

CCD Social Protection Working Group: Advocacy in Response to COVID-19

The need for social protection in response to COVID-19: COVID-19 has an unprecedented impact globally in terms of access to and the capacity of healthcare systems to respond. The health crisis is yet to peak in many countries and in low income contexts, the concern is that its impact will be severe where it is not physically possible to practice physical distancing. As we saw during Ebola in 2014 or in cholera outbreaks, physical distancing is a choice that only a minority can afford in low income countries. It is anticipated that this crisis will result in significant numbers of households falling into poverty (or deeper into poverty)¹ as a result of the enormous economic impacts of measures needed to contain this virus: recovery from the economic impact of this, will not be short term. Those most vulnerable to this are those without job security, small businesses, those in the informal economy and in unpaid care. We recognise that these roles are the backbone of many national economies. We recognise that a large burden will currently fall to communities to meet care and other needs to affected households. The impact on women is particularly strong, given their role as caregivers, which puts them at particular health and economic risk due to their roles in both the informal sector and care economy and the additional care burden of the sick and also of children, now schools are closed. Governments should recognise too, that children and caregivers depended on breakfasts and/or lunches in schools to avoid going hungry. At the same time there are those excluded from society, stateless, displaced, refugees who are extremely vulnerable to the impact of the pandemic.

Governments have an obligation to meet the human right to social protection. Recognising the impact that the health crisis will have on incomes, countries in many regions have started responding with social protection to support households – through social assistance measures and wage subsidies. To date, this has not taken place in Africa.² Even in ‘developed’ or middle-income countries, there are huge numbers of people who still need support to access food and basic needs and health care – camps in Greece, for example. Accountable cash transfers at scale and at speed, are an essential response to support households through COVID-19. To reach those in need, deciding on universal or targeted transfers will be a balance between speed of response, extent of need and the phase of the crisis.

The NGO offer to support the response: Where government commitments are not met, there is the humanitarian imperative to support. Many governments are already taking considerable action to limit the spread of the virus and to provide some compensation for vulnerable groups – but this is not comprehensive. If sufficient and timely funding is provided, local and international NGOs may have a unique opportunity to offer services where government cannot. Delivery will be challenging but governments and the international community will want to see this at scale.. NGOs are well-placed to partner with communities and the private sector to deliver services and assistance. As agencies, our approaches are embedded in community engagement, working through civil society networks. We often have pre-existing relationship with private sector mobile networks robust enough to deliver cash at scale, and we have considerable experience with digital registration and monitoring applications to manage activities remotely.

The policy recommendations and requests below comes from a network of international NGOs, the Collaborative Cash delivery Network (CCD), and refers to how cash and voucher programmes spanning humanitarian assistance and social protection, can contribute to alleviating the socio-economic impacts and risks from COVID-19 on the most vulnerable. This is an initial set of requests that must be put in place immediately – but will be updated as the impact of COVID-19 evolves.

National governments, donors and the wider international community must ensure that these requests apply to refugees, IDPs and stateless people whom have the right to similar provision and we have a duty to support. Social protection responses to COVID-19 should be designed to reach refugee and displaced populations who are currently denied rights to social benefits³

¹ https://www.ifpri.org/blog/how-much-will-global-poverty-increase-because-covid-19?utm_campaign=Feed%3A%20BlogWorldHunger%20%28IFPRI%20Blog%29&utm_medium=feed&utm_source=feedburner

² Gentilini, U. M. Almenfi and I. Orton (2020) Social protection and jobs responses to Covid-19: A real time review of country measures. A living review. 20th March, 2020; (World Bank: Washington D.C)

³ . Restrictions to social protection may be because of practical requirements around ID and Know Your Customer requirements as well as policy barriers such as restrictions on access to the formal labour market and associated rights and benefits.

Advocacy to donors

1. Allocate **resources for early action**: to prevent households resorting to negative coping strategies and risking destitution, as soon as incomes are affected. **Action now at scale but also inclusive of different needs and capacities of people, will save lives.**
2. **Consider a common fund to scale up social assistance in future humanitarian crises.** This would be akin to a global fund, enabling both humanitarian and development actors to pool resources which could be released in a timely manner. It is a means for financing social protection readiness at country-level. The fund could release financing once country-specific indicators are triggered, so the country can scale up pre-existing social assistance programmes to affected communities. This will help donor countries stabilise and plan their humanitarian funds and for recipient countries to respond to crises fast, prior to resorting to humanitarian appeals.
3. Ensure that **support is sustained for the medium term, and that livelihood protection and recovery is a priority in response planning and funding** allocation, particularly for the most vulnerable. Experience shows cash transfers alone will not be sufficient for household recovery.
4. **Facilitate coordination between humanitarian-focused cash responses and social protection support:** this requires enabling receptiveness to NGO support in contexts where government does not have the capacity to adequately reach its population and also encourage the non-governmental response system to align their interventions with government support through technical working groups & clusters.
5. Remote cash transfers are likely to be the dominant response but will not be appropriate in all contexts. Isolation policies may limit physical access. Market price and supply (and demand) monitoring will be essential to ensure the appropriateness and purchasing power of cash transfers. **Donor funds must be flexible to allow agencies to adapt programming to accommodate specific needs or as needs change.**

Advocacy to national responses in low-income countries to strengthen systems to support the most vulnerable communities

1. **Inclusive and comprehensive responses must consider the particular needs of specific vulnerable groups**, such as people living with disability, the elderly, people living with HIV/AIDS and chronically ill, malnourished children to ensure they can access care, healthcare and their basic needs. **This includes gathering sex, age and ability-disaggregated data and relaxing both ID requirements and targeting criteria to access social assistance and temporarily relaxing conditionality** both to reduce the risk of putting participants at risk of contagion and to prevent bottlenecks/delays in receipt of support.
2. Typical humanitarian cash transfers will not suffice: **government social assistance will be necessary to save lives and livelihoods now and must be the immediate focus. Long term, it will require comprehensive and inclusive social protection floors, which includes responsive interventions** and pre-positioned funds that can scale up fast in a similar crisis.
3. **Services designed to protect children, and victims of domestic abuse are vital frontline services, must be resourced and supported.** Social isolation has numerous negative impacts, including higher levels of domestic abuse, mental health stress, and criminality. Loss of livelihoods, freedoms and increased restrictions on movement and freedoms are having a severe impact on vulnerable members of society. **Feedback mechanisms which will be essential for accountable assistance, may also help support better design of appropriate services in these new and complex operating environments.**
4. Support crucial informal inter-household/community assistance by **enabling the flow of remittances with policies to relax or remove charges to the cost of money transfers.**
5. Governments must take an 'action first' approach. **NGOs can pilot schemes in hard to reach contexts where government lacks capacity to deliver remotely.** This will require openness on the part of governments to collaborate with agencies who can help them lay the groundwork for social protection.

Advocacy to implementing non-governmental agencies and other NGOs

1. As a principle, **agencies implementing cash and in-kind transfers should support and seek to align with government social protection response to COVID-19** as far as possible, where feasible and appropriate.
2. **CCD member organisations must support strategically strengthening coordination between humanitarian cash actors and government social protection departments** including discussions on aligning value of cash transfers, or planning for major market disruptions which may require alternative market interventions and consideration of the effectiveness of cash. Discussions need to start immediately so as not to raise undue expectation, conflict or inequality within communities.
3. **Documentation is critical to provide best practices, and establish systems**, models and innovations that governments can adopt, such as the use of ICT and remote delivery, e.g. mobile money; including ongoing **remote monitoring of market supply and price analysis**. This is key to ensure appropriate response, and to rapidly identify and resolve bottlenecks if they occur, such as altering intervention modalities. This **information and our experiences should be shared with governments** so that they can benefit from this to take on and expand their interventions.