

CASE STUDY 3:

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



March 2021

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



3. Implementation

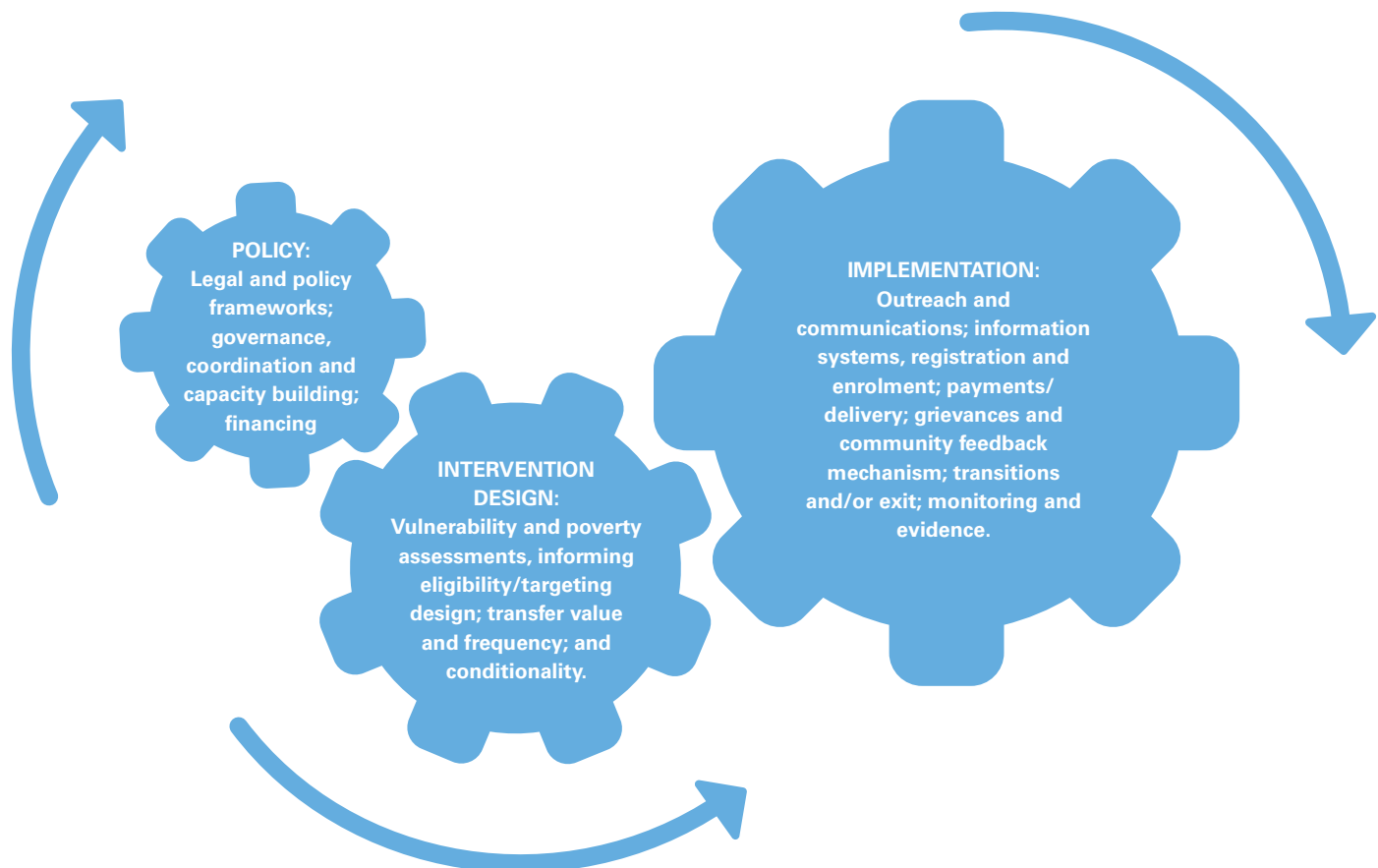
3.1 Introduction

To share learning from the COVID-19 pandemic, the Grand Bargain Cash Workstream Sub-Group on Linking Humanitarian Cash (HC) and Social Protection (SP)¹ has drawn up a series of case studies² that offer practical examples of how actors in a range of different contexts have aligned or linked elements of existing and/or nascent humanitarian and social protection approaches in cash-based responses to the 2020 COVID-19 pandemic. Using concepts that have been captured in a combination of different theoretical frameworks, the case studies bring to life examples that show how a variety of stakeholders have linked different elements of HC and SP in COVID-19 responses and the successes and challenges faced in doing so.

The case studies are organised around a combination of the humanitarian project cycle and the building blocks of the delivery chain.³ Learnings presented in this note have been drawn from the experience of sub group member agencies in several different countries.

The case studies cover the following interlinked topics⁴:

- **Policy:** Legal and policy frameworks; governance, coordination and capacity building; financing.
- **Intervention design:** Vulnerability and poverty assessments, informing eligibility/targeting design; transfer value and frequency; and conditionality.
- **Implementation⁵:** Outreach and communications; information systems, registration and enrolment; payments/delivery; grievances and community feedback mechanism; transition and/or exit; monitoring and evidence. (This case study.)



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

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

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

4 Consolidated learnings on all topics are presented in the Synthesis Report (ADD hyperlink to the Synthesis Report)

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



All the studies intend to be concise and light-touch whilst also signposting readers to places where they will be able to find further information and detail on the issues covered that are of most interest to them. They were developed throughout the pandemic and are therefore almost ‘live’ documents that would still benefit from further detail and depth, corrections and emerging learning. Each study has been led by a different sub-group member agency, relying on key informant interviews and contributions from sub-group members and a review of relevant literature to inform their content.

These case studies were developed throughout the COVID-19 pandemic and are designed as live documents that can be updated periodically to include revised information and learning. Each study has been led by a different agency, relying on key informant interviews and literature reviews.⁶

The development of this case study from the series⁷ was co-led by **UNHCR, UNICEF** and Lois Austin (Grand Bargain sub group

KML consultant) with additional contributions provided by **GIZ (Deutsche Gesellschaft für Internationale Zusammenarbeit), the Kenya Red Cross Society, the Turkish Red Crescent and World Vision**. The focus countries in this study include **Bangladesh, Jordan, Malawi, Turkey, and Zambia**. References are also made to **Iraq, Kenya, Madagascar, Mali, St. Lucia, Senegal, Serbia** and **Pakistan**. Additional information on the countries referenced in this case study can be found in the Synthesis Report. [Add hyperlink to synthesis report]

When it comes to implementation, there are many areas within the humanitarian project cycle and along the “delivery chain”⁸ where humanitarian actors can share and contribute their expertise with government and social protection actors and vice versa, playing on reciprocal strengths.

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

Operational humanitarian actors ⁹	Government actors
<ul style="list-style-type: none"> • Implement on a small scale. • Pilot and test to identify potential risks. • Be flexible in terms of intervention design, with access to dedicated funds for ‘innovation’. • Access very highly qualified staff and scale capacity where/when needed. • Build on learning from the global experiences of their agencies or of their peers, including adapting existing standard operating procedures, tools and delivery mechanisms developed in different emergency contexts. • Have experience of communicating with crisis-affected populations, who can often be difficult to reach, and experience in operating in difficult humanitarian contexts. • Abide by international protocols and standards, including humanitarian principles. 	<ul style="list-style-type: none"> • Operate at scale (nationally). • Leverage and coordinate capacity, data and systems from other sectors if needed. • Align actions with a national vision and social protection policy, and medium-term strategy and action plan instruments, increasing sustainability. • Understand and navigate the political economy of response. • Build on local/national knowledge and address local/national administrative, legal, cultural barriers and constraints.

3.2 Outreach and communications

Ensuring the existence of robust communication strategies and mechanisms in linking (for example, aligning and complementing) HC and SP responses during the pandemic has been essential to avoid exclusion and misinformation and potential conflict between those that are and are

not covered by responses. This is particularly the case as: a) the social protection sector does not always include sufficient budgets to ensure a comprehensive and coherent approach to outreach and communications; b) where SP systems are nascent, there is little experience of communicating in emergency settings (e.g. tailoring to the needs of new caseloads and the complexities of emergency situations), and (c) budgets are

6 A key reference document which has strongly contributed to the framing of the studies is [this SPACE document](#) on “Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the Covid-19 Response”, where further relevant considerations can be found (Longhurst et al, 2020).

7 The key messages contained in the case study series are not necessarily reflective of the opinions of contributing agencies.

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

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



unable to cover all and may focus on specific groups or regions in a country threatening social cohesion. In other words, the needs for linkages are particularly strong at this stage. Continuous messaging has been critical in ensuring integrated approaches that strengthen the mitigation of conflict and disharmony between different population groups who have been impacted differently by the pandemic and who are receiving different levels of assistance across HC and government programmes.

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

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

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

- In Jordan, UNICEF was able to link its humanitarian cash Management Information System (MIS) (which includes a communication component using a platform called 'RapidPro'¹⁰) with the government's National Aid Fund (NAF) programme that was supported by UNICEF since 2017, facilitating the rapid scale-up of the NAF to new caseloads of informal workers in response to the pandemic (the Emergency Cash Assistance Programme to Daily Wage Workers programme). Following online registration on a web based system (based on revised eligibility criteria), a new caseload of 240,000 recipients was able to receive emergency cash quickly, remotely and safely with text messages being sent through the Rapid-Pro system, confirming the ID of targeted recipients to help determine whether they had an active mobile wallet. UNICEF was also able to provide instructions on how to open a new mobile wallet if necessary (see [here](#) for more details).
- In **Serbia**, UNICEF is supporting the national social protection response to the COVID-19 pandemic, implementing a programme supporting households that are vulnerable but cannot be covered by the government's schemes. The Red Cross is providing the outreach as they have strong links with communities and social welfare offices.

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

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

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

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

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

- In **Mali** UNICEF and WFP introduced behavioral change messaging to the government social protection response programme: key family practices (including growth promotion and interventions for improved diet quality, im-

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



munization, insecticide-treated nets, breastfeeding, child discipline, life skills, etc.); general COVID-19 awareness and prevention; and gender-sensitive life skill activities and psychosocial support for adolescents (girls and boys) to build their resilience capacities and empower them against violence and exploitation.

3.3 Information systems, registration and enrolment

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

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

In many countries, this has led to innovative approaches for reaching new caseloads, involving the use of existing data and information systems as well as digital and remote approaches to collecting new data on socio-economic impacts and for registration and enrolment. A useful typology of such approaches - focused on government social protection responses primarily - can be found [here](#).¹¹

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

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

- In **Senegal**, both humanitarian actors and the government are using the existing Unified Social Registry (USR) for registration (and eligibility determination). The USR has been

supported by the World Bank and designed through a joint effort to ensure that beneficiaries of seasonal safety nets implemented by NGOs are included.¹²

- In **Jordan**, UNICEF's HCT information system is not interoperable with the government NAF system, but a collaborative approach to data sharing (embedded in a formal agreement) allows for both entities to ensure that there are no recipient overlaps or duplications between programmes.
- In **Kenya**, UNHCR works with the World Bank and the Kenyan National Bureau of Statistics to include four refugee sites in urban areas (Nairobi) camps/settlements Kalobeyei, Kakuma and Dadaab) and one stateless population group (the Shona) alongside nationals in Kenya for measuring the socio-economic impact of COVID-19. The joint data collection is led by a data collection firm that interviews a list of families provided by UNHCR. Monthly datasets and a dashboard for key indicators will be produced for 6 months from June to December 2020. The results are used to inform socio-economic responses, including social protection measures by the government and international actors and sets a global precedent for including refugees into national statistical surveys.
- Also in **Kenya**, GIZ has funded several different cash for work programmes to support those affected by the pandemic. One intervention, implemented by IRC, supported the training of Community Health Volunteers (CHVs) on COVID-19 using Ministry of Health (MoH) facilitators. The CHVs identified 300 vulnerable households in their area of jurisdiction and supplied them with face masks and soap as they carried out house-to-house awareness campaigns. GIZ and the MoH verified the selection.

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

- In **Malawi**, GIZ and other development partners such as WFP, World Bank and UNICEF were supporting the government before the pandemic to build a social registry for social protection beneficiaries - called the Unified Beneficiary Registry (UBR). During COVID-19, the main gap identified by government and development partners was that the UBR did not include data for populations in the four major cities in Malawi, which were most heavily impacted by the COVID-19 pandemic. The gap in social protection programmes in SP coverage in urban areas triggered the Government to design the COVID-19 Urban Cash Intervention (CUCI) which will

¹¹ Barca (2020) Options for rapid expansion of social assistance caseloads for COVID-19 responses. SPACE.

¹² [The Collaborative Cash Delivery Network](#).



be implemented with the support of various development partners and seeks to protect the livelihoods of the urban poor and cushion the socio-economic effects of COVID-19. It targets approximately 185,000 households in the four concerned cities for three months with regular cash transfers. To date, registration was completed in the four cities with a largely geographical targeting approach, targeting specific “poverty hotspots” within the major urban areas and people without formal employment who are the most affected by COVID-19. The Protection and Social Support Cluster, in coordination with the Food Security Cluster and the Cash Working Group, have been critical in supporting the design and preparation for the CUCI. For the registration of target households, the CUCI, with the support of GIZ, builds upon the existing UBR structures. It included the development of rapid digital data collection tools and a mobile app to quickly collect household data, as well as the development of an Application Programming Interface (API) to enable communication between the UBR and CUCI’s MIS. Overall, it should be noted that this new cash intervention leveraged capacities from all development partners and the government of Malawi.

- In **Jordan** and in response to COVID-19, the Jordanian government NAF requested UNICEF’s operational support and technical expertise in relation to recipient registration and enrolment in its Emergency Cash Transfer programme. This included using tools developed by UNICEF for its humanitarian programmes such as RapidPro. This has been operationalized via a technical working group to work through issues identified in using the humanitarian-focused RapidPro system and extending it for use by the government NAF.
- In **Zambia**, as part of the regular Zambia Humanitarian Response Plan pre-COVID-19, two Emergency Cash Transfer (ECT) programmes were implemented by the Government of the Republic of Zambia (GRZ) through the Ministry of Community Development and Social Services (MCDSS) and the Disaster Management and Mitigation Unit (DMMU) with support of the three agencies in the UN Joint Programme in Social Protection (UNJPSP-II), namely UNICEF, WFP and ILO. The ECT was an extension of the regular Social Cash Transfer (SCT) Programme, which is the flagship national social assistance programme with national coverage. Donors contributing to humanitarian assistance in Zambia conditioned their funds to the ECT, requesting that UNJPSP-II partners, led by UNICEF, strengthen the registration and verification mechanisms of the SCT registry (which would be used for the ECT programme). Recipient primary listings under the food security component of COVID-19 ECT were obtained from the MCDSS-managed Zambia Integrated Social Protection Information System (ZISPIS), the sector’s information system, complemented by lists of vulnerable households provided by Faith-Based Organizations. The ZISPIS was set up pre-pandemic with support from the UN Joint Social Protection Programme and, based on previous experience, was used in the

COVID-19 response to enroll new ECT recipients as part of a horizontal expansion of the SP mechanism.

- Additional households were included based on information provided on the informal sector by ILO and the Ministry of Labour and Social Security (MLSS). These were further supplemented by fresh registrations conducted by Community Welfare Assistance Committees (CWACs) and WFP-trained monitoring assistants and in collaboration with the Provincial and District social welfare officials. MCDSS through the CWACs facilitated WFP monitors to confirm the authenticity of the beneficiaries, making this humanitarian/SP collaboration an essential element of the horizontal and vertical expansion. Moreover, to strengthen the social protection-focused expansion of the SCT, UNICEF supported the GRZ to conduct a large-scale physical household verification exercise of 97,000 households in 22 priority districts to ensure that all information in ZISPIS was accurate. Existing SCT community structures including local government, community volunteers and payment managers, the house-to-house verification exercise was undertaken to confirm demographic information and update record. It was then possible to use this data for the expanded pandemic-related SP ECT.
- In **Madagascar**, WFP and the government Fonds d’Intervention pour le Développement (FID) collaborated during the COVID-19 registration process, registering almost 200,000 households in 12 days. Under the leadership of the CWG, common tools were developed and used by all actors (government and non) including a common registration questionnaire and common targeting criteria.
- In **Nigeria**, the registration of new caseloads for support is happening via a Rapid Response Registry (RRR), with a simpler screening process than used on the regular social protection schemes (via the national Social registry). Development partners have provided technical assistance to inform this design. Implementation will rely on staff in the State Operation Coordinating Units as well as survey firms to register households. Humanitarian partners will support through hiring survey firms and providing technical assistance for consistent and quality data collection and analysis.

3.4 Payments/delivery

The capacity of social protection delivery systems/partners (and their payment service providers) to be able to provide payments and adapt payment schedules for the government COVID-19 response varies widely depending on the strength of routine systems and the broader country context/preparedness. The social protection response worldwide has taken many different and innovative approaches for providing payments to new caseloads – based on existing government capacities (for a typology of how this was done, see [here](#)). Any HCT decision on ‘linking’ has therefore been based on understanding existing social protection payment systems to inform choices as to the *extent* to ‘align’ and *how* to do this most effectively.



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

- In **Nigeria**¹³, ACF and Save the Children, with funding from FCDO, 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 under the National Conditional Cash Transfer programme. The new SOPs include guidance on pay-point setup and management, health checks, physical distancing, hygiene, and suspension of biometric authentication, as well as prioritization of at-risk groups, including the elderly, pregnant women, women with children, and persons with disabilities. Save the Children and ACF also trained government cash transfer payment and community mobilization staff for all 36 states on safety during payments. Members of the Collaborative Cash Delivery Network (CCD) members also provided support to last-mile digitization of the CVA payment system, mapping segmentation and planning and setting up a rapid response register to target non-traditional poor using existing databases, mobile records, and banking information market associations. Save the Children has also supported the expansion of the National Social Register in its four focal states and will be supporting the development of the rapid response register that will be used to provide COVID-19 related support, particularly in urban areas. Similarly, UNICEF is supporting the federal government and 4 states to move forward with the digitization of the government National Social Safety Nets Project cash payment mechanism.

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

- In **Kenya**, where a conducive environment for cash transfers has developed over the years – meaning government payment systems for routine social protection programmes are fairly advanced (and mostly digital) – the scale and impact of the COVID-19 pandemic has meant that the government has sought collaboration from humanitarian

agencies, including the Kenya Red Cross Society (KRCS), to vertically and horizontally expand its support. Using its in-depth knowledge of delivering rapid cash-based assistance in times of crisis, the KRCS is supporting the government by providing cash top-ups to existing government social protection recipients as well as identifying new recipients based on established vulnerability criteria. Alongside more traditional delivery mechanisms such as banks, mobile money and vendors, KRCS and its partners have been working on blockchain-based community currencies. Also, KRCS has used the RedRose integrated platform to manage cash transfers, offering functionalities of online and offline recipient registration, compliance with privacy certifications, assets delivery and monitoring and evaluation. The platform has not yet led to linking KRCS humanitarian cash transfers to social protection, but it is in close coordination with the government with a view to potential linkages in the future. Having institutionally-agreed and pre-signed agreements with a range of different financial service providers has been critical for the rapidity of KRCS’ COVID-19 pandemic response.

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

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

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



ECT programme and the modified payment procedures. UNICEF also partnered with the University of Zambia to establish an independent third-party monitoring and payment verification system for the ECT.

3.5 Grievances and community feedback mechanisms

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

Mechanisms that ensure the channeling of feedback, grievances/complaints and appeals/grievance redress are an essential element of all humanitarian and social protection interventions. This is particularly the case in times of crisis when new approaches are being adopted and additional people facing acute and urgent needs are eligible for support (with the cost of 'non-response' or 'mis-response' much higher than in routine times). This is proving even more critical during the COVID-19 pandemic, where a) targeted caseloads by routine government social protection programmes are often very different from 'usual recipients' who may face new barriers to access assistance/benefits; b) where registration, enrolment and onboarding channels have used innovative and largely 'untested' approaches (e.g. fully digital systems); c) where the safety risks involved in delivery are also heightened – including issues of corruption, safeguarding and protection.

Additionally, many government social protection systems have under-funded and under-developed mechanisms for ensuring accountability using inclusive and accessible feedback and grievance mechanisms that have very little capacity to scale up and/or adapt these systems to the expanded needs during the COVID-19 pandemic. What 'ideally' should be in place in government social protection systems is comprehensively addressed in other literature.¹⁴ Ultimately, there is a clear rationale for complementarity, capacity building and lesson-sharing in grievance redress and complaints mechanisms. This should be done across government and humanitarian actors to ensure accountability to affected populations and maximize social cohesion between those that do and don't receive assistance. It is imperative that working across sectors raises the level of financial and non-financial protection for vulnerable households, mitigating the risk for people to fall between the cracks in government and HC coverage.¹⁵

The few examples collected of linkages between HC and SP for this part of COVID-19 responses focused on the leveraging of HA capacities and systems to provide a system for

lodging feedback, complaints and appeals for a government response. For example:

- In **Malawi** UNICEF, GIZ and the government are jointly working on developing a grievance redress mechanism for the CUCI COVID-19 Urban Cash Intervention (which extended the government's existing social protection scheme to some of the most COVID-19-affected urban populations). The creation of a **toll-free phone line** in this emergency cash-based response (which will last for four months) will ensure the management of grievances during COVID-19 for the short-term. This is also designed as the foundation for a long-term grievance redress mechanism for social protection programmes in the country, highlighting a clear link between UNICEF's emergency cash mechanisms and longer-term, government-led approaches. As a side effect, the CUCI GRM contributed to the discussions on setting up a permanent and nationwide GRM toll-free phone line.
- In **Nigeria**, Save the Children (via their work on the Child Development Grant programme) is funding and supporting the development of civil society platforms in four states to engage with the government, monitor implementation of the planned response to COVID-19 and ensure assistance is reaching those in need, especially excluded groups such as people with disabilities and women. In Nigeria, the Open Government Partnership has also been supporting transparency and accountability in the COVID-19 social protection response, involving HC actors alongside local civil society.

3.6 Transition and/or 'exit' approaches

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

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

¹⁴ For example: [here](#)

¹⁵ See also TRANSFORM SRSP Module (2020) [here](#)



than one-off support to affected households and bears similarities to a long-onset disaster.

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

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

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

- UNHCR’s COVID-19 response in **Jordan** included an exit strategy to ensure that the population does not fall into dependency and efforts on self-reliance are not eroded and it can rapidly resume economic opportunities once

the economy opens up and restrictions on access to jobs ease. This exit strategy **defines indicators** for monitoring and triggering adjustments for the expansion/retraction/withdrawal of emergency humanitarian cash. The indicators reflect the status of global and national economic recovery. In the absence of socio-economic data, the Basic Needs Task Force has defined proxy indicators to track this progress and enable humanitarian actors to make decisions on expanding or reducing assistance. The indicators are as follows:

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

3.7 Monitoring and evidence

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

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



3.8 Implementation – Lessons Emerging

Overall¹⁶

- When linking is undertaken from the perspective of aligning humanitarian cash with government social protection programmes, to ensure that the potential to ultimately contribute to building national SP systems remains feasible, operational design decisions need to be informed by discussions with government social protection actors and development partners. If HCT approaches, linking to SP systems, are designed to be transferrable to the government, the design should be appropriate to the operational and technological context and existing capacities and include a plan for how this transfer will be supported.
 - Technically, linking different systems can be challenging, particularly in the absence of clearly defined roles and responsibilities from the outset. Establishing a 'technical working group' (or leveraging existing coordination forums) to facilitate and better understand the potential for linking HCT and SP information systems could support more robust linking processes.
- Whatever the situation, practical options for 'linking' will strongly depend on the strength of specific existing systems for each sector. Sharing information on what capacity, data, and systems exist at each stage of the 'delivery chain' or 'project cycle' and how those could be leveraged will be a critical starting point, without starting from the assumption that one 'system' is stronger than the other as a whole. Breaking it down is more useful.
- Think of 'linkages' as developing collaborative models which operate as a 'single team' and using joint or aligned approaches and systems.
 - Focus on potential efficiency, effectiveness and accountability gains, particularly in contexts characterized by small or medium responses, and high operational costs.
 - Also, focus on the trade-offs of working jointly and how those can be mitigated.
 - Recognize In some contexts it will not be possible for humanitarian systems to work with all the social protection operational processes and systems and some parallel processes may still be needed. For example, where SP systems are inaccessible for humanitarian agencies and the need to implement a rapid cash-based response necessitates using humanitarian agency own systems. This is also the case where a humanitarian caseload is not eligible to access the government system or where legislation actively excludes certain groups.

Outreach and communications

- Strong outreach and communications are critical to successful programming, as well as focusing on inclusivity, doing no harm and leaving no-one behind – in both sectors. There is a particular need for collaborative work on this as: a) the social protection sector does not always take a comprehensive and coherent approach to outreach, and communications and different messaging may be spread across different programmes (these are often under-budgeted); b) the sector does not have experience communicating in emergency settings and to humanitarian caseloads (e.g. tailoring to the needs of new caseloads and the complexities of emergency situations).
- How this is operationalized can vary, including the following options for humanitarian practitioners:
 - leveraging HCT capacities and systems to share messages relating to social protection responses.
 - aligning key messages across government social protection and humanitarian programmes, to the extent possible.
 - providing technical support and capacity to ensure inclusive and accountable outreach approaches (focused on leaving no-one behind and catering to the needs of new caseloads).
 - layering further behavioral change messaging into the communications strategy – working alongside Government actors from the social protection sector and beyond.
- There is also a lot of potential for leveraging government social protection structures (local offices, social workers) to communicate in emergencies, as these are trusted actors. Local civil society and traditional networks can also be leveraged alongside government actors as these are other 'trusted' sources, particularly where the social contract between the government and caseloads is weak or strained.
 - More generally, the COVID-19 responses have further reinforced the importance of ensuring 'outreach' goes beyond initial awareness-raising, becoming a continuous action throughout linked HC/ SP interventions and providing consistent messaging on all aspects of programme design and implementation between all HC, SP and government actors. Experiences of multi-channel messaging include allowing recipients to communicate directly with implementors, and other technology-driven approaches to communicating (without removing more traditional approaches, most appropriate for some audiences). This continuous messaging is key to ensuring an integrated approach and maintaining social cohesion and mitigating risks of conflict be-

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



tween different population groups who have been impacted differently by COVID-19 and who are receiving different levels of assistance across HC and government programmes.

Read more:

- IASC (2020): [Covid-19 - Resources relating accountability and inclusion](#).
- MicroSave Consulting (2020): [Strategic Communications in Social Protection Programmes](#).
- TRANSFORM (2020) [Shock Responsive Social Protection](#), Section 3.6. See also the [Administration base document](#), Section on 'communications'.
- World Bank (2020) [Sourcebook on Social Protection Delivery Systems, Chapter 3](#) (focused on routine SP programming).
- Smith, G. and Bowen, T. (2020). [Adaptive Social Protection: The Delivery Chain and Shock Response](#) (Section 1 Phase 1 - Outreach). World Bank Social Protection and Jobs Discussion Paper.
- SPACE (2020) [Identifying Practical Options for Linking Humanitarian Assistance and Social Protection in the COVID-19 Response](#). (Section on outreach and communications).
- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section on outreach and communications).

Information systems, registration and enrolment

- When responding to a shock, the selected approach to registration and enrolment (and how an underlying information system is set up to support this) is just as important as the setting of eligibility criteria and targeting design in terms of impacting targeting *outcomes*. This is relevant for both humanitarian and SP responses. In fact, with COVID-19 (and other shocks before it), social protection targeting design was often highly impacted by what was ultimately feasible to implement. This is where the opportunities in terms of 'linkages' emerge, to help fill reciprocal capacity, financing, data and other gaps.
- Joint socio-economic COVID-19 impact assessments and/or the inclusion of humanitarian caseloads into government-run SP systems can be a starting point for data sharing.
- In the COVID-19 response, linkages across HCT and SP analyzed within this case study took two main shapes:
 - leveraging each other's data to *inform* registration – making sure any new data collected is coordinated with the national information system. The result of coordination and joint systems-building process over time, including significant efforts to address emerging data protection concerns and other risks related to the sharing of data with the government.

- supporting *new registration and/or validation* efforts (including via dedicated capacity and the sharing/creation of tailored software) to fill-in data-gaps, feeding those into the national social protection information system.
- Over time, capacity for rapid registration, while ensuring accountability to affected populations and safeguarding, can be built. This includes joint efforts that scale up access to civil documentation and electronic IDs that are part of basic eligibility criteria for government programmes.
- As humanitarian actors aiming to support social protection systems, working on 'linking' underlying information systems is increasingly seen as a crucial area of action going forward, yet one that requires considerable analysis. The starting point is often joint socio-economic data collection and sharing, which not only covers all population groups in need but also sets the template for positive collaboration and demonstrates concretely the value-added of humanitarian cash transfers to the government.

Read more:

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

Payments/delivery

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



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

- Depending on this analysis, HC-SP ‘linkages’ could be operationalized in different ways. For example:
 - HC actors supporting government responses with complementary capacity-building (including capacity building), expertise (technical assistance) and guidance.
 - where existing government capacities are high yet overwhelmed by the scale of the response, providing HCT support to specific populations in close alignment with government counterparts – testing innovative payment solutions that help to mitigate the propagation of COVID-19 and sharing learning with SP actors over time that can provide the evidence base for scaling up inclusion in government social assistance programmes over the long-term.
 - where the existing foundations for digital payments are less developed or involve important fiduciary risks, HCT actors can play a direct role in contracting and managing financial service providers for social protection responses (to ensure accountability).
- Over time, short-term decisions must feed into longer-term strategic outcomes. For example, even if parallel/aligned, HCT support can act as ‘proof of concept’ and ‘appraisal’ of electronic payment systems, informing long-term programming decisions in the SP sector. It can also contribute to strengthening the existence of building blocks for future social protection systems. HCT actors can also play a role in advocating and negotiating with financial service providers.

Read more:

- WFP 2020: [COVID-19 Food Security Response](#).
- CGDEV (2020): [COVID-19 – Pakistan’s black swan event – digital payments](#).
- TRANSFORM (2020) [Shock Responsive Social Protection, Section 3.6](#).
- SPACE (2020) [Options for rapid delivery \(payment\) of cash transfers for COVID-19 responses and beyond](#).
- Smith, G. and Bowen, T. (2020). [Adaptive Social protection – the Delivery Chain and Shock Response](#) (Section 3 Phase 7).
- SPACE (2020) [Identifying practical options for linking humanitarian assistance and social protection in the COVID-19 response](#) (Section on payments).

- SPACE (2020) [Preparing for future shocks: priority actions for social protection practitioners in the wake of COVID-19](#) (Section on payments).
- See more COVID-specific resources within the ‘payments’ section of ‘ [SPACE Useful COVID-19 and Social Protection Materials](#).
- World Bank (2020) [Sourcebook on Social Protection Delivery Systems, Chapter 6](#).

Grievances and community feedback mechanisms

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

Read more:

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

Transition and/or exit

- The issue of transition and/or exit is critical and one that has challenges with both HCT and SP actors, with many unresolved questions to date. The COVID-19 crisis has exacerbated the issue: the coverage of emergency support has been very high globally (meaning the scale of potential transitioning/exit is unprecedented), while the prolonged recession that is a direct result of the pandemic has emphasized the need for ongoing rather than one-off support to affected households.
- In terms of HCT/SP ‘linkages’, working together in the medium-term will require a joint effort to transition humanitarian caseloads that are still in need of ongoing support into government systems, where relevant and possible (this may prove more complex for refugee caseloads).



- In the prolonged COVID-19 recession it will be important to start thinking of transition strategies from emergency and humanitarian cash transfers towards income support and/or emergency public works schemes in connection with social partners (employers and workers representatives) and labour market institutions. For certain sections of the population, economic inclusion programming alongside government counterparts could be considered.

Read more:

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

Monitoring and evidence

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

Read more:

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



March 2021

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