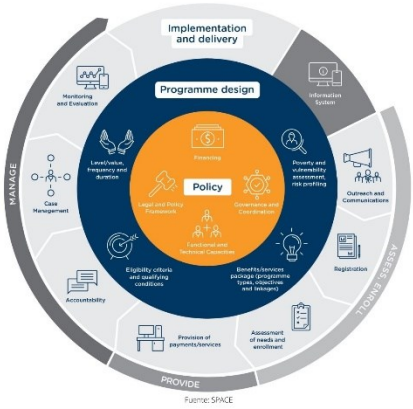
2021

Linking cash and voucher assistance with social protection systems in Latin America and the Caribbean



MAY 20TH, 2021
9- 11:30 AM
PANAMÁ TIME

LINKING CASH AND VOUCHER ASSISTANCE WITH SOCIAL PROTECTION SYSTEMS

REGIONAL LEARNING EVENT IN LATIN AMERICA AND THE CARIBBEAN

RED LAC

Systematization Document

11-6-2021

This event was made possible thanks to the collaboration of multiple governmental entities and organizations.

Convened by

Panelists

Organizing team & collaboration

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Acknowledgments

We would like to thank all the participating organizations for their active participation during this process and collective effort. We hope that it has contributed to improve dialogue and knowledge sharing among the different humanitarian and social protection actors.

This document was prepared by Maria Jimena Peroni Galli-CashCap, Senior Inter-agency Advisor - GTM-R4V and REDLAC, with the significant collaboration of Celia Gonzalez, Technical Advisor - Adaptive Social Protection Group of the Dominican Republic. During the process, the organizing team had contributions from Juan Gonzalo Jaramillo and Hanna Maier from the World Food Program; and from Valentina Barca and Rodolfo Beasley from SPACE in the final reflections.

The catalog of experiences summarizes the contributions of: Ministry of Social Development of Guatemala, Ministry of Development and Social Inclusion of Peru, Presidency of the Republic of El Salvador, Government of Dominica, Cabinet of Social Policy and Administrator of Social Subsidies, Dominican Republic; World Food Program of Ecuador, Barbados and Colombia; UNHCR of Mexico and Ecuador, UNICEF Dominican Republic, GOAL Guatemala, World Vision Colombia, CARE Haiti, Dutch Red Cross, Asociación Tzuul Taqa Guatemala.

Please contact protsocial.ptm.lac@gmail.com for any suggestions or questions regarding the Regional Learning Event-2021.

English translation of original document in Spanish

SYSTEMATIZATION DOCUMENT

REGIONAL LEARNING EVENT: LINKING CASH AND VOUCHER ASSISTANCE WITH SOCIAL PROTECTION SYSTEMS

Period: March- May 2021

1. Introduction

The purpose of this document is to systematize the process of organizing the Regional Learning Event on "Linking Cash and Voucher Assistance with Social Protection Systems", convened by REDLAC and the Regional Cash Working Group -R4V for May 20th, 2021.

The Grand Bargain's Working Cash Workstream, specifically its subgroup on "Linking Social Protection with Humanitarian Cash Transfers" identified the need to improve dialogue and knowledge sharing between different humanitarian and social protection actors. The Regional Learning Event and its documentation seek to contribute to this in Latin America and the Caribbean.

The objectives were:

- Promote dialogue between social protection and humanitarian actors about cash transfers.
- To collectively learn to identify linkages in practice, and to open dialogue on challenges and opportunities.

To this end, the following actions were carried out, led by a team formed by CashCap and the World Food Program with the collaboration of SPACE and OCHA.

I. Concept note: a concept note is elaborated, and agreement is reached on the work plan, roles and responsibilities, conceptual framework to be used and the tools (form and videos) are elaborated - 22/02- 23/03.

II. Call for examples: all actors in the region are invited to share examples, good practices, and challenges of the linkages between social protection and cash transfers, through a "Call for examples" in Spanish, English, French, and Portuguese - 23/03- 16/04

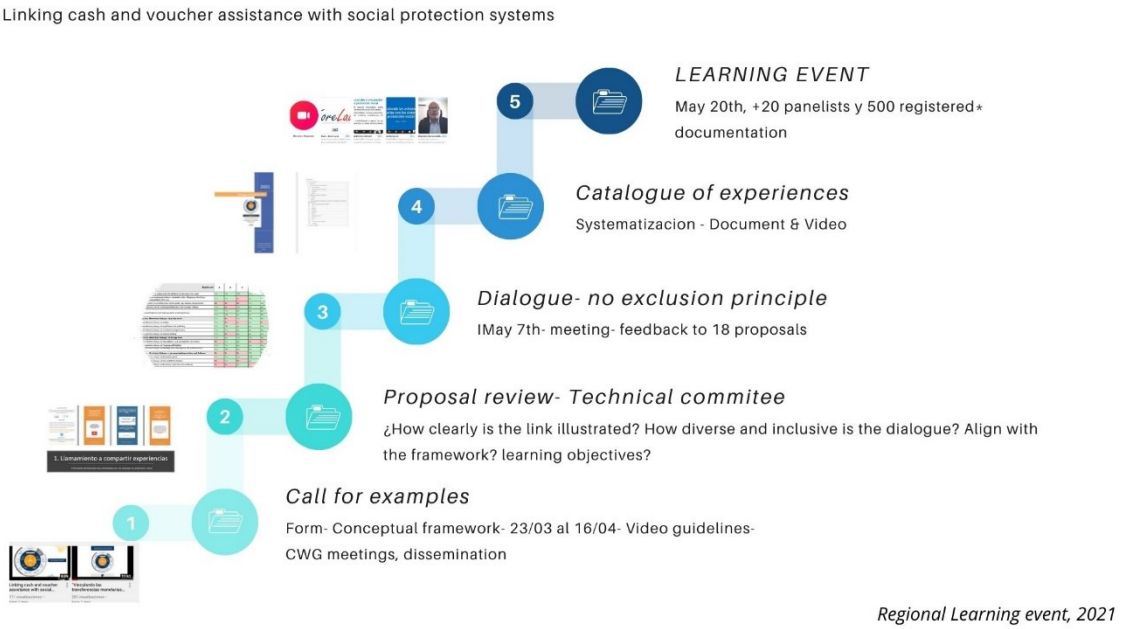
III. Review of proposals: All proposals are reviewed, analyzing the linkages, diversity, and inclusiveness of the dialogue, alignment with the conceptual framework, and learning objectives -19/04-07/05.

IV. Invitation to panelists: Organizations are invited to a meeting to propose a dialogue on their role as a panelist, feedback, format proposal, tools, and instructions - 07/05-10/05.

V. Catalog of experiences: The experiences are documented through the information provided in the form and audiovisual media (optional) - 11/05-25/05.

VI. Regional Online Event: A regional event was organized in Spanish with simultaneous translation in English, gathering more than 20 panelists from 5 Governments, 3 UN agencies, 4 International NGOs, 1 Dutch Red Cross, 1 National NGO. 20/05

VII. Systematization and dissemination: Documentation of the process, tools, experiences, event, and audience feedback - 27/05- 04/06



1 Process, Regional Learning event

2. Call for examples

Through REDLAC and Regional CWG- R4V, actors in the region were invited to share examples, good practices, and challenges of the linkages between social protection and cash transfers, through a "Call for examples" open from March 23 to April 16, 2021.

2.1. Conceptual framework

The conceptual framework used is based on the one developed by SPACE together with the World Food Program (Figure 3). The approach is systemic and seeks to promote linkages established uni- or bi-directionally between the different levels or areas of work. Linkages can occur at 3 levels; at level of (i) policy (ii) design (iii) implementation and distribution. Likewise, these can be promoted from the social protection systems (SP), as well as from Cash and Voucher assistance perspective.

> For example, "cash transfer programs could be linked to national social protection systems to achieve scalability and sustainability, but compromise their effectiveness by, for example, reducing the value and frequency of transfers. Likewise, such linkage could increase the speed of delivery in the long run but take considerable time to design and set up and result in a more rigid system that is less open to further adaptation.
>
> Juan Gonzalo Jaramillo, WFP

2.2. Collection tools

To make the call for examples open and inclusive, several tools were made available to the stakeholders. The following were designed and launched:

i. videos in Spanish and English to didactically explain the conceptual framework and what was meant when talking about linking CVA with social protection systems. To date with more than 390 reproductions.

ii. open form from March 23 to April 16, available in Spanish, English, french y Portuguese to record the experience, using the conceptual framework.

iii. invitations from REDLAC, regional CWG and disseminated through various communities of practice and social networks: CaLP-droup, CaLP "newsletter" Social protection.org, etc. CWGs, disseminated with their members, and discussed in multiple meetings of CWGs and/or social protection groups ("media kit" available in all languages).

2.3. Proposals

As of April 16, a total of 18 proposals had been received. The experiences described during the process occur in several countries in Latin America and the Caribbean: describing different types of linkages in South America (7), Central America and Mexico (4), and the Caribbean (7). A total of 18 proposals, from 16 countries/territories: Dominican Republic (4), Colombia (3), Ecuador (3), Guatemala (2), El Salvador (1), Peru (1), Haiti (1), Mexico (1), Barbados/Dominica, Saint Lucia, Jamaica, Guyana (1), Aruba, Curacao, Sint Maarten [1].

[1] There are proposals that describe more than one country, and there are proposals in the same country with different perspectives.

The actors that sent proposals were the Government of Peru (1), Government of Dominican Republic (2), Government of El Salvador (1), World Food Program (4), UNHCR (2), UNICEF (1); CUA Consortium -ACH, DRC, NRC- (1), World Vision (1), HIAS (1), CARE (1); GOAL (1), Tzuul Taqa Association (1), Dutch Red Cross (1). The "applicants" describe having been linked to a wide range of actors, 10 UN agencies, 8 governmental entities, 8 International NGOs, 2 National NGOs and 1 from the Red Cross Movement..

2. Proposals per-country

2.4. Catalog of experiences

This section is based on the information provided by the applicants in their application form, and the technical exchange of the organizing team to highlight the links according to the proposals received[2]. In Annex 4.1 you will find a summary of each experience listed by country.

2.5. Analysis

The organizing committee thoroughly read the 18 proposals, applying criteria such as (i) how is the link illustrated at each level; (ii) how diverse and inclusive is the experience concerning participating institutions, regions and countries, and contexts? (iii) Does it cover the entire conceptual framework? (iv) Does it contribute to the learning objectives?

The team was guided by the principle of non-exclusion, defined as that each experience could contribute to learning and dialogue during the event. On May 7th, all participants were invited to feedback, discussion, and proposal meeting. Based on this, the instructions for panelists were built, making available several tools to expand the space for the experiences (instructions).

2 Conceptual framework – SPACE & WFP

[2] The review of proposals was carried out by WFP´s and CashCap's social protection and cash transfer specialists.

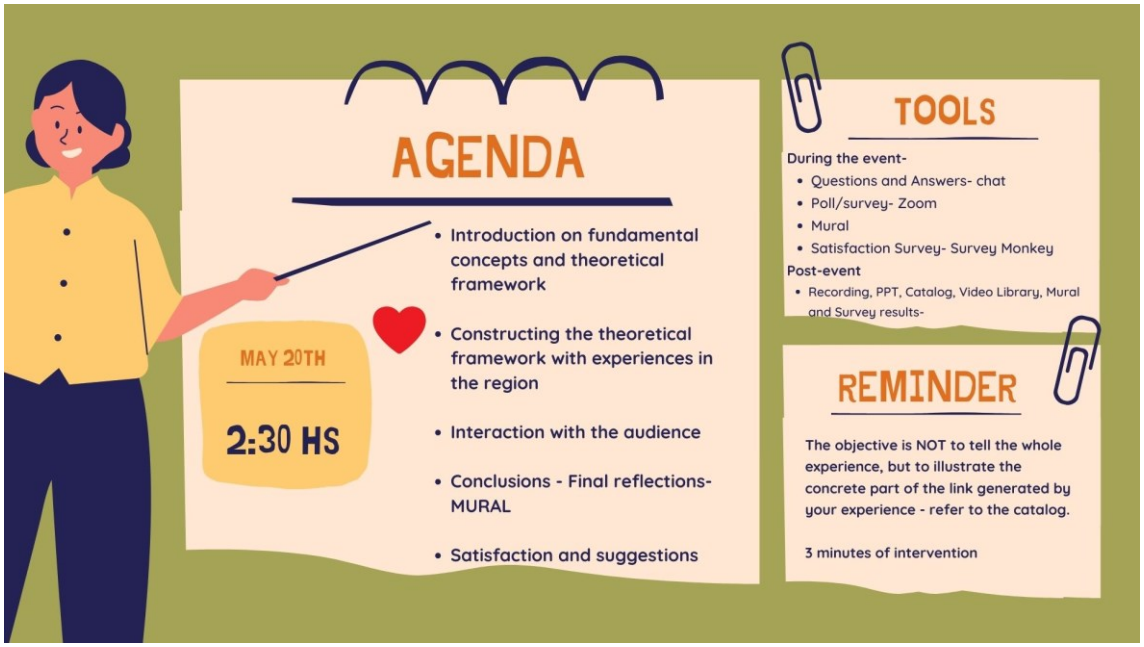
3. Regional event, May 20th, 2021

3.1. Agenda

The agenda included an introduction to fundamental concepts and a theoretical framework. The central session was aimed at collectively constructing the theoretical framework together with the experiences.

These were distributed by level and areas:

- LEVEL - POLICY: Financing, legal frameworks, and public policy, coordination, and governance,
- LEVEL - PROGRAM DESIGN: Diagnosis of vulnerabilities and capacities, targeting and eligibility, appropriateness, modality, value, frequency,
- LEVEL - PROGRAM IMPLEMENTATION: Information systems, registration, and enrollment of beneficiaries, payments, monitoring, evaluation, and learning.
- CROSS-CUTTING ISSUES: Inclusion, gender, communication with communities, participation and accountability, capacity building.



3 -Agenda- May 20th, 2021

3.2. Registration and panelists

More than 500 people registered, from various entities and organizations, from more than 50 countries (Colombia, the United States, and Peru between 10-18%); showing the high interest in the subject matter and the advantages of the simultaneous translation service. On the day of the event, 232 people attended, and more than 250 people have watched the recording to date.

Registration	
United Nations Agency	157
Donor	3
Independent	21
Red Cross and Red Crescent Movement	72
Agency/institution/governmental entity	39
International Non-Governmental Organizations (INGOs)	162

Registration	
National Non-Governmental Organization (NGOs), Civil Society Organization (CSO	45
Other	7
Private sector	2
University or academic entity	8
Total	516

The event had more than 20 panelists (in detail in Annex 4.3), from

- 5 governments: Dominican Republic, Peru, Guatemala, Dominica, El Salvador

- 3 United Nations agencies: UNHCR Mexico and Ecuador, WFP Ecuador, Colombia, and Barbados.

- 4 international NGOs, CUA Consortium (ACU, DRC, NRC), CARE, World Vision, and HIAS.

- 1 Dutch Red Cross, in support of National Societies of Aruba and Curacao.

- 1 National NGO- Asociación Tzuul Taqa GuatemalaEnlaces claves

A. Event- Recording

Here you can find the presentation , recording in Spanish, its simultaneous translation in English

B. Experiences- Videos

We invite the panelists to make a recording of their experience in strengthening national social protection systems to respond to emergencies through the use of cash transfers. We hope they will be useful tools for dissemination, as well as support tools for future initiatives at the country level. You can find the link to the brochure here and on YouTube.

4- Leaflet Voices

3.3. Interaction with audience

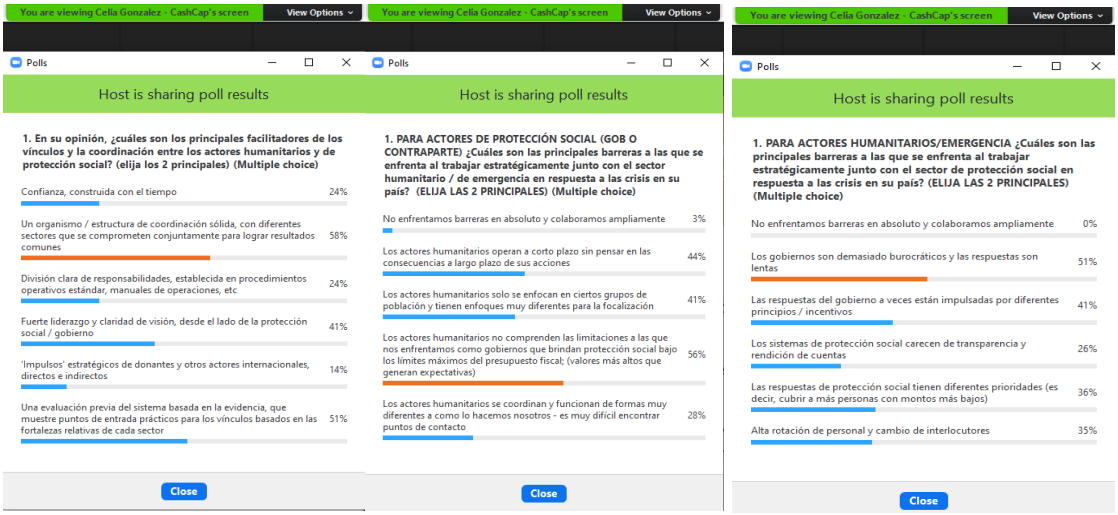
A. Poll, Q&A

To interact with the audience, the following 3 questions were asked[3] :

i. In your opinion, what are the main facilitators of linkages and coordination between humanitarian and social protection actors? (choose the 2 main ones)

ii. For social protection actors (government or counterpart) what are the main barriers, you face in working strategically together with the humanitarian/emergency sector in response to crises in your country? (choose the 2 main ones)

iii. iii. For humanitarian/emergency actors, what are the main barriers you face in working strategically with the social protection sector in response to crises in your country? (choose top 2)



The panelists and moderators actively responded to the participants with the Q&A function (Annex 4.4).

B. Final reflections/Mural

During the event, panelists shared many examples of how humanitarian cash transfers (and humanitarian actors) can be strategically linked to government social protection systems. Some examples are listed below, from the brainstorming session using MURAL, facilitated by SPACE. For more details regarding the experiences described during the event, see Annex 4.1.

At policy level:

- In **El Salvador**, government actors coordinated with WFP to modify existing social protection programs and align the humanitarian response with the government's vision. Important steps were also taken in terms of funding by earmarking a percentage of the Risk Management emergency fund for social protection responses.
- In **Ecuador**, HIAS highlighted working together with the Ministry responsible for social protection, with coordination at all levels - including through local technical committees.

A program design level

- In **Colombia**, more than 7 international NGOs harmonized/aligned eligibility criteria for humanitarian cash transfers with government social protection programs. A sub-working group was created to find a common tool, while avoiding duplication and allowing data sharing.

[3] El nivel de respuesta a las encuestas a través de la herramienta en Zoom de un total de 232 conectados: 1. 79 respuestas 2. 32 3. 94

- In **Mexico**, UNHCR targeted refugee and migrant populations with cash transfers, while offering much broader case management that supported access to social protection and government services. For example, this included accompaniment for migration regularization, support for the identification and social security documentation, reports on entitlements to access public services, etc.
- In **Ecuador**, UNHCR aligned the value of multi-purpose cash transfers with the value of transfers with the Ministry. The focus was on horizontal equity between populations: through a very similar design, but a separate payment mechanism.

At implementation level:

- An interesting example from **Guatemala** highlighted the importance of working through local partners such as Tzuul Taq, working through local systems and support networks when the government presence is weak in certain geographic areas or targeting specific populations.
- The government of the **Dominican Republic** highlighted the reactivity of the payment system (virtual cards) used for its response and learning for future strengthening.

Some cross-cutting reflections are shared below.

First, **what were the factors that facilitated successful "linkage" experiences**? The panelists provided many insights: humanitarian actors understand the government's priorities (e.g., the vision and medium/long-term strategy for social protection), while understanding in detail how the government works; respect and trust, built over time; a strong coordinating body, with different sectors engaging together to achieve common results (across many levels of coordination); clear, jointly agreed and complementary roles and responsibilities, building on the strengths of each sector; an evidence-based pre-assessment of the system, showing practical entry points for linkages.

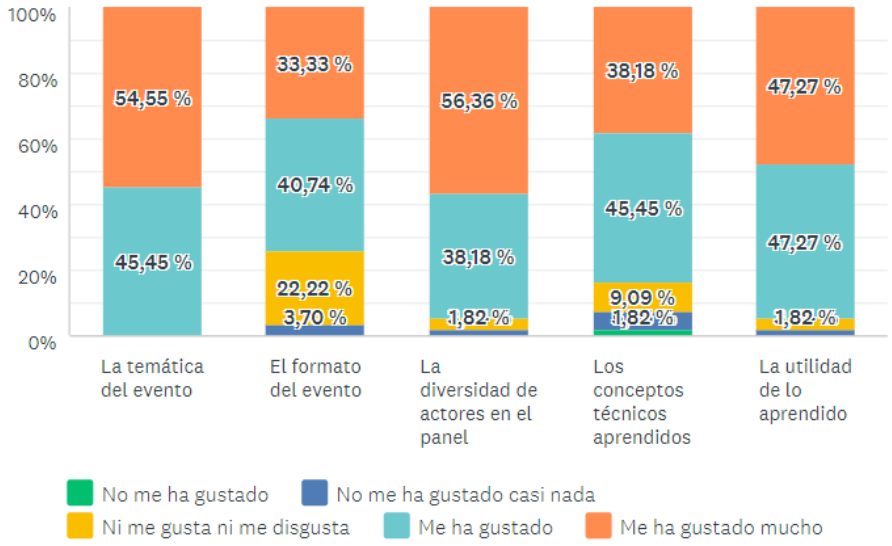
Second, **what were the main constraints**? The responses to the survey (Section A) highlighted different perceptions on the part of the actors. On the one hand, humanitarian actors have little understanding of the constraints faced by governments (e.g. in setting coverage targets and transfer values); moreover, they tend to act in the short term, without thinking about the long-term consequences of their actions, nor about overall sustainability and respect for social contracts. On the other hand, governments are often perceived as too bureaucratic and slow, and the social protection sector still has little experience in responding to shocks.

In the final session, 3 key messages were highlighted:

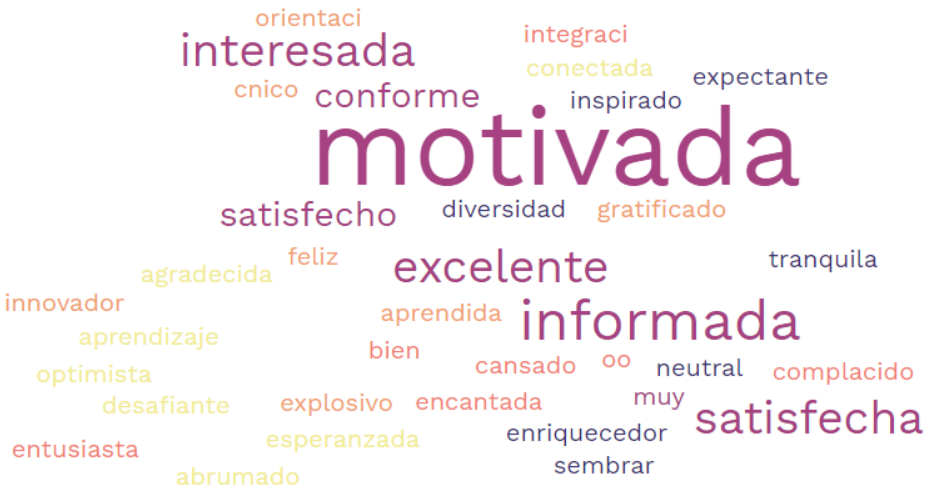
1. "**Collaboration strengthens response capacity**" The obvious advantages of coordination between humanitarian and social protection actors, especially during a pandemic. Clearly showing how humanitarian actors can strengthen the capacity of social protection systems in the short, medium, and long term. It can help fill gaps in coverage and operational capacity of social protection systems. Social protection actors can learn from the capacity of humanitarian actors in emergency response.
2. "**There are many opportunities to coordinate, whether at the policy, design and implementation level**". The diversity of entry points for collaboration at all levels was seen throughout the event.
3. "**The importance of State leadership and the relationship of trust that must be built gradually over the long term**". Understanding the needs and priorities of the government is key to achieving this dialogue.

C. Satisfaction

61 people responded to the satisfaction survey, mostly from Colombia, Guatemala and Peru. The majority (38%) were from International NGOs, 26% from United Nations Agencies, 10% from NGOs/CSOs, 15% from governmental entities, 8% from the Red Cross and Red Crescent Movement. The level of satisfaction with the event was very high - an average rating of 4.4 (5 being the highest), specifically the subject matter, the diversity of the actors on the panel, and the usefulness of what was learned.



5- Did you like the Initiative?



6. How do you feel

D. Next Steps

According to the respondents, there is a great demand for more training, more spaces for dialogue and discussion, and the provision of technical assistance to strengthen these linkages.

Table. Next steps survey

What do you think should be the next steps to promote linkages between CVA and SP systems in the region? (select the 3 priority options)	
Organize **specific trainings** to specifically strengthen linkages between cash transfer and social protection programs.	56,36%
Create **spaces for dialogue** between humanitarian and social protection actors (technical roundtables, etc.).	52,73%
That the **CWG and/or social protection groups** can systematically dedicate a space to review existing experiences that promote linkages.	45,45%
Technical assistance to governmental and non-governmental organizations to support the creation or strengthening of such linkages.	41,82%
Create/availability of more **practical tools** to strengthen linkages	29,09%
Organize **other regional learning and dialogue events**	27,27%

4. Annexes

4.1. Catalog of shared experiences

This section is built based on the information provided by the applicants in their application form, and the technical exchange of the organizing team to highlight the links according to the proposals received. The context information is not exhaustive, it only covers the information necessary for the understanding of the experience.

The following documented experiences of

- South America: Ecuador, Peru, and Colombia
- Central America: Guatemala and El Salvador
- North America: Mexico
- Caribbean: Dominica, Haiti, St Martin, Curacao, and Barbados.

Ecuador

Context/Situation/Background

i. Ecuador is the country that has recognized the largest number of refugees in Latin America. As of February 2021, 70,452 people have been recognized as refugees. More than 95% of them are Colombian nationals (Ministry of Foreign Affairs and Human Mobility of Ecuador).

i. It is the third-largest destination country for the Venezuelan population, after Colombia and Peru. The country hosts 443,705 refugees and migrants from Venezuela, around 220,000 with regular migration status. Moreover, this figure is expected to increase to some 522,500 people by the end of 2021, according to estimates by the UN System Working Group on Refugees and Migrants.

ii. The Ministry of Economic and Social Inclusion (MIES), which implements social protection policy. In the area of non-contributory insurance (cash transfer programs), the MIES implements a package of vouchers and pensions, including contingency transfers in emergency contexts, aimed at the population living in poverty, extreme poverty, and vulnerability, and which are targeted through the Social Registry.

iii. There is a UNCT Social Protection Group, in which UNHCR was involved in the technical assistance to develop the National Social Protection Strategy for COVID-19 led by the Sectoral Cabinet for Social Affairs. In addition, observations were made on the Draft Organic Law of the National System of Social Protection and Promotion requested by the Legislative Function.

Mainstreaming and integrating the refugee population into social protection policies

iv. Participating organizations: UNHCR together with the Ministry of Economic and Social Inclusion (MIES), HIAS, FUDELA, and ASVI.

v. Experience: UNHCR and HIAS work in partnership with the MIES, the body implementing the social protection policy, in favor of mainstreaming and integrating the refugee population into national policies and plans. This collaborative work focuses on technical assistance for the construction of regulations, management, and strengthening of social and economic services that guarantee attention to the population in a context of human mobility in a situation of vulnerability, with an emphasis on children, adolescents, and their families. Given that non-contributory insurance, programs are regulated exclusively for nationals, UNHCR coordinates with the MIES and implements parallel alignment mechanisms in its multipurpose cash transfer and specific needs programs, to support the State's efforts in the horizontal expansion of social protection and support for the refugee population. The challenge of the current legal framework is that it does not allow the use of the MIES national transactional switch to deliver cash to non-nationals. In response to this, alternative mechanisms have been used with implementing partners and in alliance with financial institutions.

I. Integrating the Graduation Model in social protection systems

vi. HIAS/UNHCR - Linkages with the Bono de Desarrollo Humano and the Programa de Acompañamiento Familiar (PAF)

vii. The pilot project (August 2018-May 2021) aims to (i) Contribute to improving the quality of life and social and economic mobility of 513 Ecuadorian and refugee/asylum seeker families in a situation of extreme vulnerability (ii) Strengthen the Family Accompaniment Plan and the Graduation Model (iii) Reduce barriers to access by refugees/asylum seekers to MIES social protection programs and services.

Highlights:

viii. Preliminary comparative diagnosis between the two programs (PAF and MoG) including main results obtained, methodology, data collection instruments, comparative analysis of main components, activities, implementation mechanisms, best practices, commonalities (commonalities), barriers/limitations of the two programs, and possible obstacles (challenges) to joint implementation.

ix. Comparative matrix of the Bono de Desarrollo Humano, the Crédito de Desarrollo Humano and the Programa de Acompañamiento Familiar.

x. Harmonization of the information recording and monitoring and follow-up tools and management instruments for the two programs;

xi. The two programs (PAF and MDG) that were homologated in the pilot project have important similarities in their structure, particularly in the social protection components.

xii. The harmonization consisted of operating the Graduation Model within the Ministry's Service, taking advantage of the whole governmental machinery to improve refugee families' access to social services, education and health; reaching 513 families with cash transfers: 273 Ecuadorian families receive it through the non-contributory system of the State and 240 refugee families through HIAS.

xiii. Alignment of design to the Bono de Desarrollo Humano: The delivery of assistance and services to Ecuadorian and refugee families was carried out identically, both in amount and frequency for 12 months. The basic amount is USD 50, to which a variable component is added according to family composition. [4]

xiv. Expansion of government services through the provision of seed capital and vocational scholarships for the Ecuadorian population.

xv. For the targeting based on the Social Register (the Ecuadorian Government's vulnerability base), an additional criterion of household capacity was included to ensure compatibility with the economic inclusion and self-sufficiency components of the graduation model.

xvi. Refugee families are targeted based on criteria that are part of the Graduation Model, using the Local Integration Index (LII, UNHCR-HIAS tool).

xvii. The management model of the pilot, including the methodological phases, has been mainly focused on the methodological adjustment of the PAF 2018 to ensure its correspondence with the phases, activities, and tools used by the MIES. In this sense, the pilot does not seek to be an isolated program, but rather a learning process to strengthen the PAF and enhance its possible sustainability and institutionalization within the State.

II. Reactive social protection in emergencies. COVID-19 Response

xviii. UNHCR, HIAS, AVSI, FUDELA -Links with Family Protection Voucher

xix. To ensure monetary assistance to individuals and family groups with Specific Protection Needs within a framework of a case management process. 1851 families. It is designed to reduce protection risks that increase their vulnerability during the COVID-19 pandemic.

xx. It targets refugees, migrants, and the host community who are at high and medium risk;

xxi. The targeting of beneficiaries is based on UNHCR's Special Protection Needs (SPN) identification tool through the application of the High-Risk Identification Tool (HRIT), which was modified and contextualized according to the protection needs of the beneficiaries. It is a case management tool that allows the identification of specific protection needs on a case-by-case basis, as well as the level of risk to which each case is exposed.

xxii. Alignment with the Bono de Protección Familiar de Emergencia for the economic support of vulnerable families affected by the health emergency produced by COVID 19, granted by the Ministry of Economic and Social Inclusion:

xxiii. The inclusion and exclusion criteria set out in the Family Protection voucher regulations are adapted and adopted.

[4] Children from 0 to 5 years old: USD 30 for each child up to a maximum of 3 children per family / Children from 5 to 17 years old: USD 10 for each child up to a maximum of 3 children per family) For the effect of the variable component and depending on the composition of the family nucleus, it will be up to a maximum amount of USD 150 per month.

xxiv. The data is cross-referenced with information from the Non-Contributory State System through the MIES. In this way, it is possible to target families who are outside of the State's bonuses and pensions.

xxv. At the level of amount: A total of USD 180 in cash, which is divided into a monthly instalment for three consecutive months of a value equivalent to USD 60 to cover specific needs.

xxvi. At the mechanism level, HIAS adapted the approach to remote assistance to mitigate COVID -19 risks and the mechanism used was through the sending of codes for ATM withdrawals by the recipient: AVSI, through bank accounts and FUDELA, through cash over the counter at Banco Pichincha (host community). Delivery mechanisms adapted to people's preferences and adapted to mobility and social distance constraints. Challenges are identified in relation to

- the limitation of financial products adapted to the demand of the refugee and migrant population (bank accounts for people without documentation to make transfers and/or pre-paid cards, among others).
- Communication channels do not reach 100% of the population and some people do not know the process in case of a complaint. Connectivity continues to be a problem and people now do not have platforms or minutes to make complaints due to lack of resources.

"Bono de Apoyo Nutricional" ("BAN")

xxvii. **Participating organizations:** The World Food Programme together with the Ministry of Economic and Social Inclusion (MIES), the National Service for Risk and Emergency Management, and the Presidency of the Republic.

xxviii. **Experience:** In response to the emergency caused by COVID-19, the National Government requested assistance from the international community. Based on this request, WFP worked with other executive institutions to create and deliver the "Bono de Apoyo Nutricional" ("BAN"), (Nutritional Cash transfer) the first non-contributory insurance mechanism in Ecuador with a specific focus on nutrition and with a "1,000 days" perspective. It is, therefore, a process of horizontal expansion of social protection that reduced the food security index by 10 percentage points.

xxix. Concerning the legal frameworks so that cash transfers can be aligned with social protection policies, the BAN required the issuance of a presidential decree, involving coordination with different institutions of the Executive, mainly with the MIES, for the targeting and delivery of the BAN, and with the National Service for Risk and Emergency Management, for territorial targeting according to COVID-19's incidence. This implied many challenges in terms of complementarity of efforts, trust, reciprocity and the change of interlocutors in inter-institutional coordination.

xxx. Families were identified according to their condition of socio-economic vulnerability, whose verification was based on the Social Register (the challenge was its permanent updating), which is the tool that determines, in part, the eligibility of beneficiaries of social protection programmes. These criteria included families with pregnant or breastfeeding women or with children under 3 years of age who were users of Integral Development Services of the Ministry of Economic and Social Inclusion and were not part of the non-contributory insurance system, and were located in cantons with a high incidence of COVID-19.

xxxi. The BAN included a one-time transfer of USD 240 per household. The value of the transfer was defined following the value of the government's emergency response (through the Family Protection Voucher) and the value of the food and beverage component of the basic family food basket.

xxxii. In terms of implementation, the MIES transactional platform was used to deliver the BAN, from which other pensions and bonds of the national non-contributory insurance system are delivered. An edu-communication strategy was also applied, including a chatbot and SMS messages sent to beneficiaries. In addition, an information service was set up to collect claims and complaints. Alternative mechanisms have yet to be developed to maximize the effectiveness of

communications in the context of a pandemic, for example, to people who do not have telephones.

xxxiii. Recommendations shared relate to rapid response, coordination of actors, coherence of intervention, a focus on evidence generation, the need for sustainability, administrative and communication challenges.

Peru

Context/Situation/Background

i. **National Direct Support Programme in support of the poorest**. The program promotes that pregnant women, children, adolescents, and young people from the poorest households have access to preventive maternal and child health and schooling services without dropping out, and contributes to poverty reduction through the development of human capital within households living in poverty, within a framework of joint responsibility between the household and the state.

ii. Program users are households with the socio-economic status of poor or extremely poor, with pregnant women, children, and adolescents until they reach the age of 19 or complete secondary education (Target Members), whichever comes first, residing in areas of intervention of the Programme.

iii. The co-responsibilities to which the households commit themselves are to ensure the attendance of the target members in their care to health services (pregnant women and children under 36 months) and education (from the age of three). Every two months, the reported health or education establishments check whether the target members have fulfilled their commitments in the previous period, and for each month of compliance, they are given S/. 100.00 soles (USD 27), and their accounts are credited on a bimonthly basis.

iv. Due to the health emergency caused by COVID-19, there was a drop in the delivery of prioritized packages of services to pregnant women and children under 12 months of age. The pandemic also affected the living conditions of the country's most vulnerable households. For this reason, within the framework of the National Direct Support Programme to support the poorest, the Programme's temporary intervention called "**Temporary Support for Strengthening Child Development**" was designed and implemented).

Temporary Support to Strengthen Child Development

v. **Participating organisations:** Ministerio de Desarrollo e Inclusión Social - MIDIS - Perú- PROGRAMA NACIONAL DE APOYO DIRECTO A LOS MAS POBRES - JUNTOS (National Programme of Direct Support to the Poorest - Together).

vi. **Experience**. Its purpose is to promote access to a basic package of health services for children under 24 months of age to maintain their state of health and the development of human capital, within the framework of the Territorial Management Strategy "Childhood First", and to mitigate the effects caused by the health emergency produced by COVID-19, related to the increase in poverty at national level (Emergency Decree n.° 095

vii. The scope of the intervention included 1,592 priority districts with monetary poverty equal to or greater than 15.0%, approved with R.M. n° 121-2020-MIDIS.

viii. Target population: 442,618 households with children born while the Emergency Decree is in force (December 2020) and households with children under 24 months of age at the beginning of its validity, living in the priority districts according to the monetary poverty index. **After 3 months of implementation, 99.9% of households were enrolled and subscribed**[5].

ix. To fulfill the household's co-responsibility, its target members must make use of health services, with the co-responsibilities being that the child under 24 months of age receives vaccinations (rotavirus and pneumococcus) and iron supplementation. Households receive a one-time payment of S/200.00 soles (54 USD) per affiliation and S/100.00 soles (27 USD) for each month of the fulfillment of co-responsibilities.

x. In terms of financing, the transfer of additional resources for the intervention "Temporary support for the strengthening of child development" was authorized by Emergency Decree No. 095-2020, mainly considering resources for user transfers (S/200 soles per two-month period). The

[5] As of March 2021, there are 238,054 households with children who received monetary transfers for fulfilling their co-responsibilities, which were checked against the HISMINSA Information System.

challenges remain to have budgetary resources to guarantee the continuity of the intervention until commitments are met with user households with children under 24 months of age.

The following processes and results are highlighted:

xi. Optimization of the Programme's organizational structure, developing actions and coordination at all levels to implement the intervention within the scheduled timeframe.

xii. Immediate response and innovation for the development of applications for the incorporation of eligible households with a commitment agreement through voice recording.

xiii. Online and offline membership application.

xiv. Use of a new telephone recording mechanism. Calls recorded and stored digitally for one (01) year as evidence of acceptance and commitment.

xv. Interoperability and use of administrative databases (RENIEC, Minsa, Osiptel, Banco de la Nación), and deployment of high capacity for sectoral and territorial coordination and articulation.

xvi. Nominal monitoring of basic conditions of the integrated package (vaccines, iron supplementation) through the strategy "Aló Juntos" (telephone counseling).

xvii. Use of the MY TOGETHER application for the dissemination of the subscription or non-subscription.

xviii. Implementation of a DIT dashboard to monitor the progress of the intervention at the national level.

xix. Management and coordination with the Banco de la Nación for the opening of bank account for all pre-affiliated households, as well as the provision of debit cards.

xx. At the coordination and governance level, the identification of binding institutions as strategic allies was key:

- RENIEC- Registro Nacional de Identificación y Estado Civil: to provide the Juntos Programme with access to the nominal register to have information on newborns and provide access to prioritised services.
- OSIPTEL- Organismo Supervisor de la Inversión Privada en Telecomunicaciones (Supervisory Body for Private Investment in Telecommunications), to have a telephone register of potential intervention households. This made it possible to have the necessary information for contacting eligible households, which were then migrated to the affiliation system.
- MINSA-Ministry of Health- MINSA, interoperability with HIS/MINSA, to verify basic package (pneumococcus, rotavirus, iron supplementation). There are reports of JUNTOS households in the REUNIS platform and geo-referenced IPRESS (georis) with JUNTOS beneficiaries.
- Local actors: Municipal mayors, social managers, health facility managers, community leaders. Coordination with local governments to convene DIT affiliation days, allowing local governments and neighborhood organizations to inform potential beneficiaries about the intervention, summoning them to fixed points for promoters or local managers to affiliate households that did not have mobile phones.
- Participation in health service delivery workshops in coordination with the Directorates of Integrated Health Networks, Regional Health Directorates, Regional Health Managements.

xxi. The use of technological mechanisms for affiliation and subsequent nominal follow-up has increased, for which actors have developed capacities in their use.

xxii. At the central level, inter-sectoral coordination capacities have been strengthened and replicated at the local level.

xxiii. The experience has allowed the strengthening of innovative capacities and the use of what has been learned for new user-oriented tools.

xxiv. Execution of actions and coordination at all levels for the affiliation of households, considering 100% female heads of households.

xxv. Verification of compliance with co-responsibilities through HIS-MINSA databases.

xxvi. Nominal monitoring of basic conditions of the integrated package (vaccines, iron supplementation) for children, in order to ensure early protection against health risks and human capital development.

Links - Together Peru

- Experience Together: Temporary Support for Strengthening Child Development (U.D. 095-2020) (link)
- Publication: Midis and Minsa carry out coordinated work in early childhood development and the fight against anaemia (link)
- Press Release Launch: Midis and Minsa strengthen joint work in favour of Early Childhood Development and the fight against anaemia in children (link) / https://www.facebook.com/MidisPeru/videos/318450096124559/

Colombia

Improving the effectiveness of targeting instruments to ensure the selection of the most vulnerable population.

i. **Participating organizations:** The CUA Consortium (Action Against Hunger. Danish Refugee Council (DRC) and Norwegian Refugee Council (NRC). DNA Dignity Programme

ii. The Consortium was created to respond to the population most affected by the Venezuelan migration crisis in Colombia. We provide humanitarian assistance to vulnerable migrants from Venezuela, Colombian returnees, and host communities, so that they can access goods and services that help alleviate their needs and promote their integration into society. The target population from September 2019 to September 2021 is around 130,000 people.

Do you want to know more about the CUA Consortium's experience?

https://youtu.be/T8KAB9VJFOo

iii. **Experience:** The Consortium, together with GTF Colombia, carries out advocacy and discussion actions with the national government to agree on the beneficiary population and avoid affecting the country's social protection system, and as a result, there are government guidelines for the delivery of transfers to the target population (poor and vulnerable affected by the migration crisis), including amounts, periods and conditions.

iv. A multidisciplinary team from the Collaborative Cash Delivery (CCD) Network in 2019 and gathers international experiences and knowledge from experts in food security, shelter, WASH, livelihoods, among others (ACH, DRC, NRC, Save the Children, Mercy Corps, World Vision, IRC, + WFP and UNHCR) to develop and implement tools to ensure the selection of the most vulnerable population and verify their identity with similarities and differences with the Identification System of Potential Beneficiaries of Social Programmes (Sisbén) of the Government of Colombia.

v. It considers information on the vulnerability conditions of the migrant, refugee, returnee, and host population in the country in 7 components: household composition, housing conditions, health, survival and protection, food security, income, expenditure and consumption, and access to rights. It was adapted for application in the COVID-19 context.

vi. A PMT study co-funded by the CUA and VenEsperanza Consortia was conducted to analyze the effectiveness and possibilities for improvement of the survey.

vii. At the information systems level, the 7 organizations of two of the country's largest money transfer consortia aligned their operational cycles and were able to securely share encrypted information and perform an effective deduplication process.

viii. ACH and the CUA Consortium participated in the creation of the needs, price, and market analysis sub-group in the GTF to monitor these aspects and inform TM operations.

ix. CUA develops and implements communication and information and routing strategies to improve the nutrition and protection of beneficiaries, especially children, pregnant and lactating women.

x. The Consortium develops communication strategies and spaces for the coordination and exchange of TM actors and the National Government.

Extending social protection to Venezuelan migrants and other affected groups

xxvii. **Participating organizations**: World Food Programme, the intervention was closely coordinated with three main national government agencies: the lead agency for Social Protection (Prosperidad Social), Gerencia de Frontera, and Autoridad Nacional de Gestión del Riesgo.

xxviii. **Experience**: In March 2020 when COVID 19 hit the country, it became clear that a substantial number of poor families who were not beneficiaries of national government cash transfer programs would be severely affected by its impact. At the same time, as the magnitude of the

crisis was unfolding, key government agencies, in particular the lead agency for social protection, were showing some flexibility in working together.

xxix. The objective was to complement the government's response to the socio-economic impact of COVID 19 and to strengthen its capacity to react to future shocks. The target population was poor Colombian families who were not beneficiaries of cash transfer programs (Familias en Acción, Jóvenes en Acción, Colombia Mayor) and the VAT refund scheme for the poorest.

xxx. The intervention could be considered a horizontal expansion to those families not benefiting from the effective transfer programs, including migrants (regular and irregular) from Venezuela. All families had to reside in Arauca, which borders Venezuela.

xxxi. It was designed jointly between WFP and these agencies and it was agreed that the government would target the population based on their means test registration (SISBEN) and selecting those in extreme and moderate poverty, who were not beneficiaries of other cash transfer programs. They also provided WFP with access to official databases of regular migrants and other official databases. In conclusion, it was designed and implemented jointly. The challenge was that although the government used the latest version of its means-tested register, a considerable number of families could not be contacted because the new contact information had not been updated. The situation was more complicated with migrants, as they have a high level of mobility, frequently change their contact numbers, and use community mobile phones.

xxxii. Colombia has solid experience in the provision of cash transfers, so the pilot was fully aligned with this legal and policy framework. WFP seeks to support rapid response capacity on the part of the social protection system, where there is room for improvement. WFP works together with the government to identify operational barriers for people to update information in the means-tested register and facilitate the inclusion of regular migrants in the social protection system.

xxxiii. As the pilot was an extension of the social protection system, the value assigned by one of the government's cash programs (US45) was aligned. The frequency was agreed with the authorities and was unconditional. A total of 14,487 families (46,000 people) were reached. The challenge is the low value of the transfer in relation to needs, as it only supplements household income.

xxxiv. PMT-based registration needs to be strengthened to reach the poorest during crises. It is also important to work with the Colombian and migrant population to inform them about the need to register and keep their contact details up to date. Given that Colombia is a country frequently affected by different types of shocks, it is necessary to establish a coordination mechanism to respond quickly to emergencies when the government does not have sufficient capacity or needs to be supplemented. Colombia has implemented several measures to regularise migrants from Venezuela by issuing various permits. However, more needs to be done to get financial institutions to accept these permits as valid.

DO YOU WANT TO KNOW MORE ABOUT THE WORLD FOOD PROGRAMME EXPERIENCE IN COLOMBIA? HERE IN THIS LINK

Humanitarian Transfers and "Learning Circles".

i. **Participating organizations**: World Vision Colombia, UNICEF

ii. **Experience**: The government requested support to respond to the COVDI-19 crisis through cash transfers. It sought to supplement the income of families in the Flexible Education Programme in "Learning Circles" to protect the educational trajectory of migrant and host community children and adolescents enrolled in Learning Circles by reducing the risks of educational dropout related to the COVID-19 pandemic.

iii. Areas of implementation: Arauca, Barranquilla, Cúcuta, Fonseca and Riohacha. Beneficiaries: 779 families participating in the Learning Circles modality. Coordinated with inter-agency emergency education roundtables and the GTM. Two MPCA exclusion criteria were defined: 1. The transfer

would be withdrawn in case of exclusion from the Learning Circles programme. 2. In case the family was beneficiary of other transfers capped by the government.

iv. The cash transfer component was integrated to guarantee the coverage of their basic needs and to stimulate the use of information and communication technologies that encourage their permanence in the educational processes, in line with the GTM deduplication processes and the amounts outlined.

v. Results 1. 99% of children and adolescents linked to UNICEF Learning Circles did not drop out of the programme thanks to the contribution of MPCA to meet basic household needs. 2. In Cash component 2, interventions were carried out with complementary deliveries to households focused on the most relevant needs in communications, connectivity, hygiene and care items for mothers and newborns, and 91.3% of families were impacted by WASH.

vi. For this intervention, it set up various communication channels: a hotline, suggestion boxes, text messages, social media and direct contact through staff and focal points in the CA partners/allies.

Guatemala

CWG technical advice to the social protection program

i. **Participating organizations**: Ministry of Social Development Guatemala, GOAL International, Action Against Hunger and World Food Programme Guatemala, and CWG.

ii. The **objectives** were (1) to raise awareness among the beneficiary population about cash transfers (conceptually, i.e. to provide information on what cash transfers are, what they are for, and why they are granted); (2) to ensure that cash transfers fulfill their objective (i.e. a financial and nutritional education component was included); and (3) to promote the Guatemalan Cash Transfer Working Group as a point of reference for technical advice and expertise on cash transfers to work together with MIDES. 3) Promote the Guatemalan Working Group on Cash Transfers as a point of reference for technical advice and expertise on cash transfers to work together with MIDES.

7Do you want to know more about the Bono Familia https://youtu.be/YHwIjUf2gjk

iii. The target population was families targeted by the Ministry of Social Development, who did not have access to electricity, employment status, dependents, housing status, gender, age, among others.

iv. Actions: Participation of MIDES within the TM working group and the request for technical assistance to implement cash transfers, elaboration of a proposal for technical support to MIDES that includes elements of financial and nutritional education through the elaboration of information capsules. MIDES used the information presented to elaborate and publish the information capsules in the national media. The challenges of achieving smooth inter-institutional coordination due to the multiple actors involved in the initiative.

The role of local organizations

i. **Participating organizations**: Asociación Tzuul Taqa, with the support of SDC.

ii. **Experience**: Supporting community families to cope with the impact of storms IOTA and ETA through cash transfers.

iii. Support to 2151 families in 17 communities. Local governments, Community Urban and Rural Development Councils (CODODES), leaders, women leaders were involved in the process. Challenges were the limited presence of state programs at the local level/lack of public services; the isolated rural population; and the work needed at the local level to raise awareness of rights and the limited encouragement of cash transfers by local governments in humanitarian emergencies.

El Salvador

Drought response linked to the social protection system

i. **Participating organizations**: Presidency of the Republic, Director of Social Programmes; Technical and Planning Secretariat of the Presidency; Social Investment Fund; World Food Programme, El Salvador.

ii. **Experience**: The presence of a period of drought during 2018, which made half of the country's municipalities food insecure. A response was designed linked to the social protection system, specifically to the poverty eradication strategy that was already being implemented in several municipalities.

iii. Objective: To reduce the impact on food insecurity in poor households in municipalities with the highest percentage of extremely poor households.

iv. Actions: 1. Confirmation with the civil protection institutions of the places affected by the drought; 2) Cross-checking of this information with the municipalities involved in the social protection program; 3) Identification of criteria for receiving the transfer and the amount of the transfer; 4) Financial management and territorial work for delivery. The selection criteria included a gender focus to prioritize the inclusion of women heads of household and single mothers.

v. Results A one-off cash voucher of $120 per family was delivered to 15,815 families in 38 drought-affected municipalities.

vi. In terms of funding, the main challenges identified were: 1. Having a designated budget within the social protection programs for emergency response. This scarce funding meant that the intervention was highly targeted and was only open to increasing the number of families within the municipalities where the social protection program was already being implemented, leaving out other municipalities that were also affected. 2. A comprehensive response requires greater coordination between the entities involved, within and outside the government, to prevent responses from being independent and to avoid missing out on possible synergies. 4. Updated databases of households in each municipality are essential for a quicker and more efficient response. 5. Electronic payment mechanisms should be sought to speed up delivery.

vii. At the level of legal frameworks, it was necessary to modify manuals and operational guidelines of the social protection program to be able to intervene. The necessary modifications were included in other programs to incorporate the emergency response component permanently. The challenge was to achieve the incorporation of these mechanisms in the civil protection law and to institutionalize emergency response in social protection programs.

viii. At the level of coordination and governance, the institution coordinating the social programs required a political decision to coordinate with the entity that operates the cash transfers. Articulation with other entities was also carried out to attend to municipalities that were not included in the social protection response. Therefore, it was necessary to intervene in some municipalities with social protection and allocate funds to cover it. The challenge is to ensure that a higher-level entity directs and coordinates the intervention with all the institutions involved and to avoid duality of decisions.

ix. In terms of capacity building, social protection training was provided to all the institutions involved, particularly in reactive social protection in emergencies. Definition of mechanisms for action and coordination mechanisms in the event of emergencies. The challenges are to incorporate the tools and mechanisms developed in the emergency response plans and the coordinating entity.

i. At the database level, different sources of information were found that did not coincide with each other. All of this should be a permanent preliminary work to have the information available at the time of the emergency; starting to collect data in the middle of an emergency does not allow for the rapid decision-making required. It is still a challenge to have updated information systems and to reduce exclusion and inclusion errors.

ii. At the design level, analyses were carried out to determine the amount of the transfer; the cost of 75% of a basic food basket for 3 months was determined, however, due to the funding available,

only a transfer of $120 was achieved, which was distributed through the national bank. More than 15,000 families in 38 municipalities were reached - with a one-off transfer of $120. The challenge was to establish funding mechanisms for responses within the framework of the Social Protection Subsystem. Organize the International Commission for Humanitarian Assistance for the parallel alignment of cooperation.

iii. The Unified Registry of participants in social programs made it possible to link the institutional systems of TMC, the Ministry of Agriculture, and other institutions involved. It was possible to integrate the lists of affected families from 3 institutions and form a single register.

iv. At the payment level, the same financial institutions and inter-institutional agreements that already existed for the payment of the benefit were used, arriving in record time because no new procurement processes were initiated, although some challenges related to the limited capacity of the financial institution to cover a large number of populations in a short period of time.

v. Through field staff of the institution operating the social protection programs, communication with participants and local authorities took place. More time is needed for communication with local authorities and communities.

vi. Recommendations: Social protection systems are a fundamental tool for developing a strategy that is not only reactive to the emergency but a strategy that builds resilience and effective preparedness capacities in the face of hazards. 1. It can be an opportunity to act more quickly, effectively, and comprehensively. 2. Have up-to-date records of vulnerable households. 3. A comprehensive response requires greater coordination between the entities involved, within and outside the government, to avoid responses being independent and not taking advantage of possible synergies and the establishment of a process for the identification of affected families 4. Establishment of funding mechanisms for responses, within the framework of the Social Protection Subsystem. 5. Organise a permanent International Commission for Humanitarian Assistance for the parallel alignment of cooperation.)

Mexico

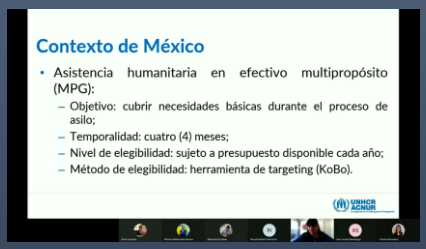
Cash transfers and protection

i. **Participating organizations**: UNHCR Mexico

ii. **Experience**: In line with the Strategic Directions for Cash-Based Interventions in the Americas, UNHCR Mexico is paying increased attention to the inclusion of refugees and other Persons of Concern in national social protection systems as an exit strategy for humanitarian assistance, along with numerous efforts and achievements in the field of durable solutions.

Want to know more about how UNHCR targets cash assistance in Mexico?

A multi-functional team explains it in detail



https://youtu.be/BYgA4CAZC4Y

iii. UNHCR provides humanitarian assistance to persons of concern (PoCs) in the form of Multi-Purpose and sectoral transfers to help PoCs cover most of their basic needs, including food, other goods, accommodation bills, and utilities. The transfers are granted for up to four (4) months, which is the approximate timeframe for the authorities to resolve asylum claims until the PoC are unable to access formal employment. Thanks to the support provided during this period for PoCs to obtain the required documents, the persons concerned can remain in the asylum process, which in turn allows them to access formal employment and social protection. The challenge lies in assessing the time required for the asylum process, which may vary from place to place depending on the number of cases processed and the capacity of the authorities.

iv. HEALTH: Although PoC can access the national health system, capacities are often overstretched, which will eventually limit their access. Sectoral transfers are therefore seen as complementary support for people with severe and chronic illnesses (including mental health) and disabilities. In this case, there is a limit on the number of transfers per person (4 transfers), as this cash assistance is complementary and cannot replace reliance on national health systems. When health situations require more extensive assistance, referrals are made to the National Refugee Agency. It is very important to ensure complementarity, and not to assume responsibility instead of the state and not to create a parallel system.

v. EDUCATION/INTEGRATION: Although the right to education for all persons, regardless of nationality or migration status, is guaranteed in Mexican law, some children do not enroll in school because families prioritize the coverage of other basic needs since, although public schools are free, there are some additional expenses derived from school insertion that must be covered by families, such as school supplies, uniforms, and transportation. In this sense, the enrolment of PoC in the national education system remains a challenge for some children.

Dominican Republic

Context/Situation/Background

i. In the Dominican Republic, the path towards universal social protection began in 2000 (the first regeneration of social policies), when the National Plan for Overcoming Poverty was formulated. This Plan established the first Social Policy Coordination Cabinet, which carried out evaluations of conditional transfer programs and promoted gender mainstreaming in social policy, supported by a Civil Society Consultative Council.

ii. In 2004, the Social Protection Programme (second generation of social policies) was created to protect the vulnerable population, especially those living in extreme poverty. To achieve this, coordination between the relevant social policy entities was strengthened, and the Single System of Beneficiaries (SIUBEN) was established as the entity in charge of targeting social protection interventions and selecting the families that would participate in its programs, as well as a specialized agency for the financial management of the conditional and unconditional subsidies contemplated in the social protection system, called the Social Subsidy Administrator (ADESS).

iii. Later, in 2012, the Progresando con Solidaridad Programme (PROSOLI) was created, combining two programs that were already in place. These were the Solidarity Programme, which consisted of granting conditional cash transfers to improve the income and investment in the human capital of families in extreme poverty, and was part of the Social Protection Network; and the Progresando Programme, which had the function of raising awareness, empowering and accompanying families in the process of integral development who were in a situation of extreme poverty, and was under the Office of the First Lady.

iv. In the current third-generation model, the public policy strategies that have an impact on poverty reduction in the country are articulated to ensure social protection for groups in conditions of vulnerability and poverty and to develop opportunities to improve well-being and prospects for progress. The main purpose of the Progresando con Solidaridad Programme is to generate well-being in families, create capacities and skills for life and work, promoting the human, economic and social development of the heads of households, as well as of each of the members of the family nucleus. Progresando con Solidaridad provides exclusive attention to families identified and categorized as living in extreme poverty by the Sistema Único de Beneficiaries (SIUBEN). Once they have joined Prosoli, beneficiary families are linked to: I) Conditional and non-conditional monetary transfers conditional on the fulfillment of co-responsibilities. Intervention with families has carried out through the interaction of seven components: 1) Identification; 2) Education; 3) Comprehensive health; 4) Food security; Income generation and nutrition; 5) Human training and civic awareness; 6) Habitability and environmental protection, and 7) Access to ICTs.

v. The Dominican Republic is one of the countries in the region that has invested the most in adapting and preparing its non-contributory social protection system for emergency response. In turn, this system has been a key element of the government's response to the crisis caused by the COVID-19 pandemic.

The Social Protection system and the response to the crisis generated by the pandemic through the "Stay at Home" program.

vi. Participating organisations: Gabinete de Políticas Sociales (GPS)

vii. Experience: The Social Policy Cabinet is the coordinating body for the formulation, implementation, monitoring, and evaluation of the programs included in the Social Protection System of the Dominican Republic. It integrates the institutions that contribute to the eradication of poverty and the creation of human capacities for social promotion:

viii. SIUBEN: Sistema Único de Beneficiarios, in charge of targeting social programmes.

ix. PROSOLI: Programme "Progressing with Solidarity", whose function is to integrate families living in poverty in a process of integral development, based on home visits that ensure the fulfillment

of co-responsibilities linked to cash transfers that contribute to the food and nutritional security of its members.

x. ADESS: Administradora de Subsidios Sociales, in charge of the payment of the different subsidies existing in the Dominican Republic.

xi. The components of the Social Protection System in the Dominican Republic consist of three interrelated pillars: (1) non-contributory - social assistance under the responsibility of the GPS, (2) contributory - social security under the responsibility of the National Social Security Council. (3) Labour market regulation under the responsibility of the Ministry of Labour.

xii. As a palliative measure to the crisis caused by the pandemic, the "Quédate en Casa" (Stay at Home) subsidy was created through the Social Protection system. This consisted of a temporary horizontal and vertical expansion of social protection programs, consisting of (i) Extending the number of beneficiaries to 1,500,000 households, (ii) Increasing the monthly quota received by households, prioritizing where older adults reside, (iii) Allowing the use of differentiated payment mechanism, (iv) Expanding the number of establishments within the Social Supply Network (RAS).

xiii. At the financing level, there is a single sectoral budget structure under the coordination of the GPS through which the state budget for cash transfers is managed as part of the social protection system. Public investment funds with external financing or cooperation are channeled through the same approach. The funds for the Quédate en Casa program were channeled through this financing system, with the amount granted per household being between 6 and 8 times the amount granted under "Comer es primero", and covering 22.9% of the family basket of the first quintile, and 32.1% in the case of households with older adults. In addition, a UNICEF pilot project was able to channel funding for specific assistance to households with children with disabilities through the channels of the social protection system.

xiv. At the level of legal frameworks and public policy, to respond to the emergency generated by the pandemic, Resolution 001-2020 was issued creating the "Stay at Home" program.

xv. At the targeting level, SIUBEN used the Quality of Life Index (ICV), based on the Proxy Means Testing methodology. The Quédate en Casa program involved a vertical expansion for beneficiaries already registered in the PROSOLI program, but also, by making use of the people registered in the database, a horizontal expansion to 1,500,000 households could be made in a timeframe of approximately 15 days. People not registered in SIUBEN also had an online form to apply for registration.

xvi. In terms of design, the country's non-contributory social protection is strongly based on conditional cash transfers (CCTs), however, the Quédate en Casa program did not contemplate any conditionality. The amount provided was also increased for existing programs, granting an amount of 5000 DOP to the general population, and 7000 DOP for households with elderly people.

xvii. At the level of information systems, GPS has an ongoing Interoperability Project as an innovation for the Public Policy system. The project arises from the need to ensure an effective exchange of data and information between the institutions that make up the Social Protection System and the Strategic Partners, and the platform is constituted as a guaranteed primary source for decision-making in the adoption of Public Policies. In its design, scalability was considered as an important feature, thus, the interoperability platform is enabled for the future incorporation of all entities that make up or support social protection.

xviii. At the payment level, through the Social Subsidy Payment System managed by ADESS, direct monetary transfers are ensured to beneficiary households and commercial establishments that are part of the Social Supply Network (RAS). The Social Subsidy Payment System is made up of 4 entities of the formal financial sector, and electronic funds transfer companies, commercially linked to VISA International, which offer subsidy beneficiaries electronic transaction services in shops that are members of the System. The subsidy cards are the means of payment used to facilitate the consumption of social subsidies, have a magnetic strip, function as a debit card, and can handle different social subsidies. Through the subsidy cards, 10 social subsidy programs are implemented, distributed between the Progresando con Solidaridad and Special Incentives cards,

respectively. The experience of payments in response to the emergency will be more detailed in the experience reported by ADESS.

xix. In terms of communication with communities, there is a one-stop-shop for direct attention to citizens, called Punto Solidario, which offers information related to social protection. They can also make inquiries about their benefits and their family profile in general. Among the services offered are: - Request for card replacement due to damage, loss, or theft; - Change in family composition: inclusion or exclusion of members; - Request for data update; - Request for household assessment; - Change of head of household; - Correction and/or update of data; - Reassessment of household; - Change of address. Similarly, the window allows beneficiaries to make claims: 1) to object to observation and/or sanction imposed by the program, 2) refusal to read the card, even when the card has an available balance, 3) to know whether the card is active or inactive, 4) to complain about unauthorized consumption, and 5) for an unavailable balance of funds.

xx. In relation to monitoring and evaluation aspects, the PROSOLI programme was evaluated between 2016 and 2019 in order to estimate the impact of the conditional cash transfers and the family accompaniment provided.

ID card payments for rapid horizontal expansion

xxi. **Participating organisations**: Administradora de Subsidios Sociales (ADESS), Programa Progresando con Solidaridad (PROSOLI), UNICEF, WFP.

xxii. **Experience**: ADESS is the Social Subsidies Administrator, in charge of the payment of the different subsidies existing in the Dominican Republic. ADESS, as part of the national social protection system, was able to make the payments of the programs designed for the response to the COVID-19 emergency quickly and efficiently.

xxiii. At the funding level, government pandemic response funds were channeled, as well as UNICEF funds to include children with disabilities. Details can be found in the experience shared by UNICEF below.

xxiv. At the coordination level, ADESS coordinated very closely with all institutions at the national social protection level so that transfers could be made on time and promptly.

Do you want to know about social protection systems in the Dominican Republic?

Here the Administradora de Subsidios Sociales (ADESS) details the structure of social protection programmes in the Dominican Republic.

https://youtu.be/JGSKQ_Awpcs

xxv. At the level of price and market analysis, ADESS and PMA established a collaboration to analyze market functionality, through the detailed analysis of the functioning of 3 components of the market system: the supply chain, the regulatory environment, and the supporting systems. The main activities of the joint mission were the collection of information, the analysis of results and elaboration of proposals for improvement, and the presentation of results. More details can be found in the experience shared by LDCs below.

xxvi. At the payment level, ADESS regularly transfers cash to the PROSOLI program cards, which brings together different subsidies. However, at the time of the pandemic response, not all people considered vulnerable were participating in the PROSOLI program, so by using the SIUBEN social register and cross-referencing the data with the database of the Social Security Treasury and the Dominican Telecommunications Institute to obtain telephone numbers, it was possible to make payments to 600,000 people in addition to the regular program. These people, not having the VISA card provided by the PROSOLI program, could make the payment through their ID card number and a code that was sent to the beneficiary. The amount received could be redeemed at local shops in the nationwide Local Supply Network (RAS), which had to be expanded to meet the demand generated by the expansion of the program.

xxvii. One limitation of the use of cédulas for payments was that it prevented the effective implementation of fraud prevention systems.

xxviii. Communication with communities: The appearance of phishing applications, false rumors and misinformation were the main risks to which the program was exposed. This situation was countered with a communication campaign aimed at orienting the population to avoid the aforementioned actions, as well as to prevent the spread of COVID-19. Given similar experiences, ADESS recommends expanding the contact centers, as the demand from the population to know whether or not they are beneficiaries will increase significantly.

Market analysis and systematization of learning

xxix. **Participating organisations**: World Food Programme, Administradora de Subsidios Sociales (ADESS)

xxx. **Experience**: The World Food Programme, in line with its mandate to ensure food security for the entire population in normal times and emergencies, has been supporting the social protection system to strengthen its emergency response mechanisms through social assistance programs.

xxxi. In the wake of the pandemic, and considering the substantial and sudden increase in beneficiaries of the Social Supply Network due to the horizontal expansion of the regular social protection program, there was a pressing need to analyze the behavior and vulnerabilities of the food market to identify possible difficulties in responding to the increased demand. WFP provided support in an area that had not been analyzed: the retail sector, on which the food security of 70% of the Dominican population depends. To this end, a market and vulnerability analysis of the social supply network (RAS) was carried out together with ADESS in times of COVID-19 to assess the capacities of the RAS's small businesses to meet demand.

xxxii. In terms of capacity building, both ADESS and WFP were able to increase their capacity by collecting information remotely and analyzing it, but additionally and especially, the capacity of various producers, suppliers, and small businesses was strengthened to articulate and respond to the increased demand.

xxxiii. At the price and market analysis level: PMA's Market Functionality Index (MFI) methodology was used, and 1,432 shops (36% of the national total of SAN businesses) were interviewed, mainly grocers (79%). The interview tabulations were weighted in each of the dimensions studied (variety, availability, prices, and resilience) for each category of essential goods (cereal food, other non-cereal food, and other non-food goods) and then aggregated at the municipal level to produce an index between 0 (zero) and 10 (ten). In the case of the Dominican Republic, municipalities average an index of 5.3/10 showing average functionality. This result is negatively pushed by the variables of the price dimension, which are the lowest (3.6/10). They all have in common that they have been negatively impacted by the price dimension, which in all cases is well below the rest of the dimensions.

xxxiv. At the level of challenges faced are the remote data collection and the inclusion of new businesses in the RAS.

xxxv. At the level of recommendations, it is considered essential to continue these studies to monitor the behavior of a sector of vital importance for the food security of the population, particularly the most vulnerable groups. It is recommended to implement the full Market Functionality Index, with all nine dimensions and trades not associated with the SAN, to holistically understand the reality of the sector, particularly in the face of climate shocks and weather events. Similarly, to design a strategy for monitoring the supply and prices of the main products in the basic food basket. Finally, it is necessary to deepen the analysis to understand the reasons behind the results of the dimensions with greater vulnerability (availability and prices) and to define whether this happens as a cyclical consequence or due to structural problems so that corrective actions can be identified. A key tool for this is the Market Systems Analysis (MSA) that WFP has designed.

Inclusion of children with disabilities in the social protection system

xxxvi. **Participating organisations**: UNICEF, Gabinete de Política Social, SIUBEN, PROSOLI, ADESS.

xxxvii. **Experience**: The economic effects associated with the COVID-19 emergency have the potential not only to slow down but to reverse development and progress in the fight against poverty in the Dominican Republic over the last decade.

Hearing on how to include children with disabilities in social protection systems

https://youtu.be/jnGHYKh79AM

xxxviii. For children and adolescents, of all groups, this emergency can have severe, even irreversible impacts. In the short term, they are at risk of illness, learning delays, inadequate nutrition, and violence. In the medium and long term, their needs may be rendered invisible, their rights violated, and they may spiral into poverty for the rest of their lives. UNICEF is mandated to look after the rights and well-being of children and adolescents, especially the most vulnerable. Within this group, children with disabilities are our priority.

xxxix. Even before the COVID-19 emergency, families with children with disabilities faced barriers to education, health, and developmental services, incurred additional expenses for the care of their children, and lacked sufficient psycho-emotional support and information to access care and protection services. Unfortunately, the specific needs of children and adolescents with disabilities are often not taken into account by social protection systems, which should provide families with the necessary means to reduce their socio-economic vulnerabilities and promote access to complementary services to contribute to their full development.

xl. Aware of this situation, UNICEF Dominican Republic has provided support since 2018 for the inclusion of children with disabilities in social protection programs. UNICEF's actions have focused on two axes (A) that the instruments used to capture potential eligible households should inquire about the conditions of disability of children from their records, (B) that the presence of children with disabilities in the household should be included as a prioritization element in the selection formula of the eligible population to benefit from these programs. In other words: to know how many and in what conditions children with disabilities live, and to prioritize their inclusion in social protection programs for them and their families.

xli. In the context of the COVID-19 pandemic emergency, the program aimed to (i) provide targeted complementary cash transfers for 2,700 families with children and adolescents with disabilities; (ii) 2. To verify the efficiency of regular government cash transfer channels during large-scale emergency response; (iii) To strengthen advocacy for the protection of children's rights through regular social protection programs in the post-pandemic recovery period of COVID-19....

xlii. At the financing level, transfer of funds to the Social Subsidies Administrator (ADESS) and the Progresando con Solidaridad Programme (PROSOLI), for temporary transfers to the 2700 targeted households.

xliii. At the level of legal frameworks and public policy, UNICEF advocated and lobbied to formalize the transfer mechanism for emergency response through the social protection system, and provided technical support for the inclusion of disability in SP programs. As a result of the pilot experience, children with disabilities were systematically included in the new cash transfer program created by the government to bring together different previous programs, called the Supérate Programme.

xliv. At the targeting level, the program's target populations were households in extreme poverty (ICV 1) and moderate poverty (ICV 2), which participate in the Dominican government's cash transfer programs. One challenge was the verification of compliance with the targeting criteria since, due to social distancing measures and response times, it was not possible to verify in the field that all selected households met the eligibility criteria.

xlv. The design of the programme was aligned with the national PS system in terms of amounts and periodicity.

xlvi. Concerning information systems, the official SIUBEN records were used for targeting. One of the biggest challenges was to contact households from the telephone numbers provided from the social protection registers. Many households change territorial location and telephone number. This is particularly worrying in the case where the social protection system is used to respond to emergencies with a defined territorial location.

xlvii. In terms of payments, delivery was made through the official ADESS channels for cash transfers. The challenge here was that UNICEF does not have contracts with financial service providers, so the request for verification of delivery and transaction had to be made through the social protection institutions.

xlviii. The lessons learned from the experience were (i) the government's response to the pandemic indicates that the system works for cash transfers; (ii) there are opportunities for improvement in the registers to identify households by targeting criteria; (iii) effective contact and feedback with households is through institutional pages; (iv) the national social protection system is the best channel for channeling cash transfers for a large-scale emergency.

xlix. The recommendations of the experience are the diversification of the supply network (grocery stores for food purchases) to include other businesses (pharmacies, household goods shops, hardware stores, transport, communications) and flexibility in terms of modalities so that participating households can have a part of the transfer in cash.

Resources

- Reactive Social Protection in the Dominican Republic National Action Protocol for Social Protection against Climate Shocks. Vice-Presidency of the Dominican Republic. 2018.
- Reactive social protection in emergencies in Latin America and the Caribbean Case study: Dominican Republic. World Food Programme, Oxford Policy Management. 2017.
- Reactive social protection in emergencies in Latin America and the Caribbean: The Dominican Republic's response to the COVID 19 pandemic. World Food Programme. June 2020

Commonwealth of Dominica

Social cash transfers in the Commonwealth of Dominica

i. Participating organizations: the World Food Programme and the Ministry of Youth Development and Empowerment, Youth at Risk, Gender Affairs, Elderly Safety, and Dominicans with Disabilities of the Government of the Commonwealth of Dominica.

ii. Experience: The Government of the Commonwealth of Dominica leveraged its Public Assistance Programme (PAP) to provide cash support to vulnerable populations who lost income due to the adverse impact of COVID-19. WFP supported the temporary vertical and horizontal expansion of the PAP with social cash transfers provided through this government program. The temporary vertical expansion of the PAP ensures that all people enrolled in the program are automatically entitled to a supplement to their current cash assistance benefits. The horizontal expansion extends PAP assistance to additional beneficiaries affected by COVID-19 quarantines, closures, and curfews.

iii. Beneficiary targeting: based on indigence and vulnerability, and income reduction due to COVID-19 measures.

iv. "Top-up" to PAP cash transfers: 2,000 extremely poor households already benefiting from the PAP.

v. Cash transfers for new beneficiaries: households not enrolled in the PAP and not receiving other financial support, selected through an enrolment process.

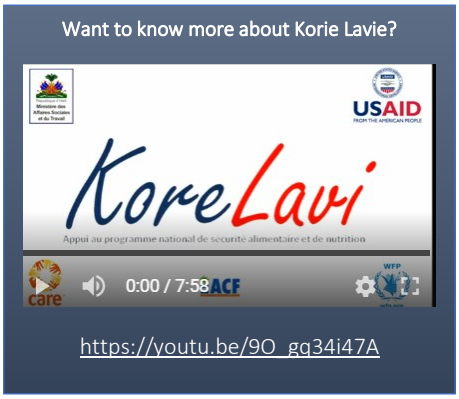
vi. Payments/delivery: cash disbursements distributed with the support of village councils or cash transfers to beneficiaries bank accounts.

vii. Transfer value: Top-up to PAP beneficiaries: EC$225 per transfer, in addition to regular PAP fees (EC$150-375 depending on household size and vulnerability). New beneficiaries: EC$450 per transfer. Each transfer covers 45 days of beneficiary needs.

viii. Communication and monitoring: messages to beneficiaries and guidance on the use of cash transfers, as well as the implementation of the complaints and feedback mechanism, and monitoring of the use of cash transfers by beneficiaries and the impact on households.

Haiti

Supporting sustainable, institutionalized, and impactful social protection



i. **Participating organizations**: CARE USA, WFP, Action Against Hunger (AAH), World Vision and the Government of Haiti.

ii. **Context:** Vulnerability to large shocks aggravate chronic poverty and vulnerability in the Haitian context, which currently counts on a weak fragmented & underfunded social protection system. Social safety nets are rare and yet to be institutionalized by the government. However, emerging interventions offer positive perspectives going forward.

iii. **Kore Lavi Objective:** Through Kore Lavi, CARE has aimed to reduce food insecurity and vulnerability by supporting the government of Haiti (GoH) to establish a replicable safety net system and expanding capacities to prevent child undernutrition.

iv. Government-led gender and nutrition-sensitive social safety net has improved access of 18,000 households to local and nutritious food. Enhanced social cohesion, women's empowerment through village savings and loans association (VSLA), stronger market systems to boost local production and local capacity building are key to enable the mobilization of the safety net system to support the people in need as evidence in October 2016 when these systems were quickly mobilized to assist the victims of Hurricane Matthew.

v. Lack of stable mobile network coverage in the remote areas, high illiteracy rates of the rural population contributed to hinder the full ability to benefit from the introduction of new technology. For example, the beneficiary registration and voucher printing/distribution process is time consuming at the start-up, aggravated by the lack of funding from the government.

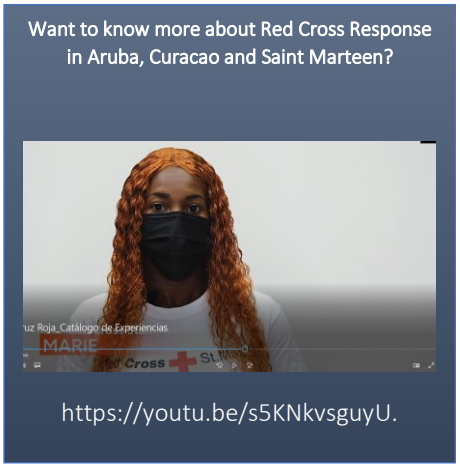
vi. Local capacity building and institutionalization of social protection have been key to ensure that the government of Haiti via the Ministry of Social Affairs and Labor (MAST) gradually and competently takes over coordination and management functions and systems of the Kore Lavi Safety Net program.

vii. **Activities**: CARE has identified the best methodologies and approaches to make the social transfers more efficient; foster the use of innovative approaches and technological platforms; build local capacity through community-based structures, using a network of community Agents and partnering with local market actors. For better diagnosing vulnerability, a consensus-based national vulnerability targeting systems led by GoH (MAST) allowed for the introduction of the Haiti's Deprivation and Vulnerability Index (HDVI).

viii. **Results**: Enabling business environment – in the pilot project that preceded Kore Lavi, businesses reported a 13% increase in paying taxes, and in both projects, vendors are much more likely to have bank accounts, stable demand, and legal documentation. Electronic vouchers can play a significant role in assisting households from the remote areas and increasing the provision of services to the ultra-poor. This has resulted in growing interest of the private sector of tapping into and reinforcing the development of mobile transfer infrastructure that relies in e-vouchers. High government interest resides now in the model to scale-up.

Aruba, Curacao, Sint Maarten

Auxiliary role



i. **Participating organizations:** Netherlands Red Cross, Red Cross Aruba, and Red Cross Curacao

ii. **Context:** The borders of Curacao, Aruba, and St. Martin as independent countries within the Kingdom of the Netherlands that live largely on tourism, were closed in March 2020 in the wake of the COVID-19 pandemic. The governments of the three Caribbean countries were unable to support the people who lost their jobs and requested assistance from the Netherlands. The Dutch government provided the Netherlands Red Cross with a grant (or fund/financial package) of 60 million euros to complement the support from the governments' social protection systems.

iii. The Red Cross with its 3 delegations in each country implemented a response proposing an e-voucher, a food parcel, or a hot meal according to the needs of the people. The program started in May 2020 and ended in April 2021 for Curacao and Sint Maarten, and at the end of June 2021 for Aruba when the local Social Protection systems took over full responsibility.

iv. As part of **its role as an auxiliary to the public authorities**, the Red Cross, with its assistance program, replaced the social protection system for a short period of time, taking into account resident, migrant, refugee, and undocumented populations, known as the population of interest by the organization as from 18 years of age without any age limit.

v. The Red Cross program sought to help the most vulnerable people with food assistance and hygiene products through restricted cash transfers. In each country, the vouchers were used in selected supermarkets to cover a portion of their basic needs.

vi. The Red Cross helped 68,371 people with a voucher 1 or 2 times per month, 2085 people with hot meals, 21,889 people with food parcels.

vii. In the vulnerability and needs assessment, the organization provided technical advice and acted in the selection of vulnerable people, the determination of the voucher amount, voucher distribution, PDM, the establishment of a public helpline, financial and administrative follow-up with supermarkets, and the financial service. It also faced challenges in the relationship between the Red Cross and the government, and with partners, and coordination in targeting the most vulnerable.

viii. Given the economic impact of the pandemic, it was decided to use an economic criterion for the determination of targeting and vulnerability criteria. Unfortunately, for targeting and eligibility determination, a database with incomplete information had to rely on data provided orally by beneficiaries as the only resource.

ix. Among the main lessons learned from the experience and recommendations that the Red Cross highlights for other actors are the need to be accountable in registration; to work with the government from the beginning and to clarify the objectives and timeframe of the programme. Also, having a CRM from the very beginning with a scheduled online survey to allow time and space to capture relevant qualitative information.

Barbados

Reactive social protection in the Caribbean

i. While "shock-responsive social protection" may be a new term, it is not a new approach in the Caribbean. The provision of cash transfers and others forms of support in response to disasters and other shocks dates back more than 15 years. A common thread across regional experiences is that they generally have been the product of necessity and creativity in the face of shocks, without plans and measures established in advance that could facilitate responses through social protection.

ii. **Participating organizations**: the World Food Programme and the government Ministries responsible for social protection programmes in the Dominica, Guyana, Jamaica, Saint Lucia, the British Virgin Islands and Saint Vincent and the Grenadines.

iii. **Experience**: tailored technical assistance to governments to implement social cash transfers within social protection programmes in response to shocks. Based on government requests and most pressing needs, WFP is supporting the expansion and strengthening of shock responsive social protection components in response to COVID-19 impacts with the governments of Dominica, Guyana, Jamaica, Saint Lucia and the British Virgin Islands; as well as in response to the volcanic eruption in Saint Vincent and the Grenadines. WFP provides cash transfers jointly with and through government social protection systems along with tailored technical assistance on expansion of programmes, targeting, digitalization, delivery mechanisms, information management, complaints and feedback mechanisms and monitoring.

iv. Key Components: Shock responsive social protection standard operating procedures. Surveys to analyse the impact of COVID-19 on households, to inform planning and targeting; transfer value definition for shock response, including minimum expenditure basket calculation based on available data and assessments on poverty and population needs; information management systems strengthening towards digitization; improved data collection capacities and tools; § context-specific targeting criteria that captures socio-economic vulnerability; remote targeting and registration tools; analysis and piloting of payment mechanisms to optimise the delivery of cash

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Want to know more? *Shock-responsive social protection in Latin America and the Caribbean WorldFood Programme (wfp.org)*

4.2. Resources - 2020/21-

Useful resources on Social Protection and COVID-19- Latin-American. [6]

Emerging experiences? Country and country case studies and analysis

- **UNICEF**. Technical note 1: Social protection response to COVID-19 in Latin America and the Caribbean (Spanish and English) (March 2020)
- **WFP** 'The Social Protection Response to the COVID-19 Pandemic in Latin America and the Caribbean: Emerging Trends, Innovative Practices and Lessons Learned here (Jul 2020)
- **Socialprotection.org** Virtual Booth Talk 'Socioeconomic impacts of COVID-19 and social protection in Latin America and the Caribbean '. In: Global e-conference here (Oct 2020); side event 'Lessons from the COVID-19 response for shock-responsive social protection in the Caribbean'. In: Global e-conference here (October 2020) and blog here
- **ECLAC** 'Policy expansion in compressed time. Assessing the speed, breadth and sufficiency of post-COVID-19 social protection measures in Latin American countries here (2020)
- **UNICEF** 'Technical note 2: Social Protection and Response to COVID-19 in Latin America and the Caribbean: Social Assistance' (Spanish here v3), English here (Oct 2020); Technical note 3: Social protection response to COVID-19 in Latin America and the Caribbean - Social security and labour market (Spanish and English) (Oct 2020)
- **UNDP** 'Policy Responses to the Pandemic for COVID-19 in Latin America and the Caribbean: The Use of Cash Transfer Programs and Social Protection Information Systems' here (Nov 2020)
- **Wilson Centre** - Working Paper "Venezuelan Migrants Under COVID-19: Managing South America's Pandemic Amid a Migration Crisis" by Jacqueline Mazza here (Dec 2020)
- **ISSA** 'COVID-19 and social security in the Americas: experiences and lessons for the future here (Dec 2020)
- **CGD** 'Social Protection in Argentina, Brazil, Colombia, and Mexico During the Pandemic' here (Feb 2021)
- GDI Blog 'Should we expect a post-Covid-19 social protection epiphany in Latin America?' (Armando Barrientos) here (Feb 2021)
- ECLAC, UNICEF Non-contributory cash transfers: An instrument to promote the rights and well-being of children

SPACE- RESOURCES

SPACE has developed (and supported the development of) many resources that can help in this process. They are currently only available in English and are as follows:

Identifying practical options for linking humanitarian assistance and social protection in the response to COVID-19 here

Grand Bargain - case studies:

Case study 1: The role of policy in creating the conditions for linkages between humanitarian cash and social protection

Case Study 2: Designing linked Humanitarian Cash and Social Protection interventions in response to COVID-19

Case Study 3: Implementation of Linked Humanitarian Cash and Social Protection Interventions in Response to COVID-19

Summary note

Linking Humanitarian and Social Protection Information Systems in the response to COVID-19 and beyond here.

Transfer values: How much is enough? Balancing social protection and humanitarian considerations here.

Overcoming obstacles to the coordination of social protection and humanitarian assistance: building on promising practices (forthcoming here)

Deciding when and how to link humanitarian assistance and social protection: Guidance and tools for response analysis (forthcoming here)

[6] Resources with focus on Latin America from "Useful COVID-19 and Social Protection Materials Curated by Valentina Barca and input from experts on the Social Protection Approaches to COVID-19: Expert Advice Helpline (SPACE), as well as counterparts from across the globe. April 2021, Living Version 3 (link).

with disabilities in Latin America and the Caribbean, 2021, here.

Country-specific social protection responses

Argentina

- CRC 'Argentina's Social Policy Response to Covid-19: Protecting Income and Employment' here (Sep 2020)

Bolivia

- CRC 'Bolivia's Social Policy Response to Covid-19: Hindered by Political and Economic Crises' here (2020)
- Inter-American Development Bank - Working Paper - 'The Unintended Effects of a Noncontributory Pension Program During the COVID-19 Pandemic' by Nicolas Bottan, Bridget Hoffman and Diego A. Vera-Cossio here (Nov 2020)

Chile

- IPC-IG 'Tools to protect families in Chile: A State at the service of its people' here (Mar 2021)
- J-Pal 'Designing a social protection program during Covid-19' here

Colombia

- World Bank Group "COVID-19 G2P Cash -Transfer Payments - Country Brief Colombia" here (May 2020)
- WB and G2PX 'COVID-19 G2P Cash-Transfer Payments Country Brief' here (May 2020)
- CGD "COVID-19 in Colombia: Impact and Policy Responses" here (Jul 2020)
- IPA The Impact of Emergency Cash Assistance in a Pandemic: Experimental Evidence from Colombia here (Nov 2020)
- IPC-IG 'Colombia's experience in addressing the COVID-19 crisis' here (Mar 2021)
- WFP one-pager forthcoming

Dominican Republic

- WFP 'The Dominican Republic response to the COVID-19 Pandemic' here (Sep 2020)
- WFP one-pager forthcoming

Ecuador

- WB and G2PX 'COVID-19 G2P Cash-Transfer Payments Country Brief' here
- WFP one-pager forthcoming
- UNICEF Evaluation of UNICEF Ecuador's strategy for unconditional cash transfers. Response to the migratory emergency in Venezuela here (only in Spanish)
- Social protection and livelihoods for Ecuadorian and refugee families | The Global Compact on Refugees | Digital platform (globalcompactrefugees.org)

Haiti

- WFP one-pager forthcoming

Uruguay

- CRC "Uruguay's Social Policy Response to Covid-19: Strong Fundamentals, Selective Expansion'' 'here (2021)

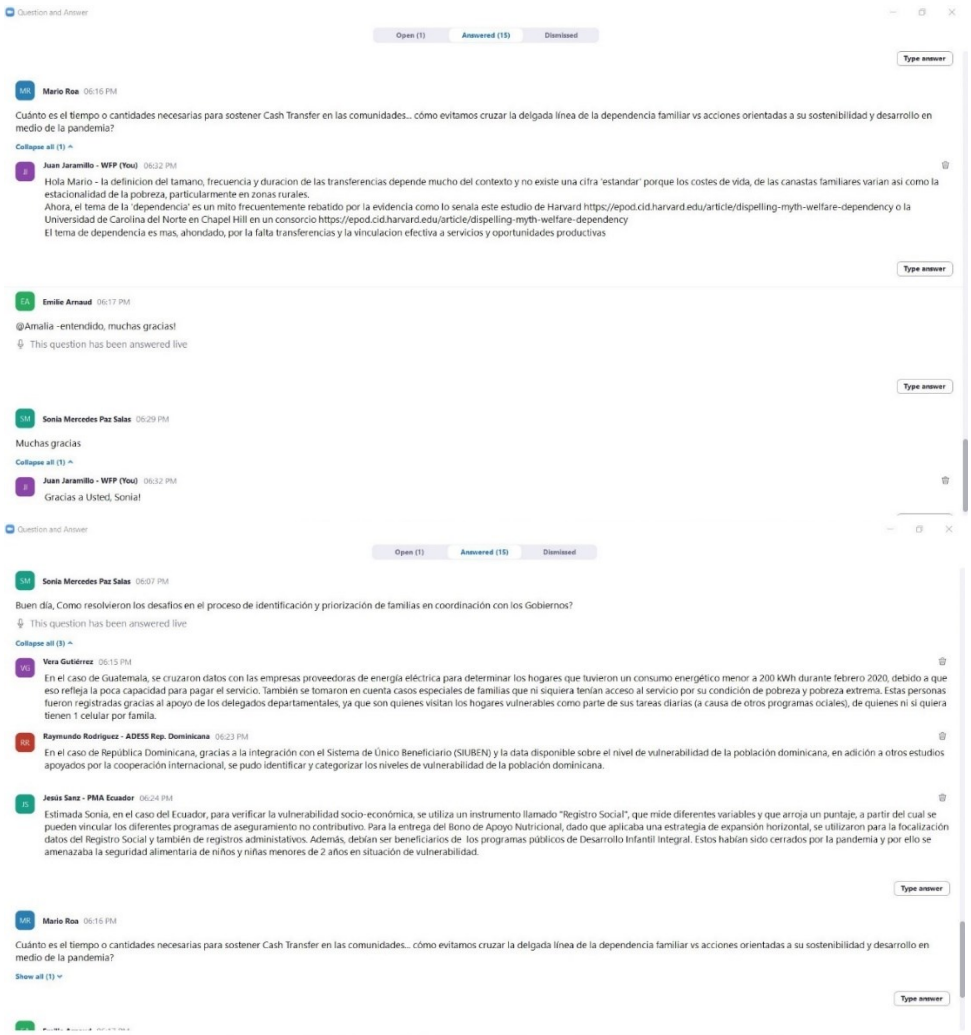
Peru

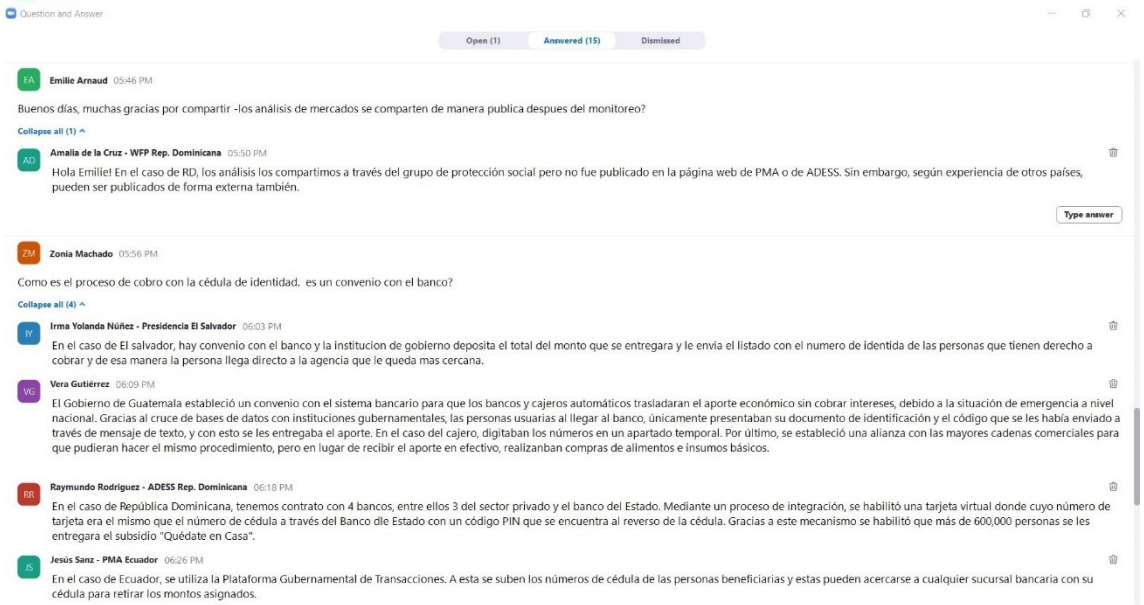
- WB and G2PX 'COVID-19 G2P Cash-Transfer Payments Country Brief' here
- WFP in-depth case study forthcoming

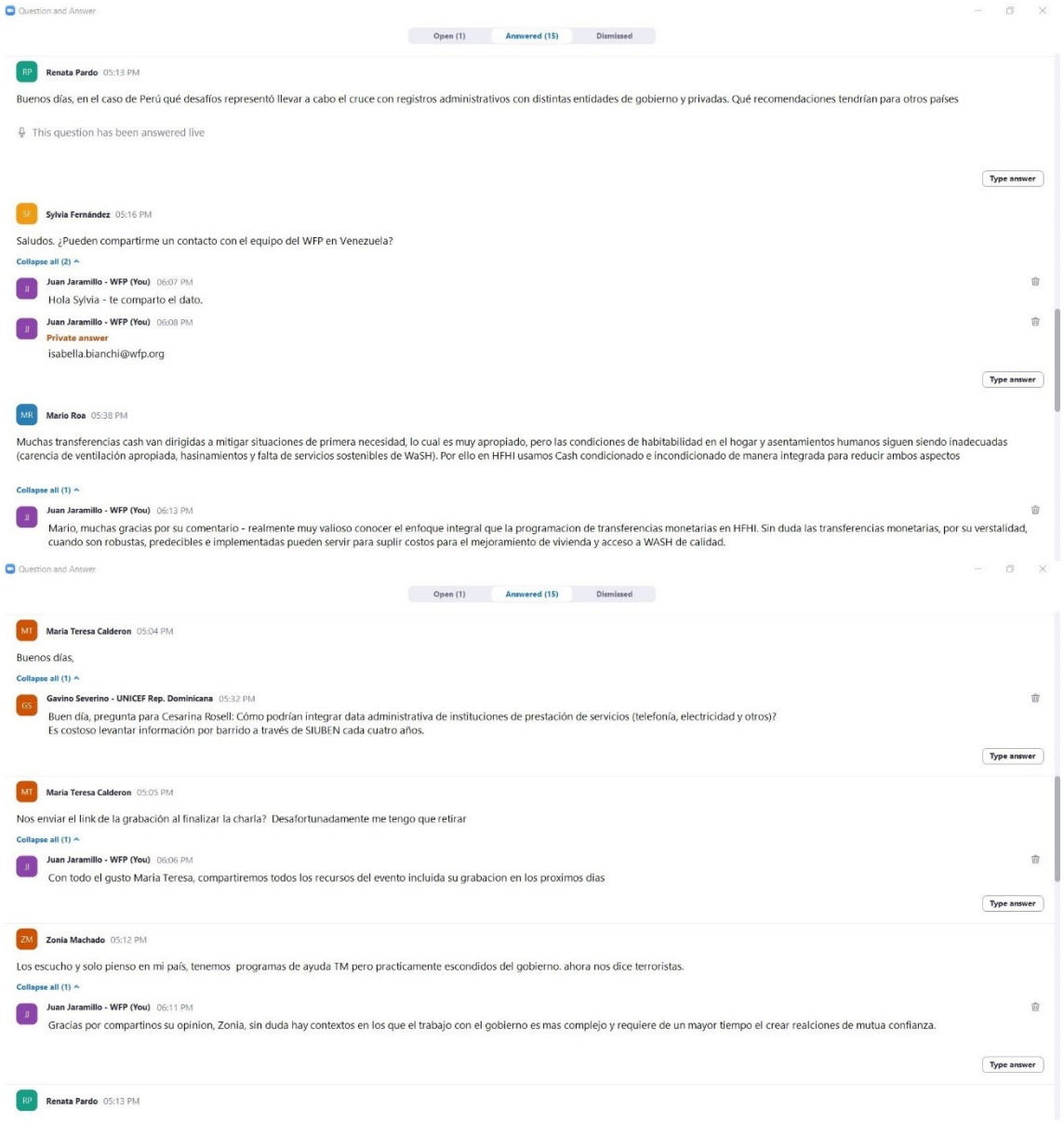
4.3. List of panelists

Tipo actor	Orden aparición	Organización	Panelista	Cargo
Gob	1	Gabinete Rep. Dominicana	Sr. Van Elder Espinal	Director técnico
Gob	2	Presidencia de la República de El Salvador	Irma Yolanda Núñez	Directora de Programas Sociales
Gob	3	Juntos Peru	Sra. Jessica Cecilia Niño de Guzmán Esaine	Directora Ejecutiva del Programa Juntos - Perú
UN	4	PMA Ecuador	Jesus Sanz	Coordinador de emergencia COVID19
ONG int	5	HIAS Ecuador	Roberto Jaramillo	Coordinador de Inclusión Económica de HIAS Ecuador
UN	6	PMA Colombia	Tania Niño	Oficial nacional de Protección Social
UN	7	ACNUR Mexico	Adrienne Alberti	Oficial de programa de transferencias monetarias
ONG int	8	Consorcio CUA Colombia	Anna Stamatiadi	Coordinadora MEAL del Consorcio CUA
Gob	9	Juntos Peru	Sra. Jessica Cecilia Niño de Guzmán Esaine	Directora Ejecutiva del Programa Juntos - Perú
UN	10	ACNUR Ecuador	Daniela Navas Perrone	Oficial de Medios de Vida e Inclusión Económica
Gob	11	Gobierno de Dominica	Mrs. Sylvanie Burton	Permanent Secretary of the Dominica Ministry of Youth Development and Empowerment, Youth at Risk, Gender Affairs, Seniors Security and Dominican with Disabilities
Gob	12	Gabinete Rep. Dominicana	Sra. Cesarina Rosell	Coordinadora General de Tecnología
CR	13	Cruz Roja Holandesa / Sociedades Nacionales	Caroline Delori	Regional Relief Delegate
Gob	14	Presidencia de la República de El Salvador	Irma Yolanda Núñez	Directora de Programas Sociales
Gob	15	ADESS Rep. Dominicana	Sr. Raymundo Rodriguez	Director de Planificación y Desarrollo
UN	16	PMA Rep. Dominicana	Amalia de la Cruz	Asociada Monitoreo, Evaluacion, Aprendizaje y Rendicion de Cuentas
UN	17	UNICEF Rep. Dominicana	Gavino Severino Berroa	Oficial de Políticas Sociales
Gob	18	Ministerio de Desarrollo Social Guatemala - MIDES-	Sra. Vera Gutiérrez	Asesora Especializada III de la Dirección de Comunicación Social del MIDES.
ONG int	19	Visión Mundial Colombia	Carolina Fuquene	Gerente de transferencias monetarias
ONG loc	20	Asociacion Tzuul Taqa Guatemala	Kenay Calel Valdez	Coordinador de proyectos
ONG int	21	CARE Haiti	Antoine Laurore	Food Security and Resilience Advisor
UN	22	PMA Barbados	Sarah Bailey	Head of Programme
UN	**Equipo Organizador Moderador**	OCHA, Panamá	Amaia Lopez	Oficial de Asuntos Humanitarios
ONG int		CashCap- acogida por FIRC, Americas	Maria Jimena Peroni Galli,	Asesora Senior Inter agencial – GTM-R4V y REDLAC
ONG int		CashCap- acogida por PMA, Republica Dominicana	Celia Gonzalez	Asesora Técnica – Grupo Protección Social Adaptativa
UN		Programa Mundial de Alimentos, Panamá	Giulia Baldi	Asesora Regional para América Latina y el Caribe de Protección Social
UN		Programa Mundial de Alimentos, Roma	Juan Gonzalo Jaramillo Mejía	Oficial de Políticas y Programas de Protección Social
		SPACE	Valentina Barca	Especialista en Protección Social
		SPACE,	Rodolfo Beazley	Especialista en Protección Social

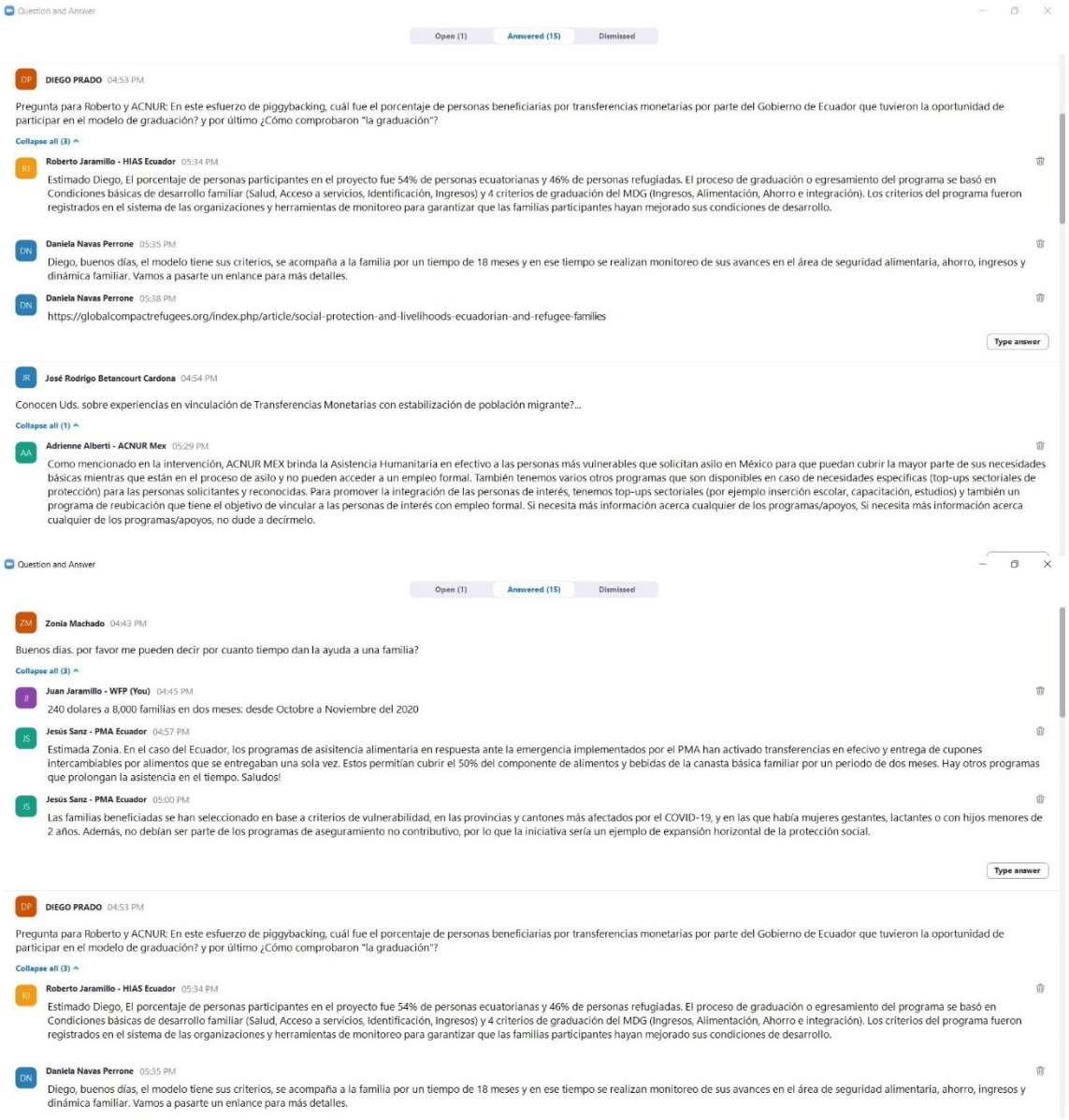
4.4. Questions and Answers






Question and Answer
Open (1)
Answered (15)
Dismissed
Renata Pardo 05:13 PM
Buenos días, en el caso de Perú qué desafíos representó llevar a cabo el cruce con registros administrativos con distintas entidades de gobierno y privadas. Qué recomendaciones tendrían para otros países
This question has been answered live
Type answer
Sylvia Fernández 05:16 PM
Saludos. ¿Pueden compartirme un contacto con el equipo del WFP en Venezuela?
Collapse all (2)
Juan Jaramillo - WFP (You) 06:07 PM
Hola Sylvia - te comparto el dato.
Juan Jaramillo - WFP (You) 06:08 PM
Private answer
isabella.bianchi@wfp.org
Type answer
Mario Roa 05:38 PM
Muchas transferencias cash van dirigidas a mitigar situaciones de primera necesidad, lo cual es muy apropiado, pero las condiciones de habitabilidad en el hogar y asentamientos humanos siguen siendo inadecuadas (carencia de ventilación apropiada, hasinamientos y falta de servicios sostenibles de WaSH). Por ello en HFHI usamos Cash condicionado e incondicionado de manera integrada para reducir ambos aspectos
Collapse all (1)
Juan Jaramillo - WFP (You) 06:13 PM
Mario, muchas gracias por su comentario - realmente muy valioso conocer el enfoque integral que la programacion de transferencias monetarias en HFHI. Sin duda las transferencias monetarias, por su verstalidad, cuando son robustas, predecibles e implementadas pueden servir para suplir costos para el mejoramiento de vivienda y acceso a WASH de calidad.

Question and Answer
Open (1)
Answered (15)
Dismissed
Maria Teresa Calderon 05:04 PM
Buenos días,
Collapse all (1)
Gavino Severino - UNICEF Rep. Dominicana 05:32 PM
Buen día, pregunta para Cesarina Rosell: Cómo podrían integrar data administrativa de instituciones de prestación de servicios (telefonía, electricidad y otros)?
Es costoso levantar información por barrido a través de SIUBEN cada cuatro años.
Type answer
Maria Teresa Calderon 05:05 PM
Nos enviar el link de la grabación al finalizar la charla? Desafortunadamente me tengo que retirar
Collapse all (1)
Juan Jaramillo - WFP (You) 06:06 PM
Con todo el gusto Maria Teresa, compartiremos todos los recursos del evento incluida su grabacion en los proximos dias
Type answer
Zonia Machado 05:12 PM
Los escucho y solo pienso en mi país, tenemos programas de ayuda TM pero practicamente escondidos del gobierno. ahora nos dice terroristas.
Collapse all (1)
Juan Jaramillo - WFP (You) 06:11 PM
Gracias por compartinos su opinion, Zonia, sin duda hay contextos en los que el trabajo con el gobierno es mas complejo y requiere de un mayor tiempo el crear realciones de mutua confianza.
Type answer
Renata Pardo 05:13 PM


Question and Answer
Open (1)
Answered (15)
Dismissed
DIEGO PRADO 04:53 PM
Pregunta para Roberto y ACNUR: En este esfuerzo de piggybacking, cuál fue el porcentaje de personas beneficiarias por transferencias monetarias por parte del Gobierno de Ecuador que tuvieron la oportunidad de participar en el modelo de graduación? y por último ¿Cómo comprobaron "la graduación"?
Collapse all (3)
Roberto Jaramillo - HIAS Ecuador 05:34 PM
Estimado Diego, El porcentaje de personas participantes en el proyecto fue 54% de personas ecuatorianas y 46% de personas refugiadas. El proceso de graduación o egresamiento del programa se basó en Condiciones básicas de desarrollo familiar (Salud, Acceso a servicios, Identificación, Ingresos) y 4 criterios de graduación del MDG (Ingresos, Alimentación, Ahorro e integración). Los criterios del programa fueron registrados en el sistema de las organizaciones y herramientas de monitoreo para garantizar que las familias participantes hayan mejorado sus condiciones de desarrollo.
Daniela Navas Perrone 05:35 PM
Diego, buenos días, el modelo tiene sus criterios, se acompaña a la familia por un tiempo de 18 meses y en ese tiempo se realizan monitoreo de sus avances en el área de seguridad alimentaria, ahorro, ingresos y dinámica familiar. Vamos a pasarte un enlance para más detalles.
Daniela Navas Perrone 05:38 PM
https://globalcompactrefugees.org/index.php/article/social-protection-and-livelihoods-ecuadorian-and-refugee-families
Type answer
José Rodrigo Betancourt Cardona 04:54 PM
Conocen Uds. sobre experiencias en vinculación de Transferencias Monetarias con estabilización de población migrante?...
Collapse all (1)
Adrienne Alberti - ACNUR Mex 05:29 PM
Como mencionado en la intervención, ACNUR MEX brinda la Asistencia Humanitaria en efectivo a las personas más vulnerables que solicitan asilo en México para que puedan cubrir la mayor parte de sus necesidades básicas mientras que están en el proceso de asilo y no pueden acceder a un empleo formal. También tenemos varios otros programas que son disponibles en caso de necesidades específicas (top-ups sectoriales de protección) para las personas solicitantes y reconocidas. Para promover la integración de las personas de interés, tenemos top-ups sectoriales (por ejemplo inserción escolar, capacitación, estudios) y también un programa de reubicación que tiene el objetivo de vincular a las personas de interés con empleo formal. Si necesita más información acerca cualquier de los programas/apoyos, Si necesita más información acerca cualquier de los programas/apoyos, no dude a decírmelo.
Question and Answer
Open (1)
Answered (15)
Dismissed
Zonia Machado 04:43 PM
Buenos dias. por favor me pueden decir por cuanto tiempo dan la ayuda a una familia?
Collapse all (3)
Juan Jaramillo - WFP (You) 04:45 PM
240 dolares a 8,000 familias en dos meses: desde Octobre a Noviembre del 2020
Jesús Sanz - PMA Ecuador 04:57 PM
Estimada Zonia. En el caso del Ecuador, los programas de asisitencia alimentaria en respuesta ante la emergencia implementados por el PMA han activado transferencias en efecivo y entrega de cupones intercambiables por alimentos que se entregaban una sola vez. Estos permitían cubrir el 50% del componente de alimentos y bebidas de la canasta básica familiar por un periodo de dos meses. Hay otros programas que prolongan la asistencia en el tiempo. Saludos!
Jesús Sanz - PMA Ecuador 05:00 PM
Las familias beneficiadas se han seleccionado en base a criterios de vulnerabilidad, en las provincias y cantones más afectados por el COVID-19, y en las que había mujeres gestantes, lactantes o con hijos menores de 2 años. Además, no debían ser parte de los programas de aseguramiento no contributivo, por lo que la iniciativa sería un ejemplo de expansión horizontal de la protección social.
Type answer
DIEGO PRADO 04:53 PM
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