectives.** Benefits range from USD 24 per month for the street vendor cash grant in **Fiji** (around 4.5% of pre-pandemic GDP per capita per month), to USD 2,119 for the sole trader cash grant in the **Cook Islands** (around 118% of pre-pandemic GDP per capita per month).<sup>72</sup> While there is no information available to analyse the extent to which the payments may offset the economic impacts of the crisis, the small transfer values and short-term provision likely mean that many needs will remain unmet.

**Waivers or subsidies of fees including electricity, water, and school tuition offer smaller benefit amounts compared to other program categories but tend to be provided for longer durations.** Where data is available, fee waivers or subsidies had been implemented for at least six months, with many countries continuing these programs beyond one year. The level of benefit ranges from 16-22% of electricity costs in the **Solomon Islands**, to 100% of electricity costs in the **Cook Islands**. In both **Vanuatu** and **PNG**, the Australian Government has supported school fee waivers through the provision of budget support – AUD 10 million (USD 7.3 million) provided to **Vanuatu**, and AUD 30 million (USD 21.8 million) provided to **PNG**. In all cases, the waiver or subsidy amount tends to cover a small proportion of household expenditure.

## Conclusions and policy implications

**The region's geography and early public health measures slowed and prevented the transmission of COVID-19 in most Pacific countries during the early stages of the pandemic, but the socio-economic impacts still hit hard, and the region remains vulnerable to further impacts from COVID-19 and other compounding shocks.** Travel restrictions, lockdowns, and the overall global crisis had, and continue to have, serious impacts on employment, income, and livelihoods across the region. Whilst most Pacific countries have not experienced the direct health impacts of the virus to a large extent, **PNG, Fiji, and Timor-Leste** have suffered significantly. The region remains at risk of further COVID-19 transmission, given recent

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<sup>72</sup> The benefit amounts are compared to GDP per capita in 2019 of USD 6,185 for Fiji and USD 21,603 for Cook Islands.

outbreaks associated with the arrival of the delta strain and low vaccination rates in some countries as discussed above.

**In line with global trends, social protection has played an important role in cushioning the effects of the crisis and supporting people in the Pacific.** Most social protection responses in the Pacific consisted of social assistance measures, and cash transfers accounted for the majority of such measures. Cash responses were primarily vertical expansions of existing programs or new emergency programs.

**Existing administrative capacity was an important enabling factor for social protection responses.** ‘Capacity’ is a dimension that is compounded by several factors, including contextual issues, legal frameworks, domestic funding, and service delivery.<sup>73</sup> Countries like the **Cook Islands** and **Fiji**, with stronger social protection capacity, were better able to respond. This finding is not surprising and is in line with global experiences.

**As a first response, many countries relied on what was available.** Where they existed, some countries expanded cash transfer programs vertically (**Kiribati, Samoa, and Tonga**). Other countries used provident funds to provide assistance (**Fiji, Vanuatu, and the Solomon Islands**) – mostly allowing for early withdrawals (with potentially problematic medium to long-term consequences). It was also common for countries to leverage other forms of existing data to cover additional beneficiaries, including through the provision of fee waivers and subsidies for users of electricity, water, schools, and other services (**Cook Islands, FSM, Kiribati, Palau, PNG, Solomon Islands, Samoa, Timor-Leste, Tonga, and Vanuatu**). However, these responses have the intrinsic limitation of reaching those who are already “in the system”, and potentially exacerbating pre-existing exclusion.

**The crisis led to some interesting operational innovations and new approaches in the region, which may affect the way social protection is delivered in the future.** The mobile registration system in **Fiji** and the universal approach in **Tuvalu** and **Timor-Leste** were implemented for the first time in the respective countries, in response to the COVID-19 pandemic. In terms of payment mechanisms, **Fiji’s** mobile money transfer has provided a new platform to disburse cash in a timely manner, in the context of **Fiji’s** high mobile connectivity. In **Vanuatu**, with its widespread geography and limited financial and communications infrastructure, the use of blockchain technology allowed remote distribution of digital vouchers. In **Timor-Leste**, despite manual payment, a new digital management information system (MIS) supported the implementation of cash transfers by enabling real-time monitoring of payments. Data from the MIS showed the progress of payments and improved transparency and confidence in the program. These relatively new modalities have the potential to shape the future implementation of social protection, both in regular programs and emergency contexts.

**The role of non-government actors was important to fill gaps in government provision of support in a few cases.** The UnBlocked Cash programme implemented in **Vanuatu** through Oxfam provided substantial support that would have otherwise not been available, particularly in remote locations. Similarly, the mobile money programme implemented by Save the Children in **Fiji**, in collaboration with the Government and other non-government and civil society organisations, provided a means to deliver support to the near-poor, utilising technology to reduce COVID-19 risks and deliver support more rapidly than manual processing. Non-government organisations are also a key partner in delivering small-scale in-kind support, mainly as food.

**Limited information about social protection and related issues in the Pacific is a constraining factor for policymaking.** For example, it is difficult to find Pacific countries in global information sources about social protection (e.g. World Bank’s ASPIRE), and in related rankings (e.g. Findex’s database on financial inclusion). Further, evaluations and reports on existing social protection schemes and related issues in the region are limited. Greater access to up-to-date and high-quality information and evidence on social protection interventions from the region is important for promoting policy dialogue, raising awareness of social protection initiatives, drawing attention to some of the unique challenges, and shining a light on some of the cutting-edge approaches that are being developed to overcome these challenges in the Pacific. This is important not only for shaping and influencing policy responses at a national and regional level, but also for ensuring that the Pacific is considered in the global dialogue on social protection.

**The responses to the pandemic, even the strongest ones, have shed light on some longstanding social protection provision gaps.** The lack of social protection systems that provide adequate support along the life cycle and against different types of shocks has become an evident and pressing need.

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<sup>73</sup> Beazley, Marzi & Steller, 2021

**A more exhaustive analysis of social protection responses to COVID-19 in the Pacific would require further research.** There are certain gaps in the analysis presented in this paper that should be prioritised in future research, including:

- Undertaking more detailed analysis of the inclusiveness of the social protection responses, in terms of gender and disability;
- Delving more deeply into the political-economic factors that shaped policy decisions of particular countries during the pandemic (e.g. what enabled innovation?);
- Conducting microsimulations to estimate the effects of the social protection responses in preventing poverty increases and cushioning the negative effects on growth, etc.;
- Examining how responses were funded, and whether funding sources influenced the type of response and its performance (e.g. timeliness); and
- Building a deeper understanding of informal/traditional social protection mechanisms in countries in the region, and how these might interact with formal social protection systems.

**Expanding social protection in the Pacific and strengthening administrative systems are crucial goals in their own right, while they also increase options for responses to shocks.** Given the limited coverage of social insurance in the region – as it primarily reaches only formal sector workers, strengthening social assistance is key to supporting people facing life’s risks and shocks. As part of this strengthening, the crisis has evidenced the need for systems that are more comprehensive, gender-sensitive, and disability-inclusive.

**For a region as exposed to hazards as the Pacific, it is fundamental to invest in social protection systems.** Social protection investments – and social assistance in particular – can be made in ways that are risk-informed to ensure service continuity during crises, while also absorbing additional demand and adapting services and benefits to address new needs. Investments would require a deeper understanding and knowledge about the risks that people face, and how the different programs and operational systems contribute to protecting the population. For example, given the importance of provident funds in the region, further analysis about the short- and long-term implications of using such funds to provide emergency support is needed.

**Experiences and lessons from other regions should inform social protection investments in the Pacific, whilst ensuring that approaches are tailored to respond to the particular characteristics of the region.** For example, a key constraining factor that typically affects small countries, particularly small island states, is the difficulty in achieving economies of scale, leading to relatively high administrative costs. Countries with such characteristics may benefit from strategies that involve leveraging private sector/technological solutions, although not at the expense of developing government administrative capacities. The same applies to remoteness and hard-to-reach populations. However, tailored approaches require a deep understanding of the characteristics and needs of each country. Further research is needed on how key contextual factors can enable or constrain the strengthening and expansion of social protection in the region. This may include the coverage of national IDs, and access to the internet and financial services.

**With countries in the Pacific on the front line of climate change, and many still at risk from further COVID-19 impacts, the lessons from the responses to COVID-19 to date could represent a tipping point for social protection.** The COVID-19 pandemic is not yet over for the Pacific region, with significant health and socio-economic risks ahead. The post-COVID-19 era is expected to find countries in the Pacific with higher poverty levels, and with a steep road towards achieving the SDGs. In addition, climate change is expected to increase the region’s vulnerability, which is already greater than most regions of the world. This scenario calls for learning from the responses to COVID-19, and investing in risk-informed social protection systems that are tailored to the needs of the region, to support people facing life’s risks and shocks, and to contribute to overall growth and development.

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## Acknowledgements and Disclaimer

This document was developed as part of SPACE - Social Protection Approaches to COVID-19: Expert advice helpline, implemented by the UK Foreign, Commonwealth & Development Office (FCDO), Deutsche Gesellschaft für Internationale Zusammenarbeit (GIZ) GmbH and the Australian Government represented by the Department of Foreign Affairs and Trade (DFAT), and funded by the UK Government's FCDO, the German Federal Ministry for Economic Cooperation and Development (BMZ) and DFAT. SPACE is managed by DAI Europe Ltd contracted through the FCDO framework agreement EACDS Lot B service 'Strengthening resilience and response to crises', and the helpline advice is provided by independent consultants contracted by FCDO, GIZ, DFAT and other partners.

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