Working paper 610

National cash transfer responses to Covid-19

Operational lessons learned for social protection system-strengthening and future shocks

Christina Lowe, Anna McCord and Rodolfo Beazley
June 2021
Social protection responses to Covid-19 and beyond

Series

Key messages

During the Covid-19 crisis, governments faced substantial implementation challenges in maintaining routine cash transfer provision and delivering additional emergency cash assistance, requiring the modification of existing operational systems and the rapid development of new operational approaches.

Based on the lessons from this crisis, key contextual enablers of shock-responsive social assistance delivery include: the existence of comprehensive ID systems; high levels of financial and digital inclusion; political commitment to mass cash transfer provision as a crisis response; access to adequate financing; and legislation supporting interoperability and data-sharing with other agencies in government and beyond.

Social protection sector-specific enablers include: the existence of established social protection systems with high levels of programme coverage; effective operational systems along the delivery chain; strong institutional capacity; and an agile and pragmatic institutional culture.

Where social protection systems and/or financial and digital infrastructure are underdeveloped, effective shock responses can still be implemented, but the set of possible approaches is constrained, and innovation, flexibility and collaboration are all the more important.

There is an opportunity to build on the operational learning and capacity developed during the Covid-19 crisis, to strengthen implementation systems for both routine provision and future shock responses. This includes filling identified gaps in core delivery systems and improving their adaptive capacity, as well as considering the potential of pandemic innovations to enhance longer-term operational approaches.

ODI

german
cooperation
DEUTSCHE ZUSAMMENARBEIT

Implemented by

gíz Deutsche Gesellschaft
     für Internationale
     Zusammenarbeit (GIZ) GmbH

Acknowledgements

About this publication

About the authors
Christy Lowe
Research Officer at ODI, specialising in social protection within the Equity and Social Policy programme.

Anna McCord
ODI Research Associate with the Equity and Social Policy programme and an independent consultant specialising in social protection design, financing and evaluation.

Rodolfo Beazley
Independent consultant specialising in social protection.

Contents

Display items

Tables

Figures

Acronyms

AFD	*Agence Française de Développement*
ANADEB	Ministry of Grassroots Development (Togo)
ANEEJ	Africa Network for Environment and Economic Justice
ATM	automated teller machine
CBT	community based targeting
CFA	West African franc
DESCO	*Centro de Estudios y de Promoción del Desarrollo*
FETAPH	*Fédération Togolaise des Associations de Personnes Handicapées*
G2P	government-to-person
GRM	grievance redress mechanism
HUP	Household Uplifting Programme (Nigeria)
ID	identification
ILO	International Labour Organization
IPC-IG	International Policy Centre for Inclusive Growth
KII	key informant interview
KYC	know your customer
LKR	Sri Lankan rupee (Rs.)
MIDIS	*Ministerio de Desarrollo e Inclusión Social*
MTPE	Ministry of Labour and Promotion of Employment
MNO	mobile network operator
NASSCO	National Social Safety Nets Coordinating Office (Nigeria)
NASSP	National Social Safety Nets Project (Nigeria)
NCTO	National Cash Transfer Office (Nigeria)
NGN	Nigerian naira
NGO	non-governmental organisation
NSR	National Social Register (Nigeria)
PMT	proxy means test
RCT	randomised control trial
RRR	Rapid Response Register (Nigeria)
SMS	short message service (text message)

SPACE   Social Protection Approaches to COVID-19: Expert advice helpline

SRSP   shock responsive social protection

UNDP   United Nations Development Programme

UNICEF   United Nations International Children's Fund

USSD   unstructured supplementary service data

WIEGO   Women in the Informal Economy Globalizing and Organizing

Executive summary

This paper analyses the operational approaches that governments took to maintain existing cash transfer provision and to deliver additional shock-responsive cash assistance during the Covid-19 pandemic in the year 2020. It combines a rapid literature review with a series of case studies on government cash transfer provision during the crisis in four low- and middle-income countries: Nigeria, Peru, Sri Lanka and Togo.

Before the Covid-19 pandemic, many countries were engaged in the process of strengthening core social protection systems and exploring ways to develop their shock-responsive capacity. However, in many low- and middle-income countries, these system-building efforts were still nascent and even in countries with more developed systems, maintaining and extending provision in response to a shock as vast, sudden and severe as Covid-19 represented a significant challenge due to the need to simultaneously maintain or increase provision for routine recipients, while also temporarily expanding to new segments of the population, particularly urban populations and informal workers. Finding this 'surge capacity' while also accommodating lockdown, mobility and social distancing restrictions created substantial implementation challenges across all phases of delivery, requiring modification of existing systems and the rapid development of new operational approaches and capacity.

In relation to maintaining routine government cash transfer programming, this paper finds that the main adjustments related to reducing in-person activities. This included relying more heavily on phone-based or digital provision, adapting payment schedules and modalities, simplifying contact-intensive enrolment procedures or relaxing programme conditionalities. Where in-person service provision continued, appropriate hygiene and safety measures such as distancing protocols were introduced, although these were often challenging to enforce.

The paper also explores the operational approaches that governments took to implement additional shock-responsive cash assistance, along four critical stages of the delivery chain:

- identification and registration of potential beneficiaries
- eligibility determination and enrolment
- payments
- accountability and monitoring

For *identification and registration*, the approaches varied greatly, but in all cases included some form of on-demand registration due to gaps in existing databases. This on-demand approach was typically combined with administrator-driven identification, including using existing social protection databases to a greater extent than in past shocks, and drawing on wider government and even non-governmental databases. For *assessing eligible beneficiaries* among the identified caseload, governments generally adopted simplified criteria and verification approaches. This

included making greater use of pre-Covid-19 socioeconomic assessments, cross-checking potential beneficiaries against criteria in wider government databases, permitting high levels of discretionary decision-making at local level, and simplifying conventional eligibility determination procedures such as the proxy means text (PMT) and community-based targeting (CBT) to expedite implementation and reduce the need for community gathering. For *payments*, a wide range of approaches were adopted, which included both direct delivery of cash where financial and digital inclusion was low, and greater reliance on digital payments, including widespread mobile-based payments where they had not previously been used for social assistance programmes. *Accountability* was particularly important given the need for rapid payment and the relaxation of verification procedures. A range of accountability mechanisms were introduced, including the use of both in-person and digital grievance mechanisms and the commissioning of monitoring and audit functions from independent private, civil society, non-governmental and academic organisations.

The paper considers the impact of these delivery decisions on the effectiveness of crisis assistance implementation, in terms of timeliness, coverage, transfer adequacy and appropriateness of mechanisms for the pandemic context. Across the case studies, there was variation in these different dimensions of effectiveness. Some programmes were able to provide transfers within days of the lockdown being announced, while others were still not operational eight months after their announcement. Coverage ranged from only a few percent of the population to the vast majority of affected households. In terms of transfer value, some programmes aspired to provide substantial income replacement during periods of lockdown while others were seemingly of a more symbolic nature to convey solidarity between government and affected populations. In some cases, concerns about Covid-19 transmission resulted in entirely digital provision, whereas in other cases, the quality of digital and financial infrastructure and characteristics of existing systems discouraged the adoption of remote approaches.

Above all, the paper's focus is on identifying the enablers (or, in their absence, the constraints) of effective operational delivery of shock-responsive social assistance.

The study finds that successful operationalisation of shock-responsive social assistance is shaped by several factors outside the social protection sphere. Contextual enablers include: the existence of a comprehensive ID system; widespread, inclusive access to mobile devices, phone and internet networks and financial services; and digital government capacity. Implementation is also directly linked to wider government support for shock-responsive social assistance initiatives, in terms of political and financial backing, as well as the provision of legal frameworks facilitating relevant collaboration with other government agencies and beyond.

With respect to the social protection sector itself, our study finds that effective shock response is generally, although not necessarily, contingent on the quality of the social protection system already in place. The existence of large-scale information systems, notably beneficiary and social registries, is a major asset, particularly if the data they contain has been updated recently and

includes contact and bank account information, and if the registries are interoperable with other government agencies, with appropriate data protection arrangements in place. Having a range of effective payment mechanisms, robust systems for grievance redress and third-party monitoring, and an adequately resourced and high-capacity social protection workforce is also immensely valuable. The stronger these systems are, the more options a government has in times of crisis. However, ex-ante system-strengthening measures are not a substitute for a context-specific ex-post response that is both agile and pragmatic. Overall, our case studies indicated that underdeveloped systems and gaps in preparedness measures do not necessarily prevent an effective shock response. But they do constrain the set of possible options and render innovation, flexibility and collaboration with other high-capacity partners all the more important.

Looking forward, there is an opportunity to build on the learning and approaches developed during the Covid-19 crisis, to address the social protection system deficiencies revealed by the pandemic and to enable better responses to future shocks. In relation to delivery system-strengthening, there are promising indications of countries looking to embed the operational capacity developed during the crisis into their permanent systems, for both future shock response and routine provision. A few initiatives to make longer-term improvements to core operational systems are already underway, notably in relation to social protection information systems and interoperability frameworks. There is also emerging evidence that operational shifts during the crisis response may be accelerating the adoption of new approaches for longer-term programming, including a greater reliance on digital approaches for identifying and paying beneficiaries. While these innovations hold potential to enhance certain aspects of delivery, their overall ability to improve upon existing approaches will inevitably depend on the specific context and manner in which they are implemented, including consideration of appropriate complementary measures for digitally excluded groups.

Several recent publications offer detailed guidance on the development of effective and adaptive social protection systems with enhanced potential for shock-responsiveness. This paper adds recommendations aimed at supporting governments when confronted with covariate shocks, based on the insights from our review of delivery systems 'in action'. These relate directly to the set of cross-cutting enablers noted above, including: drawing on digital and financial services infrastructure and capacity to the extent that it meets the needs of the crisis and affected population; identifying 'next-best' functional ID systems, where effective foundational ID systems are not available; and advocating for high-level political support, funding and modified legal protocols to facilitate the shock response. Social protection sector-specific recommendations include considering which combinations of approaches are needed for each delivery phase to achieve rapid, inclusive delivery of assistance at the scale required, and identifying the steps needed to reach often-excluded groups. In so doing, making use of existing systems is valuable, wherever relevant, but this needs to be complemented by the adoption of a flexible, pragmatic and sequenced approach, giving officials the mandate to innovate and iterate as needed, and making use of real-time feedback and monitoring throughout the crisis response.

1   Introduction

Before the Covid-19 pandemic, many countries were engaged in the process of strengthening core social protection systems and exploring ways to develop their shock-responsive capacity. However, in various low- and middle-income countries, these system-building efforts were still nascent. Even in countries with more developed systems, maintaining and extending provision in response to a shock as vast, sudden and severe as Covid-19 represented a monumental challenge. This was largely due to the need to simultaneously maintain or increase provision for routine recipients, while also temporarily expanding to new segments of the population, particularly urban populations and informal workers, whose incomes were severely limited by large-scale public health restrictions (such as lockdown and containment measures) and the resulting economic downturn. At the same time, governments also had to adapt their service delivery to navigate exceptional mobility restrictions and social distancing measures. Accommodating these adjustments while finding the 'surge capacity' to quickly meet expanded need created substantial implementation challenges across all phases of delivery, requiring existing systems to be modified and the rapid development of new operational procedures and capacity.

This paper considers how existing operational approaches were adapted and new ones developed to maintain existing social assistance provision through the Covid-19 period, and to deliver additional shock-responsive assistance. We focus on cash transfer programming, which was the most common modality used in the crisis response (Gentilini et al., 2020) and is a dominant component of routine social assistance (World Bank, 2018). The paper explores case studies on national (government-led) cash transfer programmes in four low- and middle-income countries: Nigeria, Peru, Sri Lanka and Togo. These countries were selected to ensure a diversity of contexts, using criteria of income status, geographical region and existing social protection system maturity, as well as operational innovation in their responses to Covid-19. Given the short time that had elapsed since the start of the crisis at the time of writing (December 2020), the country-level literature on the Covid-19 response was necessarily limited so the case studies draw largely on unpublished programme material and 25 key informants, including government actors responsible for programme design and implementation, civil society actors working in the sector, and development partners supporting cash transfer programming in each country. A full overview of key informant interviews (KIIs) is provided in Table A1 in Appendix 1.

The paper also draws on a review of the nascent global literature on social protection responses to the Covid-19 crisis, as well as the wider pre-Covid-19 evidence base on shock-responsive and adaptive social protection. This evidence base has grown rapidly over the last decade, after the initial literature on the topic emerged out of the last global crisis – the 2007/2008 food, fuel and financial crisis. During that crisis, effective expansion of social protection was hindered by three major factors: (i) the lack of viable delivery systems for mass provision; (ii) the absence of targeting mechanisms to enable the new poor to be identified; and (iii) the lack of social protection systems on which to base extended provision (McCord, 2013). Subsequent research

on a wide range of shocks expanded upon these factors, highlighting the following key enablers and constraints of effective implementation: the pre-crisis maturity, capacity and coverage of social protection systems, programmes and delivery mechanisms (throughout the delivery chain, but with a particular emphasis on targeting and payment mechanisms, and social protection information systems); the extent of preparedness and shock-responsiveness built into these components; the level of political support and availability of financing for the crisis response; the strength of coordination with other stakeholders within government and beyond; the existence of comprehensive, unique identification (ID) systems; and the coverage and accessibility of banking or mobile financial services for e-payments (e.g. Bastagli, 2014; OPM, 2017; O'Brien et al., 2018; Barca and Beazley, 2019; Beazley et al., 2019; SPaN, 2019). Our paper explores the factors that proved most critical in enabling effective responses to Covid-19 in light of this earlier evidence base.

The paper is structured in four chapters, including this introduction. Chapter 2 explores the operational approaches used to maintain pre-existing routine social assistance provision during the crisis, and then analyses the operational implementation of new emergency assistance across four critical stages of the delivery chain (Lindert et al., 2020): identification and registration of potential beneficiaries; eligibility determination and enrolment; transfer provision or payment; and accountability and monitoring. Chapter 3 analyses the effectiveness of the operational approaches used in our case studies, taking into consideration timeliness, coverage, adequacy of support and appropriateness of mechanisms for the pandemic context. Finally, Chapter 4 considers the implications of the operational approaches to the crisis for future social protection systems development, and concludes with lessons and recommendations for supporting adaptive delivery systems for future shock responses.

The period under review is from March 2020, when the Covid-19 pandemic was formally declared and most governments began to introduce public health measures restricting economic and social activities, to November 2020. The terms 'the crisis' and 'the pandemic' are used to refer to this period. The term 'lockdown' is used to refer to the periods during which governments imposed severe restrictions on social and economic activity in an attempt to limit the spread of the virus.

2   Covid-19 social protection implementation in practice

This section examines how routine social protection provision was maintained during the pandemic, before looking at how additional assistance in response to the crisis was implemented.

2.1   Maintaining routine provision through the crisis

Ensuring resilience of the system to a crisis is a crucial dimension of shock-responsive social protection, so that support is not disrupted when people need it most. During the Covid-19 crisis, transmission risks and associated restrictions on movement, community gathering and bank, business and office operations necessitated various operational adjustments to maintain routine provision (Beazley et al., 2020; CaLP, 2020; HelpAge, 2020).

Worldwide, the International Policy Centre for Inclusive Growth (IPC-IG) database of social protection responses to Covid-19 has documented over 100 adjustments to routine social assistance programmes to date (IPC-IG, 2021), although the true number is likely to greatly exceed this since monitoring efforts have focused more on documenting new programming than tracking every tweak to routine provision. Below we discuss some of the key approaches taken to maintain routine provision through the crisis, illustrated by examples and analysis from the largest routine cash transfer programmes in our case study countries, namely:

1. Nigeria: cash transfer component of the National Social Safety Nets Project (NASSP)
2. Peru: *Juntos* conditional cash transfer programme
3. Sri Lanka: cash transfer component of the *Samurdhi* programme
4. Togo: cash transfer component of the Safety Nets and Basic Services project

The salient characteristics of these programmes are briefly described in Table 1.

Table 1 Routine cash transfer programmes under review in each case study country

	Nigeria's NASSP cash transfer programme	Peru's *Juntos* conditional cash transfer programme	Sri Lanka's *Samurdhi* programme (cash component)	Togo's cash transfer programme under Safety Nets and Basic Services Project
Description	Conditional cash transfer scheme – also known as the Household Uplifting Programme (HUP) – launched as part of the World Bank-supported National Social Safety Nets Project (NASSP) in 2016	Conditional cash transfer scheme – '*Programa Nacional de Apoyo Directo a los más Pobres Juntos*' (National Programme to Support the Poorest Together) – launched in 2005	Cash transfer scheme forming part of the government's largest social safety net programme – launched in 1994	Unconditional cash transfer component of World Bank-supported Safety Nets and Basic Services Project, managed by Togo's Ministry of Grassroots Development (ANADEB) – launched in 2019
Objective	To respond to deficiencies in capacity and lack of investment in human capital of poor and vulnerable households	To help alleviate poverty and promote the human capital of households living in poverty and extreme poverty	To ensure minimum living standards by improving purchasing power	To provide poor communities and households with greater access to basic socioeconomic infrastructure and social safety nets
Pre-Covid-19 coverage	400,000 households (1% of total households, total population 201m)	740,000 households (8.5% of total households, total population 33m)	1.4m households (22% of total households, total population 22m)	52,000 households in 2019 (4% of total households, total population 8m)
Eligibility criteria	Poor and vulnerable households identified through a combination of initial geographic and community-based targeting followed by proxy means test (PMT) verification using socioeconomic data from the National Social Register. Households below 6th decile eligible for cash transfer	Poor households in districts with poverty rates over 40% and living below the poverty threshold based on PMT analysis of socioeconomic data in the Household Targeting System's National Social Register (*Padrón General de Hogares in the Sistema de Focalización de Hogares*, or "SISFOH")	Low income households identified through PMT/self-reported income	Poor households in targeted villages identified through census data and PMT ranking, followed by community validation

Table 1   Routine cash transfer programmes under review in each case study country (continued)

Transfer value	Base transfer of NGN 5,000 per month ($13) plus NGN 5,000 top-up conditional on fulfilling health, education, nutrition and environment co-responsibilities	S/100 per month ($27.5), conditional on fulfilment of health and education co-responsibilities	LKR 1,500 per month ($8) for a family of 2 members or less, LKR 2,500 ($13) for 3 members, and LKR 3,500 ($18) for 4 or more members	CFA 5,000 per month ($9)
Payment modality	Collection of cash payments from government-contracted network of payment service providers	Paid into *Banco de la Nación* (state bank) accounts, plus cash home delivery for small minority	Paid into *Samurdhi* bank accounts and accessed over the counter	Cash-in-hand payment for last-mile distribution
Payment frequency	Every other month	Every other month	Monthly	Quarterly
Source	NCTO (2020); World Bank (2020a)	Stampini (2018); Government of Peru (2019); Programa Juntos (2019)	Department of the Commissioner General of *Samurdhi* (n.d.); Sebastian et al. (2018); World Bank (2018)	Boko (2020); Government of Togo (2020a); World Bank (2020b)

2.1.1   Approaches used to maintain routine programming

Heightened hygiene and safety measures

Where accessing regular payments required physical interaction, a range of health and safety measures were introduced. In our case studies, these included the introduction of social distancing protocols, protective equipment, sanitising measures and sensitisation around Covid-19 risks and behaviour, at social protection offices, registration and payment points.

Adjusted payment schedules

To reduce the frequency of contact at collection points and in some cases to enable households to smooth consumption in the challenging crisis period, payment schedules were phased, windows for collecting cash were extended, and the 'bundling' or merging of payments was introduced. For example, in Peru, *Juntos* beneficiaries received the combined April and June payments in advance, to help absorb the impacts of the lockdown. August and October payments were also bundled and paid in advance, and the December payment was brought forward and paid in October. In Nigeria's NASSP, payments had already been delayed before the pandemic so the decision was taken to pay four months' worth of transfers at once for January to April (although the high degree of variation in state-level NASSP implementation saw some states remaining many months in arrears).

Shift in service delivery modality

In addition to revised payment schedules, some routine programmes looked to change the modality of payments in response to the crisis. In Togo, the government is working with the World Bank to shift from in-person cash distribution to mobile money payments in the (rural-focused) cash transfer scheme. This decision was made based on the precedent set by the (urban-focused) Covid-19 *Novissi* scheme (described in Section 2.2), which relied on mobile money as the sole payment modality. For the routine scheme, the introduction of mobile money payments will involve subsidising the purchase of mobile phones for beneficiaries, given the lower levels of mobile penetration in rural areas. In Sri Lanka, routine *Samurdhi* benefits continued to be paid through the usual bank transfers; however, since bank closures prevented beneficiaries from accessing these payments during the nationwide lockdown, additional crisis assistance was also delivered to *Samurdhi* beneficiaries through home delivery or at local collection points (as described further in Section 2.2). In Peru, *Juntos* beneficiaries continued to receive payment through their usual modality (bank transfers for most, with a small minority receiving home-delivered cash), but the in-person support visits that beneficiaries usually received as part of the programme was replaced with remote support via phone and text messages.

Relaxation of conditions for receiving payments

Since lockdown and mobility restrictions hindered fulfilment of routine programme requirements, conditions for beneficiaries to receive payments were sometimes temporarily waived. For example, in Peru's *Juntos* programme, health and education-related co-responsibilities were temporarily suspended, given school and health service closures. Consequently, all *Juntos*

beneficiaries received both the base payment and the co-responsibility-related top-up payment. This adaptation reduced the logistical burden of monitoring conditionalities during the crisis, but did require a budget increase, since the full top-up is not usually attained by the whole beneficiary caseload.

Simplification of contact-intensive enrolment procedures

For countries that continued registration and enrolment into routine programmes during the crisis, standard operating procedures often had to be modified to account for in-person transmission risks. In our case studies, a prominent example was the modification of procedures to register households in Nigeria's National Social Register and to determine their eligibility for the NASSP cash transfer scheme. This would normally involve extensive community-based targeting activities, but instead community leaders selected just five representatives (one from each categorical group that would normally participate in focus groups) to develop inclusion criteria and identify beneficiaries.

2.1.2   Enablers and bottlenecks for maintaining core provision

The **contextual environment** played a key role in determining viable adjustments for routine provision, particularly in relation to payment modalities, where low beneficiary access to banking and mobile phone services was a critical constraint. In Nigeria, there was no choice but to continue making NASSP payments manually because beneficiaries' bank and mobile money access was poor. Similarly, in Togo, shifting to mobile money for rural beneficiaries was not possible as an immediate crisis response due to low mobile phone ownership but was planned for the medium-term response, by giving beneficiaries subsidised access to phones to receive transfers. In Peru, it was not viable to change payment modality for the small proportion of *Juntos* beneficiaries already receiving payment in cash due to their remote location and poor bank access, but, for most *Juntos* beneficiaries, it was feasible to shift from an in-person to a phone-based mechanism for the monitoring/support aspect of the programme, given high phone ownership among recipients.

Within this broader context, three aspects of system design and implementation appeared to particularly influence the resilience of routine provision, as follows.

The ability of implementing agencies to maintain their administration capacity amid crisis disruption was an important factor. In Peru the resilience of the *Juntos* programme was linked to staff's ability to adopt remote working and continue managing the programme from home, an approach facilitated by the programme's IT infrastructure. In Sri Lanka, it was the ability of local government to accommodate an increased workload that enabled substitute provision to be delivered to routine (and new) beneficiaries during the crisis, as discussed further in Section 2.2.

The extent to which programmes could accommodate operational flexibility also mattered, including whether managers had the mandate to adapt processes to crisis realities (changing payment schedules, modalities, simplifying programme procedures). This was in part shaped by the existence

of viable alternative approaches from a technical perspective, but also by the ability of programme managers and their ministerial counterparts to negotiate new legislation or protocols (as in Peru), which reflected the technical capacity of implementing institutions, and the institutional mindset.

Prior experience of innovation in operational processes proved useful. Although programme adjustments at this scale had not been attempted in Peru's *Juntos* programme, there was institutional experience from smaller-scale shocks, for example advancing payments due to 2019 flooding and waiving co-responsibilities for beneficiaries facing extreme weather events. These precedents were drawn on to inform Covid-19 programme revisions.

2.2 Delivering additional emergency assistance

As well as maintaining routine programming, governments worldwide faced an urgent need to deliver additional assistance to mitigate Covid-19's grave socioeconomic impacts. This section explores the operational features of this new emergency provision, looking across the four delivery phases (Lindert et al., 2020): (i) identification and registration; (ii) eligibility determination and enrolment; (iii) payment provision; and (iv) accountability and monitoring. For each phase, we analyse the range of operational approaches used, focusing primarily on our case studies but situating these within the wider literature on global experiences. We also explore our case study lessons on the enablers and bottlenecks to successfully implementing that aspect of delivery.

Our case studies focus on the largest emergency cash assistance measures announced by the national government in the initial months of the crisis:

- Nigeria: the accelerated expansion of cash transfers under the existing National Social Safety Nets Project (NASSP) and the planned temporary Covid-19 Urban Cash Transfer programme based on the new Rapid Response Register.
- Peru: *Bono 'Yo Me Quedo en Casa'; Bono Independiente; Bono Rural;* and *Bono Familiar Universal.*
- Sri Lanka: the provision of emergency cash transfers of 5,000 Sri Lankan rupees (LKR) during the initial nationwide lockdown.
- Togo: the urban-focused *Novissi* emergency cash transfer programme (and where relevant the smaller-scale temporary expansion of the rural cash component of the Safety Nets and Basic Services Project[1]).

The salient characteristics of these programmes are briefly described in Table 2.

---

1   This initiative was announced several months into the crisis, affecting 38,000 households. It was separate from the *Novissi* scheme, so was not part of our primary case study; however, we mention it where relevant to acknowledge the distinct, smaller-scale approach to rural expansion, alongside the prominent new, urban-focused *Novissi* scheme.

Table 2 Covid-19 cash transfer programmes under review in each case study country

	Nigeria **Accelerated expansion of NASSP cash transfers**	Nigeria **Covid-19 Urban Cash Transfer Scheme**	Sri Lanka **Covid-19 Rs. 5000 Emergency Cash Transfers**	Togo *Novissi*
Objective	To accelerate the planned expansion of the national, poverty-targeted CCT in response to increased needs due to Covid-19	To reach the transient poor identified as impacted by the Covid-19 pandemic in urban and peri-urban locations	To support low-income households and those facing hardships due to Covid-19 lockdowns	To support informal workers whose incomes were disrupted or negatively impacted by Covid-19 lockdowns
Launch date	Announced 29 March 2020; first payments end of April 2020	Referenced in April 2020; officially launched January 2021	Announced 30 March 2020; first payments April 2020	Announced 8 April, 2020; first payments 9 April 2020
Coverage	Original (pre-Covid-19) expansion target was 1.4m households by end of 2020. Following Covid-19 this was increased to 2m households (5% of total households) by end of 2020. As of Nov 2020, 1.2m households were registered as beneficiaries (3% of total households)	1m households (2.4% of total households), with potential to increase to 3m households (7% of total households)	5.4m households (officially 95% of total households)	● 580,000 beneficiaries in target areas (15% of total adult population) ● Of these, 97% received transfers during the initial lockdowns in Grand Lomé and Tchaoudjo and 3% in Soudou in a subsequent lockdown

Table 2 Covid-19 cash transfer programmes under review in each case study country (continued)

Registration process	New data collection for the National Social Register (NSR), as in the routine programme	• Rapid Response Register to be developed using • SMS-based registration process – invitations to register sent by SMS to all residents in priority geographical areas selected through satellite imagery-based poverty mapping • Additional potential beneficiaries may also be identified via NGO/civil society databases, categorical targeting	• Automatic registration for those in receipt of *Samurdhi* and Social Cash Transfers (Senior Citizens', Chronic Kidney Disease and Disability Allowance programmes), plus those on *Samurdhi* and Social Cash Transfer waiting lists, those registered as *Samurdhi* applicants who had not yet been processed, and those receiving Farmers' and Fisherman's Insurance payments • Local demand-driven registration for specified groups (including daily wage-earners, pre-school teachers and bus drivers)	Application using SMS registration platform
Eligibility criteria	Being below the 6th decile in NSR, as in the routine programme	Being identified in the Rapid Response Register as belonging to a targeted household (the urban poor and destitute; those directly affected by Covid-19 and needing financial and material support; those with members who are self-employed; low/daily-wage workers)	• Meeting the poverty/categorical criteria of the above programmes or being registered applicants • Belonging to certain occupations, mostly in the informal sector – 17 occupations were reportedly announced	Being a Togolese national resident in the geographic areas subject to lockdown; having a valid voter ID card, and being listed on voter ID database as working in an informal sector occupation identified as at risk of income loss due to Covid-19 labour market disruption

Table 2 Covid-19 cash transfer programmes under review in each case study country (continued)

Eligibility determination mechanism	Geographical and community-based targeting (CBT) to identify poorest households, followed by PMT verification, as in the routine programme but with modified CBT	PMT field validation	● Being in the relevant beneficiary/waiting/applicant list for the programmes above ● Being determined by local committee to be eligible by either meeting the eligibility criteria above or being on a relevant association list (e.g. for certain informal worker occupations)	Automatic cross-checking of application with location and occupation in voter ID database
Transfer value	Base transfer of NGN 5,000 per month ($13) plus NGN 5,000 top-up conditional on fulfilling health, education, nutrition and environment co-responsibilities, as in routine programme	NGN 5,000 per month ($13)	LKR 5,000 ($26)	CFA 12,250 per month ($22.5) for women, CFA 10,500 per month ($19) for men
Payment modality	Cash-in-hand from government-contracted network of payment service providers, as in routine programme	Paid into bank accounts (households without bank accounts to be supported to open bank accounts or paid via mobile money)	Cash-in-hand via home delivery or from local collection points	Mobile money
Payment frequency and duration	Every other month, as in routine programme	Monthly or bimonthly; programme duration will be at least 6 months and may reach up to 12 months	Two payments during nationwide lockdown (April and May) and further payments in selected areas affected by subsequent localised lockdowns	Fortnightly payments in target areas for lockdown duration – April to June in Grand Lomé; May and June in Tchaoudjo; and August and September in Soudou

Table 2 Covid-19 cash transfer programmes under review in each case study country (continued)

Source	Key informant interviews (KIIs); Government of Nigeria (2020)	KIIs; Government of Nigeria (2020)	KIIs; News.lk (2020)	KIIs; Government of Togo (2020b; c); Boko et al. (forthcoming)
	Peru ***Bono 'Yo Me Quedo en Casa' ('I stay at home')***	**Peru** ***Bono Independiente***	**Peru** ***Bono Rural***	**Peru** ***Bono Familiar Universal* (inclusive of previous three *Bono* schemes)**
Objective	To support poor urban households with high health vulnerability during the pandemic	To support vulnerable households with self-employed workers who did not benefit from the previous emergency programme	To support poor rural households who had not benefited from earlier emergency measures	To support households in poverty or extreme poverty or in a vulnerable situation during the pandemic
Launch date	Announced 16 March; payment initiated on 23 March	Announced 27 March; payment initiated 10 April	Announced 9 April 2020; payment initiated May	● First payment announced 5 May, initiated in late May (or August for households not in social registry) ● Second payment announced 20 August, initiated in October
Coverage	2.73m households (31% of total households)	773,000 households (9% of total households)	980,000 households (11% of total households)	8.6m household units, out of the 12.6m listed in the newly created National Household Registry (68.4% of total population)

Table 2 Covid-19 cash transfer programmes under review in each case study country (continued)

Registration process	Identification through existing social registry	Identification through existing social registry	Identification through existing social registry	● Identification through existing social registry for beneficiaries of earlier *Bono* schemes and *Juntos*, *Contigo,* and *Pensión 65* programmes ● Online on-demand registration process for households missing from the social registry to join the new National Household Register – platform live from 20 May to 3 June
Eligibility criteria	Being listed in the social registry as poor and living in urban areas with high health vulnerability; not receiving other payments from the state	Being listed in the social registry as non-poor and living in the areas with high health vulnerability; not having received the earlier *Bono 'Yo Me Quedo en Casa'* scheme; not being a beneficiary of the *Juntos, Pensión 65* or *Contigo* social safety net programmes; not having a household member working in formal employment or working as a mayor, regional governor or congressperson; not having household income above S/1,200 ($330)	Being listed in the social registry as poor; not having received earlier *Bono 'Yo Me Quedo en Casa'* or *Bono Independiente* payments; not being a beneficiary of the *Juntos, Pensión 65* or *Contigo* social safety net programmes; not having a household member working in formal employment or working as a mayor, regional governor or congressperson	Not having a household member working in formal employment (except as an intern) or working as a mayor, regional governor or congressperson; not having a monthly income above S/3,000 ($824)

Table 2 Covid-19 cash transfer programmes under review in each case study country (continued)

Eligibility determination mechanism	Social registry socioeconomic ranking based on information originally collected via PMT	Social registry data, cross-checked with the databases for: public and private sector payrolls; public sector contracts; the earlier emergency *Bono* scheme; and the tax (SUNAT) and bank, insurance and pension regulator (SBS)		On-demand registration process for the National Household Registry verified by cross-checking with the databases for private and public sector payrolls, tax (SUNAT) and bank, insurance and pension regulator (SBS)
Payment modality	Bank transfers for those with *Banco de la Nación* accounts; over-the-counter payments for those without accounts	Bank transfers for those with *Banco de la Nación* accounts; *Banco de la Nación* mobile 'e-wallets' for those without full accounts; over-the-counter payments for those unable to access other modalities	Bank transfers; *Banco de la Nación* mobile 'e-wallets'; Cash-in-hand delivery for those in remote areas unable to access other modalities	Bank transfers into accounts with *Banco de la Nación* and various private banks; mobile 'e-wallets' with *Banco de la Nación* or Interbank; over-the-counter payments; Cash-in-hand delivery for those in remote areas
Payment value	S/380 ($104.5)	S/760 ($209)	S/760 ($209)	S/760 ($209)
Payment frequency and duration	First payment from late March; second from late April. Beneficiaries then integrated into the *Bono Familiar Universal* for further support	One payment in April. Beneficiaries then integrated into the *Bono Familiar Universal* for further support	One payment in May. Beneficiaries then integrated into the *Bono Familiar Universal* for further support	Two payments, the first starting from late May/June (or August for households applying through on-demand registration) and the second from October
Source	KIIs; programme documentation	KIIs; programme documentation	KIIs; programme documentation	KIIs; programme documentation

2.2.1   Identification and registration

Approaches used

Faced with unusual containment and distancing measures, governments adopted wide-ranging and creative approaches to identify and register households for their Covid-19 emergency assistance schemes[2]. While some schemes operated nationwide, others were limited to specific priority areas, meaning the first step in our case studies and beyond was often some form of geographical targeting. Prioritised areas tended to be those affected by the strictest lockdown measures (as in Togo's *Novissi* scheme) or those perceived to be worst hit by the economic impacts of the pandemic (as in Peru's first, urban-focused *Bono 'Yo Me Quedo en Casa'*). In other cases, high-poverty areas were prioritised using census data or satellite-imagery-based poverty mapping (as in Nigeria's Rapid Response Register[3]). Once target areas were identified, governments used various means to identify priority households; below we discuss the main strategies, as well as the successes and challenges associated with that approach.

Using existing social protection databases

Far more than previous crises, many governments' Covid-19 responses made use of their existing social protection information systems (notably their social or beneficiary registries[4]) (Beazley, 2020). This was driven by multiple factors, including the need for a swift response, the exceptionally large size and spread of the affected population and the contagion risk of physically collecting new data. The global trend was clearly reflected in our case studies, where registries were used to identify and provide additional support both to routine beneficiaries ('vertical expansion') and to listed households who were not part of the routine beneficiary caseload ('horizontal expansion'). For example, in Sri Lanka, the emergency LKR 5,000 cash transfer caseload included beneficiaries of the *Samurdhi* and Social Cash Transfer schemes, as well those on Social Cash Transfer waiting lists (nearly 200,000 people) and those who were registered in the *Samurdhi* database (but were not previously eligible as beneficiaries) during a mass registration exercise in 2016 (600,000 households). In Togo, it was determined that those who had been surveyed but not previously deemed eligible for the rural-focused routine cash transfer programme (around 38,000 households) should receive six months' worth of temporary assistance during the crisis. In Peru too, *Bono 'Yo Me Quedo en Casa'* and *Bono Rural* supported households who were listed in the social registry[5] as living in poverty or extreme poverty, but not benefiting from routine schemes (principally because

---

2   See also Alfers (2020), Barca (2020), Beazley (2020), Gelb and Mukherjee (2020), Gentilini et al. (2020), World Bank (2020c) and IPC-IG (2021) for global analysis; and for examples of regional analysis see Kidd et al. (2020), Rubio et al. (2020), UN (2020) and Gentilini et al. (2021) .

3   See Gentilini et al. (2021) for other examples of satellite-imagery-based mapping, including Democratic Republic of the Congo, Mozambique, Liberia. For a discussion of targeting using satellite imagery and other 'big data' (e.g. mobile phone metadata), see e.g. Steele et al. (2017), Blumenstock (2018), Blumenstock (2020) and Yeh et al. (2020).

4   See Chirchir and Barca (2020) for a discussion of these and Barca and Beazley (2019) on the use of social protection information systems for shock response.

5   Peru's social registry sits within a social assistance information system known as the SISFOH (*Sistema de Focalización de Hogares*, Household Targeting System).

their districts had poverty rates above the threshold targeted by routine programming). Peru's *Bono Independiente* caseload was also drawn from the social registry, targeting 'non-poor' households who worked entirely in the informal sector.

Our case studies evidenced several of the benefits and challenges of registry-based identification strategies that have been noted in earlier literature (e.g. Barca and Beazley, 2019; Barca, 2020; Smith and Bowen, 2020). Relying on information and capacity that already existed within the social protection ministry did enable a rapid and efficient response for the households covered by the registry in cases like Peru, where the *Bono 'Yo Me Quedo en Casa'* identification process reportedly took only a few days. Since the existing registry had large-scale coverage (around 75% of the population pre-Covid-19), it provided a viable starting point for a fast first wave of payments to a sub-set of the affected population. However, Peru's Covid-19 experience also demonstrated that even a large-scale social registry cannot be relied upon as the sole basis for targeting crisis support, unless it is both universal and up to date, among other characteristics (Barca and Beazley, 2019). Many households were either missing altogether from the registry or had entries that were significantly outdated. This was particularly true in areas that were not a focus of routine social assistance, such as many urban areas. In Sri Lanka too, existing social programme databases were recognised to be inadequate for reaching all those affected by the crisis, since they did not capture many informal workers and the data from the 2016 mass registration exercise had not been fully verified at the time or updated since. In Nigeria, the pre-Covid-19 social registry had limited coverage (6% of total households) and focused on rural areas, while Togo's social safety net database contained only 90,000 rural households (5% of total households) so lacked value for responding to urban-focused lockdowns.

Using wider government databases
The limitations of existing social registries prompted many governments to go beyond these databases to reach households affected by the crisis (Barca, 2020; Beazley, 2020; Gelb and Mukherjee, 2020; Gentilini et al., 2020; World Bank, 2020c; Gentilini et al., 2021). One strategy for this was to use databases of other government agencies, such as those for tax and state utility provision, health insurance and financial inclusion initiatives. In our case studies, Sri Lanka used databases from the agriculture and fisheries' ministries to deliver emergency LKR 5,000 transfers to 165,000 people registered in the farmers and fishermen pension schemes. In Nigeria, the government is considering using data held by the Ministry of Labour on informal worker association members as one of multiple approaches to identify potential beneficiaries for its urban-focused Rapid Response Register. In Peru, civil society groups advocated for government-held informal worker association member lists to be used for the *Bono Independiente,* but this did not go ahead because the Ministry of Finance only permitted the use of databases that had been explicitly recognised as an official basis for targeting social assistance. However, the government did make extensive use of cross-government databases in other ways, to identify and contact the most appropriate adult to receive the payment within beneficiary households. This included exchanging data with the government entities responsible for ID and civil registration, people with disabilities, migration, and the state bank, to identify the household member best equipped

to receive the payment electronically or with the lowest Covid-19 risk to be paid in person, as well as working with the state telecommunications regulator to access phone numbers for communication with eligible beneficiaries.

Using wider government databases as the basis of identification is associated with many of the benefits and challenges discussed for social registry-based targeting (Barca, 2017; Barca, 2020; Barca and Hebbar, 2020; Chirchir and Barca, 2020; World Bank, 2020c). Since the data is already held within government, it should theoretically be quicker and easier to access than new data collection or data-sharing with non-government entities. There are nevertheless still multiple challenges, including potentially variable quality and currency of the other databases, and the complexity of trying to integrate household-level unit data in the social registry with the individual-level data held in many other government databases, a challenge experienced in Peru. Peru's case also highlighted the need for interoperability protocols that cover the exchange of data for a crisis response; while some already existed, others had to be newly developed to cover the specific data-sharing arrangements required by the Covid-19 response. Relying on multiple government databases to identify recipients was therefore a challenge for Peru's emergency *Bono* schemes. In a country without the universal foundational ID coverage that Peru benefits from, it would be significantly more difficult.

Using private or non-governmental sector databases

Where government-held data was inadequate as a basis for registering Covid-19 beneficiaries, several countries explored the potential to use data held by private or non-governmental entities for household-level identification[6] (Barca, 2020; Gentilini et al., 2020; World Bank, 2020c). There are, however, relatively few examples of this happening in practice in the Covid-19 response. As documented in Gentilini et al. (2021), the Democratic Republic of the Congo offers one such example, where the government used mobile phone network databases to identify subscribers without smartphones, high-value data plans or expensive usage patterns, who were then sent SMS messages inviting them to apply. Sierra Leone is another example, where the government identified informal workers in part by relying on databases from microfinance institutions and informal worker associations. Within our case studies, Nigeria is planning to use selected civil society and NGO databases to identify potential beneficiaries for the urban-focused Rapid Response Register. It also explored the possibility of using databases from mobile phone companies and banks to identify households whose account histories suggest low income levels, given research indicating the potential for mobile phone use patterns to predict poverty status where mobile penetration is very high (see e.g. Blumenstock et al., 2015).

The fact that these innovative approaches had not been widely implemented in the Covid-19 response at the time of writing, either in our case studies or more generally, is indicative of

---

6   Unlike the earlier discussion of using data from mobile-network operators or satellite imagery for geographic targeting (to identify high-priority communities), we focus here on the use of such data for identifying specific households (or individuals) for assistance.

the challenges associated with arranging exchange of non-anonymised data with private or non-governmental entities, particularly during a crisis. In our Nigeria case study, negotiation of appropriate data-sharing arrangements was proving time consuming, and it was felt that data privacy concerns might ultimately undermine the feasibility of identifying beneficiaries based on private mobile phone or bank histories. Even if legally feasible, an identification strategy based on these approaches was inherently challenging as one individual could easily have multiple phone numbers or bank accounts. Since Nigeria lacks a unique identifier to match these up, additional household-level verification would be needed to ensure that anyone identified as a potential beneficiary was indeed eligible, limiting the supposed cost-efficiency of the approach.

Inviting on-demand applications

The difficulties of relying solely on existing databases led many governments, including all of those in our case studies, to invite new, on-demand applications for affected individuals to proactively request crisis assistance (Barca, 2020; Gelb and Mukherjee, 2020; World Bank, 2020c; IPC-IG, 2021). In the case of Togo's *Novissi* scheme, an on-demand, digital (SMS) application process was the only registration strategy used, via a newly developed USSD[7] platform that was free for users and did not require internet or smartphone capabilities. In other schemes, on-demand registration complemented alternative identification strategies. For example, for Peru's *Bono Familiar Universal,* an online registration platform was available for two weeks to enable households who were not included in the social registry to apply for the National Household Registry and thereby be considered for assistance. In Sri Lanka, anyone who wished to request emergency cash assistance could apply in person from local authorities, and have their application considered by a five-person local committee. In Nigeria's Rapid Response Register, one of the core identification strategies is for households in geographically targeted urban neighbourhoods to be sent SMS messages inviting them to complete an SMS-based application process.

In line with wider literature (e.g. Barca, 2017; Barca, 2020; Barca and Hebbar, 2020; Gelb and Mukherjee, 2020; Lindert et al., 2020; World Bank, 2020c), our case studies highlighted various potential benefits and challenges of on-demand application processes. By enabling those who may not be identified through existing records to request assistance directly, they can facilitate greater inclusion and accountability. They can also be a simple and fast way to identify potential applicants, as demonstrated by the Togolese case where a registration platform was developed in only ten days and subsequently formed a database of nearly 1.4 million applicants in the first programme phase (out of only around 3.8 million adults nationwide, a minority of whom live in the areas geographically targeted by the *Novissi* scheme). In Peru, more than three million households registered during the two-week online registration window, enabling the government to create a quasi-universal National Household Registry containing 33 million people (when combined with the existing 25 million people listed in the social registry), which accounts for 99% of the population. In Sri Lanka, the government reported that over 90% of households were

---

7   Unstructured supplementary service data (USSD) is a global system for mobile communications (GSM) protocol that is used to send text messages.

reached when combining the existing social programme lists with the local-level identification process. These varied uses of on-demand registration suggest an important role for some form of self-registration in enabling inclusive crisis provision, whether a country's social registry is large-scale, nascent or non-existent. Nevertheless, it is important to recognise that Covid-19 was characterised by specific peculiarities that made on-demand registration a particularly popular method, where it might otherwise be less feasible. These included the large numbers of people affected, widespread public engagement with the emergency response, simplified eligibility criteria and general willingness of governments to make payments without detailed verification. Without these characteristics, using on-demand registration as a dominant identification mechanism presents many more complexities.

Alongside its benefits, the on-demand approach was also associated with some clear challenges. When first launched, the digital platforms in both Peru and Togo experienced substantial technical difficulties, repeatedly crashing due to the sudden volume of registration attempts. While these technical challenges were resolved, concerns about potential exclusion risks were less easily dealt with. In both Peru and Togo the governments felt exclusion was not a major issue given the nature of the populations being targeted (urban informal workers in Togo, and urban 'new-poor' in Peru) as they assumed that those with lower levels of digital literacy or phone/internet access could request support from a neighbour or relative to apply. However, civil society representatives raised concerns in both cases that digital exclusion may have occurred; independent monitoring and evaluation will help to determine the extent of this issue. In other contexts, such as Thailand, exclusion risks were in part mitigated by explicitly engaging civil society organisations to support enrolment among digitally excluded groups.

Beyond potential digital barriers, on-demand approaches can also be exclusionary if affected populations lack sufficient information about the programme or application process. In Togo, mass communication campaigns were adopted to address this challenge, including radio advertisements on over 35 broadcasters in five national languages, and daily appearances by government officials on radio talk shows. Similarly, in Peru, various outreach strategies were used, although civil society representatives suggested that not everyone was aware or able to apply in the window, particularly given the website crashes. In Sri Lanka, the deep engagement of the *Grama Niladhari* local authorities meant that people in need of assistance had experience of how to request support, by phone or more often in person. This in-person approach carried trade-offs; on the one hand, digital exclusion risks were lower, but, on the other, Covid-19 transmission risks were harder to manage.

Table 3 summarises the key features of each case study's approach to identification and registration.

Table 3 Summary of identification and registration approaches

Identified/registered potential beneficiaries from:	Nigeria's accelerated NASSP expansion	Nigeria's urban Covid-19 transfer	Peru's emergency *Bono* schemes	Sri Lanka's Rs. 5000 Emergency Cash Transfers	Togo's *Novissi* scheme
Existing social registry or programme databases	x		x	x	
Wider government databases		x	(x)	x	
Non-governmental or private sector databases		x			
On-demand applications: remote		x	x		x
On-demand applications: in-person				x	

Source: Authors' compilation

Enablers and bottlenecks for identification and registration

Six factors stood out in our case studies as being critical enablers or constraints in the identification and registration of crisis assistance caseloads.

An effective social assistance information system (especially if underpinned by a social registry) is invaluable in terms of the potential to rapidly enrol targeted segments of the population into new crisis programmes.[8] Peru and Sri Lanka benefited from using their social programme databases to identify not only routine beneficiaries, but also vulnerable households not benefiting from any ongoing support. However, their experiences demonstrated that the usefulness of a registry for crisis response can be significantly impaired if it is not up to date and does not have sufficient coverage. In addition, a registry's value is much greater if it contains operationally relevant information like mobile phone contact and bank account details, as this reduces the time required for officials to source this information to enrol listed households into crisis response programmes.

Interoperability with other data sources is crucial, given that data in existing information systems may not be sufficient for identification and registration in the context of a crisis response. In this context, interoperability includes having protocols in place to facilitate data-sharing with relevant agencies in government and beyond. These protocols benefit from the ability

---

8   More insights on effective social assistance information systems for shock response can be found in Barca and Beazley (2019).

to be rapidly adjusted to respond to specific crisis needs and circumstances, but having core agreements in place at least provides a starting point to ensure that the vital fundamentals of data privacy, data protection and software interoperability have been well established before the emergency occurs.

A foundational ID system providing a unique identifier for every member of the population is a huge asset.[9] In Peru, where a foundational ID system was in place, cross-referencing applicants with the ID system enabled processing of on-demand applications as well as the identification of priority recipients within beneficiary households. In the absence of a foundational ID in Togo, the government drew on the recently updated voter ID database as an alternative. This database was chosen because it was the highest coverage biometric ID available nationally (covering approximately 3.6 million adults, or over 90% of the adult population) and had been recently updated for the February 2020 presidential elections. In addition, it was the only ID database with the information on people's occupations and location required to establish eligibility. The decision did however generate controversy due to past politicisation of the voter ID enrolment process. An opposition-party boycott of previous years' elections meant that supporters of that party had not historically been well represented on the voter ID database – demonstrating the challenge of relying on a politicised database for social protection intake. However, while recognising that this approach would be politically contentious, the government selected this option as it was the best available pending the roll-out of a foundational ID system (currently under development in collaboration with the World Bank). By contrast, implementation options were severely limited in Nigeria by the lack of a foundational ID system or credible alternative.

The ability to offer remote (SMS or online) registration is, unsurprisingly, very advantageous in the context of restricted movement. This requires agility and advanced technological capacities within government to develop the relevant digital platforms, as demonstrated by the dynamic Ministry of Posts, Digital Economy and Technological Innovation in Togo which led the *Novissi* operationalisation alongside the President's Office. However, these types of digital registration approaches also require relatively high penetration of mobile phones and mobile network coverage (or internet coverage, if an online platform is being used), alongside widespread literacy and digital literacy.[10] Any gaps in these areas increases risks of exclusion, although the extent to which this occurred in Togo or Peru's on-demand digital approaches has not yet been appraised. Whether digital or in-person registration takes place, it is important that strong outreach and direct government support is provided (preferably in both on- and off-line forms, and often with explicit engagement of civil society organisations), to ensure that the population is well informed about the programme and assisted to complete the registration.

---

9   See Gelb and Mukherjee (2020) and World Bank (2020c) for further analysis on the role of ID systems in shaping Covid-19 social protection responses.
10   See also e.g. Gelb and Mukherjee (2020), Gelb et al. (2020) and World Bank (2020d) for further analysis on the role of mobile phone and bank account coverage in enabling social protection expansion, before and during Covid.

The flexibility and capacity to combine identification and registration strategies is likely to be important for ensuring full coverage of the affected population, in most cases involving some form of on-demand registration. Both Peru and Sri Lanka were able to achieve large coverage, through combining on-demand options with various administrator-driven approaches (using existing social protection data alongside other central databases in Peru or local lists in Sri Lanka). Using a phased approach to gradually expand coverage across different target groups can be helpful for building administrative capacity (e.g. in Peru, it enabled the creation of the online platform to develop the new National Household Registry). However without clear and consistent communication, phased programming can cause confusion and result in a slow response for households in the latest phase, so ideally the on-demand component should be introduced as early as possible.

Strong political will, driven from the top levels of government, enables timely and effective registration. For example, in Togo, this was clear from the presidential ownership and drive behind the *Novissi* scheme. In Peru, this was demonstrated by rapid emergency decrees from the president, which spurred cross-sector collaboration, including data-sharing arrangements and platforms, across various government entities and with the private sector, where permitted by emergency legislation.

2.2.2   Eligibility determination and enrolment

Approaches used
While routine social protection programmes often have strict criteria and rigorous processes for determining eligibility, many governments adopted simplified, broader approaches in their crisis responses (in line with recommendations in Barca, 2020; Duflo and Banerjee, 2020; and Ravallion, 2020). These simplified approaches were preferable given the difficulty of conducting time-consuming, document-heavy or contact-intensive eligibility assessments mid-pandemic; the large size and breadth of the crisis-affected population; and the urgent need for timely assistance to enable those dependent on daily earnings to withstand week- or month-long lockdown or curfew measures.

This approach was evident in our case studies, with three of the four (Peru, Sri Lanka, Togo) opting for significantly simpler eligibility determination processes and broader criteria than are used in their routine schemes. The relatively high coverage levels and choice of methods suggest that, rather than intricately identifying the *highest* priority people for assistance, the aim was instead to exclude people who were deemed to be the *lowest* priority for assistance: those with access to formal sector earnings (Peru), those working in jobs that were less affected by curfew measures (Togo, Sri Lanka) or those living in areas without stringent restrictions (Togo). The ways in which Peru, Sri Lanka and Togo designed their simplified eligibility verification processes nevertheless showed interesting variation.

Drawing on pre-Covid-19 socioeconomic classifications

As noted in Section 2.2.1 above, many governments made use of existing social assistance information systems to (partially or wholly) determine their Covid-19 emergency caseload, which inherently meant relying on pre-Covid-19 household rankings or categorisation. For example, in Peru, households that were listed as living in poverty or extreme poverty received the first wave of assistance, and in Sri Lanka, households on the waiting list for the Social Cash Transfer schemes and who had been registered (although not previously selected as eligible) for the *Samurdhi* programme were among the first to be identified for the LKR 5,000 transfers.

Consequently, the benefits and challenges of this approach in many ways overlap with those discussed for the social registry-based registration strategy (Barca and Beazley, 2019; Smith and Bowen, 2020). Using existing eligibility mechanisms for crisis response can enable a rapid and low-cost response, but relying on household rankings and categorisations conducted before the crisis is inherently problematic as it does not accommodate the diverse impacts of the shock on households. Furthermore, where problems with existing eligibility mechanisms had been identified (as in Sri Lanka regarding targeting of *Samurdhi* benefits[11]), using existing approaches will replicate these errors in the crisis response if existing beneficiaries become first priority for crisis assistance.

Cross-checking against wider government databases

Instead of, or in addition to, relying on pre-Covid-19 social assistance classifications, many governments attempted to newly verify eligibility by cross-checking potential beneficiaries against wider government databases (Barca, 2020; Gelb and Mukherjee, 2020; World Bank, 2020c). In Peru, a 'targeting out' approach was used, in which all households identified through the social registry or on-demand registration were deemed eligible for assistance, *unless* they were found on public and private payroll, social protection, tax or financial regulator databases: to benefit from another emergency cash measure; to have died or gone to prison; or to have a household member working in the formal sector or earning more than S/3,000 monthly ($824[12]). In Togo's *Novissi* scheme, a much simpler check against a single database was conducted; eligibility was determined based on the applicant's occupation and location, as listed in the biometric voter ID database (provision of voter ID number/card details were required during registration to facilitate this check).

As demonstrated by the relatively rapid enrolment processes in both Peru and Togo's *Novissi* scheme, relying on existing databases to verify eligibility rather than conducting any kind of new assessment can facilitate speed and efficiency. However, the overall effectiveness of this strategy is entirely dependent on the appropriateness of the exclusionary criteria and the quality of the additional database(s) being used for verification. For example in Togo, the use of the voter ID

---

11   See e.g. UNICEF (2020a).
12   Dollar values cited in this paper are calculated on the basis of exchange rates from February 2021; $1 = 3.64 Peruvian soles (S/).

database as the basis for enrolment was somewhat contentious as discussed in Section 2.2.1 above, and the criteria included only people officially registered as working in a relevant informal profession, thereby excluding, for example, unemployed people with disabilities. In Peru, there was concern about the decision to exclude households who had *any* member listed on public or private payroll databases, as this resulted in the exclusion of families even if their one formally employed member was working in a low-wage job and multiple other household members had lost informal employment income. Furthermore, relying on multiple different databases from different sources and of different quality to assess multiple eligibility criteria can lead to a selection approach that is not transparent or fully understood by the population, unless an effective communication strategy is implemented. This was the case in Peru, where the actual eligibility criteria and data sources used for some of the *Bonos* were not entirely clear.

Decision-making by local committees

Although not widely discussed in global literature on the Covid-19-19 response, one of the main approaches to determining eligibility in our case study set was Sri Lanka's reliance on decision-making by local-level committees. In this case, eligibility criteria were set at the central level (for example, outlining the informal worker occupations that should be prioritised for assistance) and then applied locally, with the aim of drawing on grassroots structures and local knowledge to ensure that the most vulnerable households got support.

Given the existence of robust local structures in Sri Lanka, this approach was found to promote speed, respond to contextual realities and promote local-level accountability for effective distribution of assistance. Local officials in Sri Lanka often have strong community knowledge and are well positioned to identify priority households, and independent UN monitoring indicated that the majority of households who requested this support had received it (UNICEF and UNDP, 2020). However, this level of local discretion inevitably carries risks, including concerns in Sri Lanka's case about local political interference in the process. Although not officially on local decision-making committees, local politicians were allowed to recommend residents for support and this led to concerns about attempted political influence on the selection process in numerous instances.

Maintaining traditional eligibility determination mechanisms, with Covid-19-modifications

Rather than developing new mechanisms or criteria to deliver emergency assistance, an alternative option is to rely on existing eligibility determination arrangements, with slight modifications to account for changes to the operational environment post-shock (Smith and Bowen, 2020). This was the case for Nigeria's NASSP expansion, where the traditional eligibility criteria and determination processes were largely maintained. The standard procedure combines targeting of vulnerable areas with community-based targeting to identify and rank the poorest households, followed by field validation of household conditions for those registered in the sixth decile and below. During Covid-19, the community-based targeting process was modified to rely on community representatives rather than broader focus groups, and to introduce health and safety measures. Otherwise, there was no major pivot from the original NASSP approach.

Using this approach, Nigeria's cash transfer caseload rose from 400,000 households for the April payment to 600,000 in June, and 900,000 in October, and was reported to have reached 2 million by the end of 2020 (Agbakwuru, 2021). Civil society monitors report that the accelerated NASSP intake has generally been effective. However, there was significant public and political confusion regarding the enrolment process, suggesting that the attempts to maintain thorough and transparent eligibility determination procedures were not always well understood outside the immediate areas where they were applied. More fundamentally, there are also concerns that the relatively complex, time- and resource-intensive approach is not appropriate for a crisis response, particularly given the scale of the crisis with more than 70% of the population of 201 million reportedly experiencing food insecurity during the Covid-19 lockdown (Lashitew and Kanos, 2020). This concern is even more true of the urban response. For the urban-focused Rapid Response Register and temporary cash transfer scheme, a different form of eligibility determination is planned, relying less on community inputs and instead using geographic targeting combined with some form of household-level validation (and potentially information from other non-governmental databases) in an attempt to precisely target high-priority households. The time taken to develop this complex multi-stage process meant that the urban programme had not been launched by the end of 2020. The approaches adopted for both programmes have implications for both timeliness and adequacy in terms of Covid-19 responsiveness, and seem to prioritise longer-term objectives relating to the identification of households for routine social protection.

Table 4 summarises the key features of each case study's approach to determining eligibility.

Table 4 Summary of eligibility determination approaches

Verified eligibility by:	Nigeria's accelerated NASSP expansion	Nigeria's urban Covid-19 transfer	Peru's emergency *Bono* schemes	Sri Lanka's emergency Rs. 5000 payments	Togo's *Novissi* scheme
Relying on pre-Covid-19 socioeconomic classifications			x	x	
Cross-checking with wider government databases			x		x
Decision-making by local committees				x	
Maintaining traditional eligibility mechanisms (with Covid-19 precautions)	x	(x)			

Source: Authors' compilation

Enablers and bottlenecks for eligibility determination and enrolment

Our case studies highlighted the role of various enablers and bottlenecks for the successful implementation of the enrolment phase. Some were common with those for effective identification, namely the existence of **foundational ID systems, flexible and skilled government officials**, and **political will** for rapid and cross-sectoral collaboration. However, there are also some additional enablers that were found to be specific to this particular phase, as follows.

The availability of robust socioeconomic information about the potential beneficiary caseload was found to be a particularly important asset for eligibility determination. Across our case studies, a range of sources were explored to access this information, from existing poverty data in the social registry in Peru (and to a lesser extent, Sri Lanka), to local knowledge held by decentralised social welfare and government actors in Sri Lanka, to occupational and residence information in the electoral register in Togo.

However, in all three cases, there were questions about the reliability, currency and political neutrality of these information sources, potentially limiting the effectiveness of enrolment decisions. In Peru, household poverty rankings in the social registry were reliant on locally collected information of variable quality and limited coverage, particularly in urban areas, and the data was in many cases outdated. This challenge was recognised during implementation and an alternative approach was adopted which included 'non-poor' households, cross-checked against occupational information from employment databases, which were more up to date but by no means comprehensive (for example, there was no central database of civil servants and political representatives at the local level, who were meant to be excluded from the emergency transfers).

In Togo, the accuracy of occupation information and the political nature of the voter ID database were noted as potential challenges, while in Sri Lanka there were concerns about the potential for political interference given high levels of local discretion, changing eligibility criteria, and the reliance on local knowledge to determine enrolment.

The mindset that governments were able or willing to adopt in relation to assistance provision was another factor that repeatedly proved important for this phase. Opting for a 'no regrets' mindset was an important enabler in ensuring that crisis-affected populations could get quick access to assistance; for example, in Peru the focus on 'targeting out' clearly ineligible households, rather than thoroughly assessing the conditions and relative eligibility of each household, was critical for enabling a rapid and large-scale response. Having the flexibility and humility to learn from and improve upon initial approaches was also important. For example, the Peruvian government responded to media and civil society criticism that the first *Bono* was not reaching most urban informal workers, leading to a subsequent scheme specifically targeting that group. When it was found that many households were still inadequately served, a more universal approach was adopted, including an on-demand registration option for the *Bono Familiar Universal*. Meanwhile, the Nigeria case study demonstrated how a government's ability to simplify and revise procedures and adopt a flexible approach in a crisis context may be constrained by pre-existing levels of trust in government probity and the transparency of previous social programme provision. The pre-NASSP legacy of pervasive corruption and past diversion of social assistance led to the retention of thorough, pre-approved eligibility determination procedures, even amid the pandemic needs and constraints, significantly delaying the pace of extension.

Access to financial, technical and human resources, both centrally and at the local level, represented a significant bottleneck where the chosen scale-up strategy involved rigorous eligibility determination procedures. In Nigeria, the addition of new beneficiaries to the National Social Register during the pandemic was delayed in some cases by lack of tablet devices for enumerators to conduct household verification. It was also hindered by variable capacity among State Operating Coordination Units, who provide beneficiary caseload lists for inclusion in the central register. This highlights the need for the structures, capabilities and incentives for collaborative cross-government working to be in place for enrolment decisions to move forward in a swift and reliable manner.

2.2.3   Payments

Approaches used

Driven by the simultaneous need to limit physical contact, provide rapid payments to new, often unbanked beneficiaries and operate on a large scale without compromising accountability, a wide range of approaches were adopted to deliver Covid-19 payments. Globally, these included paying bank transfers into existing and newly opened accounts, and without accounts (such as via one-time passwords or e-vouchers), as well as through mobile money payments, cheques and physical cash distribution (Beazley et al., 2020; Gelb and Mukherjee, 2020; Gentilini et al., 2020; World

Bank, 2020c; Zimmerman et al., 2020; IPC-IG, 2021). Below we explore diverse ways in which bank transfers, mobile payments and physical cash distribution were used in our case studies, drawing on the wider literature on alternative payment modalities (ISPA, 2016; CGAP, 2020; Covid-19 Global Situation Room, 2020; Gronbach, 2020; GSMA, 2020; Lindert et al., 2020; World Bank, 2020d).

Bank transfers
Paying into existing bank accounts
Where routine social protection systems were already making payments predominantly through bank transfers, it made sense for Covid-19 assistance to also rely on this mechanism for banked beneficiaries, assuming that they still had access to their accounts. This was the case in Peru, where existing systems to pay most routine beneficiaries into accounts with the state bank (*Banco de la Nación*) made it relatively easy for new emergency beneficiaries with existing state bank accounts to be accommodated by this mode of delivery. However, payments into accounts with other banks were not viable at first because the decree regulating emergency assistance initially made provisions for the transfer of funds only to a public entity. This was adjusted over time, enabling direct deposit payment into private banks for the *Bono Familiar Universal*, which significantly sped up future payments. In all cases where bank transfers were paid, the government exchanged data with banks to identify which beneficiaries held accounts that could receive direct bank transfers. Where such accounts existed, this was automatically allocated to the beneficiary as the default payment mechanism, as it was perceived to be the fastest and most efficient mechanism with the lowest transmission risk.

Despite the potential advantages of bank transfers, this approach could not be relied upon as the sole strategy in any of our case studies, and in many other low- and middle-income countries (IPC-IG, 2021), given widespread gaps in access to bank accounts, particularly among women and marginalised groups (Demirguc-Kunt et al., 2018; Zimmerman et al. 2020). Furthermore, even where beneficiaries had accounts, lockdown, quarantine and social distancing requirements sometimes made it difficult for beneficiaries to access their payments. In contexts where ATM provision and debit card use are widespread (as in Peru), this was less of a constraint, but in cash-based economies (like Sri Lanka) where beneficiaries rely on withdrawing their cash from bank agents, bank transfers were not deemed viable as a primary mechanism.

Opening new bank accounts
In routine programmes, a common way to address the challenge of low financial inclusion is to support unbanked beneficiaries to open new accounts (Demirguc-Kunt et al., 2018). Although many countries had made efforts to streamline this process, mandatory 'know your customer' (KYC) identification requirements to open accounts are often still a challenge in non-crisis periods. During Covid-19, account-opening was complicated further by bank closures, contagion concerns and mobility restrictions (Kazazz, 2020).

Despite these constraints, several countries did work with banks to find suitable workarounds during the Covid-19 crisis, such as simplified due diligence and remote account-opening options

(Gentilini et al., 2020; Kazzaz, 2020). At the time of writing, our case studies did not offer any examples of Covid-19 beneficiaries being supported to open *traditional* bank accounts during the initial crisis period (although opening of alternative, mobile-based accounts did occur, as discussed below). However, in Nigeria, bank-account-opening is planned for the temporary urban programme roll-out in 2021. Given the higher levels of bank access in urban areas, bank transfers were considered preferable to the routine, manual-intensive NASSP approach but, even in urban areas, financial inclusion remains low, so the plan is to support unbanked urban beneficiaries to open accounts upon registration. While this level of individual support may be feasible given the later and longer-term timeline of that programme, it would have been far less viable during the initial emergency or in areas where physical bank infrastructure is more limited.

Mobile payments

Where beneficiaries could not receive payments into existing accounts, opening new bank accounts was often less practical than finding an alternative remote mechanism for the temporary transfers. Mobile payments emerged as a key solution (Davidovic et al., 2020; IPC-IG, 2021), including in our case study countries.

Mobile banking via an e-wallet

In the case of Peru, mobile banking via an 'e-wallet' was the favoured solution for those who could not receive traditional bank transfers. The e-wallet was a bank-based product which provided a temporary, mobile-based account that could be opened remotely. The e-wallet uses beneficiaries' mobile numbers and provides an SMS code to access the transfer, avoiding the need for the full KYC data and in-person verification required for traditional account-opening, and hence offering a fast and simplified way for beneficiaries to receive electronic transfers.

Before the crisis, social safety net payments in Peru had been made either through bank accounts or cash in hand, with no use of mobile options, because the priority had been to promote financial inclusion by bringing beneficiaries into the conventional banking system. However, during the crisis, the rapid roll-out of functional transfer mechanisms was prioritised over traditional financial inclusion. Those who could not be paid via bank accounts were encouraged to open these limited functionality e-wallets, starting from the *Bono Independiente* scheme (for which 500,000 of the 780,000 beneficiaries accessed payment via this modality). *Banco de la Nación* already had the e-wallet mechanism in place before the crisis, but it was not widely used and had not previously been adopted for social protection provision.

Other mobile money mechanisms

While Peru's mobile payment solution was linked to the formal banking system, phone-based payment solutions were sometimes more readily found in the mobile money services provided by mobile network operators (MNOs). This was the case for Togo's *Novissi* programme, where mobile money infrastructure and access to mobile phones among the target group (urban informal-sector workers) were felt to be sufficient to make this the sole transfer modality. Payments could be made into a pre-existing or newly opened account with either of the country's

main mobile money operators. Neither internet nor smartphone access was required, with transfers instead being based on a system of SMS notification and a PIN code which enabled recipients to collect their cash from a variety of agents or send or spend it electronically. There was no delay between enrolment and payment as the registration process required the provision of a mobile phone number and, subject to verification of a four-digit code on the reverse of the voter ID card, payments were automatically transferred.

For the *Novissi* scheme, mobile money was perceived to be a success, enabling 30,000 payments to be disbursed within the first two days of programme launch, and nearly half a million payments in the first three weeks. For many beneficiaries and particularly those who already had mobile money accounts, approximately 62% of the total population (Government of Togo, 2020c), the modality was likely a fast, convenient and flexible means of receiving the payment. However, physical contact was not necessarily avoided, since most beneficiaries still preferred to cash out the transfer payments at the 'last mile' with agents or money traders. The extent to which such agents are available determines the ease of access, and this was reported to be problematic for some *Novissi* recipients. In addition, exclusion may have occurred for beneficiaries who were digitally or functionally illiterate or who lacked mobile phones and were therefore dependent on others' support to access their payments.

Cash-in-hand payments

Although the speed, transparency and lower physical contact requirements of the electronic payment options above made them the preferred mechanism in many cases, simple cash payments often remained the chosen modality in contexts where bank closures or low digital and financial inclusion ruled out more advanced technological options (Beazley, 2020; IPC-IG, 2021). In Peru, this meant offering over-the-counter or hand-delivered payments for a minority of emergency cash recipients who could not receive payments into bank accounts or mobile e-wallets. In Sri Lanka, physical distribution of cash payments was used for all the emergency cash transfers, since banks were closed and options for alternative digital payments were likely to be slower to roll out than relying on the strong decentralised network of local officials. District-level committees (including *Samurdhi* officers) were mandated to organise the distribution of a LKR 5,000 note to each registered beneficiary. This included delivery directly to the homes of those with mobility constraints (such as the elderly and disabled) or to community collection points. In Nigeria too, payments continued to be disbursed in-person, with last-mile payment agents transferring cash to new NASSP beneficiaries. Given weak banking and mobile money infrastructure among the primarily rural beneficiaries, this was deemed the only feasible modality for the existing NASSP expansion. As described in Section 2.1, various health and safety measures were introduced to reduce transmission risks for cash-in-hand payments. However, in all cases where in-person collection of cash occurred, crowding was reportedly a challenge and Covid-19-related hygiene measures were not always followed.

Table 5 summarises the key features of each case study's approach to payment provision.

Table 5 Summary of payment approaches

Payment modality	Nigeria's Accelerated NASSP Expansion	Nigeria's Urban Covid-19 Transfer	Peru's Emergency *Bono* schemes	Sri Lanka's Emergency Rs. 5000 payments	Togo's *Novissi* scheme
Bank transfers		x	x		
Mobile-based payments		(x)	x		x
Cash-in-hand at collection points	x		x	x	
Cash-in-hand delivered to people's homes			x	x	

Source: Authors' compilation

Enablers and bottlenecks of payment provision

The main factors enabling and hindering effective crisis payments in our case study countries are as follows.

More developed banking, mobile phone, mobile money and internet infrastructure inevitably increased the range of payment options. In highly cash-based contexts where there was limited prior adoption of digital government-to-person (G2P) payments and weak digital payment infrastructure, options for digitalisation of crisis payments were constrained. This was the challenge faced in Sri Lanka and also Nigeria, whereas in Peru, higher levels of mobile phone access or prior bank account ownership meant that digital payment modalities could be adopted for many beneficiaries.

The ability to make use of existing technology and prior technological pilots enabled rapid payment innovation in response to the crisis. In Peru, this meant recognising the potential of the *Banco de la Nación* e-wallet product, while in Togo, the government drew on prior experience of a small-scale AgriPME mobile money pilot which 'turned farmers' cellphones into real electronic wallets' (Agence Ecofin, 2016).

The availability of national technical expertise, and dialogue between different institutions was a key factor underlying the adoption of technical innovations. In the case of Peru, the key dialogue was between the Ministry for Labour and the Promotion of Employment, the Ministry of Development and Social Inclusion, the telecommunications regulator and the state bank (and later private banks), and in the case of Togo, between the President's Office, the ministries responsible for social and digital affairs, and mobile network operators.

Flexibility on the part of implementing agencies, and a willingness to innovate and move away from previously adopted approaches was a key characteristic enabling these innovations and partnerships. An example is the adoption of an iterative or phased payments approach, adopting partial solutions to payment delivery challenges while others were under development. This evolving and problem-solving approach enabled the extension of payment options in Peru; new payment options were added with each *Bono* scheme to create a combination of options ultimately including over-the-counter, home delivery, state banks, private banks and the e-wallet, to meet the needs of different beneficiaries and increase programme reach.

The ability to adopt relevant aspects of routine social protection systems and reject those that are unsuitable for the specific crisis circumstances was also crucial. The strong institutional structure of the NASSP enabled an increasing volume of payments via the existing process as the programme expanded within rural areas. However, in Togo, the existing manual cash delivery mechanisms used in the routine cash transfer programme were rejected for *Novissi*, in favour of a new entirely electronic payment approach, to promote speed, traceability and transparency. In Sri Lanka, the limitations of relying on the *Samurdhi* banks were rapidly recognised, and an alternative, cash-in-hand modality adopted for crisis payments. This approach drew on strong pre-existing local capacity for decentralised social protection delivery, including tens of thousands of local *Samurdhi* officials with high knowledge of the local population and the administrative capacity to identify those in need, carry out registration and deliver support.

Rapid adjustment of legislative regulations was also a critical enabler, as in the case of Peru where legislation enabling ministries to exchange information with the public *Banco de La Nación*, was later extended to private banks, enabling the *Bono Familiar Universal* to be paid into accounts that beneficiaries already held with a wide range of banks.

2.2.4   Accountability and monitoring

This section considers the approaches used in Covid-19 assistance programmes to collect and address complaints and queries (formally known as 'grievance redress mechanisms' (GRMs)) and to monitor, evaluate and report on performance (which spans both audit mechanisms and monitoring systems).

Despite their critical importance for programme transparency, consistency, quality and learning, as well as citizen trust and engagement, accountability mechanisms have historically been a relatively neglected aspect of social protection delivery, with many countries lacking strong systems for complaints, feedback and transparency in their routine provision (Barca, 2016; Ayliffe et al., 2018). In some cases, this relatively weak provision might be expected to carry over to Covid-19 programming; in other cases, the sudden influx of large (potentially externally financed) sums being distributed through government social assistance channels might have prompted the development of more rigorous accountability mechanisms. Below we consider the diverse

experience of our four case studies, drawing on wider work on alternative accountability and monitoring approaches from Barca (2016); TRANSFORM (2017); Ayliffe et al. (2018), Lindert et al. (2020) and Smith and Bowen (2020).

Approaches used
Grievance mechanisms
In-person mechanisms
One approach, used as the primary grievance mechanism in Sri Lanka, was for people to raise issues and appeals by presenting themselves in person at the local village or divisional secretariat office. These offices were well known at the local level, and were reportedly an obvious focal point for citizens to present complaints. However, there were concerns about the lack of accountability and impartiality within this system (as in the routine system), since the officials receiving complaints and appeals were also part of the committee who had made the original eligibility decisions. Furthermore, there are clear concerns about requiring in-person resolution of issues, in the midst of the virus spread and lockdown restrictions.

Remote mechanisms
By contrast, Peru's emergency grants and Togo's *Novissi* scheme opted for digital-only grievance mechanisms, to avoid contagion risks. For *Novissi,* a private sector call centre was hired to deal with grievances and a toll-free phone helpline was established. This enabled applicants to receive advice on the registration process and check their application progress, but the service was not able to directly resolve individual issues. Feedback from this service led to the simplification of the registration interface after the first week and the introduction of an additional data requirement from applicants (a unique four-digit code from the voter ID card) to reduce the occurrence of ID theft. Like Togo, the Government of Peru also offered a phone helpline for people to raise queries and complaints about the emergency grants, which was complemented by an email helpline. The government significantly enhanced the provision of this helpline as the pandemic went on; for example, the email inbox set up for queries on the first *Bono* scheme was overwhelmed by tens of thousands of unanswered queries. As a result, the second *Bono* scheme established a formal e-helpdesk mechanism, which was staffed by more than 50 operators and used an IT ticket system to ensure that queries could be distributed and promptly addressed by relevant teams.

Piggybacking on routine systems
In some cases, the approach used for emergency provision was simply to adopt the routine grievance mechanisms already in place for existing programmes. Since Nigeria's emergency cash provision to date has been an expansion of its existing NASSP programme, it continued to use the existing grievance mechanism during the Covid-19 expansion. This combines in-person and phone options (attending a local government office or having an advocate attend on your behalf, or calling the state GRM desk officer or National Cash Transfer Office hotline). Strengthening this GRM was felt to be particularly important for the credibility of the programme given the volume of complaints and misperceptions about social assistance provision and the low levels of trust in the government. At the time of writing, it was not yet known what GRM mechanisms will be used for the new urban programme.

Audit and monitoring mechanisms

Audit and monitoring mechanisms were found to be a particular and explicit focus of operational systems where there had been historic questions relating to the probity of cash transfer provision and government corruption overall, as in the cases of Togo and Nigeria. In both contexts, innovative systems were introduced to establish and signal operational transparency to both the domestic audience and the international donor community.

Contracting a private auditing company

In Togo the adoption of electronic payments was intended to contribute to greater accountability, reducing the diversion risks inherent when cash was transferred via intermediaries to the intended recipients. To monitor the extent to which the funds transmitted by the central government reached beneficiaries, an electronic daily reconciliation of transactions by a private auditing company was conducted, to independently verify the transactions carried out. All transactions were logged (as successful, failed, pending, etc) and daily reports were generated. A programme dashboard was then implemented to provide key data to internal stakeholders (number of registrants, beneficiaries by locality, proportion of professions) and promote transparency with regard to donors. Much of this information was also publicly visible on the programme website.

Appointing official civil society monitors

An alternative approach, used in Nigeria's routine and Covid-19-accelerated NASSP, relies on direct monitoring by appointed civil society organisations who have an official mandate for independent oversight (ANEEJ, 2020). This process was helpful for identifying beneficiary feedback, and was also vital for building citizens' trust and confidence in the social protection system.

Collaborating with academic institutions

Another monitoring approach identified in our case studies was collaboration with academic institutions on impact monitoring surveys and evaluations. In Togo, the government hired the National Institute of Statistics to work with UC-Berkeley researchers on large-scale phone surveys for a *Novissi* impact evaluation (J-PAL, 2020). They are also working with the same researchers on satellite-imagery-based mapping to evaluate and refine the beneficiary targeting strategy, by applying machine learning techniques to various databases to create high-resolution poverty maps. These can be used to help assess the programme's performance in covering high-priority areas, and inform decisions on future targeting of cash transfers.

Proactive monitoring by local and international NGOs

Alongside government-led monitoring mechanisms, local or international non-governmental organisations also played a valuable role in conducting surveys and evaluations of their own initiative and sharing their findings with government to help refine the Covid-19 response. For example, in Sri Lanka, UNICEF and UNDP conducted three rounds of large-scale surveys in May, June and July and shared the findings with government as they came in (UNICEF and UNDP, 2020). These surveys helped assess the extent to which the government's emergency cash transfers were reaching households on the ground and the ways in which this money was being spent, as well as

wider impacts of the pandemic on households. In Nigeria, a pre-existing network of civil society 'champions' who had been observing the pre-Covid-19 NASSP roll-out continued to play a role in monitoring the NASSP expansion during the pandemic through field surveys. Their initial findings gave some confidence that the Covid-19-adjusted NASSP procedures were working reasonably well.

Table 6 summarises the key features of each case study's approach to accountability and monitoring.

Table 6 Summary of accountability and monitoring approaches

	Nigeria's Accelerated NASSP Expansion	Peru's Emergency *Bono* schemes	Sri Lanka's Emergency Rs. 5000 payments	Togo's *Novissi* scheme
Grievance redress mechanism				
In-person mechanism			x	
Remote mechanism: phone- or internet-based		x	x	x
Pre-Covid-19 routine programme mechanism	x			
Accountability mechanism				
Private audit company				x
Appointed civil society monitors	x			
Official collaboration with academic institutions				x
Proactive monitoring by CSOs and NGOs	x	x	x	x

Source: Authors' compilation

Enablers and bottlenecks for accountability and monitoring mechanisms

Several factors emerged in our case studies as enablers or bottlenecks for effective grievance and monitoring mechanisms.

The approach to addressing grievances in routine programming was found to influence the performance of crisis response programmes, particularly where emergency programming builds on existing structures. For example, in Sri Lanka, the absence of an independent process for resolving grievances in the routine *Samurdhi* programme carried over to the Covid-19 emergency transfer delivery. By contrast, in Nigeria, the third-party civil society monitoring system set up under the existing NASSP project was considered an effective accountability mechanism before Covid-19, and then provided a useful foundation for tracking the project's accelerated roll-out during the pandemic.

The capacity and authority of system operators to address the issues raised was found to be vital whether existing or new systems were used. In Peru, under-resourcing of the email helpline initially limited its ability to serve as an effective grievance mechanism, until the system was re-designed to enable programme staff to manage the volume of queries they received. In Togo, the phoneline served as an efficient information source but the operators did not have the ability or authority to resolve individual-level grievances, leaving citizens without any recourse if they faced challenges in accessing the transfer.

The value of engaging a trusted, independent third party for audit and monitoring mechanisms was highlighted in both Nigeria and Togo. In the case of the former, civil society monitors built confidence in programme accountability, while, in the latter, an independent accounting firm was used.

Having a centralised, digitised information system, that automatically compiles data on objective measures of programme performance, is beneficial, as illustrated by *Novissi* in Togo. The use of an electronic registration and payments platform, and the decision to base eligibility on non-discretionary criteria from the voter ID database (location and employment), made detailed data on programme applications, registration, implementation and disbursements available in real time. By contrast, in Sri Lanka, implementation was highly decentralised and based on local lists, with the consequence that comprehensive data on overall implementation was not readily available at national level, even six months after initial disbursement. Recognising this bottleneck, efforts are underway in Sri Lanka to build a centrally managed information system that can compile locally held data to enable easier monitoring of programme performance by national government and international agencies.

3   Effectiveness of delivery approaches

In line with the other papers in this series and with the broader literature (SPaN, 2019; SPACE, 2020; TRANSFORM, 2020), our analysis considers effectiveness in terms of four core criteria: (i) timeliness, (ii) coverage, (iii) adequacy and (iv) the appropriateness of the operational mechanisms to the unique public health context.[13] Our focus is on exploring the ways in which the operational adjustments reviewed above influence the effectiveness of cash transfer delivery.

Across our case studies, there was large variation in different dimensions of effectiveness, in part reflecting the specific ways in which the public health crisis manifested in different countries. For example, in countries where lockdown measures were more severely implemented (as in Peru), there was greater impetus to design timely, remote assistance programmes that promoted compliance by reducing incentives for people to leave their homes. By contrast, in contexts where public health restrictions were not as stringent (as in many parts of rural Nigeria), developing approaches that avoided all face-to-face interaction may have been less of a concern. The cross-country variation also reflects the differing objectives that governments held in implementing their programmes and hence the relative priority given to the different aspects of effectiveness and the trade-offs between them. For example, there were obvious trade-offs between the Covid-19-appropriateness and equity of coverage. Togo's 100% digital approach supported reductions in face-to-face interaction but with potential digital exclusion risks, whereas the absence of digital mechanisms in Nigeria's rural NASSP expansion meant that the prioritisation of inclusive coverage increased Covid-19 transmission risks. Governments gave different weight to short- and long-term dimensions of efficacy. In Nigeria's urban programme, the ambition to develop a digital-based, Covid-19-secure approach that could be used for future programming was prioritised at the expense of timeliness, coverage and adequacy in the short term. Conversely, in Sri Lanka, the imperative to get payments out quickly and at scale meant relying on more contact-intensive, manual mechanisms that could be instantly deployed in the emergency phase, regardless of their value for long-term system development.

3.1 Timeliness

This section considers the ways in which different delivery approaches across our case studies influenced the timeliness of their emergency programme implementation.

Rapid mobilisation of emergency provision was seen in **Togo**, where the *Novissi* digital registration platform was set up in a remarkable ten days, and launched on 8 April, one week after the state of public health emergency was announced. The processes of checking eligibility (against the

---

13   We also recognise the importance of cost-effectiveness and efficiency criteria in assessing the effectiveness of operational systems, but due to the lack of robust data available at the time of the research on operational system costs and impacts, these criteria were not included in the review.

voter ID database) and disbursing payments (to the mobile money account details provided upon registration) were virtually instant, meaning that more than 30,000 payments were reportedly made within 48 hours of the platform launch (Government of Togo, 2020d). Three weeks later, at the end of April, nearly 1.3 million adults had registered via the SMS platform and 475,000 had received payments (Akoda, 2020; Government of Togo, 2020e).

In **Peru**, the timeliness of the payment depended on the scheme and the beneficiary's payment modality. The first scheme, *Bono 'Yo Me Quedo en Casa'* was formally announced on the same day as lockdown on 16 March and payments for the first of the 2.7 million beneficiary households began one week later, from 23 March. Those collecting in-person payments (because they lacked state bank accounts for electronic transfers) reportedly struggled to collect during their appointed time slot due to crowds at the payment points and limited agency opening hours; this was subsequently addressed through expanded collection times. The second scheme (*Bono Independiente*) was announced on 24 March, with beneficiary payments starting for the first of 780,000 beneficiary households two weeks later; multiple payment options enabled around three-quarters of beneficiaries to receive their payment within a month. Announced on 19 April, the third scheme (*Bono Rural*) enabled poor and extremely poor rural households in the social registry to start receiving payments from 10 May (La Republica, 2020). But for those who were not in the existing social registry and therefore only covered by the fourth and final scheme (*Bono Familiar Universal*) after registering in the new National Household Registry, payments did not begin until August, several months into one of the strictest lockdowns worldwide (Ministry of Economy and Finance, 2020; Tegel, 2020).

In **Sri Lanka**, a nationwide curfew was introduced on 20 March, and the emergency cash transfer measures were announced 10 days later. Through the decentralised government infrastructure, the first payments were made by local authorities during April, and phone monitoring surveys by UNICEF and UNDP (2020) in May found that the majority of those who registered had received the payments during that time.

By contrast, in **Nigeria**, the timeliness of the emergency cash response was a relative weakness. For the NASSP expansion component, this in part reflected the fact that the routine cash transfer payments were already delayed coming into the pandemic, having been disrupted by the NASSP transition from the Vice President's Office to the newly created Ministry of Humanitarian Affairs, Disaster Management and Social Development the previous year. In April, a combined January/February and March/April payment started to be paid to the 400,000 beneficiary households (comprising households registered both before and during Covid-19), but delays in payment agent contracts meant that some states still had not initiated their payments several months later. For urban households to be supported through the temporary Covid-19 relief scheme, the decision to develop a new Rapid Response Register pioneering relatively complex identification and payment approaches meant assistance was unlikely to implemented before early 2021.

The timeline of programme announcement and the initiation of payments across the case studies is summarised in Figure 1 below.

Figure 1 Timeline for Covid-19 assistance announcements and first payments
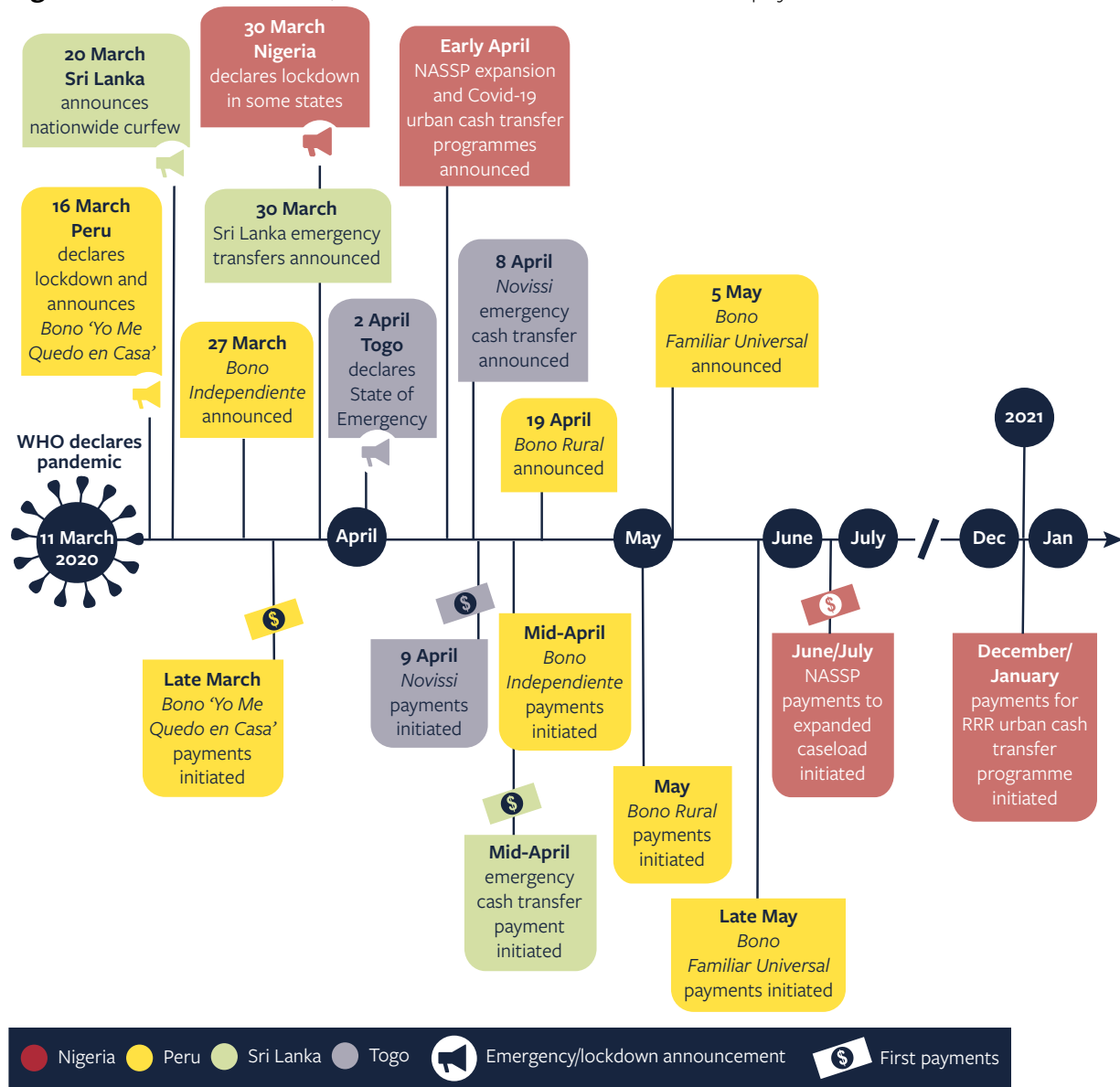
Note: NASSP, National Social Safety Nets Project (Nigeria); RRR, Rapid Response Register (Nigeria); WHO, World Health Organization

Source: Authors, initial design by Valentina Barca

Notable factors found to facilitate timeliness across the case studies are consistent with those identified as enabling effective performance in each delivery phase above, as follows:

An institutional culture of flexibility and pragmatism, putting an emphasis on 'starting with what you've got', facilitated a timely approach. In Peru, this meant using the social registry for

the first phase, and moving quickly to start developing a more comprehensive registry for later payments. In the absence of any national ID system in Togo, the pragmatic although politically sensitive decision was made to use the voter ID database. In Sri Lanka, the government worked through existing local structures for welfare provision, to get payments out quickly on the ground.

The quality of existing government administrative systems had a significant impact. Linked to the point above, some countries had the advantage of broad and high-quality population datasets, identification systems and/or welfare delivery structures on which to base emergency provision. Nigeria was at a significant disadvantage here, having only a nascent system for social protection, a small-scale social registry and no nationwide system of foundational IDs. However, even in the Nigerian case, the fact that the NASSP structures existed was perceived to have sped up the process, providing at least a foundation for getting payments to newly registered beneficiaries in areas covered by the NASSP expansion.

High-level political support also visibly accelerated programme development. Presidential decrees and announcements in Peru, Sri Lanka and Togo gave notable national prominence to the emergency schemes, creating momentum for their rapid delivery.

3.2 Coverage

This section considers how different delivery approaches across our case studies influenced coverage, considered both in terms of scale (in relation to the affected population and the specifically targeted population) and in terms of equity (who was covered and who was not, within the affected or target group).[14]

The case of **Peru** was characterised by a layered and sequenced approach to progressively increase coverage of the non-formal sector, which represents 69% of total employment (ILO, 2018). After starting with poor households and subsequently non-poor households listed in the social registry, the increasingly evident gaps in that database led to a decision to permit on-demand registration for the final *Bono Familiar Universal* scheme. This final scheme aimed only to exclude households with a formally employed member (and wealthy households identified through payroll, tax and financial regulator databases). Ultimately it reached 68.4% of the population, according to the Ministry of Development and Social Inclusion (MIDIS). Civil society representatives reported some continued exclusion errors, with a small proportion of households not able to access it due to lack of a valid ID number or challenges using the online system. Furthermore, both regular and irregular migrants were excluded from the scheme (and the social registry), leaving a critical gap that could be filled only partially by humanitarian assistance for Peru's 1 million Venezuelan migrants (WFP et al., 2021).

———

14   The programme coverage statistics presented in this section are not intended as comparable measures of the adequacy of provision, as governments used a range of instruments to support affected populations and our analysis is focused on only one aspect of the social protection package.

In **Sri Lanka,** a multi-pronged identification approach also facilitated high coverage, with the government reporting that 5.4 million payments were made in April and 5.7 million in May. Precise estimates of coverage rates are hard to determine since some households received multiple payments (either because of having multiple families living in one household, or because of having household members targeted for multiple needs e.g. a senior citizen plus a self-employed worker). Telephone surveys by UNICEF and UNDP (2020) found that between 62% and 65% of surveyed households had received the government assistance in April and May, and UNICEF (2020c) estimates a coverage rate of around 66% of all households and 90% of the poorest. The government, however, estimates that around 90% of households were covered, including universal coverage of the poor. Coverage can therefore be categorised as being either high or extremely high.

Unlike Peru and Sri Lanka which sought nationwide coverage, **Togo's** *Novissi* scheme was restricted to two prefectures in Grand Lomé in April and extended to the next largest urban area in May; this geographical targeting was directly linked to the implementation of stricter curfew measures in these areas (through June). During this period, the scheme covered 567,000 beneficiaries, equating to just over one-third of adults in all urban areas,[15] although the proportional coverage in the specific targeted cities/prefectures will surpass this. In August, the scheme resumed for three weeks, this time targeting Soudou, a rural locality near Lomé, where high transmission rates were occurring. There were 5,850 beneficiaries, which was reportedly around 82% of the adult population. In relation to equity of coverage, the exclusive focus on those listed in the voter ID database as working in informal worker occupations was felt by some to be problematic, since it excluded certain vulnerable groups such as unemployed people with disabilities. Beyond this, there were also concerns about the potential for exclusion errors given the fully digital approach. However, there has not yet been any independent evaluation that we are aware of, to enable assessment of the degree of coverage gaps. The heavily urban focus of the *Novissi* scheme was also a matter of some concern, given that many rural households had also been heavily impacted by Covid-19 measures, particularly the border closures that left farmers unable to sell their goods and facing high levels of food insecurity. These concerns likely prompted the later plans to temporarily expand the routine, rural-focused cash transfer scheme from July onwards to an additional 38,000 households in the poorest rural areas.

In **Nigeria** too, the plan was to expand support both through increasing coverage of the routine cash transfer and through a new urban scheme. The routine scheme aims to expand from 400,000 households at the onset of Covid-19, to 2 million households by the end of 2020, using a slightly modified version of the traditional NASSP targeting process combining geographic, community-based and PMT approaches. This mixed eligibility determination was reportedly working quite well, both before Covid-19 and in its modified form (World Bank, 2020f; Civil

---

15   According to the World Bank (Boko et al., forthcoming), there are 3.85 million adults (18 or over) in Togo. Since 42% of the Togolese population resides in urban areas (World Bank, 2020g), the total adult population in urban areas is around 1.6 million.

Society KIIs). In 2021, it is hoped that at least 1 million additional households (and potentially up to 3 million, depending on World Bank funding) will receive temporary Covid-19 cash transfers via the urban Rapid Response Register, which pioneers new identification methods. The need to avoid inclusion errors through final-stage PMT verification was mentioned; to some degree, attempts to mitigate exclusion errors were also referenced (for example through using civil society databases to identify those missed by SMS-based registration, and supporting unbanked households to open accounts for payment receipt). The combined beneficiary caseload across the NASSP and urban schemes amounts to at least 3 million households, a significant increase on the pre-Covid-19 NASSP coverage of 400,000 households but a small fraction of Nigeria's total population (around 43 million households), of whom 40% are poor and the vast majority make their living in informal employment (ILO, 2018; NBS, 2020).

Alongside the enablers and bottlenecks discussed above in relation to specific delivery phases, three key factors affecting coverage outcomes are worth highlighting here.

The immediate availability of resources to finance expanded provision (whether through pre-planned contingency funding or ex-post commitments). In Nigeria for example, domestic funding constraints, exacerbated by the significant fall in oil prices during the crisis represented a severe impediment to delivering support at scale. The planned increases in target coverage were possible only by renegotiating the terms of existing World Bank funding provided under the five-year NASSP project, to front-load expenditure in order to accelerate roll-out.

Pre-crisis coverage of routine social protection programmes and delivery systems directly influences emergency programme coverage. Peru and Sri Lanka were able to achieve high nationwide coverage by relying heavily on existing social assistance information or administration systems, whereas Nigeria's nascent NASSP roll-out or Togo's limited routine cash transfer provision led to more geographically limited and less comprehensive coverage of emergency transfers.

Related infrastructure for IDs, financial service provision, mobile phones and digital access also shaped the scale of emergency transfers, and the potential for exclusion errors, as discussed at length above in relation to the specific delivery phases (Section 2.2), as well as in the wider literature (Gelb and Mukherjee, 2020; World Bank, 2020c; e).

3.3 Adequacy

The adequacy of social assistance provision across our case studies was found to vary significantly in line with the objectives of the programme, with some aiming to provide income replacement during periods of lockdown, and others attempting to provide income supplements of a more symbolic nature.

In **Peru**, the initial transfer value was set at S/380 ($104.5) [16], which equates to around 89% of average monthly income for the poorest household quintile, who were the target for that scheme (although the percentage above applies to national average, rather than the average for the urban poor, who were the target of that scheme) (IPC-IG, 2021). When the initial two-week lockdown was extended, the transfer size was doubled for the first set of beneficiaries, and maintained at the higher level (S/760, or $209) for all future emergency transfer schemes (27% of monthly income for the average household, or 178% of monthly income for the poorest quintile). However, after this initial support of S/760, some beneficiary households had to withstand several further months of lockdown before the *Bono Familiar Universal* payment kicked in. Consequently, while civil society representatives highlighted that the support was greatly appreciated, it was not sufficient to compensate for the many months of lost earnings that households faced during a strict and protracted lockdown. This was particularly the case for urban households, given the lack of distinction between the urban and rural transfer values.

In **Sri Lanka**, two transfers of LKR 5,000 ($26) were paid in the first two months of the nationwide lockdown, but not continued as the election commission ruled that this would interfere with the parliamentary election neutrality during the campaigning period. LKR 5,000 equates to around 8% of average household income for a month (UNICEF, 2020b), highlighting the value of the transfers more as a symbolic gesture than a significant real income replacement.

In **Togo**, the *Novissi* transfers were valued at 12,250 CFA ($22.5) for women and 10,500 CFA ($19) for men, with women receiving a higher value transfer on the basis that they spend a greater proportion of the transfer on children. This transfer intended to prevent a rise in the urban poverty rate in the areas with the strictest curfews and mobility restrictions. When commenting on the transfer adequacy, government representatives noted that the transfer equated to around one-third of the monthly minimum wage, and was paid for up to two months in the first phase and for less than one month in the second. Civil society interviewees suggested that the transfer value was widely felt to be too low to protect target households' food security given the high cost of living in urban areas, leading to some cynicism about the notion that it provided meaningful support during the crisis period.

In **Nigeria**, the monthly transfer value of NGN 5,000 ($13) for the NASSP expansion reflects the transfer level used for the base transfer in the routine cash transfer scheme. This value was set in 2016 based on a cost of diet analysis at the time, and even before Covid-19 there were discussions about the need to increase the level in line with inflation, a need which is only likely to have increased during this crisis. Currently, the transfer level of the temporary cash transfer scheme for urban households on the Rapid Response Register is also set at NGN 5,000, reflecting some desire to align with the core scheme, although this may be revisited given the higher cost of living in

16   Dollar values cited in this paper are calculated on the basis of exchange rates from February 2021: $1 = 3.64 Peruvian soles; $1 = 194 Sri Lankan rupees; $1= 541 West African francs; $1 = 381 Nigerian naira.

urban areas. The duration and scale of the temporary cash transfer programme is under discussion between the Government and the World Bank and is likely to be between six and twelve months and one to three million households, depending on whether additional financing could be secured.

Across our case studies, operational considerations shaped the adequacy of transfer value in several key ways, as follows.

As with coverage levels, the availability of funding also affects the duration, frequency and value of payments. For example, the duration of the new urban programme in Nigeria will be closely linked to the ability to secure additional World Bank financing, beyond that already committed for the NASSP project. In the *Novissi* scheme, the objective of financing provision for all eligible applicants was one factor in determining the level at which the transfer was set, pending the identification of additional financing.

Practical considerations directly influence how transfer values are set. In Togo, the fact that payments were made to individuals based on their voter ID record allowed transfer values to be automatically adjusted based on gender; this aimed to ensure that the level of support was adequately set for the individual recipient because prior evidence suggested that a greater share of women's expenditure went towards wider household needs. By contrast, in Nigeria, no differentiation has been made between the new urban transfer value and the existing (rural-focused) NASSP cash transfer value, partly because of the lack of a more recent urban-specific cost of living calculation and partly due to potential political benefits of maintaining a transfer level consistent with existing NASSP provision. In Sri Lanka too, the crisis transfer value follows the existing monthly transfer value for some of the routine social safety net schemes, limiting potential for contestation, while also minimising transaction complexity by requiring only a single LKR 5,000 note to be paid to each beneficiary.

Operational approaches affect the real value of the support received. In Nigeria and also parts of Amazonian Peru, where transfers required beneficiaries to travel significant distances to access the payment, opportunity costs reduced the net value of support received, and also increased the risk of exposure to Covid-19 (Takasaki et al., 2020). In-person payment approaches can also increase opportunities for corruption, with beneficiaries reporting pressure to give part of their payment to community leaders during the distribution in Nigeria (ANEEJ, 2020). The value of electronic payments can also be significantly reduced if money transaction fees are levied.

3.4 Appropriateness – sensitivity to public health context

As well as facilitating adequate and timely socioeconomic assistance at the required scale, shock-responsive operational mechanisms also need to be sensitive to the specific crisis environment. This section considers the extent to which countries were able to adopt delivery approaches that were appropriately designed given the unique public health context of the pandemic and the overarching need not to exacerbate virus transmission rates.

In **Peru**, the government attempted to rely heavily on remote mechanisms in order to reduce Covid-19 transmission risks, a strategy that was perceived to be feasible given that the least digitally connected households were likely to be already listed in the social registry, and so automatically included in the programmes. Outreach, enrolment and complaints-handling were managed in an entirely remote manner, and bank or e-wallet transfers were prioritised for payments. In the minority of cases where in-person payment was necessary, the household member with the lowest Covid-19 risk was automatically selected as the payee (female, not elderly, not disabled), to reduce transmission. Efforts were made to improve the range of digital mechanisms over the course of the crisis, for example by adding the e-wallet and private bank transfer payment modalities, and by introducing the e-helpdesk to manage *Bono* queries after the inundation of the initial email inbox that was set up for queries. Initiatives were also implemented to proactively reach beneficiaries who appeared to be struggling to access their payments, for example by collaborating with mobile network providers to send personalised SMS messages, and by publishing beneficiary lists and running radio campaigns in low-uptake districts.

In **Togo**, the 100% digital approach (with registration, payments and query-handling processes all being conducted solely through remote channels) was chosen to avoid congregation of beneficiaries in the pandemic circumstances, as well as to guarantee transparency of mass emergency payments. This digital approach was perceived to be acceptable, given the urban audience for the scheme. The strategy did not require people to have mobile phones of their own or to have pre-existing mobile money accounts, but they needed to be able to access someone else's phone and to open a new mobile money account if they did not have one. This was seen to promote financial inclusion without increasing contagion risks. Nonetheless, challenges were posed by people congregating unexpectedly at mobile money agents. Civil society representatives also noted concerns about potential digital exclusion risks, which still need to be investigated further.

In **Sri Lanka** it was not possible to adopt remote provision in response to the particular challenges of the crisis; neither the registration nor the payments process were digitised as in the examples above. For people with the highest Covid-19 risk, payments were home delivered by local officials. However, in many cases, household members had to present themselves in person either to request inclusion in the emergency scheme or to collect their money from a payment point.

Similarly, in **Nigeria**, given digital infrastructure quality and access, there was no way to shift to remote registration or payments for the rural-focused NASSP. Instead, efforts were made to modify the most interaction-heavy activities and to add Covid-19-safety measures for registration and payments. By contrast, a more Covid-19-sensitive design was developed for the temporary urban programme, using approaches such as satellite-imagery-based poverty-mapping, SMS-based registration and digital payments to reduce the level of in-person interaction required. However, as noted above, this urban programme had not yet started operation at the time of writing (December 2020).

The public health dimensions of the crisis created a demand for reduced in-person contact. The extent to which remote solutions were a viable response was determined by two main factors.

The first factor is the **digital and financial services infrastructure**, which shaped options for remote methods of registration, enrolment, payment and accountability. Access to mobile phones, mobile money, bank accounts, and mobile/internet network coverage, alongside levels of digital and financial inclusion, shaped whether the most pandemic-appropriate programming could be implemented in practice.

The second factor is **technical capacity for digital government**, which was vital to make use of the infrastructure that existed. For example, Togo's Digital Ministry had been trialling innovative digital approaches to enhance government service provision for a decade, and in designing *Novissi* drew on expertise in designing and running projects that support households to open mobile bank accounts and receive digital government transfers. By contrast, in countries where digital government initiatives are more nascent, there was less experience and skills to innovate with digital responses.

3.5 Cross-cutting enablers of effective implementation

Our case study analysis highlighted a wide range of enablers that facilitated (or, in their absence, constrained) the effective implementation of timely, adequate support at scale, in a pandemic-sensitive manner. Table 7 synthesises the cross-cutting factors that emerged as important across the delivery system phases from this study.

Table 7 Summary description of key enablers

Enabler	Description
Digital and financial services penetration and uptake	In terms of the broader context, the penetration of mobile phone and internet networks and financial services (banking and mobile money), together with levels of financial and digital inclusion among affected populations, was a dominant enabler of rapid crisis programme development and implementation. This set the boundaries for what was technically possible in terms of delivery mechanisms across our case studies.
Availability of unique ID	The existence of some form of unique identifier was a fundamental enabler of rapid, inclusive and accountable crisis provision. In the absence of a formal foundational ID system, the use of substitutes, such as comprehensive local-level population lists or a voter ID, enabled timely, although potentially less inclusive or transparent, provision to be made.
Access to funding	The availability of financing shaped delivery options, as well as the speed, coverage and adequacy of transfers that could be implemented.
Political commitment	High-level support, together with strong central leadership and vision, was critical in enabling the rapid resolution of legislative, mandate and financing issues which would otherwise have constrained operational performance. This also facilitated critical intergovernmental collaboration on technical and delivery issues.
Legislation	The existence of appropriate legal frameworks and protocols for cooperating and exchanging data with other government agencies and non-governmental stakeholders (e.g. banks or mobile network operators) greatly facilitated implementation. The ability to make rapid adjustments to these protocols where necessary, often under the mandate of emergency legislation, was particularly important.
Institutional capacity	Within the social protection sector, the institutional capacity of the agencies responsible for provision was critical; administrative and technical skills, human resource availability, outreach, and credibility and trust determined the set of possible operational choices available for crisis response.
Operational systems	Effective core social protection systems strongly determined operational options and performance during the crisis response. In particular, our analysis highlighted the strong benefits of having a high-quality, interoperable social registry, capacity for a range of payment modalities and robust and diverse existing mechanisms for outreach, grievance redress and monitoring.
Institutional culture	An institutional culture characterised by innovation, flexibility, humility, pragmatism and collaboration contributed significantly to the development of effective operational outcomes. This includes the ability to: evaluate which aspects of routine social protection to build upon in the crisis response and which to reject; identify appropriate innovations well suited to meet the new crisis needs; and iterate to improve the response throughout implementation.[17]

Source: Authors

___

17   This relates closely to the concept of agile management or problem-driven iterative adaptation (PDIA). See Samji et al. (2018), notably sections 6 and 7, on designing and learning from iterations. For PDIA's application to public leadership in crisis contexts, see BSC (2020).

4 Emerging lessons and recommendations

Experiences during the Covid-19 crisis have demonstrated the potential for national social protection systems to provide rapid support at scale in the face of a major covariate shock (Gentilini et al., 2020; IPC-IG, 2021), in a way that was not possible in previous global crises such as the 2007/2008 food, fuel and financial crisis (see for example McCord, 2013). Our case studies illustrate that, given political support, adequate resources and a mandate to extend delivery, social protection systems can be used to provide crisis assistance that expands significantly beyond pre-existing beneficiaries, in terms of both scale of provision and target groups. This section considers:

1. the extent to which the Covid-19 response has contributed, or appears likely to contribute, to the longer-term strengthening of social assistance delivery systems
2. lessons from this crisis for enabling effective adaptive social assistance delivery, and operational recommendations.

4.1 Covid-19 crisis response: an opportunity to strengthen social assistance delivery systems?

By exposing gaps in existing systems and stimulating a significant international wave of new and expanded social protection responses, Covid-19 has given further impetus to the global drive to develop effective, adaptive social protection systems with universal coverage (socialprotection.org, 2020). This has the potential to trigger significant development in the sector, as was observed after the last major global crisis, the 2007/2008 food, fuel and financial crisis, which provided both the impetus and also international financing for extensive social protection systems development globally (McCord, 2013). Below, we draw on our case studies to consider the extent to and ways in which the Covid-19 response may help to strengthen social assistance systems, based on evidence from the first nine months of the crisis. We focus primarily on key implications for operational system-strengthening, before briefly considering the implications of these operational changes for social protection provision more broadly.

4.1.1 Implications for operational capacity

In all of our case studies, there was interest in institutionalising some aspects of the operational learning from the Covid-19 response, with a view to improving delivery for routine provision and future shock responses. The potential impacts on longer-term operational capacity related to two main categories: increased investment in adapting existing systems, and faster adoption of new approaches.

Increased investments in core operational systems with adaptive capacity

Before the pandemic, widespread efforts were already underway to build or enhance core social protection delivery systems. The Covid-19 crisis laid bare areas still in need of development, and provided evidence of the potential benefits of improved operational systems, not only for routine provision but also for effective shock responses. In this way the crisis is likely to give additional momentum to initiatives to strengthen core operational systems, as well as increase the focus on developing systems with appropriate adaptive capacity.

Some indications of increased investment in core operational systems had already emerged in our case study countries. The most common example relates to establishing or strengthening social protection information systems (particularly social registries), including in more advanced cases developing the frameworks to improve their interoperability with other agencies. In Peru, for example, concrete steps are already underway to ensure that the SISFOH social protection information system data is more current, complete and interoperable with other databases in future. The 2021 budget law gives the social development ministry (MIDIS) the leading role on managing the newly developed National Household Registry and on developing the protocols and capacity for data-sharing and more interoperable systems. In Togo, the experience delivering *Novissi* is informing the development of the country's first national social registry, which will be linked in the next 18 months to a new foundational ID system that the government is developing with World Bank support. In Nigeria, the growing National Social Register (NSR) doubled in size during the pandemic, following the decision to piggyback on the NASSP for the Covid-19 response. As the NSR continues to expand, the intention is for government, humanitarian and development partners to use it as the principal database for future routine and shock-responsive social protection programming (including by incorporating the forthcoming Rapid Response Register as a sub-set of the NSR). Meanwhile, in Sri Lanka, the government highlighted the importance of working to develop a central electronic information system that can automatically compile and report on local-level datasets related to social protection.

Accelerated adoption of new operational approaches

As well as stimulating investment in core operational systems, the Covid-19 crisis is accelerating operational changes, particularly (although not exclusively) towards greater use of digital approaches. While these trends were already underway before the pandemic, experimentation with alternative operational approaches during the crisis response may have provided a basis for their earlier incorporation into longer-term programming. Examples in our case studies related mainly to the identification/registration and payments phases.

In terms of identification and registration, the increased use of **on-demand registration approaches** during the Covid-19 response may have increased the appetite and capacity for using this form of registration more widely and effectively in longer-term systems. In Peru, for example, there is an expectation that the arrangements for on-demand SISFOH updates will be improved following this crisis. Similarly, experimentation with **technology-based identification approaches** during the crisis response may accelerate their adoption in future programming, for both on-

demand applications and administrator-driven selection. In Togo, for example, the government is already making use of the satellite-imagery-based poverty mapping and machine learning mechanisms developed during the pandemic to identify priority households for future transfers.

In terms of payment approaches, the Covid-19 response saw many governments trial new **digital payment modalities**, some of which are likely to be permanently adopted. In Togo, for example, the intention is for mobile money payments to become the dominant mechanism for future social protection provision, including thinking about ways to facilitate universal access to a mobile phone and network coverage for future beneficiaries. In Nigeria, the introduction of digital payments for the temporary urban Covid-19 programme was perceived as a first step towards the eventual digitisation of payments in the wider NASSP programme. Expanded capacity for digital payments has the potential to facilitate convenient, rapid, and efficient payments for recipients who are able to access financial services, although the attention given to digital payment modalities during the crisis should not overshadow the continued need for manual alternatives, for those unable to access financial services and in contexts where digital services provision is disrupted or limited.

4.1.2   Broader implications

Beyond improving technical performance, the operational developments described above have some potential to help address pre-crisis gaps in social assistance provision. In the case of Togo, the operational capacity developed for the implementation of *Novissi* during Covid-19 is perceived by the government as a step towards developing a universal social safety net system and also a means to strengthen the social contract, setting new expectations about the timeliness, transparency, quality and effectiveness of public service provision. By providing a tangible example of government support for those in need, it was hoped that *Novissi* might incentivise greater engagement with government systems more generally, including registration in the tax system.

In the other case studies, there was less evidence of the Covid-19 experience resulting in plans for significantly extended social assistance coverage. In Sri Lanka, there was a reluctance to convert increased coverage during the crisis into a sustained expansion of provision, while in Nigeria, the plans for permanent expansion pre-dated the pandemic. In Peru, the government piggybacked on its Covid-19 response to launch a new programme focused on early child development that extended *Juntos'* routine coverage to previously unserved, largely urban areas.[18] While this will improve urban coverage, it is not primarily designed to fill the gaps in social protection for informal workers identified during the crisis. Ultimately, governments' decisions to convert

---

18   The programme provides support to mothers of children under the age of two who live in areas with poverty prevalence above 15% and whose household has no access to formal employment. It was launched in September 2020 as a one-year pilot, but there is a strong expectation that it will be permanently integrated into routine programming.

pandemic-related expansions into permanent provision for previously neglected groups depend less on operational capabilities than on resource availability and political interest in enhancing social protection coverage.

4.2 Emerging lessons and recommendations

Over the course of this study, several factors were identified as key enablers of effective social protection implementation during Covid-19. These enablers are summarised in Figure 2, and lessons and recommendations emerging from them are summarised in Table 8.

Figure 2 Enablers of effective and flexible shock responsive delivery systems
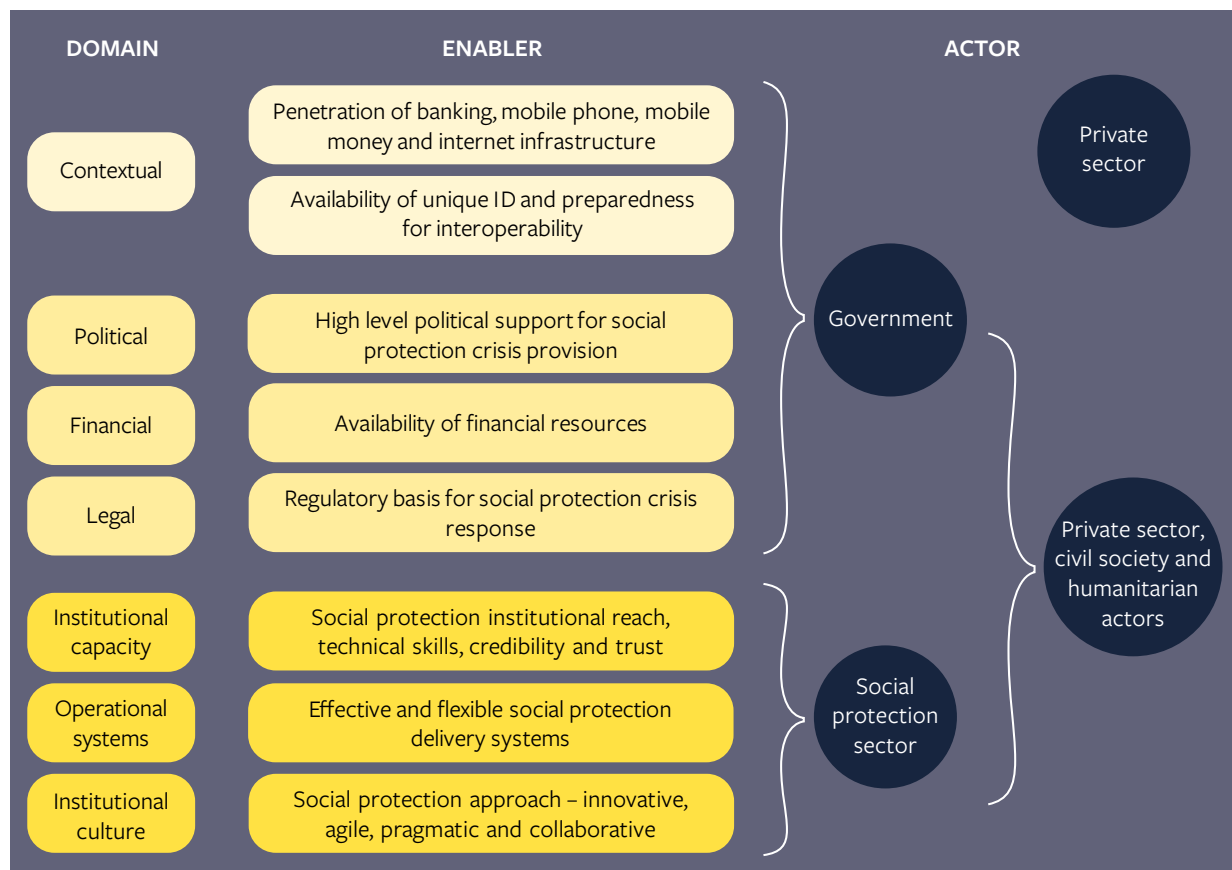
Source: Authors

As Figure 2 illustrates, key factors outside the social protection sphere can have a significant impact on the effectiveness of a crisis response. Contextual enablers include: the existence of a robust foundational ID system; widespread access to mobile phones and coverage of phone and internet networks; high levels of financial inclusion and a well-developed financial services infrastructure; and digital government capacity. Successful implementation is also linked to wider

government support for shock-responsive social assistance, in terms of political and financial backing, as well as the provision of legal frameworks enabling collaboration between government agencies and with private and non-governmental actors.

With respect to the social protection sector itself, our study finds that effective shock response is generally, although not necessarily, contingent on the quality of the social protection system already in place. The existence of large-scale information systems, notably beneficiary and social registries, is a major asset, particularly if the data they contain has been updated recently and includes contact and bank account information, and the registries are interoperable with other government agencies. Having a range of effective payment mechanisms, robust systems for grievance redress and third-party monitoring, and an adequately resourced and high-capacity social protection workforce is also immensely valuable. The stronger these systems are, the more options a government has in times of crisis. However, ex-ante system strengthening measures are not a substitute for an agile, context-specific, ex-post response that is both flexible and pragmatic. Overall, our case studies indicated that underdeveloped systems and gaps in preparedness measures do not necessarily prevent an effective shock response. But they do constrain the set of possible options and render innovation, flexibility and collaboration with other high-capacity partners all the more important.

It should be noted that some of the conditions enabling delivery adaptations in response to Covid-19 were highly specific to this crisis, and may not be readily transferable either to routine social protection provision or to other shock responses.[19] In particular, the scale of the Covid-19 crisis and the associated desire to deliver mass assistance to an expanded range of demographic and socioeconomic groups made certain innovations more feasible and desirable than in contexts where provision is more limited. Simplified targeting criteria and less stringent verification processes were adopted to address the overriding concern to avoid errors of exclusion, rather than inclusion, in a reversal of more typical approaches in programme delivery. The goal of achieving high or even universal coverage for certain groups or categories of workers in the Covid-19 response also made large-scale on-demand registration a feasible option, an approach that is less easily adopted in the context of the heavily rationed, supply-driven provision that characterises much routine social protection programming in low- and middle-income contexts.

Notwithstanding these Covid-19-specific considerations, the enablers identified in this analysis are consistent with those highlighted as critical for the shock-responsive expansion of social assistance provision in pre-Covid-19 literature (e.g. Bastagli, 2014; OPM, 2017; O'Brien et al., 2018; Barca and Beazley, 2019; Beazley et al., 2019). It is particularly notable that many of the factors that enabled large-scale Covid-19 responses in 2020 were those identified as hindering effective responses to the global crisis of 2007/2008: the low prevalence of national social protection systems, limited delivery mechanisms, and constrained targeting options (McCord, 2013). The **coverage and prevalence of social protection systems** has expanded significantly, now existing in some form in every country worldwide and reaching

---

19   For guidance on differentiation of social protection delivery approaches in different shock contexts, see
      TRANSFORM (2020).

45% of the population, compared to only 20% in 2013 (McCord, 2013). **Transfer delivery options** have notably improved over the same period, with the rapid adoption of G2P systems and the growth of electronic payment modalities, made possible by the extension of mobile phone, internet, bank and mobile money infrastructure, alongside increases in digital and financial inclusion.

The **targeting context** has also experienced significant change over this time: whereas previously there was a reliance on labour-intensive, programme-specific approaches such as CBT and PMT, extensive investment in the development of social protection information systems and ID systems has meant that new mechanisms for rapidly identifying and verifying eligible populations were available during the Covid-19 response. Improvements in technology and data, together with the increased maturity of systems, has created the possibility of moving away from exclusively supply-driven social assistance to enable a greater degree of demand-driven responses, which in turn has facilitated programme reach to new groups such as informal workers (although there is not yet evidence that this will result in sustained shifts to demand-driven programming in the sector more widely in the longer term).

Addressing these fundamental constraints was central to much systems-development work in the sector over the last decade. This changed the characteristics of the Covid-19 response compared to the 2007/2008 global crisis, when the limited potential to deliver emergency cash provision resulted in a greater reliance on subsidies, in-kind provision and labour market policies as alternatives (McCord, 2013).

Given our case study lessons on the enablers of effective implementation during the pandemic, Table 8 identifies recommendations and guidance for effectively maintaining or expanding assistance in times of crisis.[20]

---

20   These recommendations are not intended to provide a set of comprehensive operational guidelines for delivery aspects of either routine or shock-responsive programming – this purpose is already well served by a number of existing toolkit-style resources, which are focused on building shock-responsive capacity 'ex ante' and strengthening social protection delivery systems more generally (see O'Brien et al., 2018; Bowen et al., 2020; Lindert et al., 2020; Smith and Bowen, 2020; SPACE, 2020 and TRANSFORM, 2020).

Table 8 Recommendations for facing future covariate shocks

Enabler	Crisis response recommendation
Digital and financial services provision and uptake	• Assess: (i) the state of infrastructure and affected population's access to mobile phones, network coverage, and traditional and non-traditional financial services; and (ii) government capacity and experience of using this infrastructure to provide services to the affected population. • Consider options for drawing on this infrastructure, capacity and experience to the extent that it meets the demands of the crisis response and is appropriately suited to the affected population's needs. Ensure suitable monitoring and support mechanisms for reaching digitally or financially excluded groups, for example through official partnerships with grassroots civil society organisations.
Availability of a unique ID	• Assess quality and scope of any foundational ID system. Where no large-scale foundational ID system exists, assess coverage, currency, character and capabilities of functional ID systems that could serve as a substitute.
Access to funding	• Identify resources for rapid social protection provision through requests for release of contingency or reserve funds, budget reallocation or applications for additional domestic/international grants/loans.
Political commitment	• Seek high-level buy-in, highlighting the potential role of a timely social protection response in mitigating the negative economic, social and political impacts that shocks can generate. • Initiate a collaborative dialogue across different institutions within government.
Broader legislative framework	• Assess the state of existing legal frameworks and protocols regulating exchange of data and payment disbursal, in relation to relevant partners in other government agencies and in the private and non-profit sectors. • Advocate for emergency adjustments to existing legal frameworks where necessary and appropriate (e.g. to enable payment via public and private telecommunications and financial service providers, where this can be done securely and transparently without compromising protection of participants' data).
Institutional capacity	• Make use of the relevant strengths, skills and resources already held within the social protection system. • Reinforce with additional capacity where needed; avoid launching mechanisms that cannot be adequately resourced to function in practice. • Establish continuous audit by a trusted, independent monitor.

Table 8 Recommendations for facing future covariate shocks (continued)

Operational systems	• Assess the state and shock-preparedness of core delivery systems, and consider which aspects: (i) are relevant and readily able to serve the current crisis context; (ii) need modifications to maintain routine provision or to deliver additional crisis assistance; and (iii) are not appropriate to use during crisis response. • Where routine delivery systems are suitable for emergency provision, use and adapt accordingly. • For each delivery phase, consider which combination of approaches is needed to achieve rapid delivery of assistance at the scale required, while also reaching the most marginalised. • Consider whether/how social or beneficiary registry data may be relevant for identifying shock-affected population groups (among lists of existing beneficiaries, former beneficiaries, waiting lists, unprocessed entries or those who have been processed but were not eligible on the basis of pre-shock criteria). • Consider whether/how: (i) other government databases; or (ii) non-governmental databases (such as those of informal worker trade union or humanitarian organisations) hold relevant information on affected populations, and could be accessible and appropriate for use in this instance. • Recognise the value of on-demand registration in identifying households missed in existing databases. • Use simple targeting criteria based on available data. • Extend eligibility criteria if initial coverage is insufficient. • Ensure an effective range of payment modalities to reach all affected groups, including considering tested innovations beyond traditional payment modalities, where responsive to crisis circumstances and needs. • Adopt diverse outreach strategies (using a range of conventional and electronic media) and provide direct support to promote and facilitate applications of marginalised shock-affected households. • Ensure provision of a credible, well-advertised grievance redress mechanism, using a range of contact methods. • Maintain electronic records of registration, enrolment, payment and grievance redress activities.
Institutional culture	• Ensure that officials have a mandate to innovate, iterate, problem-solve and collaborate as needed to ensure an effective crisis response. • Adopt a flexible approach to maintaining routine provision (such as: developing or revising mandates, protocols and operating plans to enable advanced, bunded or extended windows for payments; expanding payment point locations or providers; changes in modality; or suspension of conditionalities). • Adopt an iterative approach to developing emergency assistance mechanisms (e.g. progressively expanding choice of registration, payment and accountability options where needed) – be proactive, humble and agile in identifying and addressing gaps or limitations in initial response design. • Adopt successfully piloted innovations (e.g. for registration, payments and complaints-handling), including those trialled outside the social protection sector. • Adopt a 'no regrets' mindset to the extent feasible – for example, adopting a 'targeting out' approach rather than complex eligibility targeting procedures. • Make real-time use of complaints, queries and monitoring information to address implementation challenges and improve future programme design and delivery. • Promote discussion, documentation and institutionalisation of learning from shock-responsive experience.

References

Agbakwuru, J. (2021) 'ESP: 20m people to be lifted out of poverty in next 2-yrs – Osinbajo. Vanguard'. Vanguard Nigeria, 19 January (www.vanguardngr.com/2021/01/esp-20m-people-to-be-lifted-out-of-poverty-in-next-2-yrs-osinbajo/).

Agence Ecofin (2016) 'Avec Agri-PME, l'agriculture togolaise fait sa révolution numerique'. Agence Ecofin, 2 September (www.agenceecofin.com/gestion-publique/0209-40556-avec-agri-pme-l-agriculture-togolaise-fait-sa-revolution-numerique).

Akoda, S. (2020) 'Covid-19: nearly XOF5 billion has been disbursed so far under the *Novissi* cash transfer program'. TogoFirst, 30 April (www.togofirst.com/en/social/3004-5451-covid-19-nearly-xof5-billion-has-been-disbursed-so-far-under-the-novissi-cash-transfer-program).

Alfers, L. (2020) 'Informal workers and social protection'. SPACE (https://socialprotection.org/discover/publications/space-informal-workers-and-social-protection).

ANEEJ – Africa Network for Environment and Economic Justice (2020) 'Spot checks on the payment to beneficiaries'. National Cash Transfer Programme, 20 May (www.aneej.org/wp-content/uploads/2020/06/REPORT-ON-SPOT-CHECKS-INFOGRAPH.pdf).

Ayliffe, T., Aslam, G. and Schjødt, R. (2018) 'Social accountability in the delivery of social protection'. Technical Guidance Note. Orpington: Development Pathways (www.developmentpathways.co.uk/wp-content/uploads/2018/05/DFID-Social-Accountability-in-the-Delivery-of-Social-Protection-Technical-Guidance-Note.pdf).

Barca, V. (2016) 'Grievance mechanisms for social protection programmes: stumbling blocks and best practice'. IPC-IG One Pager 320. Brasília: IPC-IG (www.ipcig.org/pub/eng/OP320_Grievance_mechanisms_for_social_protection_programmes_stumbling_blocks_and_best_practice.pdf).

Barca, V. (2017) *Integrated data and information management for social protection: social registries and integrated beneficiary registries*. Canberra, Australia: Department of Foreign Affairs and Trade (DFAT) (www.dfat.gov.au/about-us/publications/Pages/integrating-data-information-management-social-protection).

Barca, V. (2020) 'Guidance note on rapid expansion of social protection caseloads', May 2020 (https://socialprotection.org/discover/publications/space-guidance-note-rapid-expansion-social-protection-caseloads).

Barca, V. and Beazley, R. (2019) 'Building on government systems for shock preparedness and response: the role of social assistance data and information systems'. DFAT (www.dfat.gov.au/about-us/publications/Pages/building-government-systems-for-shock-preparedness-and-response-the-role-of-social-assistance-data-and-information-systems).

Barca, V. and Hebbar, M. (2020) 'On-demand and up to date? Dynamic inclusion and data updating for social assistance'. GIZ (https://socialprotection.org/sites/default/files/publications_files/GIZ_DataUpdatingForSocialAssistance_3.pdf).

Bastagli, F. (2014) *Responding to a crisis: the design and delivery of social protection*. London: ODI (www.odi.org/publications/8357-responding-crisis-design-and-delivery-social-protection).

Beazley, R. (2020) 'Building on existing data, information systems and registration capacity to scale up social protection for COVID-19 response', 1 June (https://socialprotection.org/discover/blog/building-existing-data-information-systems-and-registration-capacity-scale-social).

Beazley, R., Solorzano, A. and Barca, V. (2019) 'Study on shock-responsive social protection in Latin America and the Caribbean: summary of key findings and policy recommendations'. World Food Programme/Oxford Policy Management (www.opml.co.uk/projects/study-shock-responsive-social-protection-latin-america-and-caribbean).

Beazley, R., Derban, W., Barca, V. et al. (2020) 'Options for rapid delivery (payment) of cash transfers for COVID-19 responses and beyond'. SPACE, July (https://socialprotection.org/discover/publications/space-options-rapid-delivery-payment-cash-transfers-covid-19-responses-and).

Blumenstock, J.E. (2018) 'Don't forget people in the use of big data for development' *Nature* 561(7722): 170–172 (www.nature.com/articles/d41586-018-06215-5).

Blumenstock, J.E. (2020). 'Machine learning can help get COVID-19 aid to those who need it most' *Nature* 581(7807) (www.nature.com/articles/d41586-020-01393-7).

Blumenstock, J.E., Cadamuro, G. and On, R. (2015) 'Predicting poverty and wealth from mobile phone metadata' *Science* 350(6264): 1073–1076 (https://science.sciencemag.org/content/350/6264/1073.abstract).

Boko, J. (2020) 'Disclosable restructuring paper – Safety Nets and Basic Services Project – P157038 (Togo)', March (https://documents.worldbank.org/en/publication/documents-reports/documentdetail/119151583777164204/disclosable-restructuring-paper-safety-nets-and-basic-services-project-p157038).

Boko, J., Alberro, L., Gueye, M. et al. (forthcoming) 'Technical note on Togo's *Novissi* Program', July 2020. Social Protection Delivery Systems in Africa Series. Washington DC: World Bank Group.

Bowen, T., del Ninno, C., Andrews, C. et al. (2020) *Adaptive social protection : building resilience to shocks*. International Development in Focus. Washington, DC: World Bank Group (https://openknowledge.worldbank.org/handle/10986/33785).

BSC – Building State Capacity (2020) *Public leadership through crisis*. Harvard University Center for International Development (https://bsc.cid.harvard.edu/public-leadership-through-crisis).

CaLP – Cash Learning Partnership (2020) 'CVA and COVID-19: key resources'. Working document (https://docs.google.com/document/d/1Vk6ShfDS-_kVVGeGcNzFXhKLSMgK-VyDfa09ZkhWZOE/edit).

CGAP – Consultative Group to Assist the Poor (2020) 'Social assistance payments in response to COVID-19: the role of donors' September (www.cgap.org/research/covid-19-briefing/social-assistance-payments-response-covid-19-role-donors).

Chirchir, R. and Barca, V. (2020) 'Building an integrated and digital social protection information system'. GIZ/DFID (https://socialprotection.org/sites/default/files/publications_files/GIZ_DFID_IIMS%20in%20social%20protection_long_02-2020.pdf).

Covid-19 Global Situation Room (2020) 'Seven major risks for digital financial transfer programs in COVID-19'. Responsible Practices Working Group, October (https://g2p-network.org/wp-content/uploads/2020/10/responsible-practices-address-seven-major-risks-covid-19-digital-financial-transfers.pdf).

Davidovic, S., Nunhuck, S., Prady, D. et al. (2020) 'Beyond the COVID-19 crisis: a framework for sustainable government-to-person mobile money transfers'. International

Monetary Fund (IMF) Working Paper No. 20/198. IMF (www.imf.org/en/Publications/WP/Issues/2020/09/25/Beyond-the-COVID-19-Crisis-A-Framework-for-Sustainable-Government-To-Person-Mobile-Money-49767).

Demirguc-Kunt, A., Klapper, L., Singer, D. et al. (2018) 'Global Findex Database 2017 : Measuring Financial Inclusion and the Fintech Revolution'. Washington, DC: World Bank Group (https://openknowledge.worldbank.org/handle/10986/29510).

Department of the Commissioner General of Samurdhi (n.d.) 'Samurdhi Relief Programme'. Website (http://samurdhidept.gov.lk/more12.html).

Duflo, E. and Barnerjee, A. (2020) 'Coronavirus is a crisis for the developing world, but here's why it needn't be a catastrophe'. The Guardian (https://socialprotection.org/discover/news/op-ed-coronavirus-crisis-developing-world-heres-why-it-neednt-be-catastrophe-covid-19).

Gelb, A. and Mukherjee, A. (2020) 'Digital technology in social assistance transfers for COVID-19 relief: lessons from selected cases'. Washington DC: Center for Global Development, September (www.cgdev.org/publication/digital-technology-social-assistance-transfers-covid-19-relief-lessons-selected-cases).

Gelb, A., Mukherjee, A. and Navis, K. (2020) 'Citizens and states: how can digital ID and payments improve state capacity and effectiveness?' Washington DC: Center for Global Development, March (https://www.cgdev.org/publication/citizens-and-states-how-can-digital-id-and-payments-improve-state-capacity).

Gentilini, U., Almenfi, M., Dale, P. et al. (2020) 'Social protection and jobs responses to Covid-19: a real-time review of country measures'. Living Paper Version 12. Washington DC: World Bank Group (https://documents.worldbank.org/en/publication/documents-reports/documentdetail/295321600473897712/Social-Protection-and-Jobs-Responses-to-COVID-19-A-Real-Time-Review-of-Country-Measures-September-18-2020; and underlying dataset: https://documents.worldbank.org/en/publication/documents-reports/documentdetail/330791600474275156/Global-Database-on-Social-Protection-and-Jobs-Responses-to-COVID-19).

Gentilini, U., Khosla, S., and Almenfi, M. (2021) *Cash in the city: emerging lessons from implementing cash transfers in urban Africa*. Discussion Paper. No.2101. Social Protection & Jobs. Washington, DC: World Bank Group (https://openknowledge.worldbank.org/handle/10986/35003).

Gronbach, L. (2020) 'Social cash transfer payment systems in sub-Saharan Africa' (http://www.cssr.uct.ac.za/sites/default/files/image_tool/images/256/Publications/WP452Gronbach.pdf).

Government of Nigeria (2020) 'National Social Safety Nets Projects scale-up to urban wards for Covid-19 palliative support: implementation guidelines' [shared directly].

Government of Peru (2019) 'Programa Juntos cierra el 2019 con más de 740 mil familias afiliadas a nivel nacional', 31 December. (www.gob.pe/institucion/juntos/noticias/185076-programa-juntos-cierra-el-2019-con-mas-de-740-mil-familias-afiliadas-a-nivel-nacional).

Government of Togo (2020a) 'Togolese government gives support to informal workers affected by its measures against Covid-19'. Press release, 8 April (https://novissi.gouv.tg/wp-content/uploads/2020/09/20200408-CP-ENG-NOVISSI_v2.pdf).

Government of Togo (2020b) '*Novissi* FAQs' (https://novissi.gouv.tg/en/home-new-en/#faq).

Government of Togo (2020c) 'Digital cash transfer programme in response to Covid-19', December [shared directly].

Government of Togo (2020d) 'Plus de 30 000 personnes ont déjà bénéficié du programme *Novissi*'. Republique Togolaise, 10 April (www.republiquetogolaise.com/social/1004-4243-plus-de-30-000-personnes-ont-deja-beneficie-du-programme-novissi).

Government of Togo (2020e) 'Le programme *Novissi* s'étend désormais à Tchaoudjo'. Republique Togolaise, 2 May (www.republiquetogolaise.com/social/0205-4307-le-programme-novissi-s-etend-desormais-a-tchaoudjo).

GSMA – GSM Association (2020) 'Policy and regulatory recommendations to facilitate mobile humanitarian and social assistance during COVID-19'. Blog. GSMA, May (www.gsma.com/mobilefordevelopment/blog/policy-and-regulatory-recommendations-to-facilitate-the-role-of-mobile-in-humanitarian-assistance-in-a-covid-19-world/).

Helpage (2020) 'How to administer pension payments during the COVID-19 pandemic' (www.helpage.org/download/5e81be01c9f40/).

ILO (2018) *Women and men in the informal economy: a statistical picture*, 3rd edn. Geneva: ILO (www.ilo.org/global/publications/books/WCMS_626831/lang--en/index.htm).

IPC-IG (2021) 'Social protection responses to Covid-19 in the Global South'. socialprotection.org (https://socialprotection.org/social-protection-responses-covid-19-global-south).

ISPA – Inter-Agency Social Protection Assessments Partnership (2016) Social Protection Payment Delivery Mechanisms. Washington DC: World Bank Group (https://ispatools.org/tools/payments-tool.pdf).

J-PAL (2020) 'Using mobile phone and satellite data to target Togo's emergency cash transfer program' (www.povertyactionlab.org/initiative-project/using-mobile-phone-and-satellite-data-target-togos-emergency-cash-transfer).

Kazzaz (2020) 'Emergency disbursements during COVID-19: regulatory tools for rapid account opening and oversight'. Glenbrook Partners, July (www.findevgateway.org/paper/2020/07/emergency-disbursements-during-covid-19-regulatory-tools-rapid-account-opening-and).

Kidd, S., Athias, D. and Tran, A. (2020) 'Addressing the Covid-19 economic crisis through social protection', May 2020. Orpington: Development Pathways (www.developmentpathways.co.uk/publications/addressing-the-covid-19-economic-crisis-in-asia-through-social-protection/).

La Republica (2020) '*Bono Rural* 2020: consulta AQUÍ cómo acceder al beneficio del sector agrario de 760 soles', 1 May 2020 (https://larepublica.pe/economia/2020/05/01/bono-rural-760-soles-consulta-como-saber-si-soy-beneficiario-del-bono-zona-rural-agrario-peru-2020-y-como-cobrar-midis-atmp/).

Lashitew, A. and Kanos, D. (2020) 'Figures of the week: the effect of COVID-19 on food and income security in Africa'. Brookings, 9 July 2020 (www.brookings.edu/blog/africa-in-focus/2020/07/09/figures-of-the-week-the-effect-of-covid-19-on-food-and-income-security-in-africa/).

Lindert, K., Karippacheril, T.G., Rodriguez Caillava, T. and Nishikawa Chavez, K. (2020) *Sourcebook on the foundations of social protection delivery systems*. Washington, DC: World Bank Group (https://openknowledge.worldbank.org/handle/10986/34044).

McCord, A (2013) 'Review of the literature on social protection shock responses and readiness'. London: ODI (https://odi.org/en/publications/review-of-the-literature-on-social-protection-shock-responses-and-readiness/).

Ministry of Economy and Finance Peru (2020) 'Marco Macroeconómico Multianual 2021-2024'. Lima: Ministry of Economy and Finance, Government of Peru.

NBS – National Bureau of Statistics (2020) '2019 Poverty and inequality in Nigeria'. NBS (https://nigerianstat.gov.ng/download/1092).

NCTO – National Cash Transfer Office (2020) Activities – HUP (Household Uplifting Programme) (https://ncto.gov.ng/activities/#hup).

News.lk (2020) 'Many material, financial assistance for those affected by the Coronavirus', 1 April (www.news.lk/news/political-current-affairs/item/29919-many-material-financial-assistance-for-those-affected-by-the-coronavirus).

O'Brien, C., Holmes, R., Scott, Z. et al. (2018) 'Shock-responsive social protection systems toolkit – appraising the use of social protection in response to large-scale shocks'. Oxford, UK: Oxford Policy Management/ODI, January (www.opml.co.uk/files/Publications/a0408-shock-responsive-social-protection-systems/srsp-toolkit.pdf).

OPM – Oxford Policy Management (2017) *Shock-responsive social protection systems research: literature review (2nd edition)*. Oxford, UK: OPM (www.opml.co.uk/files/Publications/a0408-shock-responsive-social-protection-systems/srsp-literature-review.pdf).

Programa Juntos (2019) 'Resolucion Ministerial No. 286-2019-MIDIS'. Ministry of Development and Social Inclusion Peru (https://cdn.www.gob.pe/uploads/document/file/743989/RM-_286_2019-y-RE-Juntos.pdf).

Ravallion, M. (2020) 'On the virus and poor people in the world' *Economics & Poverty*. Blog Post, 2 April (https://economicsandpoverty.com/2020/04/02/on-the-virus-and-poor-people-in-the-world/).

Rubio, M, Escaroz, G., Machado, A. et al. (2020) 'Social protection and response to Covid-19 in Latin America and the Caribbean'. IPC-IG/UNICEF LACRO (https://socialprotection.org/sites/default/files/publications_files/II%20Technical%20Note%20Social%20Protection-COVID19%20UNICEF-IPC%20final%20dig23122020.pdf).

Samji, S., Andrews, M., Pritchett, L. et al. (2018) 'PDIA toolkit: Building State Capability (BSC) initiative. Harvard University Center for International Development (https://bsc.cid.harvard.edu/PDIAtoolkit).

Sebastian, A., Shivakumaran, S., Silwal, A.R. et al. (2018) 'A proxy means test for Sri Lanka'. Washington DC: World Bank Group (https://openknowledge.worldbank.org/handle/10986/30125).

Smith, G. and Bowen, T. (2020) *Adaptive social protection: the delivery chain and shock response.* Washington DC: World Bank Group (http://documents1.worldbank.org/curated/en/799281603376140118/pdf/Adaptive-Social-Protection-The-Delivery-Chain-and-Shock-Response.pdf).

Socialprotection.org (2020) 'Turning the COVID-19 crisis into an opportunity: what's next for social protection? Global e-Conference, October (https://socialprotection.org/discover/blog/session-summaries-and-links-global-e-conference-turning-covid-19-crisis-opportunity).

SPACE (2020) 'Strategy decision matrix: Using or leveraging social assistance programmes' (https://socialprotection.org/sites/default/files/publications_files/SPACE_Cash%20delivery%20matrix_%20V1%2002072020.pdf).

SPaN – Social Protection across the Humanitarian Development Nexus (2019) 'Guidance package (GP) on social protection across the humanitarian-development nexus (SPaN)' (https://europa.eu/capacity4dev/sp-nexus/wiki/guidance-package-span-resources).

Stampini, M. (2018) '*¿Cómo funciona el Programa Juntos?: Mejores prácticas en la implementación de programas de transferencias monetarias condicionadas en América Latina y el Caribe*'. IADB – Banco Interamericano de Desarrollo (https://publications.iadb.org/es/como-funciona-el-programa-juntos-mejores-practicas-en-la-implementacion-de-programas-de).

Steele, J.E., Sundsøy, P.R., Pezzulo, C. et al. (2017) 'Mapping poverty using mobile phone and satellite data' *Journal of the Royal Society Interface* 127 (14 February: 20160690) (https://royalsocietypublishing.org/doi/abs/10.1098/rsif.2016.0690).

Takasaki, Y., Abizaid, C. and Coomes, O. (2020) 'COVID-19 among rural peoples in the Peruvian Amazon: the PARLAP Phone Survey'. Innovations for Poverty Action (www.poverty-action.org/recovr-study/covid-19-among-rural-peoples-peruvian-amazon-parlap-phone-survey).

Tegel, S. (2020) 'The country with the world's strictest lockdown is now the worst for excess deaths'. The Telegraph, 27 August (www.telegraph.co.uk/travel/destinations/south-america/peru/articles/peru-strict-lockdown-excess-deaths/).

TRANSFORM (2017) 'Administration of non-contributory social protection – Delivery Systems – Manual for a leadership and transformation curriculum on building and managing social protection floors in Africa'. socialprotection.org (http://socialprotection.org/institutions/transform).

TRANSFORM (2020) 'Shock-responsive social protection'. socialprotection.org (https://socialprotection.org/sites/default/files/publications_files/SRSP%20BD_singles_v12.pdf).

UN – United Nations (2020) 'Social protection responses to Covid-19: MENA'. UN Issue-Based Coalition on Social Protection with IPC-IG (www.unicef.org/mena/reports/social-protection-responses-covid-19-crisis-menaarab-states-region).

UNICEF (2020a) 'Investing in the future: universal benefit for Sri Lanka's children', February (www.unicef.org/srilanka/media/1276/file/Investing%20in%20the%20future:%20A%20universal%20benefit%20for%20Sri%20Lanka's%20children.pdf).

UNICEF (2020b) 'An assessment of the value of the COVID 19 support to Sri Lankan households', April (www.unicef.org/srilanka/reports/assessment-value-covid-19-support-sri-lankan-households).

UNICEF (2020c) 'Tackling the COVID-19 economic crisis in Sri Lanka: providing universal, lifecycle social protection transfers to protect lives and bolster economic recovery', June 2020 (www.developmentpathways.co.uk/wp-content/uploads/2020/06/UN_Brief_SocialProtectionResponseSL_Summary_2020June121.pdf).

UNICEF and UNDP (2020) 'Covid-19 crisis household impact. Sri Lanka telephone surveys', July 2020 (www.unicef.org/srilanka/reports/covid-19-crisis-household-impact).

WFP – World Food Programme, UNICEF and IPC-IG (2021) 'Protección social y la migración venezolana en América Latina y el Caribe en el contexto de COVID-19' [shared directly]

World Bank (2018) *State of social safety nets*. Washington DC: World Bank Group (https://openknowledge.worldbank.org/handle/10986/29115).

World Bank (2020a) *Nigeria: National Social Safety Nets Project.* Washington DC: World Bank Group (https://projects.worldbank.org/en/projects-operations/document-detail/P151488).

World Bank (2020b) *Togo COVID-19 Crisis response DPF (P174376)*. Washington DC: World Bank Group, August (http://documents1.worldbank.org/curated/en/630971600048821354/pdf/Togo-COVID-19-Crisis-Response-Development-Policy-Financing.pdf).

World Bank (2020c) 'Scaling up social assistance payments as part of the Covid-19 pandemic response'. G2Px. Washington DC: World Bank Group (http://pubdocs.worldbank.org/en/655201595885830480/WB-G2Px-Scaling-up-Social-Assistance-Payments-as-Part-of-the-Covid-19-Pandemic-Response.pdf).

World Bank (2020d) 'Key considerations and policy options for emergency social assistance payments'. G2Px. Washington DC: World Bank Group (http://pubdocs.worldbank.org/en/485391596485076174/WB-G2Px-Key-Considerations-and-Policy-Options-for-Emergency-Social-Assistance-Payments.pdf).

World Bank (2020e) 'From containment to recovery: East Asia and Pacific Economic Update'. Washington DC: World Bank Group, October.

World Bank (2020f) 'Rising to the challenge: Nigeria's COVID response'. Washington DC: World Bank Group, December (https://documents.worldbank.org/en/publication/documents-reports/documentdetail/152691607607461391/rising-to-the-challenge-nigerias-covid-response).

World Bank (2020g) Urban population (% of total population) – Togo. Washington DC: World Bank Group (https://data.worldbank.org/indicator/SP.URB.TOTL.IN.ZS).

Yeh, C., Perez, A., Driscoll, A. et al. (2020) 'Using publicly available satellite imagery and deep learning to understand economic well-being in Africa' *Nature Communications* 11(2583) (www.nature.com/articles/s41467-020-16185-w).

Zimmerman, J., May, M., Kellison, E. et al. (2020) 'Digital cash transfers in the time of Covid-19: opportunities and considerations for women's inclusion and empowerment'. G2Px. Washington DC: World Bank Group (http://documents1.worldbank.org/curated/en/378931596643390083/pdf/Digital-Cash-Transfers-in-Times-of-COVID-19-Opportunities-and-Considerations-for-Womens-Inclusion-and-Empowerment.pdf).

Appendix 1   Key informants overview

Table A1 Overview of key informant interviews

Country	Key informant organisation
Nigeria	NASSCO (National Social Safety Nets Coordinating Office)
	World Bank Nigeria
	Foreign, Commonwealth and Development Office, Nigeria
	International NGO (anonymous)
	SPACE (Social Protection Approaches to Covid-19: expert helpline)
	ANEEJ (Africa Network for Environment and Economic Justice)
Peru	Trabaja Peru, within Ministry of Labour and Promotion of Employment (MTPE)
	Juntos Programme
	Targeting and Information Unit, within Ministry of Development and Social Inclusion Ministry of Development and Social Inclusion (MIDIS)
	Monitoring and Evaluation Unit, within Ministry of Development and Social Inclusion (MIDIS)
	World Bank Peru
	WIEGO (Women in the Informal Economy Globalizing and Organizing) Peru
	DESCO *Centro de Estudios y de Promoción del Desarrollo*
Sri Lanka	Samurdhi Scheme
	Presidential Taskforce for Economic Revival and Poverty Eradication
	UNICEF Sri Lanka
	World Bank Sri Lanka
	ILO Sri Lanka
	Sarvodaya NGO
Togo	Ministry of Post, Digital Economy and Digital Transformation
	President's Office
	Social Protection and Jobs Unit, World Bank Africa
	AFD (*Agence Française de Développement*)
	Togolese Civil League
	FETAPH (*Fédération Togolaise des Associations de Personnes Handicapées*) NGO