

# CASH TRANSFERS IN PANDEMIC TIMES

**Evidence, Practices, and  
Implications from the Largest  
Scale Up in History**

**Ugo Gentilini**



**WORLD BANK GROUP**

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### ABOUT THE AUTHOR

Ugo Gentilini serves as Global Lead for Social Assistance with the Social Protection and Jobs Global Practice at the World Bank.

Email: [ugentilini@worldbank.org](mailto:ugentilini@worldbank.org)

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# EXECUTIVE SUMMARY

Is Covid-19 a “game changer” for cash transfers? This tantalizing question has animated a large body of recent literature and over 60 virtual panels. This paper offers some clues to address the question by bringing together data, evaluations and practical experiences generated over the course of the pandemic. In particular, the paper flashes out differences between Covid-19 and other crises; it lays out an anatomy of global responses and offers novel data analysis around stylized international trends; synthesizes fresh empirical evidence on response effectiveness based on over 40 evaluations; discusses country-level operational practices as emerging from an array of high and lower-income contexts; and distills key insights with possible future implications.

## Ten facts emerge from global trends in cash transfer responses:

1. **Cash transfers reached unprecedented levels of coverage, but unevenly so across countries and largely concentrated in the early phase of the pandemic.** About 66% of those measures were introduced in the first semester of 2020. Cash transfers reached 1.36 billion individuals, that is, one out of six people in the world received at least one cash transfer payment. About half of the population of East Asia and North America were covered, while about one-tenth of Africa’s was so.
2. **Cash transfers were of short duration and uncertain in extension.** The average duration of cash transfers was only 4.5 months. Where these were extended, or in 16% of cases with available data, they were so for an additional 6.3 months on average. Program extensions were highly uncertain in their outcome. Duration choices may be in no small measure due to the uncertainty surrounding the direction of the crisis and its waves. Yet there seems to be no correlation between the duration of severe containment policies and the duration of cash transfers.
3. **Transfers were generous, but likely not enough to counter forgone labor incomes.** Covid-19 cash transfers were 70% higher than in the pre-2020 period. The amount of cash received by beneficiaries represented an average of 46% of median income. Yet evidence shows that such generosity may have not been sufficient to offset the temporary or permanent loss of livelihoods incurred over the pandemic, especially among vulnerable but not the poorest people. This is corroborated by empirical studies showing that cash transfers provided significant support in mitigating the effects of the pandemic, but without countering its full impact.



4. **Governments simplified the design of cash transfer programs in several ways.** In-kind transfers were in some cases converted into cash; transfers were made easier to access, were mostly unconditional, and eligibility was simplified. In specific cases, transfers were adjusted in subtle ways to ensure relatively fast and localized spending, but without turning them into quasi-cash (or voucher) transfers. A range of practical innovations introduced during Covid-19 were absorbed into routine delivery systems.
5. **Most responses relied on introducing new programs through various identification and registration mechanisms.** Most cash transfers were introduced afresh. The identification of beneficiaries mostly relied on open registration, social registries, and tax databases. Among registration mechanisms, online platforms were the most widely utilized.
6. **Most cash transfers were paid digitally. A total of 763 million people were reached by digital cash transfers.** Digital payments yielded a number of benefits, including making people more likely to receive transfers on a timely basis. However, access to digital payments can be hindered at several levels and can amplify exclusion. It is key to ensure the alignment of payment models with contextual user capabilities and payment ecosystems.
7. **Preexisting social protection delivery systems helped responses significantly, but they were not always a necessary nor sufficient condition for scale-up.** The social protection responses to Covid-19 underscored the fundamental importance of delivery systems. However, these were often unable to reach people at the middle or so of the income distribution. This speaks to the salience of recognizing the importance of all delivery building blocks, and not just some (e.g., payments or registries), the relevance of interoperable government databases across sectors, as well as considering both public and private sector infrastructure in delivery capacity assessments.
8. **The timeliness of transfers varied substantially.** On average, coverage scale-up (horizontal extension) took 26 days, with timeliness ranging from 2 to 119 days. The increase in benefits (vertical expansion) was faster, taking an average of 18 days (varying between 0 and 67 days). Programs that were preexisting and using social registries were faster. The delivery of payments in high income countries shed light on a range of challenges also in those settings.
9. **Governments moved centerstage, but civil society actors played an important role.** A qualitative reading of the overall Covid experience indicates that governments embraced the crisis response in ways that are more visible and deliberate than in other circumstances. This is likely because of the role states played in managing the crisis. The pandemic has accelerated linkages between international humanitarian assistance and domestic social protection. National and local civil society actors were also called for widespread engagement in direct provision of assistance.
10. **Record-level global spending was highly uneven across countries, with financing based on a range of sources.** Average spending on social protection amounted to an average of 2% of GDP, three-quarters of which was devoted to social assistance. With a global average of \$313/capita, high-income countries display a level of injection about 93 times higher than low-income countries. Domestic financing of responses occurred via transfers from the existing budgets, budgetary reallocation, contingency

funds, and in some cases taxation. These were complemented by extrabudgetary mechanisms with various degrees of alignment with national budgets. Private donations were also an important part of the financing mosaic.

### Global and country-level responses point to ten lessons for the future:

1. **Whether Covid-19's response is a "historical game changer" depends on a range of factors.** These include where the bar for change is set – that is, whether it's the scale of response; the capacity of the response to withstand the crisis; the influence it exerts on existing, routine delivery systems and practices; the effects on fomenting or amplifying public debates; and the ability to alter the structural configuration of systems. Framed in those terms, the pandemic has clearly been a game changer in some aspects, but not in others.
2. **The pandemic has illuminated major blind spots in the labor market.** There is a need for better protecting unemployed and precarious workers across a range of contexts, including strengthening, establishing, or rethinking unemployment insurance, social assistance, and their interactions for workers in non-standard employment, the self-employed and informal sector workers.
3. **Future crises scale up may be enhanced by a wider use of social protection automatic stabilizers.** Social protection responses relied heavily on discretionary choices – “who to cover, how much to provide, for how long” – and to a limited extent on automatic stabilizers, especially in low- and middle-income countries. Automatic stabilizers are nested within an “anticipatory” framework featuring early warning systems, scale-up triggers, protocols for program expansion, and pre-positioned financing. As such, they are anchored on transparent, predictable criteria, while also leaving room for the policy space and discretionary spending (to manage basis risk, etc.). These “thermostatic” measures could be further explored moving forward. To identify gaps in response readiness, social protection systems should be routinely stress-tested.
4. **The pandemic displayed creative and diverse financing modalities, with trade-offs and fiscal headwinds looming on the horizon.** A range of financing innovations were recorded, such as contingency financing and new funds being established in lower-income contexts. Private support also played a significant role in financing responses, such as contributions from the Zakat system. Yet many of those financing practices also present drawbacks. For instance, responses were in some contexts financed by redirecting resources from other social sectors. High debt levels is being recorded across country income groups. This indicates that sharp trade-offs might loom on the horizon. The crisis might present an opportunity to reenergize the debate on social protection financing across a portfolio of options, including for example the relationship between subsidies and transfers, the role of indirect taxes, and innovative earmarked taxation.
5. **The expected multipliers of cash transfers helped fiscal and unconventional monetary policy converge.** Given the macro contexts, central banks favored universal or quasi-universal cash transfers over other options as an effective route to reignite consumer demand and economic activity. Emerging

evidence from higher-income contexts shows that transfers may have generated economic multipliers via augmented consumption. Such evidence may also affect debates on the benefits of cash transfers in non-crisis settings. It is likely that future recessions entailing strong reductions in consumer demand, temporary large-scale cash transfers may become a default option in emergency response.

6. **Capitalize on the new generation of urban social assistance to enhance the salience of social protection in cities, large informal settlements and throughout the urban-rural continuum.** This would imply adapting conceptual, design and implementation practices, as well as devising fresh partnerships and novel framings. Operating in urban environments opens the door for accelerating the discussion on mobility, portability of benefits, and individualized assistance.
7. **Covid-19 points to the need for universal delivery systems that could potentially reach the entire country population.** A key role will be played by large-scale, dynamic, and interoperable information systems. This also entails a judicious digital approach to delivery functions like identification, enrolment and payments based on the surrounding ecosystem and user preferences. At what pace countries would travel toward utilizing universal systems in routine programs – i.e., ensuring social protection coverage, adequacy, and comprehensiveness for everyone in society – would depend on a variety of evolving political, economic, operational, and societal factors.
8. **Simple cash transfers as possible benchmark.** Given the simplicity of Covid-19 cash transfers benefit structure, there is renewed interest in benchmarking programs against basic unconditional design. This entails contrasting benefits, costs, and implementation requirements of different design variants pursuing similar goals for comparable populations. These involve a whole spectrum of options ranging from “plain vanilla” cash transfers to more comprehensive, integrated interventions. Other user-friendly delivery choices tested in the pandemic (e.g., remote applications) could also be benchmarked against standard practices.
9. **Enhance information on global social protection responses.** The experience from extensive Covid-19 social protection tracking suggests the need for more proactive, comprehensive, coherent, and coordinated reporting systems. Perhaps the development of global standards for social protection response reporting might enhance future tracking endeavors. Initiatives that may help institutionalize the collection, analysis, and dissemination of global data in crisis times might also be better explored.
10. **Historical antecedents and current experience suggest four scenarios or pathways that countries may take post-Covid.** Pending on if and how they act on pandemic lessons, country scenarios may include “the ostrich” (ignoring lessons), “the refresher” (marginal improvements), “the constrained reformer” (relatively significant enhancements), and “Beveridge redux” (comprehensive reform).



# I. INTRODUCTION

It is hard to overstate the current vibrance of social protection debates. If Covid-19 shed light on gaps in social protection systems, the unprecedented scale of country responses reenergized the conversation on the future of those systems. As Covid-19 programs were tapering out in early 2022, shockwaves from the Ukraine conflict and global inflation reembarked governments on a new round of crisis interventions (Gentilini et al 2022a,b). Clear lessons from recent pandemic responses are needed to inform both short-term action and longer-run trajectories.

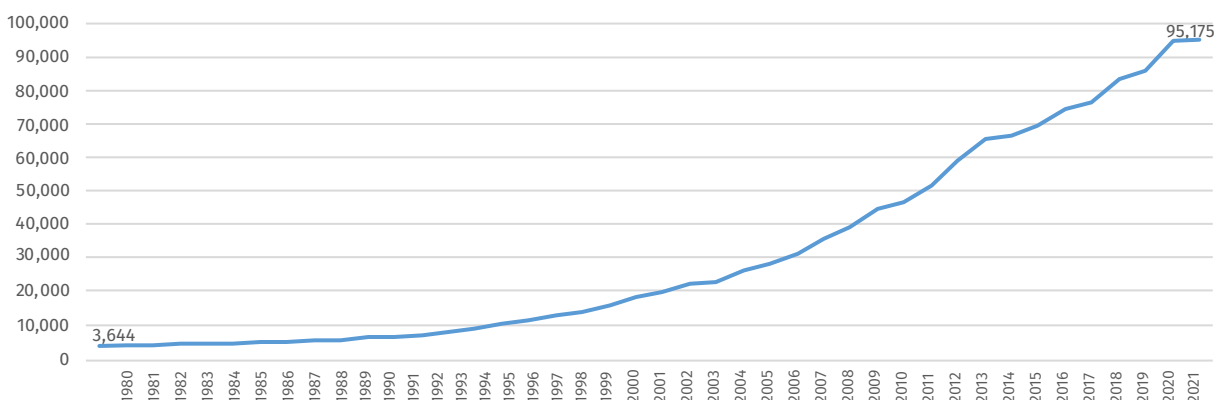
To be sure, there has been no paucity of efforts in capturing emerging learning. Insightful perspectives were offered by country leaders involved in Covid responses firsthand (Behsudi 2022; Nishtar 2021). Various contributions synthesized global experiences (Bastagli and Lowe 2021; Gentilini 2021; Hammad et al 2021; Abdoul-Azize and El Gamil 2020). Suites of assessments were regionally geared (Blofield et al 2021a; Devereux 2021; ILO 2021a; Barrientos 2020) or covered country-specific responses (Fiala et al 2021; Arruda et al 2021; Beazley et al 2021). A branch of literature examined responses to particular profiles of beneficiaries (Alfers et al 2022, 2020; Barca et al 2021; Holmes 2021; Mukherjee 2020), and specific operational and delivery issues were investigated (Gelb et al 2022a; Ohlenburg 2022; GIZ et al 2021). Debates in dedicated commissions and conferences flourished (e.g., UN 2022; Peres et al 2021), while working groups – such as in the EU – were formed to “... build on the lessons from the COVID-19 pandemic and consider the interaction between social protection systems and other welfare policies”.<sup>1</sup> Academic journals released special issues (Beland et al 2021; Cook and Ulriksen 2021), collections of working paper series were launched,<sup>2</sup> and institutions have been articulating their visions, roles, and experiences (Rutkowski 2020; UNICEF 2020; WFP 2020a; UNHCR 2020). Bibliographies and reference guides helped navigating the vast production of Covid-related social protection literature (Barca 2021).

Drawing from my keynote address at the 6th Zurich Conference on Public Finance in Developing Countries,<sup>3</sup> this paper brings together trends, evidence and practices generated over the course of the pandemic. The focus revolves primarily around social assistance in general and cash transfers in particular, with both anchored to the broader remit of social protection. The objective is to give a compact, evidence-based, and coherent overview of issues and experiences unfolding in different contexts, and present a balanced discussion of recent performance and possible future directions.

Why a particular premium on, but not an exclusive attention to, cash transfers? Reasons are threefold. First, cash transfers have been a core protagonist of the global Covid-19 response (see annex 1 for program-level descriptive statistics). As we will discuss in section 3, those instruments have been the single most-widely used intervention in governments’ social protection toolbox, accounting for about a quarter

total global responses across social assistance, insurance, and active labor market programs. Second, the responses itself presents an historical record: cash transfers coverage reached an unprecedented level of 1.36 billion people or 17% of the world's population. Finally, research on cash transfers increased enormously in recent years, a fact that might help explain the massive surge in practice. A Google Scholar search conducted for this paper<sup>4</sup> yielded nearly 1.3 million papers produced over the past three decades, a level that increased 26-fold since 1980 and reached 95,000 titles in 2021 (figure 1).

**Figure 1. Number of cash transfers-related publications, 1980-2021**



Source: entries based on Google Scholar.

Overall, the paper finds that social protection responses mitigated the effects of the pandemic significantly. Countries diversified their responses, and social assistance played a key role in reaching people and areas uncovered by social protection programs. The crisis displayed the value of pre-Covid investments in social protection capabilities, and in a number of cases innovations spurred by the pandemic were absorbed into routine, permanent delivery systems. However, responses were also uneven in provision across time and space, and didn't often offset the full impact of the crisis. Assistance has been generally short-term and uncertain in extension over time, in part because of the unpredictable nature of the crisis itself. Enmeshed technical and political economy considerations might also have contributed to the volatility of responses. Covid-19 exposed structural gaps in serving particular population profiles and locations, as well as in connecting social protection with other sectoral policies.

The reminder of the paper is structured as follows. The next section briefly contextualizes Covid-19 within the broader discussion on crises and their role in sparking change. Section 3 offers ten stylized facts emerging from global responses, including novel analysis chiefly drawing from a large public dataset of nearly 4,000 social protection programs with about a hundred indicators and 223 economies. The section then offers a review of design and delivery practices, compounded by synthesis of the effectiveness of social assistance measures as emerging from over 40 evaluations on welfare and economic effects. Section 4 turns into practical country-level experiences across an array of themes. These include how cash transfers were linked to labor markets, spatial policies, and human capital sectors (especially health and education). Finally, section 5 distills ten key insights and lessons for the future.

## II. A CRITICAL JUNCTURE?

Over the course of 2020-2021, social protection was rapidly elevated as a fundamental component of countries' response framework.<sup>5</sup> This has energized an intense debate on the future of social protection, including whether a radical disruption like the pandemic could alter the long-term, structural equilibrium of social protection coverage, adequacy, and comprehensiveness. For example, *The Economist* (2021) mused about “how to make a social safety net for the post-Covid world”, a question that animated at least 62 virtual panels in 2020-2022.<sup>6</sup>

Such vibrant conversation is motivated by multiple factors. For once, Covid might have expanded the notion of real and perceived vulnerability. The pandemic itself worsened wellbeing in relation to specific dimensions of wellbeing, such as poverty, human capital, mental health, and social cohesion<sup>7</sup> (Kuhfeld et al 2022; Lampraki et al 2022; Abbott 2021; Sumner et al 2020). At the same time, while quantitative data is limited it might be plausible that a wide range of populations might perceive being increasingly exposed to social, health and economic risks (Verhaeghe 2020). For example, it has been argued that in Bangladesh there is a more acute awareness around the income vulnerability of informal sector workers, despite their average earnings being significantly above the poverty line (Johnson et al 2022).

Covid-19 has injected a sense of urgency in “casting the net wide” for tackling longstanding deficiencies in current social protection systems as well as restoring trust in social contracts (Barca et al 2021; Perry 2021). Bierbaum et al (2021) argued that pandemic measures should be “... understood and utilized as building blocks for establishing rights-based national social protection floors, rather than remaining mere stopgap responses” (p.1). Following Razavi (2021), “... [w]e can turn the COVID-19 crisis into an opportunity to build robust, comprehensive and universal social protection [or] we can stumble zombie-like through this crisis and leave ourselves exposed to and unprepared for future shocks” (p.15).

Perceptions of vulnerability, however, may vary over time. In Germany, a study by Ebbinghaus et al (2022) examined public attitudes towards social protection during the first year and half of the pandemic. It found short-term boosts in support of policies like unemployment insurance and family-related measures; but within a year, public opinions returned to prepandemic levels: “... the pandemic has induced a “veil of ignorance” and led to the widespread perception that everyone might be at risk of losing a job or requiring health care. (...) With decreasing uncertainty and increasing risk inequality along already existing social divisions, the cost argument – social insurance becomes more expensive for a majority – weights in, and social solidarity with the vulnerable is receding to normal levels” (ibid, p.10).



Global social protection responses themselves might have fueled further hope for comprehensive enhancements. If the scale of cash transfers were unprecedented, the profile of a large share of beneficiaries is also historically noteworthy: in fact, 203.7 million workers received unconditional cash transfers, including 184 million in the informal sector and 19.7 million in formal jobs (Gentilini et al 2022a). Such approach may have broken a “last taboo” in providing cash transfers beyond traditional “deserving” populations (box 1). This leads to a more fundamental point: in order to properly interpret government pandemic responses, it is key to recognize that the nature of the Covid-19 pandemic and rationale for government responses are fundamentally different from previous shocks.

### **Box 1. Breaking the last taboo?**

The history of social protection has been characterized by policymakers’ constant efforts of balancing the act of supporting people in need while managing unintended behavioral effects (Cooper and Szreter 2021; Lindert 2021). In particular, fears of inducing labor supply disincentives have dominated and profoundly influenced approaches towards cash transfers for centuries. For hundreds of years, governments have tried to (and still are) navigating the tension between supporting people while not make them depended on such support: the level of coverage, the size of benefits, and ancillary design measures (e.g., work requirement) are part of efforts to reconciling those somewhat competing objectives. As a result, social assistance has often been provided to “deserving” populations (e.g., children, seniors, disabled people, etc.) and seldom to working-age “able bodied” people – unless on a small scale or in the form of public works, themselves also geared to reduce interference with labor markets (via below-market wages, etc.). By explicitly supporting over 200 million workers, countries have broken a longstanding taboo in supporting “able bodied workers” with unconditional cash transfers. If before Covid-19, policymakers were concerned of labor supply disincentives, with the pandemic response those disincentives were induced intentionally. In most cases, cash transfers were designed precisely to keep people out of the labor market. (For example, Levy and Filho (2022) show that in Brazil, Auxilio Emergencial had a relatively small, statistically significant effect on women labor supply (by 3.4 percentage points.) Of course, such remarkable development has to be put in perspective. If reaching hundreds of million workers with unconditional cash might be a departure from longstanding practices, governments had basically no other choice. Yet, the fact that workers received cash no-strings-attached withholds a historical and symbolic value that may potentially help alter persistent negative rhetoric on cash assistance in the long run.



Sao Paulo, SP, Brazil - May 12, 2021: People wait in big line to receive food donations for lunch in a downtown street during a severe economic crisis due to Coronavirus, COVID-19 pandemic. By Nelson Antoine.

Stressing the different nature of the Covid-19 may appear obvious, but it's an aspect that is sometimes overlooked in policy debates. Because of the unique way in which Covid affects human decisions and interactions, containment policies to curb the spread of the virus were adopted<sup>8</sup> (Romer 2021; Goolsbee and Syverson 2020). As such, programs like state-provided cash transfers were a response to state-induced needs. Such implicit social contract establishes a direct relationship between the role of governments in reducing economic activity and compensating for it. This association is not present in other types of crises, and it motivates the basic rationale for Covid social protection globally. As put by Barrientos (2021), "... social assistance transfers have come to the fore in the pandemic in support of government-imposed restrictions on social and economic interaction".

This combination of historical scale occurring within a highly peculiar crisis made the discussion on whether Covid represents a critical juncture quite contested and controversial. When discussing future directions, most contributions fall along a spectrum. This includes scenarios where Covid has possibly been a "game changer" for social protection (e.g., Anderson et al 2022); views arguing that "it's too early to say" whether such change might happen (e.g., Devereux 2021); and more skeptical stances about future prospects for change (e.g., Barrientos 2021). There is truth in all those perspectives: Covid-19 shed light on structural gaps (Aaron 2020; ILO 2021b); it suggests a need for change (Cichon 2021; Oxfam 2020); it has opened the space for bold ideas, even if on a temporary basis (Gray Molina and Ortiz-Juarez 2020); and it provides a window of opportunity for public debates on future directions (Gronbach et al 2022). The question is one of degree across those dimensions. This applies for big-picture issues for specific themes, such as leveraging social protection responses for improving children and youth's mental health (Bauer et al 2021). However, forward-looking discussions may have sometimes unfolded along preexisting policy and advocacy lines, and perhaps without being grounded on a fuller theory of change (Leisering 2021).

In principle, the thesis that Covid-19 could act as a “positive disruptor” is not without conceptual and historical grounding: an important branch of scholarship has identified the occurrence of covariate crises as enablers of change in social protection systems (Obinger et al 2018; Rixen and Viola 2015; Farnsworth and Irving 2011; Kaasch et al 2010; Pierson 2004). Gupta and Tovar Jalles (2022) look at the question through a financing lens: based on data for 45 low- and middle-income countries over 2000-2015, they examine whether recent pandemics or epidemics (e.g., SARS, H1N1, Ebola, and Zika) have led to tax reforms, like changes in tax rates, tax base, and exemptions. Their analysis reveals that “... crisis situations present an opportunity for a country to implement tax reforms”<sup>9</sup> (p.2297).

Another line of inquiry, however, suggests an opposite outcome: under uncertain circumstances, policymakers may tend to resort to existing, path-dependent approaches as default options (Starke et al 2013; Chung and Thewissen 2011). This may not necessarily be undesirable: building on existing systems could be ideal if preexisting performance is strong. For example, a review of case studies from East Asia argued that while “... policy responses seem to be a *déjà-vu* (...), past crises have nurtured ingredients for the ‘immune system’ of the East Asian welfare state that tends to reinforce its institutional resilience and to strengthen the efficacy of social policy responses to the pandemic crisis” (Soon et al 2021, p.384).

A further consideration relates to whether interventions were intended to foster change in the first place. According to Cook and Ulriksen (2021), government social protection responses “... do not in themselves change the basic characteristics of the existing welfare system” (p.389). Similarly, Seemann et al (2021) noted that the Covid response was not intended to bring about systemic change to overall redistribution regimes. In fact, country measures “... have a relatively clear anchoring in the welfare state architecture (...). [Responses] have not modified the existing configuration of state responsibility towards citizens, and that behind the temporary crisis measures, the pre-crisis mechanisms of the welfare states have overwhelmingly remained intact” (ibid, p.551 and 562). Initial conditions matter: examining the extension of social protection to urban areas in Africa, Gronbach and Seekings (2021) argued that the pandemic “... strengthened pro-reform coalitions only when those coalitions already existed. Where pro-reform coalitions were weak, Covid-19 was generally not a ‘game-changer’” (p.450).

When pondering whether the Covid experience has been (or still is) a critical juncture, it is key to ask the right questions. Ultimately, whether Covid is a catalyst for change would depend on where the bar is set; what is meant by “change” across different dimensions; and whether expectations to meet those expectations were realistic. Change, for instance, could be interpreted in terms of the scale of response, its adequacy, the influence on existing systems and practices, fomenting or amplifying public debates, and altering the structural configuration of systems. Covid-19 has been a game changer for some of these issues, but not for others. The paper will revert to such discussion in section 5 after reviewing key facts and experiences from pandemic responses.



# III. ANATOMY OF RESPONSES AND EMERGING PERFORMANCE

This section presents ten facts on global cash transfer responses, it offers a rapid tour of select practical and delivery matters, and reviews emerging evidence evaluating the effectiveness of cash transfer programs on welfare and the economy.

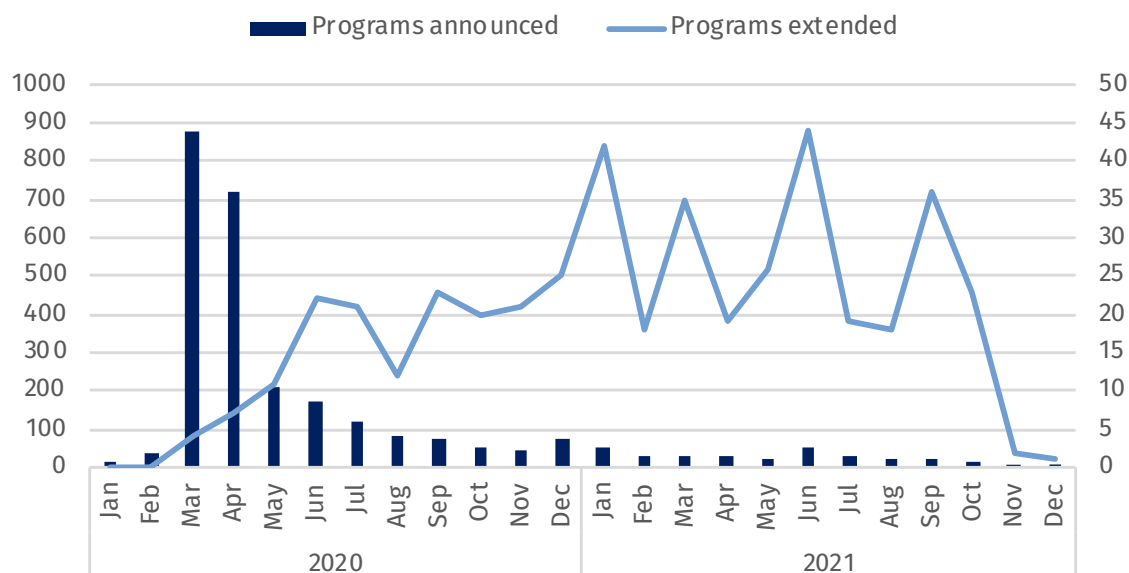
## 3.1 Unpacking cash transfer responses: ten stylized facts

**Fact 1.** *Cash transfers reached unprecedented levels of coverage, but unevenly so across countries and largely concentrated in the early phase of the pandemic*

Over the two-year period spanning from January 2020 to December 2021, a total of 3,856 social protection and active labor market measures were planned or implemented by 223 economies (Gentilini et al 2022a). About 66% of those measures were introduced in the first semester of 2020<sup>10</sup> (figure 2). From a peak of 876 measures announced in March 2020, the launch of programs steeply declined thereafter. Coverage was sustained by a growing, although limited number of extensions: this included 449 programs (or 16% of programs with available information), with the maximum number of extensions (44) reached in June 2021. By February 2022, only about one-fifth of measures with data available was still active.



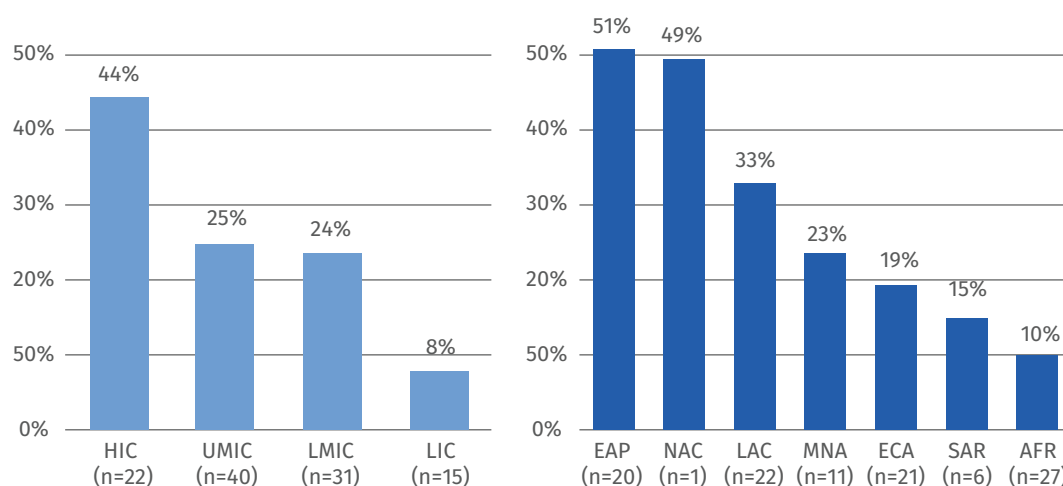
**Figure 2. Monthly social protection measures announced and extended, 2020-2021**



Source: data from Gentilini et al (2022a)

Nearly 61% of social protection measures took the form of non-contributory social assistance, with the rest being equally split among active labor market programs and social insurance. At program level, “cash was king”: with 1,023 measures in 203 countries, cash transfers represented 26% of social protection and 43% of social assistance measures, respectively. Their coverage has been nothing short of extraordinary: over 2020-2021, cash transfers reached 1.36 billion individuals, that is, one out of six people in the world received at least one cash transfer payment.<sup>11</sup> About half of the population of East Asia and North America were covered, while about one-tenth of Africa’s was so (figure 3). Only two low-income countries – Gambia and Sudan – reported cash transfers coverage rates of over 20% of the population.

**Figure 3. Coverage of cash transfers by country income group and region, % of population**



Source: data from Gentilini et al (2022a)

## **Fact 2. Cash transfers were of short duration and uncertain in extension**

The average duration of cash transfers was only 4.5 months. Where these were extended, or in 16% of cases with available data, they were so for an additional 6.3 months on average. This means that out of the period for which response tracking is available, or roughly 24 months, transfers supported people for nearly 13 months at best. For at least 10 months, people were left uncovered.

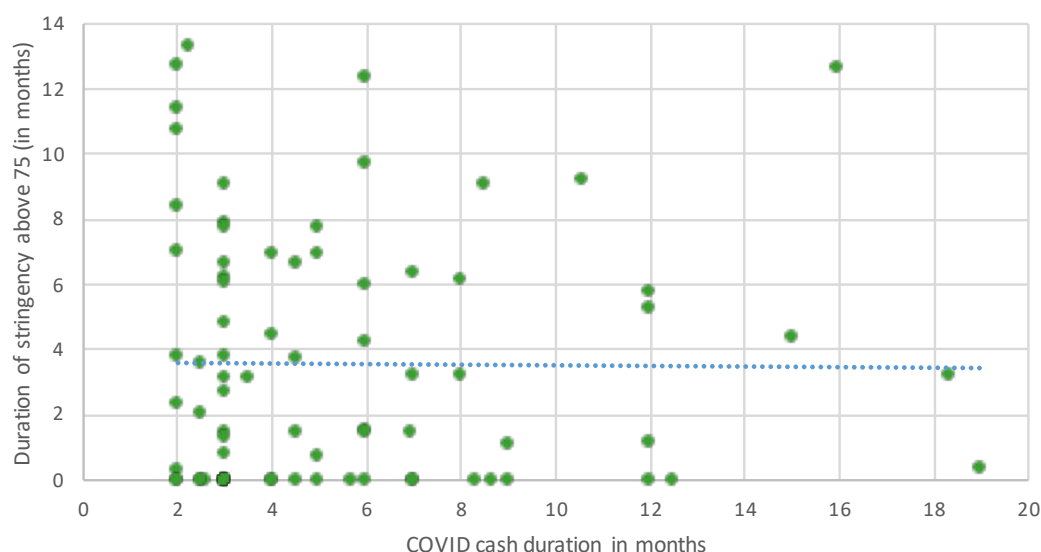
Program extensions were highly uncertain in their outcome. In fact, extensions were surrounded by a degree of unpredictability on whether and when they would be enacted, with decisions often taken “last minute”. For example, Indonesia’s unconditional cash transfer program (BLT Dana Desa) was implemented from April to June 2020. Its extension (until September 2020) was reported a month in advance of expiration, or June 3. But other cases gave limited advance notice: Jersey’s Covid cash transfer (CRESS) was executed over the same period, i.e., April-June 2020. But it was only on its last day, June 30, that the program was eventually extended until August 31. In the Maldives, the Income Support Allowance – which also ran over the same April-June period – was reintroduced in October after it had lapsed. Similar uncertainty was observed for other social protection instruments: in the United States, the Pandemic Unemployment Assistance program was set to expire on December 31, 2020, and its continuation was confirmed on December 27. The program was extended again on September 6, 2021, a few days before the program was discontinued (Romer and Romer 2021).

Those considerations need to be put in perspective: for once, the pandemic itself followed an uncertain trajectory. Determining the right duration of programs was no easy task as governments tried to balance health and economic needs in the wake of sudden new variants and surges in contagion. Also, cash transfers were the premier response modality, but other instruments were present. Especially in the upper bound of the country income spectrum, programs other than cash transfers (including labor market policies, insurance, as well as non-cash social assistance) have cushioned the effects of the pandemic (see section 3.3 for an assessment of response effectiveness). While it could be argued that even in high income settings social insurance reached structural limits in scale-up (see section 4), the reach of components other than social assistance declines as country income dwindles, hence making social assistance the cornerstone of response. In fact, in low income countries social assistance measures represented 78% of the Covid-19 relief – a level 28 percentage points higher than its share in high-income country responses.

Were cash transfers aligned with the severity of the pandemic? Figure 4 plots the average duration of the Stringency Index (number of months that the index is above a score of 75) and the average duration of cash transfers (number of months) for 80 low- and middle-income countries over 2020-2021. The figure shows no correlation between the duration of severe containment policies and the duration of cash transfers.<sup>12</sup>

In other words, when interpreted over the full course of the pandemic as it unfolded in 2020 and 2021, cash transfers duration and adequacy may, in hindsight, have been insufficient to counter the effects of the crisis. Clearly, the severity of the pandemic varied over the biennium, and duration choices may be in no small measure due to the uncertainty surrounding the direction of the crisis and its waves. Under such conditions, short-term choices were made, which may have allowed governments

**Figure 4. Country Stringency Index and cash transfers duration, average 2020-2021 (n=80)**



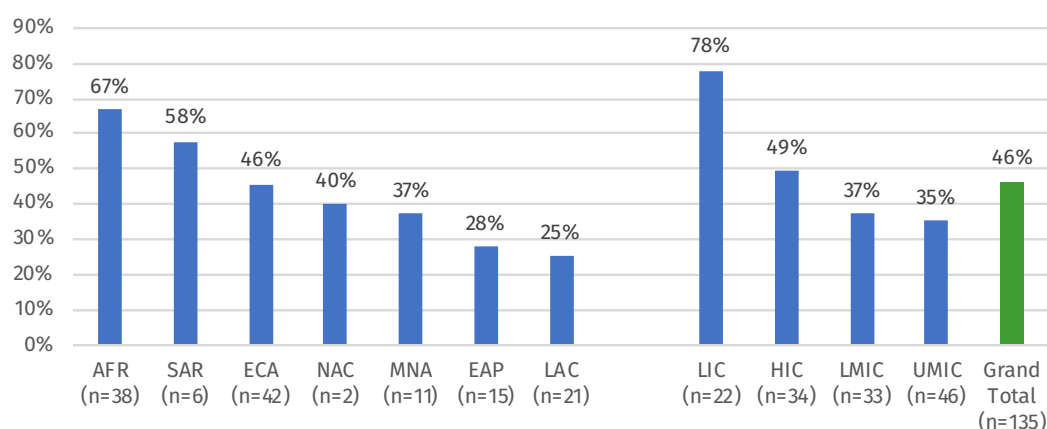
Source: data from Gentilini et al (2022a) and Hale et al (2021)

to continuously reassess the situation as it evolved. Yet the limited number of extensions and the volatility underpinning them may not have been optimal for impacted beneficiaries.

**Fact 3. Transfers were generous, but likely not enough to counter forgone labor incomes**

By pre-Covid standards, cash transfers were generous in size: on average, transfers were 70% higher than in the pre-2020 period.<sup>13</sup> The amount of cash received by beneficiaries represents an average of 46% of median income,<sup>14</sup> ranging from nearly 80% in low-income countries to 35% in upper middle-income settings (a level that was below 30% for East Asia and Latin America) (figure 5).

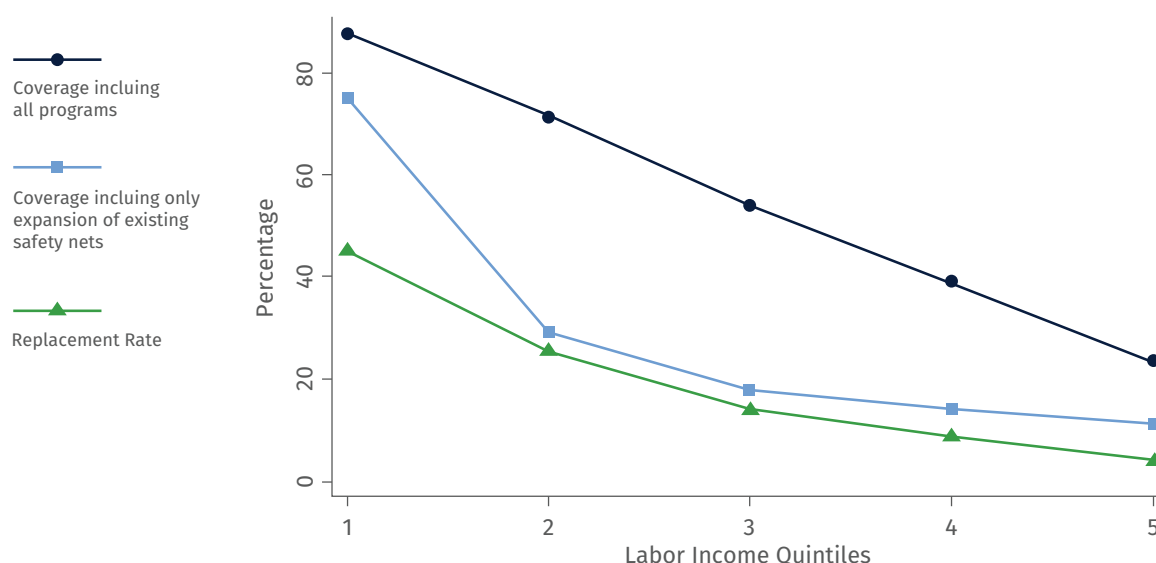
**Figure 5. Cash transfers as share of median income by country income group and regions (n=135)**



Source: data from Gentilini et al (2022a) and World Bank PovCal.

Yet such generosity may have not been sufficient to offset the temporary or permanent loss of livelihoods incurred over the pandemic. An analysis from ten Latin American countries may illustrate this point. Busso et al (2021) show that with the exception of Brazil and Bolivia, social assistance replaced only a small share of potential earning losses of households. Average replacement rates – or total transfers that households receive as share of their regular labor income – were nearly 80% among the poorest beneficiaries. Yet such rates were only about 30% and 20% among households in the second and third quintile, respectively (figure 6). In the words of the authors, social assistance “... could not replace the potentially foregone incomes of a large fraction of families in the informal workforce that were forced to shelter in place and could not work. This insufficient compensation has surely limited the ability of governments to sustain extended lockdown periods, and it may limit the ability to enforce another wave of lockdowns if there were a resurgence of contagion” (ibid, p.12).

**Figure 6. Coverage and replacement rates for social assistance programs in LAC**



Source: adapted from Busso et al (2021); data refers to regional unweighted regional averages.

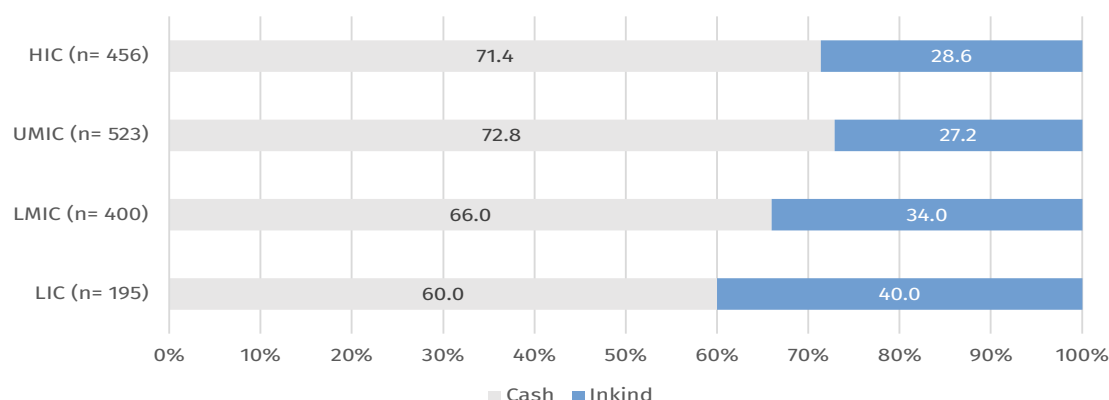
**Fact 4. Governments simplified the design of cash transfer programs in several ways**

Country adaptations included extending coverage by either relaxing eligibility criteria of existing programs to enroll new beneficiaries, or introducing ad hoc new interventions (horizontal expansion of 727 programs across 192 countries); transferring more assistance to existing beneficiaries or anticipating payments due at later stage (vertical expansion of 146 programs in 90 countries); making programs simpler to access, e.g., digital or remote applications and benefit management (50 programs in 43 countries); and revising design to make interventions more pandemic-sensitive (e.g., largely by making transfers unconditional).<sup>15</sup>

As mentioned, cash transfers were clearly the dominant form of social assistance transfers relative to in-kind measures (figure 7). Part of such dominance resulted from the temporary conversion of in-kind transfers into cash. A case in point are school feeding programs which switched to cash-based transfers in 25 countries, e.g., Brazil, Egypt, Malawi, Niger, Spain, and UK.<sup>16</sup>



**Figure 7. Share of cash and in-kind transfer programs out of total social assistance (n=1,583)**



Source: data from Gentilini et al (2022a)

Some hybrid modalities also emerged. While nominally “cash”, transfers were not always usable in any location or at any point in time. In specific cases, transfers were adjusted in subtle ways to ensure relatively fast and localized spending, but without turning them into quasi-cash (or voucher) transfers. In a way, such forms of “restricted cash” represent a novel transfer modality at the intersection of cash and quasi-cash transfers (Box 2).

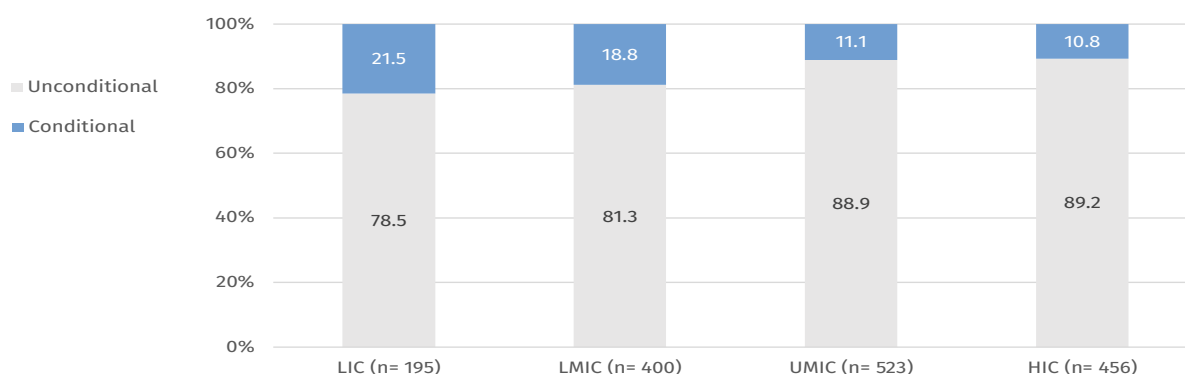
### **Box 2. Hybrid modalities at the intersection of cash and quasi-cash transfers**

Several practices emerged in terms of restricting the use of cash transfers (Soon et al 2021; Shi and Soon 2020). Korea’s e-money payments, which provided about \$900 for families of four or more members, had an expiration date (August 31, 2020). Also, the transfers could only be used at small-medium enterprises within the residential areas of beneficiaries. Similarly, Taiwan’s Triple Stimulus Voucher reached 96% of the population. Under the scheme, people could “purchase” \$100 worth of transfers by paying one third of that level, or about \$33;<sup>17</sup> the entitlement was expendable nationwide, but also in this case, transfers were timebound, i.e., they had to spent by December 31, 2020.

More traditional vouchers, however, have been leveraged to play an important role in recovery plans. For example, Australia’s New South Wales government provides at least 6 types of voucher programs,<sup>18</sup> such as the “Before and after school care voucher scheme” (a one-off voucher of \$500 per child aged 4 to 13 years) – an approach that also Malaysia adopted<sup>19</sup> – and the “First Lap learn to swim vouchers” (a \$100 voucher towards the cost of swimming lessons for children aged 3 to 6 years). Some of these schemes are recent, although evaluations exist for the programs’ precursors, such as the NSW Active Kids voucher program subsidizing the cost of children’s registration in structured physical activities (Reece et al 2021).

Another way in which design was eased involved making transfers more unconditional. Among cash-based programs, unconditional cash transfers represent 89% of cases (the rest being conditional cash transfers and public works). This constitutes an 11%, or 9 percentage points, increase relative to the approximate pre-Covid share of unconditional cash.<sup>20</sup> If we enlarge the sample to include all Covid-related social assistance transfers,<sup>21</sup> the share of Covid unconditional transfers (whether provided in cash or in-kind) was on average 86%, ranging from about 78% in LICs to 89% in HICs (figure 8). Such average share is about an 8 percentage points increase relative to pre-Covid levels. However, this doesn't mean that prior skepticism toward unconditionality entirely dissipated. For example, Aidukaite et al (2021) argue that in Hungary, the choice for response options other than unconditional transfers was rooted in beliefs "... about a 'work-based society' that claims that no handouts should be provided to the workless (...). In line with this social policy paradigm, the public works programme was extended providing simple physical work to some of the unemployed" (p.363).

**Figure 8. Share of unconditional and conditional transfers out of social assistance (n=1583)**



Source: data from Gentilini et al (2022a)

Another element of simplification is evident in the targeting of transfers. Out of 374 programs with available information, methods based on occupations were used in the majority of cases (25.9%). These were defined as transfers to workers based on type of employment, activities, and sector without particular needs-based eligibility criteria (e.g., frontline workers, sector specific targeting at informal and self-employed workers, etc.). Such methods are followed by transfers based on income (22.7%) and categorical criteria (21.6%), like families with children, age, and disability. Methods based on combinations and mixed methods represent 14.1% of the cases. Other methods are single digits<sup>22</sup> (table 1).

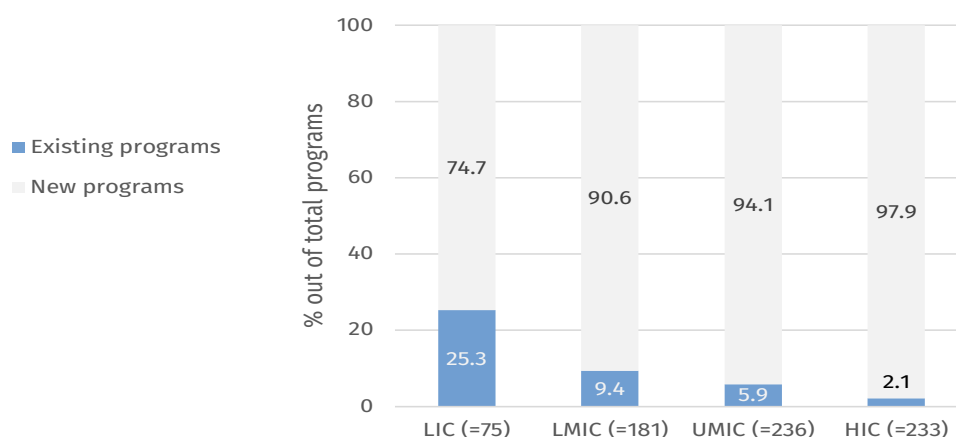
**Table 1. Targeting methods of cash transfer programs (n=374)**

	% out of total	Number
Categorical	21.60%	81
Occupation-based	25.90%	97
Universal	4.28%	16
Geographical	1.87%	7
Community- based	1.60%	6
Means test, income	22.73%	85
Proxy means test	2.94%	11
Self-targeting	4.28%	16
Food security, nutrition	0.53%	2
Combos	14.17%	53

**Fact 5. Most responses relied on introducing new programs through various identification and registration mechanisms**

Most of the cash transfers response hinges on launching new programs. On average, 92% of programs were new, and 48% of them were one-off transfers. New programs include three-quarters of cash transfer interventions in LICs, and almost all those in HICs (figure 9). Such large scale of novel schemes speaks to the possible limitations of preexisting programs in meeting the scale of the crisis.

**Figure 9. Horizontal expansion of cash transfers via new and existing programs (n=725)**

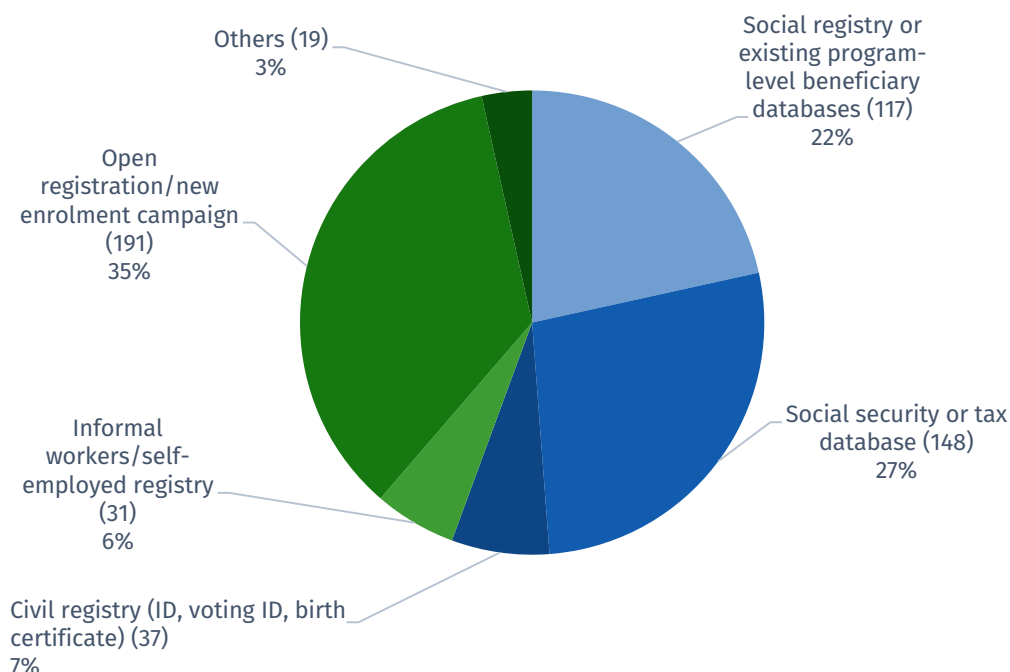


Source: data from Gentilini et al (2022a)

The identification of beneficiaries for old and new programs relied on a variety of methods, often involving combinations of mechanisms across 543 social protection responses in low- and middle-income countries (Hammad et al 2021). Before Covid-19, social registries reached about 21% of the population in low- and middle-income countries (Grosh et al 2022). As shown in figure 10, such databases and other program-level lists of beneficiaries were used for 117 programs during the pandemic, constituting 22% of identification mechanisms<sup>23</sup> (e.g., Brazil, Ecuador, Mauritania, Peru, and Pakistan). Social security and tax databases accounted for 27% of identification methods.

The remaining half of programs used more unconventional mechanisms, such as open registration and new enrolment campaigns. The latter constituted the single largest share of identification methods (35%), hence signaling the need that countries faced in expanding the identification frontier of existing options. Civil registries were used in 7% of the cases (e.g., Namibia and Togo). Registries of informal and self-employed registries were tapped in some situations (6%), such as in urban Sierra Leone and Sri Lanka.

**Figure 10. Identification mechanisms of social protection measures (n=543)**



Source: Hammad et al (2021)

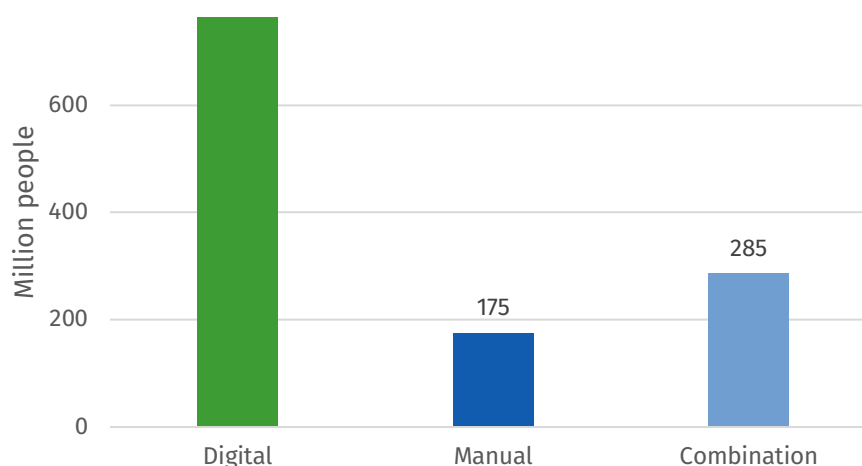
Among registration mechanisms, online platforms were the most widely utilized. According to Hammad et al (2021), out of a sample of 516 social protection measures an average of 38% utilized online registration (e.g., Brazil, Iran, Morocco, Kuwait, and Jordan). Such method was followed by automatic enrollment (24%) and manual self-registration (18%). Some countries also took steps for making online registration more inclusive: for instance, Pakistan's Ehsaas Emergency Cash Transfer program made the application messaging service free; Namibia allowed up to ten individuals to submit an application using a single SIM card; and hotlines and mixed strategies complemented online registration in Bhutan, Dominica and Guatemala (Hammad et al 2021).

#### **Fact 6. Most cash transfers were paid digitally**

The crisis has witnessed a large share of transfers being paid digitally, i.e., via fully functional accounts, limited purpose accounts, or electronic non-account-based solutions. A total of 107 programs (96 of which in low- and middle-income countries) present data on both beneficiaries and payment modalities. In total, 763 million people were reached by digital cash transfers, or 62% of all cash transfers with available information (figure 11). Only 5 million of those digital payments occurred in low income countries, while high income countries adopted some combination of both manual and digital payments (reaching 162 million people).

A range of innovative practices have emerged. In Brazil, 14 million new accounts were opened via a smartphone app by the public bank *Caixa Economica*; in Bangladesh, employment records were used to

**Figure 11. Beneficiaries by payment modalities (n=107 programs)**



Source: Gentilini et al (2022a)

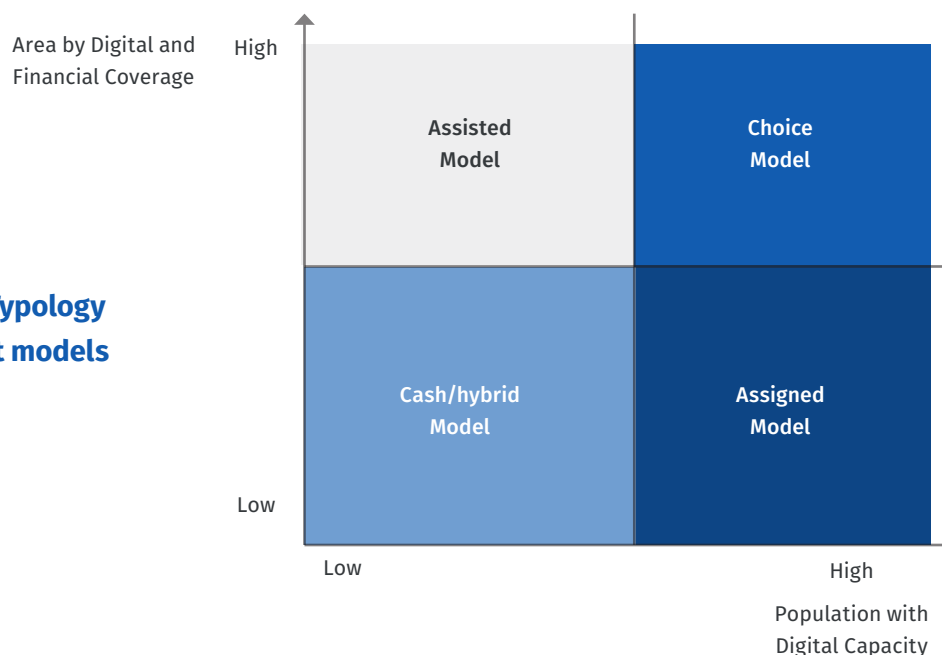
open accounts of garment workers; in the Philippines, ID requirements were waived for those lacking those documents; and Ecuador permitted the involvement of non-financial actors such as grocery shops and pharmacies to act as ‘cash-in-cash-out’ agents (Hammad et al 2021). Changes in regulations were also observed: the Central Bank of West African States allowed for onboarding via USSD text or phone (such as in the case of the Democratic Republic of Congo’s *Solidarité par Transferts Economiques contre la Pauvreté à Kinshasa*, or STEP-KIN), while Jordan’s Central Bank relaxed KYC requirements: this help boost the share of NAF cash transfer beneficiaries paid via mobile wallets from 5% pre-pandemic to 68.5% in 2021 (Gentilini et al 2022a; Hammad et al 2021).

Digital payments yielded a number of benefits. For example, a survey of old age and widow allowances of social pensions in Bangladesh found that those with access to digital cash payments were more likely to receive transfers on a timely basis and had lower consumption and income risks (Shonchoy et al 2021). However, access to digital payments can be hindered at several levels. For example, Gelb et al (2022a) examine a survey of India’s PMGKY program transferring benefits to the accounts of over 200 million beneficiaries. They found that among respondents with specific characteristics (like being female, illiterate, and living in a household with no smartphone), the probability of reporting the use of digital payments is only between 1 and 3.9%.

Therefore, it would be important to ensure flexibility in payment systems, including aligning payment models with contextual user capabilities and payment ecosystems. In this regard, a typology proposed by Gelb et al (2022b) envisages four models: (i) direct manual payment of cash; (ii) an assisted model, where multiple providers and instruments with assistance at the point of service may help reduce exclusion; (iii) an assigned model, whereby selected providers with limited instruments to provide payments; and (iv) a choice model, where multiple providers and instruments offer beneficiaries choice over payment receipt and use (figure 12). While in principle the choice model offers the widest utility, countries may follow different trajectories towards such model based on prevailing conditions.



**Figure 12. Typology of payment models**



Source: Gelb et al (2022b)

**Fact 7. Preexisting social protection delivery systems helped responses significantly, but they were not always a necessary nor sufficient condition for scale-up**

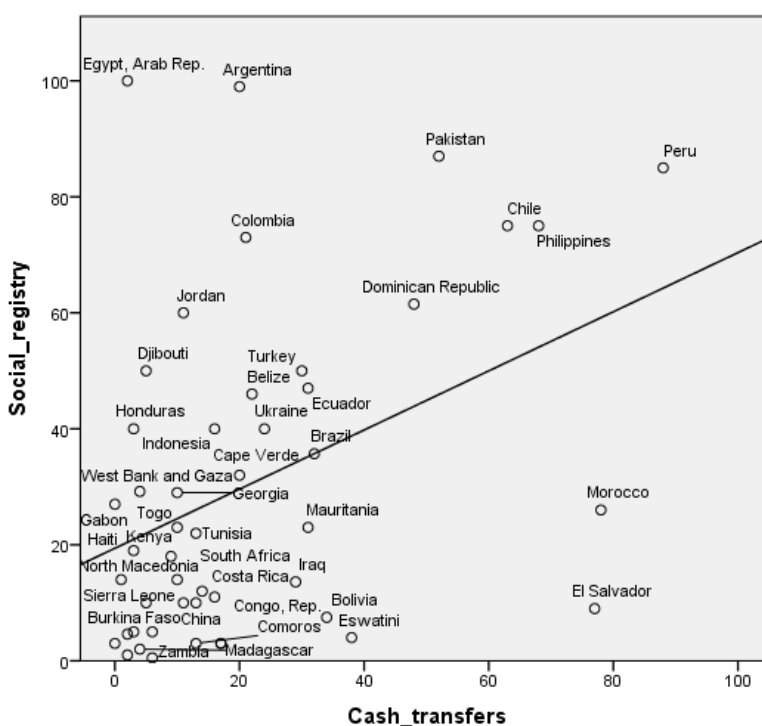
There is clear evidence that social protection delivery systems play a pivotal role in both crisis and “normal” times: program quality and performance heavily hinge on effective delivery building blocks (Grosh et al 2022); and their pre-existing presence is part of the larger quest for adaptive, “anticipatory” social assistance (Pople et al 2021; Bowen et al 2020).

In general, the social protection responses to Covid-19 underscored “... the fundamental importance of information systems, which enabled identification of beneficiaries (e.g., social registries), and digital payments, that allowed the effective delivery of the transfers” (Stampini et al 2021, p.19). However, the pandemic presented the unique challenge of not only reaching people at the lower end of the distribution, but also those in the middle and beyond. This meant that, with social registries reaching about one-fifth of the population on average, existing delivery infrastructure may have helped to reach part of the population, but not the large swaths not enrolled in neither social assistance nor insurance. For example, while India’s initial response has been found to be “broad-based” in reaching households (Bhattacharya and Sinha Roy 2021), others like Bhan et al (2020) pointed out that in the earliest stages, “... [i]t was soon evident that reaching those already within the system was not enough”<sup>24</sup> (p.8).

More generally, the degree to which pre-existing delivery systems were key for scale up depends how those systems are defined. A key difference, for instance, is whether such definition is strictly related to social protection, or if encompassing national capabilities more widely, including sectors other than

social protection as well as private sector capabilities. A range of countries were able to scale up – or even introduce – cash transfers without a preestablished social protection delivery building blocks in place (Kidd and Sibun 2020). In fact, figure 13 shows only a moderately significant correlation between the coverage of cash transfers and that of social registries among 48 countries.<sup>25</sup>

**Figure 13. Coverage of cash transfers and social registries (% population)**



Source: data from Gentilini et al (2022a)

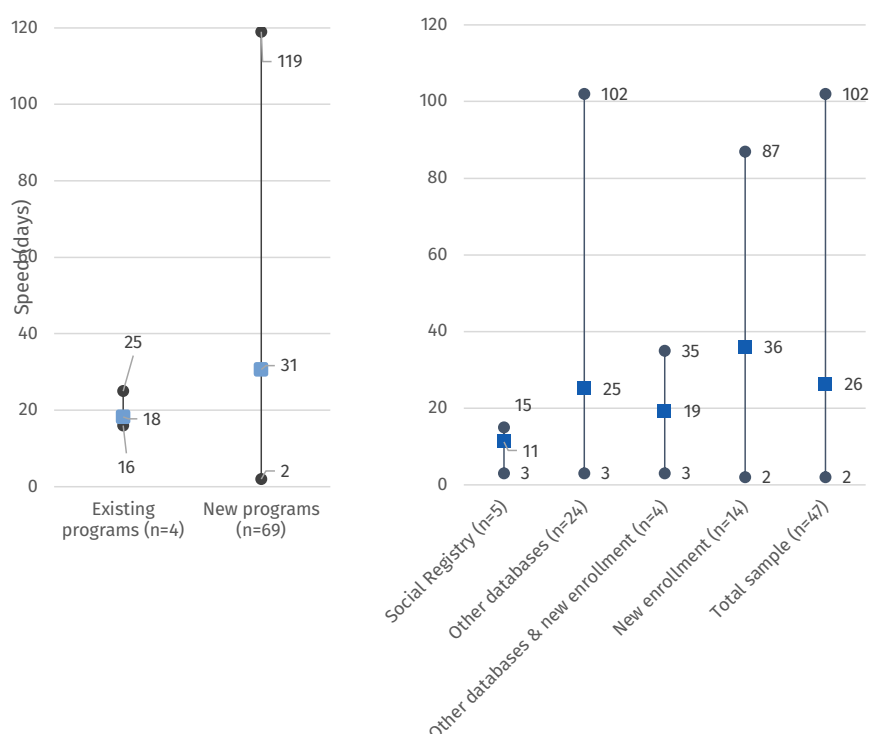
Several countries that had relatively limited registry coverage achieved sizable coverage levels – e.g., notably Morocco and El Salvador, but also Bolivia and Mauritania. A review of responses in Latin America found that only 4 out of 15 countries has registries with high coverage and high interoperability (Berner and van Hemelryck 2020). As we will discuss in section 4, in the case of Togo the large scale up of cash transfers tapped the voter registry and an ad-hoc payment platform created during the pandemic (Aiken et al 2022; Lawson et al forthcoming). Similarly, in Kinshasa a registry was built real-time based on anonymized data from private mobile phone companies (Bance et al 2021). Others, like Pakistan and the Philippines, had large-scale registries and achieved high levels of cash coverage, although data wasn't necessarily up-to-date and needed supplementation (Beazley et al 2021). In Peru, households already listed in the social registry began to receive their Bono Familiar Universal payments in May 2020; however, those who needed to be registered received the first payment only in August 2020 (Bastagli and Lowe 2021). Following Lowe et al (2021), registries “... provided a viable starting point for a fast first wave of payments to a sub-set of the affected population. However, (...) 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” (p.19).

These considerations may speak to the salience of interpreting scale up within the broader delivery capabilities at country level. This would include recognizing the importance of all delivery building blocks, and not just some (e.g., payments or registries), the relevance of interoperable government databases across sectors, as well as considering both public and private sector infrastructure in delivery capacity assessments.

**Fact 8. The timeliness of transfers varied substantially**

How much time did it take to programs to reach beneficiaries? Gentilini et al (2022a) present data on program timeliness, that is, the number of days between announcement of the program and first payment. On average, data from 98 programs shows that coverage scale-up (horizontal extension) took 26 days, with timeliness ranging from 2 to 119 days.<sup>26</sup> The increase in benefits (vertical expansion) was faster, taking an average of 18 days (varying between 0 and 67 days). An important distinction pertains to whether expanded programs were preexisting or new: the extension of pre-existing programs was on average 42% faster than the introduction of new programs (18 versus 31 days) (figure 14, left graph). The larger role played by existing systems in lower-income context reflects the attention placed on maintaining and sustaining their delivery under challenging conditions (Beazley et al. 2021). As put by Slater (2022) in the context of East Africa, the initial phases of the pandemic focused “... on adaptations required to existing operations to ensure all those currently receiving support could continue to do so, despite new access, monitoring and funding constraints” (p.11). Relatedly, the use of social registries was more than three times faster than identification mechanisms based on other databases, new enrollment, and combinations thereof (figure 14, right graph).

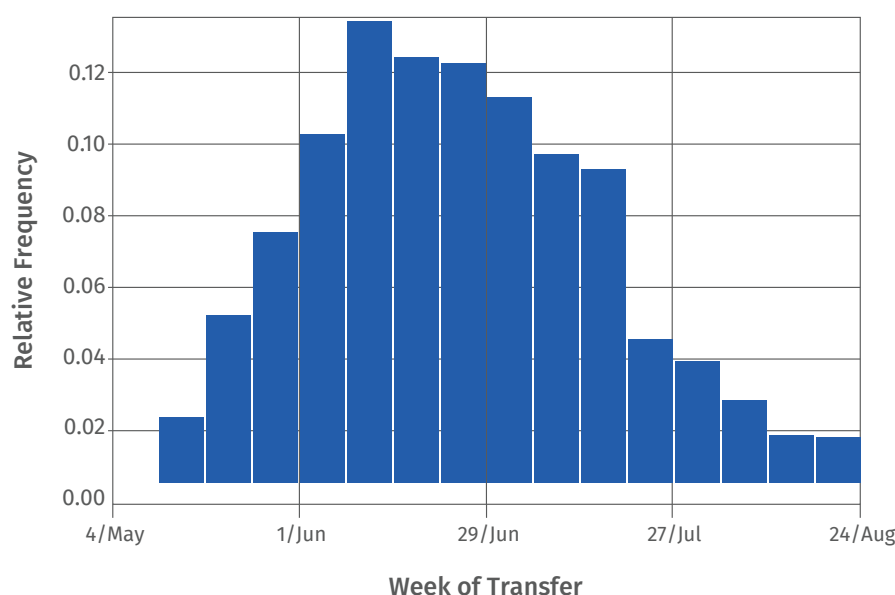
**Figure 14.**  
**Timeliness of cash transfers by new/ existing programs (n=73) and by identification mechanism (n=98)**



Source: data from Gentilini et al (2022). Note: squares indicate average values.

There is a range of reasons explaining the timeliness of new programs, some of which will be tackled in section 4 in the context of reaching informal sector workers in low- and middle-income countries. But bottlenecks were not unique to those contexts. The delivery of payments in high income countries shed light on a range of challenges also in those settings (Spasova et al 2022; Romer 2021; Moffitt and Ziliak 2020). For example, Japan was one of the 13 cases implementing a universal cash transfer scheme for nearly 125 million people (Ando et al 2020). Evidence shows that payment performance varied significantly due to within-country diversity in administrative capacity of local governments. While some payments started in May 2020, the majority of deposits occurred between late June and early July of that year – with some residual payment stretching until August (figure 15). According to a survey of 43 large municipalities, a key bottleneck was the amount of time needed handle numerous inquiries and check mailed envelopes (Kaneda et al 2021). The same study also laid out a counter-intuitive finding, namely that “... postal applications were significantly faster than online applications due to insufficient preparation” (ibid, p.414).

**Figure 15. Weekly distribution of universal cash transfer payments in Japan, May-August 2020**



Source: Kaneda et al (2021)

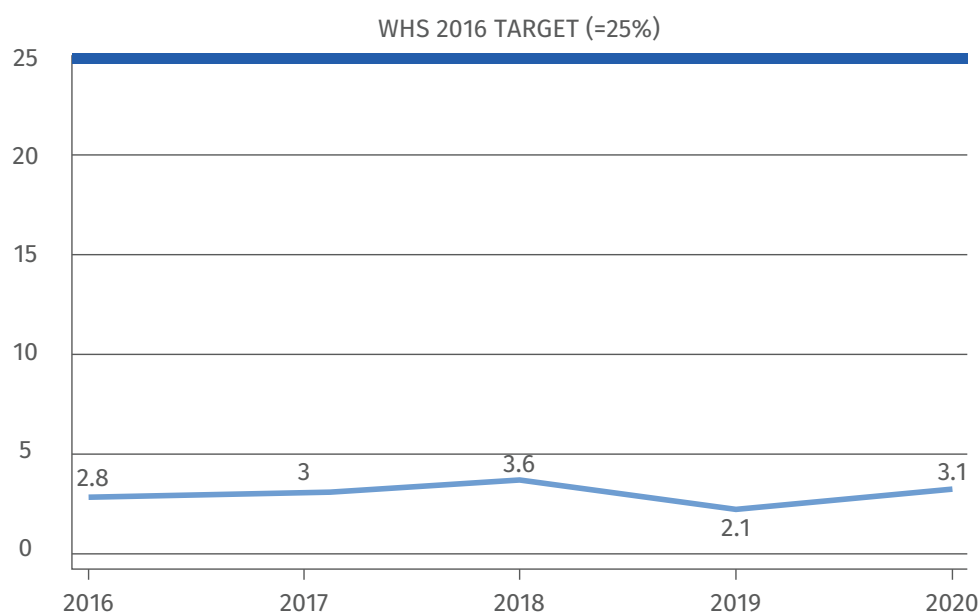
The fact that delivery hurdles were underpinning countries across the income spectrum may, to some extent, be akin to Rodrik’s (2022) argument that “... developed countries’ problems increasingly resemble the problems found in poor countries”, and “... models and frameworks used to study developing economies are increasingly relevant to the problems confronting rich countries”. Covid-19 may have illuminated not only on clear differences between countries, but also similarities that countries across the income spectrum share on select social protection issues (e.g., supporting the “missing middle”, as discussed in section 4).

### **Fact 9. Governments moved centerstage, but civil society actors played an important role**

Social assistance responses to crises in lower-income countries is typically bolstered by domestic and international assistance. A qualitative reading of the overall Covid experience indicates that governments embraced the crisis response in ways that are more visible and deliberate than in other circumstances. This is likely because of the role states played in managing the crisis (see section 2). For instance, there has been significant allocation of domestic financing for cash transfers in contexts where those programs are traditionally heavily donor-supported, such as Mauritania and Kenya (Zeufack et al 2022; Almenfi et al 2020). The uprise in state engagement is also visible in complex situations: Blattman et al (2020) documented that in Colombia's Medellin city, community leaders reported greater welfare services rendered by state authorities (including police and municipal officials) than criminal gangs (which may hold a strong neighborhood-level presence as service providers).

There is a vibrant literature documenting the ways in which international humanitarian assistance and domestic social protection could better converge, especially around cash transfers (Jodar et al 2020). The linkages between those agendas have received heightened attention during Covid-19 (Lawson-McDowall et al 2021). Such attention occurs against a backdrop of structural challenges (Levine et al 2022). For example, Development Initiatives (2021) estimates that only a fraction of global humanitarian assistance is channeled through national structures – i.e., \$756 million or 3.1% of total assistance in 2020.<sup>27</sup> Such level is about 8 times lower than the 2016 World Humanitarian Summit target of 25% (figure 16). Recent guidance notes have further emphasized humanitarian linkages and coordination with national social protection (ECHO 2022; Grand Bargain 2022).

**Figure 16. Direct funding of local and national actors, % of total humanitarian assistance**

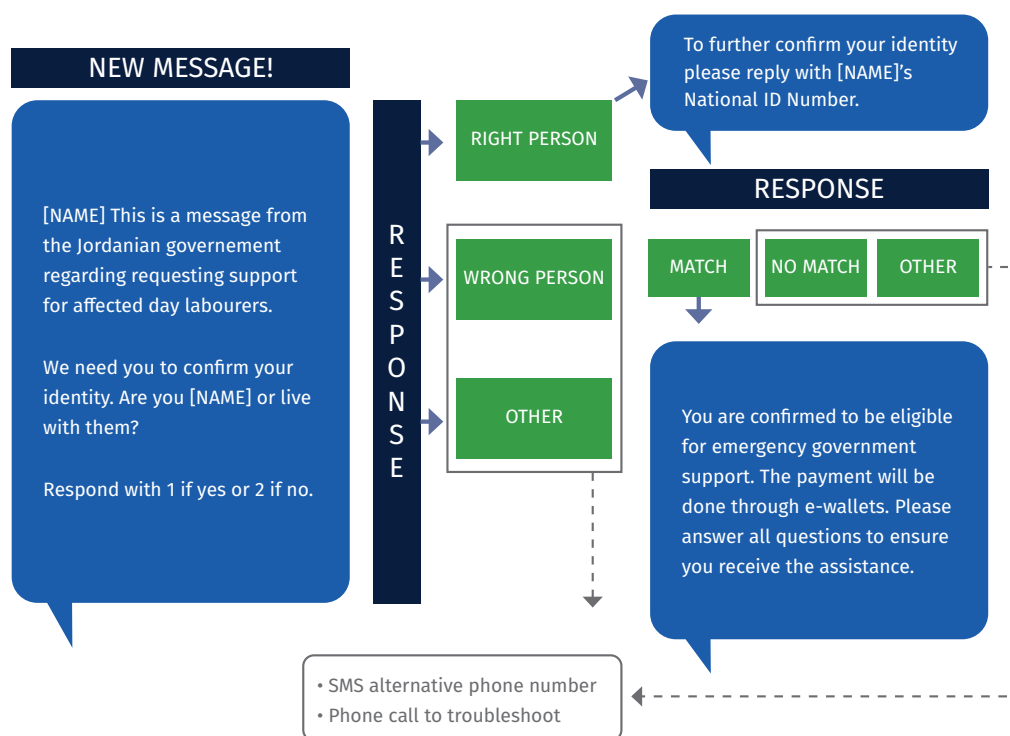


Source: data from Development Initiatives (2021)



The pandemic has accelerated further linkages in two directions (Hagen-Zanker and Both 2021; Smith 2021; Albaddawi et al 2020; Longhurst and Smith 2020). On one hand, governments have been extending social protection to typical “humanitarian beneficiaries”. This includes making refugees eligible for flagship pandemic responses in Argentina, Brazil, Cameroon (including public works), Colombia (displaced Venezuelans), Chile, Congo, Djibouti (vouchers), Panama, South Africa, and Trinidad and Tobago.<sup>28</sup> Furthermore, there are instances where state authorities utilized “humanitarian systems”: for example, Jordan tapped UNICEF’s RapidPro tool developed for the organization’s Hajati cash transfer for contacting, validating identity and confirming e-wallets presence for daily workers supported under the NAF social protection pandemic responses (figure 17). Two weeks after commencing the process, about 188,000 out of 200,000 beneficiaries had been identified and received their payments (Hammad et al 2021).

**Figure 17.**  
**RapidPro**  
**system for**  
**refugees**  
**leveraged in**  
**Jordan’s NAF**  
**cash transfer**  
**program**



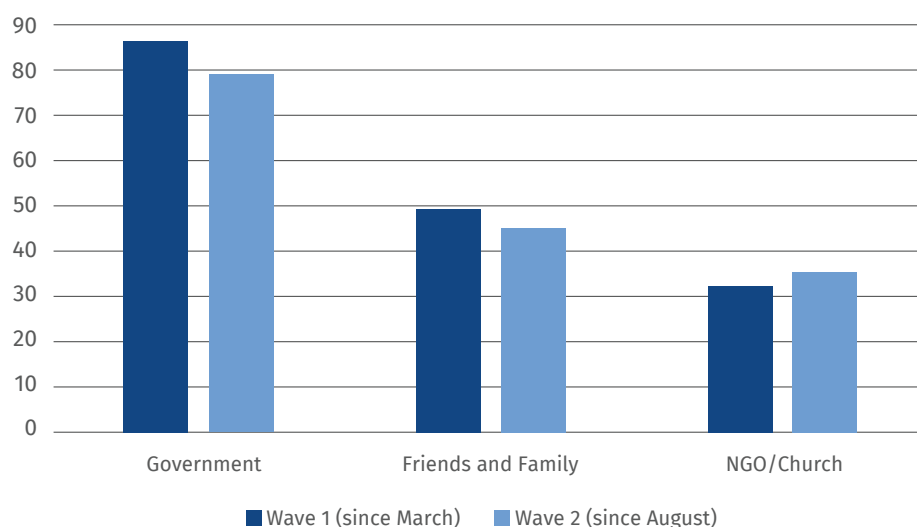
Source: Albaddawi et al (2020)

On the other hand, humanitarian assistance has been connecting with government social protection platforms deliberately, e.g., in terms of accessing government database (e.g., WFP in Cambodia and Colombia); aligning with national program parameters like transfer size, duration and payment (e.g., UNHCR in Peru, Turkey and Morocco). Cases where humanitarian agencies directly channeled cash as top-up to existing national schemes was observed in Armenia and Ethiopia, while participation in working group on cash and social protection emerged in Iraq and Yemen. The cases of Dominican Republic, Tajikistan and the Philippines offer further examples of joint assessments and options analysis. The pandemic also illuminated other aspects of the typical humanitarian process, including for example the wider empowerment accorded to local and domestic responders as a result of movement restrictions of international staff (Brubaker et al 2021).

National and local civil society actors were also called for widespread engagement in direct provision of assistance (Gerard et al 2020). This occurred also in contexts of high social protection coverage: for example, during the early stages of the pandemic part of the South Africa's response relied on civil society organizations for food and in-kind assistance (Gronbach et al 2022). In the Philippines, two rounds of high frequency monitoring surveys show that as the crisis unfolded, public assistance became less progressive (Cho and Johnson 2022). Data revealed that between March and December 2020, government support for the poorest quintile diminished by almost 7 percentage points, while help from informal networks of family and friends diminished relatively little. Remarkably, assistance from nongovernmental and faith-based organizations increased over time to seemingly fill gaps in public provisions<sup>29</sup> (figure 18).

Similarly, in the United States the use of food pantries (food banks or soup kitchens) operated by faith-based and other non-governmental organizations soared by 2.3 percentage points in 2020. The increase reached about 7 percentage points among very food insecure households, with nearly half (45.5%) accessing food pantries the first year of the pandemic (Coleman-Jensen and Rabbitt 2021). In France, food banks increased distributions by 25% in 2020, with an estimated 8 million people requiring such assistance that year compared to 5 million in 2019 (Legros 2021).

**Figure 18. Sources of assistance in the Philippines, % of poorest quintile**



Source: Cho and Johnson (2022)

**Fact 10. Record-level global spending was highly uneven across countries, with financing based on a range of sources**

Data on social protection and labor program spending is available for 23% of programs. Over 2020-2021, countries invested a total of over \$3 trillion in those interventions. Such level of expenditures represents around 18% of overall stimulus packages, and it is about 4.5 times higher than the estimated level of social protection spending during the Great Recession of 2008-09.<sup>30</sup> The United States accounts for 64% of global social protection spending (Gentilini et al 2022a).

Average spending on social protection amounted to an average of 2% of GDP, three-quarters of which was devoted to social assistance (figure 19, panel a). Ravallion (2020) considered such level of social protection spending a minimum basis for response: “... [a]s a rough rule of thumb (...) a near-term fiscal injection of transfers less than 2% of GDP should be judged as inadequate”. Spending varied between 1.1% of GDP in MENA to 7.4% of GDP in North America. Interestingly, East Asia and Pacific present a level of investment that is over twice that of ECA. Similarly, there are stark differences when considering spending in per-capita terms: with a global average of \$313/capita, high-income countries display a level of injection about 93 times higher than low-income countries – i.e., about \$715 and \$7.7 per capita, respectively; regionally, per capita spending ranges from about \$27.5/capita in Sub-Saharan Africa to 4,130/capita in North America (figure 19, panel b).

**Figure 19. Social protection spending by region (average % of GDP and \$/capita)**

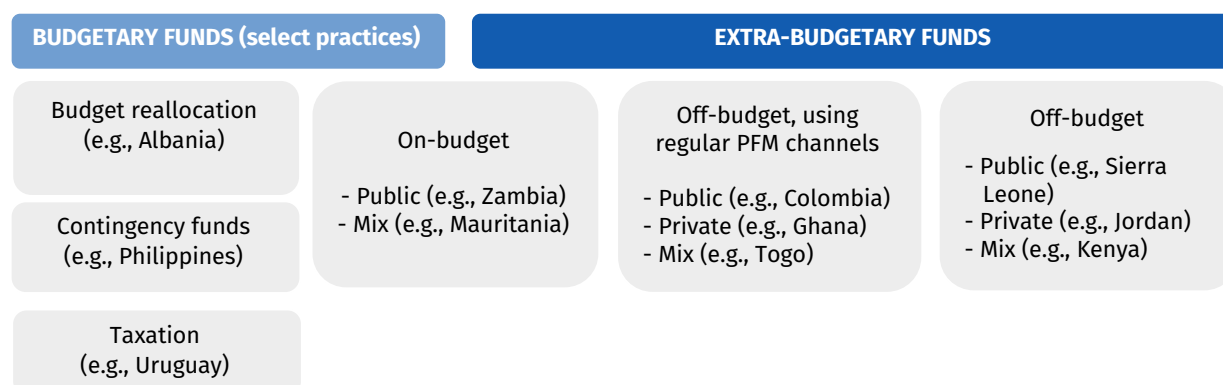


Source: Gentilini et al (2022a)

How are responses financed? Analysis by the IMF (2022) shows that between 2019 and 2021, the world's gross debt as percentage of GDP rose by about 13 percentage points. And an early contribution examining sources of domestic financing for social protection responses found that debt and deficit spending constituted 38% of sampled cases (Almenfi et al 2020). Pre-pandemic analysis by Romer and Romer (2017) predicted that a country's prior debt-to-GDP ratio had a large contractionary effect on the fiscal response to a crisis, and vice-versa.<sup>31</sup> This seems not have been the case during Covid-19, when countries debt-fiscal response relationship was severed. Yet, in some cases political considerations may have curbed the appetite for debt increases and related implications. In the case of Southern European governments, for example, Moreira et al (2021) argued that "... [o]ne possible interpretation of the initial lower immediate fiscal stimulus payments is that national governments treated any additional loan [from the European Central Bank] with caution because the stigma of fiscal surveillance remains politically toxic" (p.354).

At more granular level, a comprehensive analysis by Hammad et al (2021) shows that domestic public financing was the most prevalent source of funding, including 74% of responses (with the reminder equally split between external assistance (13%) and other sources). Domestic financing occurred via transfers from the existing budgets (79.5% of the 524 recorded measures), budgetary reallocation (5.7%), contingency funds (3.4%), and in some cases taxation. These were complemented by extrabudgetary mechanisms (6.8% of cases) (figure 20).

**Figure 20. Illustrative Covid-19 budgetary and extrabudgetary financing for social protection**

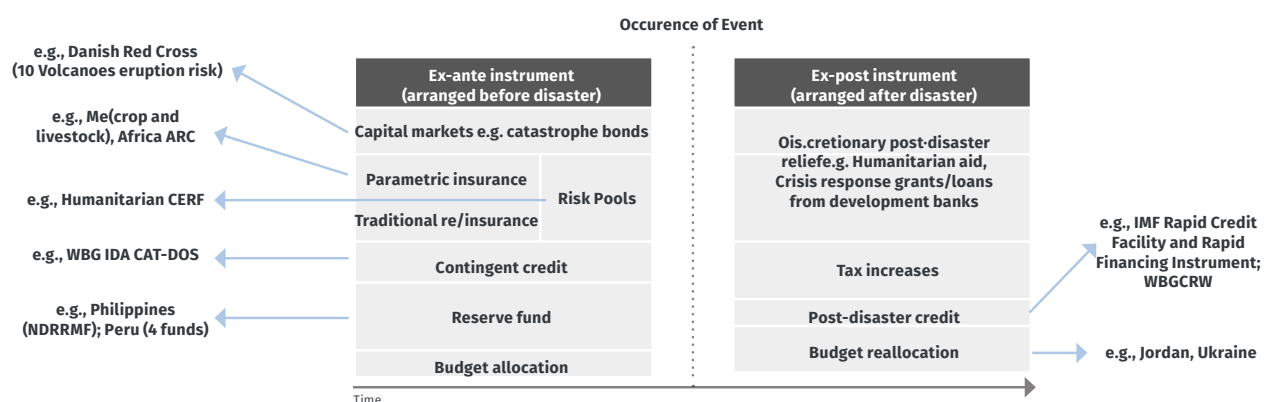


Source: adapted from Hammad et al (2021) and Rahim et al (2020)

In Timor-Leste, social protection was in part funded by reallocating resources from the national Petroleum Fund; Bolivia redirected financing for fuel subsidies toward pandemic responses; in Ukraine, the repurposing of funds for social protection affected the planned census, among others; Kenya's initial rollout of *Kazi Mtaani* – a public works program for youth in informal settlements – was financed by redirecting infrastructure sector funds for urban development; and Albania reallocated \$18 million of defense spending for, inter alia, unemployment benefits and social assistance (Duran-Valverde et al 2020). Liberia and Uruguay used earmarked taxes on public sector wages as a source for their Covid-19 funds (Hammad et al 2021).

Contingency financing was another financing modality. At the core of this agenda is how to strike a balance of ex ante and post-shock risk financing instruments for a given country risk profile (figure 21). Such approach has advanced in areas at high climatic risk (particularly droughts and typhons), and recently receive further impetus under the Covid crisis (Calcutt et al 2021; Longhurst et al 2021; World Bank 2021d; Hill et al 2020). The basic tenet of the agenda is that risks with a certain probability and occurrence may be tackled more effectively and efficiently with anticipatory action (Pople et al 2021). This includes a firmer grounding of scale up decisions on early warning systems.

**Figure 21. Risk financing instruments**



Source: adapted from Longhurst et al (2021)

Those principles have been put in practice in the Covid response, albeit at a small scale. In the Philippines, lockdowns on the Luzon island in the Philippines triggered the use of nearly \$26 million from its Quick Response Fund for in-kind provisions. In Sierra Leone, the Epi Fund (EPF) cash transfer program was introduced in 2014. The program supported 12,000 households with quarterly payments of \$45 via mobile money combined with distribution points based on QR codes. Based on the Ebola experience as well as flooding of Freetown in 2017, the EPF was reformed in 2019 for pre-arranging external financing for emergency response. This involved a risk layered approach and a contingency budget of \$4 million that was activated in 2020 enabling faster disbursement (Sandford et al 2020).

Extrabudgetary funds were used to finance 36 programs in 18 countries. These present different levels of alignment with budgetary outlays. At one extreme are fully off-budget mechanisms running in parallel to national budgets. While separate from budgets, those models tend to come with strong oversight, transparency, and accountability measures: for example, Sierra Leone's off-budget fund was established in an Emergency Operations Center under the President. Jordan's Himmat Watan Fund was financed by public actors (e.g., Bank of Jordan), private sector and individual donations. The fund financed the national emergency cash transfer for daily wage workers, including covering the first payment in full and about 88% of the cost toward the end of the program (12% being funded by the Treasury). In Kenya, a weekly



cash transfer was implemented for 6 months with funds from the COVID-19 Emergency Response Fund. In some countries with significant external assistance, like Uganda, pandemic funds were supported by donors to ringfence contributions for Covid-19 relief and lower fiduciary risks.

An off-budget practice that used routine public financial management channels is Colombia's Fund for the Mitigation of Emergencies financed via public debt bonds for \$3.1 billion. In Togo, a dedicated portal tracked payments made under the Tovissi cash transfer program on a daily basis. Lastly, Mauritania's National Solidarity Fund offers an example of an on-budget funding fully integrated into country's public financial management structures (Almenfi et al 2020). In mid-2020, about three-quarters of the fund's \$125 million were devoted to subsidies and utility fee waivers, as well as partly supporting the Taazour cash transfer scheme.

Private donations were also an important part of the financing mosaic. For example, Zakat-related contributions accounted for at least 11 measures. Hammad et al (2021) report that the Zakat fund in Jordan funded 13.6% of its in-kind transfers; the equivalent fund in Egypt financed monthly cash transfers of \$110 for 30,000 informal workers; the Kuwait zakat fund contributed in assisting over 312,000 stateless individuals and migrants with cash and in-kind transfers; and in Indonesia, "... the central Zakat Agency (BAZNAS) accepted zakat payments through QR codes, e-wallets and bitcoin (...) and created ZakatHub, a common crowdfunding platform to raise zakat to be used by the agency's regional committees (...). Regional zakat collection and distribution agencies set up a COVID-19 crisis centre to synergise the response and implement a number of social assistance programmes across all regions. One of them was a cash for work programme in which the agency contracted daily wage workers to disinfect public spaces" (ibid, p.60).

### 3.2 Cash transfers in practice<sup>32</sup>

#### *One tool, many applications*

Cross-country practices reveal the multiple objectives pursued by cash assistance, and the diverse population profiles served during the crisis. For example, one area where governments used cash transfers was to offset the competing demands of work and childcare. Eighty-two countries, such as Argentina and Armenia, have provided childcare benefits to parents with children. Myanmar and others 16 countries have implemented a one-off targeted cash transfers to pregnant women or with children below 3 years of age. Malta introduced childcare benefits for private sector employees who took unpaid leave for childcare. Similarly, Poland provided additional 14 days of childcare allowance to parents with children below 8 years of age. Other 12 governments provided universal childcare allowances. For example, Iceland announced a one-off childcare payment to all families with children below 18: parents with an average monthly income below ISK 927,000 in 2019 received ISK 40,000 (about \$300) per child, while those with higher income received half of such amount.

Cash assistance was also provided in connection to stay-at-home orders. Government provided cash assistance to people living in lockdown-imposed areas or regions, e.g., in Azerbaijan, Fiji and other 6 countries. In Malaysia, for example, the Federal Territories Islamic Religious Council provided advance payments and a one-off top-up to its monthly beneficiaries in response to lockdown measures.

Frontline workers received special cash transfer payments in 36 countries (either as one-off or monthly top-ups). For example, in April 2020 Brunei announced a monthly special allowance of B\$400 (nearly \$290) for doctors, nurses, paramedics, ambulance drivers, and hospital cleaners and security guards. The Seychelles provided additional transfers to their immigration, customs, and related workers. Similarly, countries like Peru, Timor-Leste, and Tuvalu provided payments to their military, police, and civil defence forces. Other economies provided bonuses to their civil servants (e.g., Cayman Islands, France, Malaysia, and Zimbabwe).

Cash transfers were also provided on a more traditional needs-based basis. Fifty-eight countries delivered cash assistance to poor and vulnerable people. Belize, for example, implemented a temporary cash transfer to low-income families who were not covered by any other social assistance program. Similarly, countries made payments to other vulnerable groups such as people with disabilities (55 countries), single parents (13), and the elderly (31). These also include 12 cases where transfers made to foster families or custodians that took care of disabled people, orphan children and seniors. Governments also provided additional assistance to people with a higher risk of Covid-19 due to comorbidities. This also involved governments offering home delivery of cash to such populations (e.g., Grenada). Other special transfers were made to people affected by HIV or tuberculosis (e.g., Myanmar, St Lucia, and Tajikistan), chronic kidney (e.g., Sri Lanka), and various other diseases (e.g., Cuba).

A total of 11 countries (e.g., Argentina, Eswatini, France, Gambia, Iran, Madagascar, Uganda) have implemented some form of Covid-related conditional cash transfers based on absence of domestic violence during quarantine (e.g., Colombia); transfers connected to human capital development (e.g., Congo); or linked to training programs (e.g., Benin, Myanmar). Conditionalties were sometimes tied to benefit temporal extensions: for example, the Cook Island's Emergency Hardship Fund had extended the eligibility period for support by 3 months, with an option for further extension by 3 months conditioned on recipients participating in volunteer work or community service for at least 5 hours/week.

A few countries, such as Kiribati, Mongolia and 7 others, helped stranded citizens living abroad. Assistance was also provided domestically: China, India and 6 others had taken active steps to disburse cash to affected mobile populations. For instance, India's Bihar state transferred money to bank accounts of workers stranded in other states due to lockdowns (Mukherjee 2020).

Finally, governments at federal and local levels incentivized the uptake of vaccinations through a range of creative programs<sup>33</sup> (box 3). Also, countries provided financial support to people who were infected by Covid-19: the Philippines and other 9 countries compensated people who were tested positive for Covid-19 while on duty. India's Delhi government provided Rs5,000 (about \$65) per person (and maximum of Rs10,000

per family) to Covid-positive construction workers. Similarly, Australia and 7 other countries assisted those who were asked to self-isolate. For example, UK's Test and Trace Support Payment Scheme provided a cash assistance of £500 (nearly \$613) to low-income, self-isolating individuals. Finally, 13 governments provided cash transfers to support families with the expenses related to funerals and last rites (e.g., Bangladesh).

### **Box 3. "Cash for jobs"**

Governments have provided cash assistance in a variety of forms to incentivize people to take-up vaccination. A total of 55 cash-for-job programs were recorded in 6 economies, namely Cambodia, Japan, Russia, Serbia, United States, and Virgin Islands. Among the schemes, organizing lotteries and cash prizes were the most widely used mechanism, including 26 programs in 3 countries. For example, New York State announced in May 2021 a new vaccination program that provided free lottery scratch-off tickets to individuals aged 18 and above with a grand prize of \$5 million. While 18 US states had some form of lottery, others like Arkansas and New Mexico offered \$100 incentive programs. The town of Miyashiro, in Japan's Saitama prefecture, passed a supplementary budget that included a plan to distribute JY 1,000 coupons (about \$7.5) to all residents eligible for vaccination. Serbia offered about \$30 to all those who got their Covid-19 vaccine by May 31, 2021. Other methods to offer financial nudges include providing university scholarships (e.g., New York, Ohio, West Virginia); gift cards (e.g., California, Maine, North Carolina, Michigan); \$100 saving bonds (e.g., West Virginia); and discount coupons (e.g., Japan).

Source: Gentilini et al (2022a)

### ***Implementation across delivery building blocks***

Programs were implemented in a variety of ways during the crisis. This section briefly reviews those arrangements following a typical delivery systems framework (Lindert et al 2020). In terms of outreach, programs were publicly announced through media and community to promote the awareness among potential beneficiaries (e.g., Pakistan and Bhutan). For example, Bhutan's Druk Gyalpo's Relief Kidu cash program was provided widespread publicity through television, radio, press and social media. Similarly, Colombia had YouTube videos explaining the Ingreso Solidario program.<sup>34</sup>

For intake and registration, various modalities were pursued, often as complementary strategies within the same country. Those options included registration via digital and web portals (e.g., Bhutan, Cape Verde, Czech Republic, Guam, Honduras); via mobile platform (e.g., SMS in Brazil, Pakistan, India, Togo); manual registration at public local offices (e.g., Jordan, South Korea, Ukraine); manual registration via outreach/enrolment provided in mobile vans or similar initiatives (e.g., Algeria, Côte d'Ivoire, Kenya, Sudan).

Some countries have retained the need for verification (in the form of home visit or inviting the beneficiary to the government office) for first-time applicants. This included Cook Islands, Kosovo, and San Marino. Others, instead, simplified need assessments for first-time applicants. In case of Jordan (Takaful-3), for instance, verification of new applicants by a social worker was conducted virtually. For existing beneficiaries, Kosovo and other 12 countries simplified the process by suspending all the re-application and verification requirements – such as to visit government office, fill out the form, etc – thereby allowing to automatically extend cash for existing beneficiaries whose benefits expired. Kosovo, for example, had suspended the verification process for social assistance (and pensions) benefits of re-applicants. However, new applicants were required to complete full application process. Ukraine automated the verification of information that the applicant indicated in the application: the time taken to complete the registration process through a software was less than 5 minutes.

Countries enriched their social registries with information collected during the pandemic. For example, in addition to census data and local government data, Colombia's Bogotá *Solidaria en Casa* used data from cell phone operators to identify its potential beneficiaries. Ghana, Indonesia, Mali, Mauritania, and Nigeria integrated information collected during Covid -19 into their social registry. In Indonesia, for example, beneficiary data collected from *Bantuan Sosial Tunai* (an emergency unconditional cash transfer program) has been integrated into the social registry. Brazil created the ExtraCad platform combining different information sources and databases.

Some other governments (such as El Salvador and Guatemala) used other proxies of welfare – e.g., electricity consumption – to identify beneficiaries. For example, Guatemala introduced the emergency cash transfer Bono Familia to reach 2.7 million households (80% of population) for a duration of 3 months: in such case, 90% of beneficiaries were targeted based on electricity consumption less than 200whz for areas with proper electricity access; the remaining 10% of beneficiaries were selected based on socio-economic characteristics.

Uzbekistan increased the age limit of the child grant from 14 to 18 years old. Similarly, 7 countries relaxed the eligibility threshold (by disregarding certain incomes and categories, or increasing the threshold) for registrants to receive allowances. For example, Belize' BOOST cash transfer program relaxed the eligibility threshold to include vulnerable households above the poverty line. And North Macedonia relaxed the eligibility criteria of guaranteed minimum income scheme for materially deprived households, allowing the program to expand horizontally to 15,500 new households from the informal economy and 30,000 existing beneficiaries. Also, governments have suspended or reduced the eligibility proof requirements (such as reporting of income, wealth, etc.) for their cash assistance. For example, in Germany parents who lost income due to the pandemic could receive easier access to child grant (*Kinderzuschlag*) with simplified eligibility requirement of one-month income proof instead of 6 months. Similarly, the Kyrgyz Republic's suspended the requirement to report income for low-income families and extended the standard one-year enrolment term for the poverty-oriented cash transfer. France waived the quarterly declaration of resources for its guaranteed minimum income.



Some countries also enrolled people who were previously on waiting list of social assistance program. For example, West Bank and Gaza enrolled 10,000 new families who were previously on the waiting list of the Cash Transfer Programme. Some other countries have targeted and enrolled previously unsuccessful applicants. Albania, for example, provided cash assistance of about \$140 per unsuccessful applicants of the Ndhima Ekonomike program since July 2019 (and who did not receive any assistance until April 2020). In other cases, e.g., Colombia's Familias en Acción, programs have re-enrolled registrants who previously failed to comply with conditionalities. Such approach in Colombia has, according to Alvarez-Iglesias et al (2021), presented an opportunity to "... understand how to reduce barriers experienced by vulnerable families and young people when attempting to access support from conditional cash transfers".

Belize and 6 others have used SMS to notify regarding the result of their application and to inform about the onboarding process. The Kuwaiti Zakat House/Fund sent text messages to all registered families to update their private data through an attached link. Similarly, Egypt notified accepted beneficiaries via a SMS regarding the location and time to collect their first payment and ATM card. This was done to avoid overcrowding, and compounds other Covid protocols established at payment locations. Other Covid-sensitive practices are laid out in box 4.



Cartagena, Bolívar/Colombia; 06/06/2020: Retired men are queuing up and keeping a distance to enter a local city bank in times of pandemic. by Luz Zuluaga Photography



#### Box 4. Social distancing protocols in cash transfers

In the case of Japan's special cash transfer, beneficiaries were encouraged to fill application online and in person applications were only restricted to only special case in a attempt to avoid the spread of the virus. Also, in Philippines, "Assistance to Individuals in Crisis Situation (AICS)" program processed only limited application every day in order to adherence with the social distancing measures. Egypt sent SMS regarding payment collection details such as location and time of visit to avoid overcrowding and ensure the safety of beneficiaries. WFP, in Egypt, increased the number of distribution stations to avoid overcrowding. Inua Jamii beneficiaries, in Kenya, were required to maintain 1.5 meters of social distance, while standing in queue at the payment centers. Yemen's Emergency Cash Transfer beneficiaries were requested to cover their nose and mouth, and maintain social distancing while queuing inside the payment sites. They were also requested to use the provided hand sanitizer before entering and after collecting their cash. Likewise, all project staff were using protective gear (such as masks and gloves). Finally, strong scheduling and crowd management mechanisms were put in place to prevent crowding at the payment sites. Montenegro's Material security program processed the payments through post office and home deliveries, to enforce social distancing. Similarly, Grenada's SEED program provided cash assistance delivery at home for elderly while rest of them had to collect it from allotted payment stations. Some countries such as India and Latvia used a unique way of dispersing money to its beneficiaries. For example, to maintain social distancing, India's Pradhan Mantri Jan Dhan Yojana (PMJDY) program used last digit of the account numbers to provide the delivery of the cash transfer. For account numbers with last digit as 0 and 1 will get the money in their account on 3 April 2020, 2 and 3 will get on 4 April 2020 and so on. Similarly, Latvia's childcare transfer dates for each child varied as the pay-out took place gradually according to the child's year of birth, starting with the oldest children.

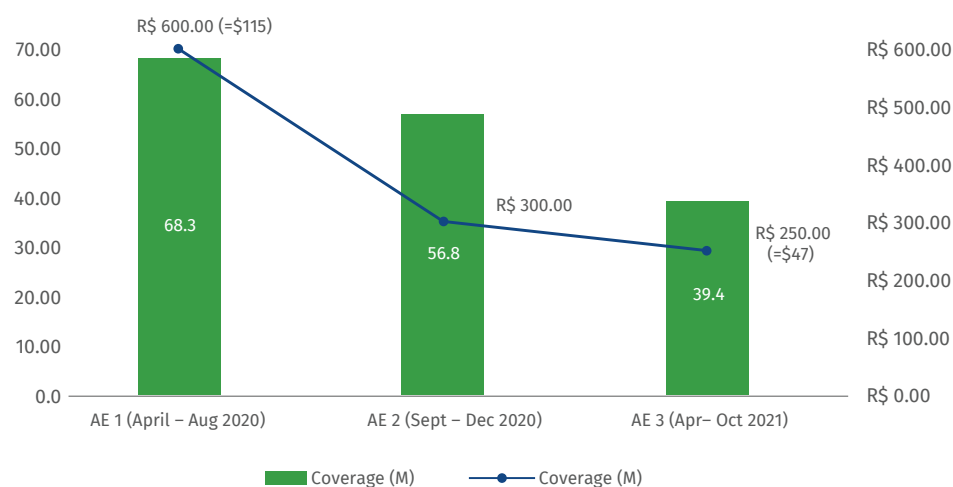
Source: Gentilini et al (2022a)

#### ***Program design is largely "back to normal"***

Basic design of Covid cash transfers has been "lean and simple", including weaving conditionalities and work requirements. As of late 2021, a number of countries have reinstated pre-Covid design features. This includes the reactivation of conditionalities, like in Indonesia (Family Development Sessions for the PKH program), Dominican Republic (soft conditions for food component of *Superate* program), Brazil, Chile, Hong Kong, Norway, Panama, and Tanzania. Work requirements have also resumed in public works schemes in Rwanda, Ethiopia and, again, Tanzania.

Such “back to normal” is also visible in core trends in coverage and adequacy. Brazil is a case in point: the national Auxílio Emergencial (AE) program gradually reduced provisions in three phases (figure 22). Out of the initial AE-1 scale up reaching 68.3 million individuals (10.5 million via Cadastro Unico, 19.5 million as Bolsa beneficiaries, and 38.2 million via mobile apps), gradually more stringent criteria were established. To enable cross checks, the number of databases tapped increased from 17 in AE-1 to 42 in AE-3. Overall, this led to reduction by 42% in coverage and 58% in benefit levels in the 18 months spanning from April 2020 to October 2021.

**Figure 22. Evolution of Auxílio Emergencial coverage and adequacy in Brazil, 2020-2021**



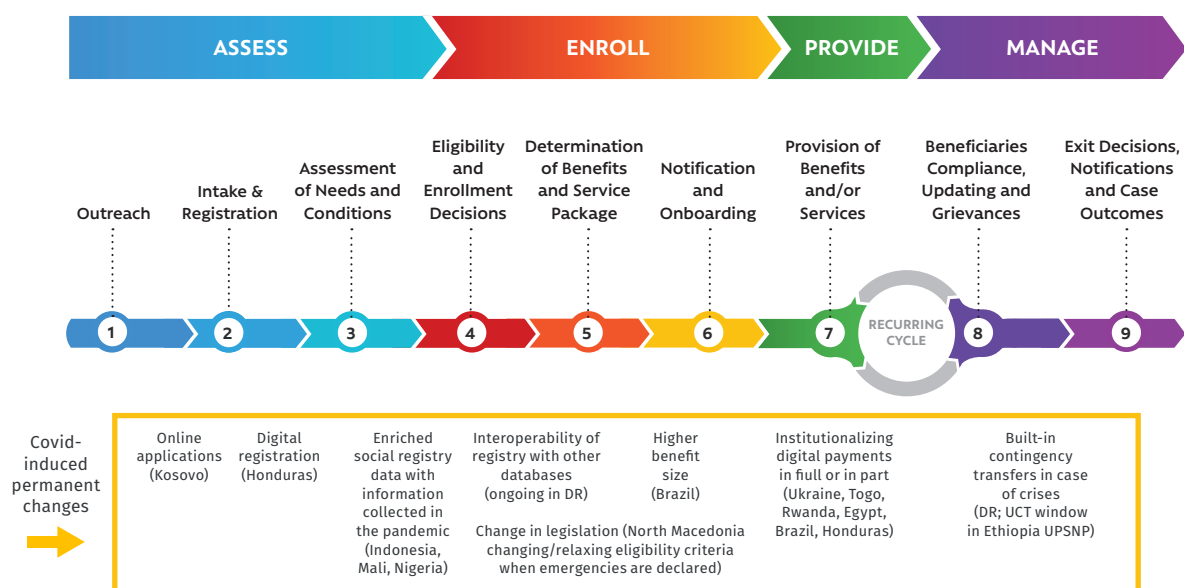
Source: data from Arruda et al (2021)

Similarly, Australia’s Corona Virus Supplement gradually reduced the benefit amount. In March 2020, Australia announced a six-month Coronavirus Supplement to be paid at a rate of AUD550 (about \$380) on a fortnightly basis. The transfer was directed to recipients of the jobseekers payment, parenting payments, youth allowances and other payment types. The cost was AUD 14.1 billion (\$10 billion). In July 2020, the program was extended until December 2020, with payments reduced to AUD 250 (\$173). On December 10, 2020, the government further extended the duration of the payment until March 2021, but reduced the payment to AUD 150 (\$104) (Gentilini et al 2022).

### **Early signs of a Covid operational legacy**

As the wave of country Covid-19 responses recede, an operational “Covid legacy” emerge. For instance, in Brazil the crisis sealed the permanent migration from debit cards to digital bank accounts for recipients of AE as well as increasing cash benefit size (relative to pre-2020) on a more permanent basis. Others, like Iceland, New Zealand, and Moldova have either made such increase permanent or are planning to do so. Similarly, there is a growing cadre of programs that leveraged the pandemic to enhance routine social protection delivery systems (figure 23).<sup>35</sup>

**Figure 23. Covid-induced innovations in delivery systems, select countries**



Source: author based on internal survey of WBG task team leaders in late 2021; framework is from Lindert et al (2020)

Upgrades include, among others, online applications in Kosovo, digital registration in Honduras and digital payments in Rwanda and Egypt; newly collected data in Covid times enriching pre-existing registries, such as in Nigeria; enhanced interoperability of social registries, e.g., Dominican Republic; legislative provisions activating the relaxation of eligibility criteria in crisis, like in North Macedonia; and advancements in using built-in contingency transfers in emergencies, e.g., Ethiopia. In Lithuania, responses featured higher amounts of monthly social assistance benefits and easing of eligibility criteria: as reported by Aidukaite et al (2021), such measures “... will remain in force after the COVID-19 crisis” (p.365). And in New Zealand, if an employee must self-isolate because of Covid-19 and can’t work from home during that period, the leave support scheme provides the person with cash transfers for \$359-600/week.<sup>36</sup>



Glen Innes, Auckland / New Zealand - March 24 2020: People queue outside discount supermarket Pak'nSave two days before the coronavirus covid-19 self isolation level four shut down of New Zealand. By Glen Innes.



Cape Town, South Africa - August 2020: Covid Relief Funds in South Africa. long lines for people waiting for money to feed themselves. Poverty in Africa. People waiting hours for 20 Dollars. By Chadolfski

### 3.3 Effects of social assistance responses

#### *Welfare effects*



















A growing volume of assessments is examining the extent to which social protection has been effective in mitigating the pandemic's detrimental welfare consequences.<sup>37</sup> Table x presents findings from a compilation of over 30 cross-country and country-specific studies.<sup>38</sup> Impacts are reported for health as well as other welfare dimensions, particularly food security.<sup>39</sup> An indicative typology of performance is offered along three basic categories: social assistance responses that mitigated most or even the entire negative impact of the pandemic (green cells); responses that halted the negative effects of the pandemic significantly, but not sufficiently to offset most of the damage (in blue); and social assistance that resulted in modest or limited mitigation effects (grey cases). Most studies found that responses helped significantly, but were enough to offset the pandemic's effects. This includes 11 out of 22 blue cells of table X.<sup>40</sup>

**Table 2. Summary effects of social assistance responses on welfare**

#### **WELFARE DIMENSION: HEALTH**

Countries	Indicative effects of social assistance	Summary effects	Source
43 countries		A standard deviation difference in poverty leads to +25% Covid cases. With cash transfers, however, the rate is only 11% increase	Aminjonov et al 2021
178 countries		-21.8–47.7 pp Covid growth rate; -17.1–29.7 pp Covid mortality growth rate; -3.69M Covid cases; 166,690 lives saved (-4.4–8.29 pp in workplace mobility; -6.6–11.6 pp in job search effort levels)	Asfaw 2021
Brazil		Auxilio Emergencial (AE) (\$155 x 5) reduced the chance of reporting Covid by 15% (by reducing work between 2.7 to 3.6 hours/week)	de Leon et al 2021
Togo		Improved access to health care services for the most vulnerable households	Tossou 2021

## WELFARE DIMENSION: HEALTH: CONSUMPTION, FOOD SECURITY, POVERTY, INEQUALITY

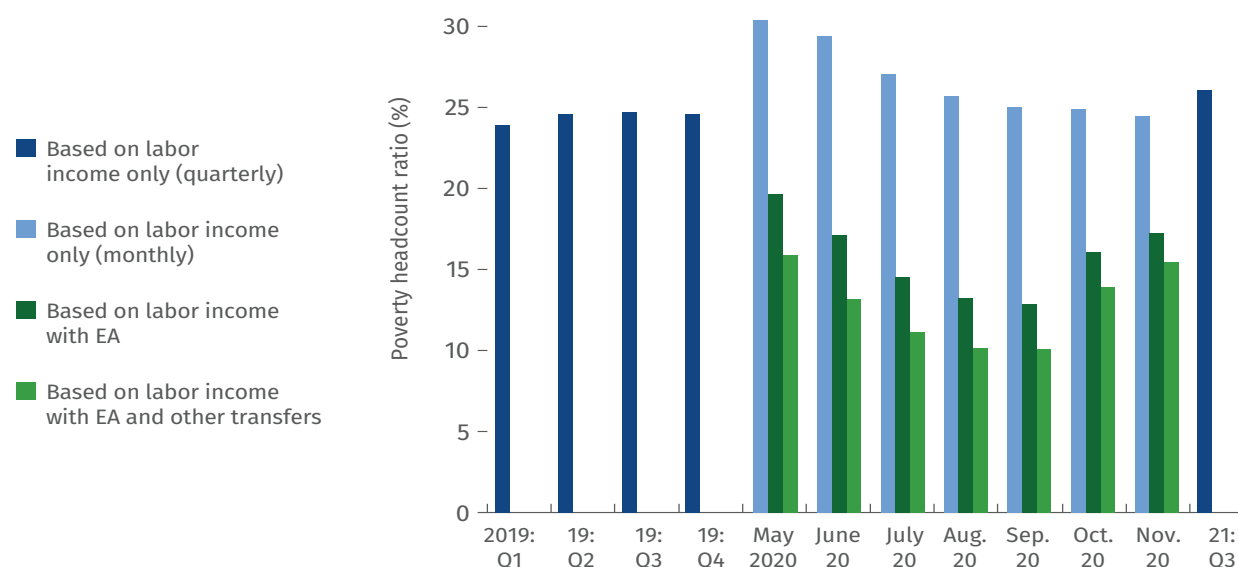
Countries	Indicative effects of social assistance	Summary effects	Source
South Africa		Poverty reduced between 56% (food poverty) and 23% (upper-bound poverty line); performance improved over time	Barnes et al 2021; Gronbach et al 2022
Brazil		Offset and reversed poverty (it would have increased by 5.6M in the absence of cash; response of 3.3% of GDP); benefits with relatively high breadth and sufficiency. AE reduced poverty from 23 million people in 2019 to 9.8 million in September 2020.	Lustig et al 2020; Blofield et al 2021a,b,2020; IMF 2022; Neri 2021
Chile		Benefits with relatively high breadth and sufficiency	Blofield et al 2021a,b
Ethiopia		PSNP largely mitigated food insecurity (from + 11.7pp to 2.4pp; size food gap from 0.47 months to 0.13 months); response generally progressive in rural areas	Abay et al 2020; Duchoslav and Hirvonen 2021
Argentina		With a response of 1.48% GDP, poverty increased by 0.6M people, but it would have been 1.6M without cash	Lustig et al 2020; Blofield et al 2021a,b,2020
United States		Pandemic EBT reduced the share of families in SNAP households where children experienced very low food security by 17%; reduced food insufficiency among SNAP households by 28%	Bauer et al 2021
India		In India's Bihar state, households that received cash transfers had a lower proportion of food insecurity (43.6%) compared with those who did not (49.7%)	Makkar et al 2022
Armenia, Cambodia, Chad, Djibouti, Ethiopia, Kenya, Malawi, Mali, Nigeria, South Africa, Uganda		Cash transfers more effective than in-kind transfers; but overall, analysis of High Frequency Phone Surveys found "... food insecurity that government safety nets have not fully mitigated"	Dasgupta and Robinson 2022
Colombia		Ingreso Solidario had limited overall effects on food consumption; but among households that experienced large labor market shocks, it mitigated more than 50% of drops in food consumption	Vera-Cossio et al 2020
South Africa		Special Covid grant reduced poverty by 2pp (till 5.3%) and inequality by 1.3-6.3%	Kohler and Bhorat (2021)
Costa Rica, Uruguay, Peru, Bolivia		Sufficiency of benefits varies from medium to low sufficiency, often with differences between programs	Blofield et al 2021a,b
Kenya		Beneficiaries were 4.9-10.8pp less likely to report experiencing hunger during the last 30 days	Banerjee et al 2020
Uruguay		Positive effects, but limited in size	Brum and De Rosa 2021
Colombia		Response of 0.87% of GDP, poverty increased by 2.3M with cash (instead of 2.5M without it)	Lustig et al 2020; Blofield et al 2021a,b, 2020
Bolivia		Enhanced probability that households had a week's worth of food stocked by 25%; reduced probability of going hungry by 40%	Bottan et al 2020
India		Cash transfers decreased moderate food insecurity by 2.4% and severe food insecurity by about 0.92%; NREGA program only provided 13.5 days per rural household	Kumar et al 2022; Narayanan et al 2022
Ghana, Mozambique, Ecuador, Zambia, Tanzania, Uganda		Limited mitigation effects (simulations based on tax-benefit models)	Adu-Ababio et al 2021; Cardoso et al 2021; Jara et al 2021; Kalikeka et al 2021; Kisanga et al 2021; Lastunen 2021
Malawi, Liberia		Modest effects on consumption and dietary diversity	Aggarwall et al 2020
Mexico		No significant social assistance response (9M additional people fell into poverty)	Lustig et al 2020; Blofield et al 2021a,b, 2020

Source: compiled by author



Importantly, as benefits were short term and mostly phased out in 2021, welfare effects may follow a U-shaped trajectory. In the case of Brazil's example highlighted in the earlier section, Auxílio Emergencial played a critical role in reducing poverty from 23 million people in 2019 to 9.8 million in September 2020. But as support receded, poverty reemerged in early 2021 affecting nearly 27.7 million people (figure 24) (IMF 2020; Neri 2021).

**Figure 24. Poverty in Brazil with and without cash transfers**



Source: IMF (2022); AE = Auxílio Emergencial

Analysis of cost effectiveness of interventions fell outside the remit of most evaluations. This stems from the particular challenges that cost identification and attribution may pose in emergency contexts, as well as the priority accorded to speed as opposed to efficiency that may characterize early phases of response. Future work may shed light on options for optimizing cost-effectiveness. This may involve the discussion on anticipatory transfers and automatic stabilizers, which the paper will examine in section 5.

### **Economic effects**

The economic multipliers of cash transfers have received renewed attention in the literature. Before the pandemic hit, emerging evidence shows that the local economic effects of cash transfers range between \$0.8 and \$2.6 per dollar injected.<sup>41</sup> Such increase in interest has grown in tandem with the adoption of unconventional monetary policies in times of economic downturns. From this perspective cash transfers have been part of macro debates whereby governments, Central Banks, and other macro authorities identify channels to increase liquidity in the economy and stimulate demand. In other words, during Covid-19 debates on cash transfers were, particularly in high-income countries, often located at the intersection of fiscal and monetary policy.



Conventional monetary policy instruments generally include open market operations, adjustments of interest rates, and reserve requirements. But when interest rates are stuck at the lower bound, authorities may lead to consider more radical, unconventional options (Furman 2020; Christiano et al 2011). Such unconventional policies include indirect and direct measures: the former involves “quantitative easing” (QE), under which central banks buy government bonds or other financial assets; the latter concerns the direct provision of cash not to intermediary financial institutions, but to people or consumers. This is also known as “helicopter money” (HM), which is the large-scale provision of cash transfers (see box 5). During 2020-2021, a total 13 economies provided universal transfers to whole population (or for adult members only and variants thereof) with the premier goal of boosting consumer spending.<sup>42</sup>

### **Box 5. Quantitative easing, helicopter money and design choices**

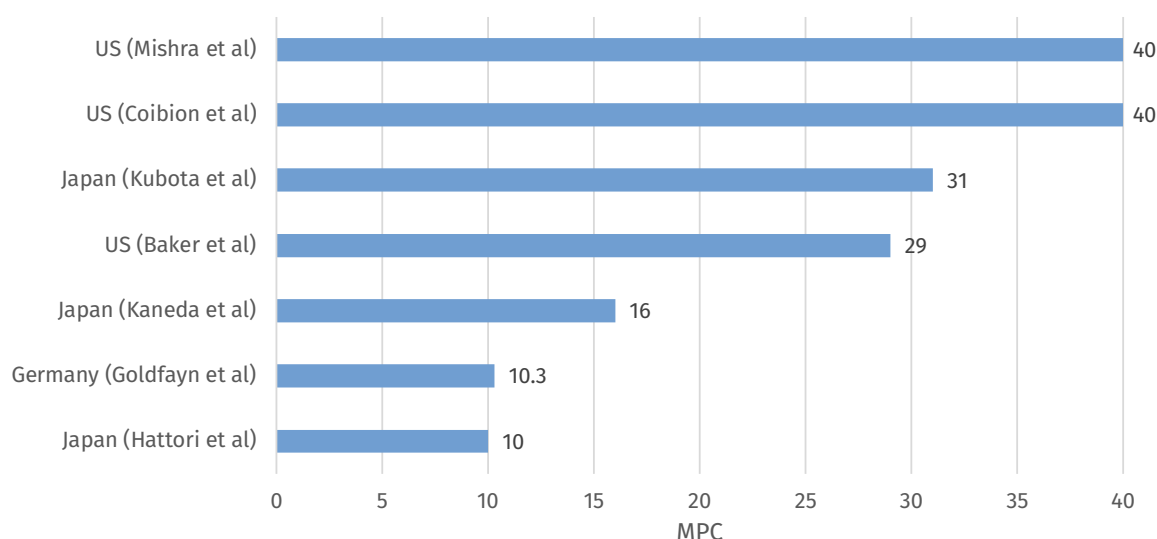
In addition of providing indirect and direct ways of injecting liquidity into the economy, there are a number of differences between quantitative easing (QE) and helicopter money (HM). For instance, there are diverse implications for central bank balance sheets: under QE, central banks create reserves by purchasing bonds or other financial assets; while under HM, central banks distribute the money created without increasing assets on balance sheets. The extent to which QE and HM are consumed depends on many factors, including for example the profile of recipients, supply-side responses and, intriguingly, whether money is perceived as free or coming at a cost. On the later point, HM provides newly issued, ‘windfall’ cash; instead, QE would need to be repaid (e.g., via future taxes).

There is also debate on whether HM should occur via (more) transfers or (less) taxes: for example, the American Recovery and Reinvestment Act of 2009 included tax rebates. While a matter of intense empirical debate, there is suggestive evidence that the provision of relief via taxes may have not been fully “realized” by consumers. For example, Sahm et al (2012) found that the reduction in withholding in 2009 boosted spending at roughly half the rate (13%) as the one-time payments (25%) in 2008. One reason for the difference was “visibility”: “... a change in withholding is simply an adjustment by one’s employer of a recurring, periodic flow. It might not be noticed, especially for individuals whose paycheck routinely fluctuates for other reasons” (ibid, p.4). Furman (2020) argued that in 2009, the option of withholding less taxes was selected because of concerns regarding the risks and administrative feasibility of swift, nation-wide distribution of “debit cards” for relief transfers. Differently from 2009, the choice for tangible, visible “cheques” to nearly all the US population in 2020 might have enshrined an element of public visibility. Those cheques were not helicopter money per se, but they illustrate the point of tax versus benefits: as put by Matthews (2021), “... the flat cash checks to almost every American were by far the most visible part of the country’s policy response to the Covid-19 pandemic”.

Were large scale injections of cash transfers effective in bolstering consumer spending? How money is allocated by recipients would hinge on a host of factors, including the profile of beneficiaries (e.g., their share of budget devoted to food expenditures, etc.); the design of programs (e.g., size, frequency, and duration of payments); and contextual factors, like inflation. For example, Roll et al (2022) show how cash transfers usage in the United States changes based on alternative design parameters like frequency of payments and their amount. Clear public communication can influence spending patterns: using high-frequency panel survey of Euro area consumers' expectations and behaviors, Georgarakos Kenny (2021) found that that "... [b]y communicating clearly and factually about the magnitude, nature and ultimate goals of fiscal interventions, it is possible to improve the public's perceptions about the adequacy of such policies. This, in turn, can help stimulate consumer spending and enhance the benefits of fiscal policy in terms of stabilising the economy". In fact, one of the findings of the study is that expenditures on non-durables (e.g., clothing) increase when consumers perceive government support to be more adequate. Recent studies also suggest that the source of transfers matters: for example, an experiment by Crossley et al (2022) shows that in the UK, cash transfers provided from the government are more likely to be spent than from other sources.

Evidence on marginal propensity to consume (MPC) out of large-scale Covid emergency cash transfers is available for a sample of (at least) three high income countries: estimates show that MPC in Germany, Japan, and United States range between 10-40%, with an average of 25.1% -- that is, a quarter of additional benefits received as cash transfers were consumed or spent on durable and/or non-durable goods (figure 25). The rest of transfers was used for others non-consumption purposes, such as savings and debt repayment.

**Figure 25. Use of cash transfers in select countries, marginal propensity to consume (MPC)**



Source: compiled by author. Note: when estimates include a range, the average is here reported.

In Japan, the effects of the one-off, universal infusion of \$100B (\$950/capita) were studied by three papers: Kubota et al (2021) tracked 2.8 million personal accounts at Mizuho Bank and used cash withdrawal as consumption proxy. Their estimated MPC was 0.31. Another study by Kaneda et al (2021) estimated an MPC

of 0.16 (0.06 for lower and 0.27 for upper bound estimates) within 6 weeks of receipt. Finally, Hattori et al (2021) calculated an MPC of 10%. The latter level is broadly in line with findings from Germany: Goldfayn et al (2022) showed that the first among the three payments (for a total of E450/child) boosted spending by 9.5-11.1%, with effects higher for low-income families.

Cash transfers have been subject to extensive empirical scrutiny in the United States. Coibion et al (2020) studied choices of cash allocation among 12,000 CARES Act beneficiaries. They found that recipients spent or planned to spend about 40% of transfers on average (mostly on non-durables); 30% of cash was directed for debt repayment.<sup>43</sup> Additional econometric work by Baker et al (2020) estimated a spending increase by 29% using the FinTech app (mostly spending on non-durables, driven by liquidity constrained households). Also, Misra et al (2020) examined debit card transaction data and documented an MPC of 29-51%. Furthermore, Karger and Rajan (2020) had a study following for two weeks recipients of the \$1,200 payments. They found that \$546 of the transfer was spent, which translated into an MPC 46%.<sup>44</sup>

Other studies don't necessarily estimate MPC, but still provide insights in spending patterns. Again, in the United States, a report by the Federal Reserve examined spending of cash transfers under the Child Tax Credit Program (US Federal Reserve Board 2022). Findings confirm that most cash transfers were saved (43% of recipients), followed by expenses for children (40%), food (31%), rent, mortgage, or utilities (29%) and debt repayment (21%).<sup>45</sup> Interestingly, wealthier recipients were three times more likely to save than the poorest (earning less than \$25,000/year) (table 3).

**Table 3. Use of cash transfers by US Child Tax Credit beneficiaries by income**

Use of cash	< \$25,000	\$25,000-\$49,999	\$50,000-\$99,999	>\$100,000
Saved it	18	15	33	54
Paid off debt	14	9	9	10
Spent on child	22	22	22	16
Spent on rent, mortgage, or utilities	29	33	18	6
Spent on food	13	19	15	7
Other expenditures	5	2	5	7

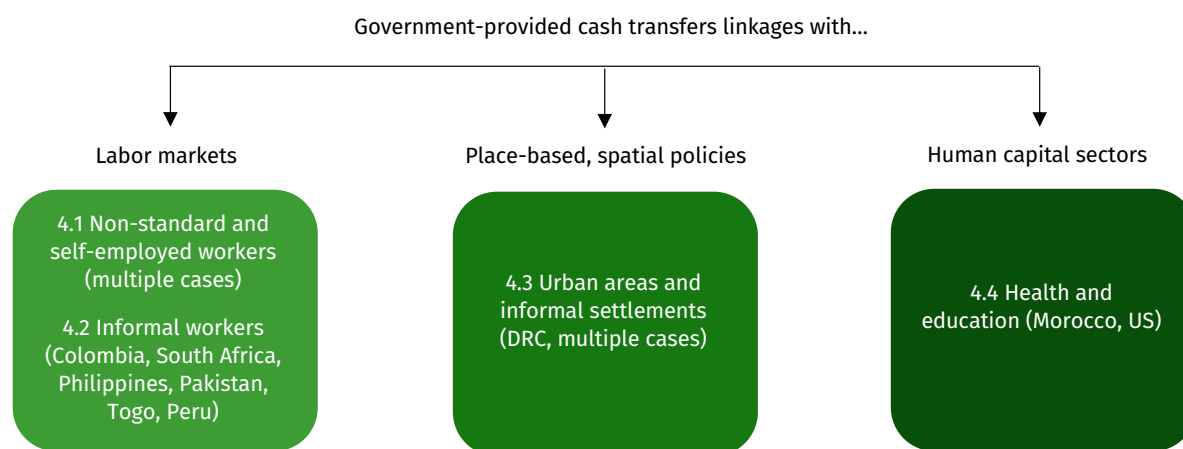
Source: US Federal Reserve Board (2022)

In Thailand and Vietnam, Bui et al (2022) used a survey of about a thousand respondents in each country to estimate the effect of transfers. These amount to up to \$240/month in Vietnam and \$412/month in Thailand. Their findings show that the likelihood of buying durable goods was 22 percentage points (pp) higher among beneficiaries in Vietnam and 13 percentage points higher among those in Thailand. Finally, in Israel Feldman and Heffetz (2020) showed that at the time of their study (mid-2020), 25-45% of beneficiaries of a universal transfer (\$220/adult and \$150/child) had already mostly spent or were planning to spend money by year's end. About 36-52% of beneficiaries paid down debts, while 10-18% of them had rerouted transfers to others voluntarily.

# IV. THEMATIC ISSUES AND COUNTRY PRACTICES

While devised withing a social protection framework, cash transfers are de facto cross-sectoral. Examined through a practical lens and country experiences, this section explores the deliberate linkages between cash transfers and measures in other sectors and themes. A guiding compass for the section is laid out in figure 26.

**Figure 26. Thematic content of section 4**



## 4.1 Non-standard and self-employed workers

Social protection systems in advanced economies tend to display a variety of forms and provisions varying by worker contracts. Within such diversity, some common themes emerge. In the context of formal sector wage employment, countries invested in large number of jobs retention programs (Carranza et al 2020). Those schemes are part of the family of wage-oriented, employment-related interventions that also include measures like public works and earned income tax credits. As such, they fall under supply-side, labor market activation measures.<sup>46</sup> Over the period 2020-2022, wage subsidies involved 233 interventions in 117 countries and were particularly prevalent in more formalized economies<sup>47</sup> (Gentilini

et al 2022a). Importantly, those programs were “... adapted to the needs of the COVID-19 crisis, with the schemes extended to include larger segments of the economy as well as benefit levels for workers and compensation rates for employers raised” (Seemann et al 2021, p.563).

More to the point, a core common challenge across social protection regimes in higher-income settings included reaching and adequately supporting categories of workers that don’t conform to the “norm” of full time, regular, open-ended employment with a single employer. Those profiles include the self-employed and workers in non-standard employment (NSE) such as part-time, temporary, and zero-hour contracts. A rich literature documents how those broad categories of workers tend to face constrained access to contributory measures, like unemployment insurance, while not qualifying for social assistance schemes such as guaranteed minimum income programs (OECD 2020a,b). Also, particular implementation modalities can stifle the uptake of benefits even if granted in principle, such as limited awareness of benefits, cumbersome application procedures, stigma, and various other barriers. For example, the United Nations Human Rights Council (2022) reports that in the United Kingdom, “... an estimated 280,000 to 390,000 individuals wrongly thought they were ineligible for Universal Credit between June and August 2020 (...). [Furthermore] 41.6% of individuals who thought they were eligible [didn’t claim the benefit] because of stigma or perceptions of not deserving it” (p.12-13).

There are differences between countries and within NSE categories. On one hand, recent evidence presented by Immervoll et al (2022) shows that contrary to conventional wisdom, for half of the sample of 16 OECD countries (i.e., Australia, Austria, Belgium, Germany, France, Hungary, Spain, and UK) there is only a limited gap between coverage provisions accorded to standard versus non-standard workers. Conversely, differences were more pronounced in other countries, including non-standard workers being 50-60% less likely to be covered during periods of unemployment than standard workers (e.g., Korea, Poland, Portugal, Spain, Italy, Latvia, Lithuania, and Estonia).

On the other hand, there are qualitative differences between atypical workers. Most NSEs tend to have access to unemployment benefits, but face high risk of exclusion. For example, in the European Union Matsaganis et al (2016) estimated that such risk is only 0.1% for standard workers, while it soars to 31.9% and 38.7% for temporary full-time and temporary part-time workers, respectively. Self-employed populations, instead, tend to be excluded more often, but with some caveats: for example, exclusion from unemployment insurance is single digit in countries that mandate such coverage (e.g., 7.9% in Poland); but it skyrockets where unemployment insurance is voluntary (e.g., 93.7% in Romania). An EU-wide review by Spasova et al (2021) shows that 13 countries offer the selfemployed no formal access to insurance, 6 states do so on voluntary schemes, and only 7 nations mandate it.

Against this background, part of the responses in the European context involved the adaptations of wage subsidies to meet the needs of vulnerable wage employed workers. For example, France extended wage subsidies to categories of workers like artists and freelance journalists, while in the UK the definition of ‘employee’ was made broader (Seemann et al 2021). There are some examples of inclusion of NSE workers in the routine system, e.g., Sweden lowered the time to access unemployment benefits (50% over the past

6 months) so to allow a larger number of part-time workers to become eligible. Also, Belgium leveraged its relatively generous unemployment system, including by halting the reduction in benefits over time (Cantillon et al 2021). Otherwise, a large number of measures for those workers involved cash transfers for, among others, seasonal occupations (e.g., Greece provided €534 for June–September 2020), part-time workers (e.g., Spain for temporary workers with contracts ending after lockdown), and domestic workers (e.g., 1.3 million returning workers in Romania).

A key role was played by social assistance: while a range of measures for the unemployed were called ‘unemployment benefits’, ‘bridging rights’ and ‘worker allowances’, in practice they were ad hoc non-contributory cash transfers. In other words, temporary social assistance filled the structural gaps in

**Figure 27-A. Recipients of guaranteed minimum income prior and during the pandemic (% of working-age population, select OECD countries)**

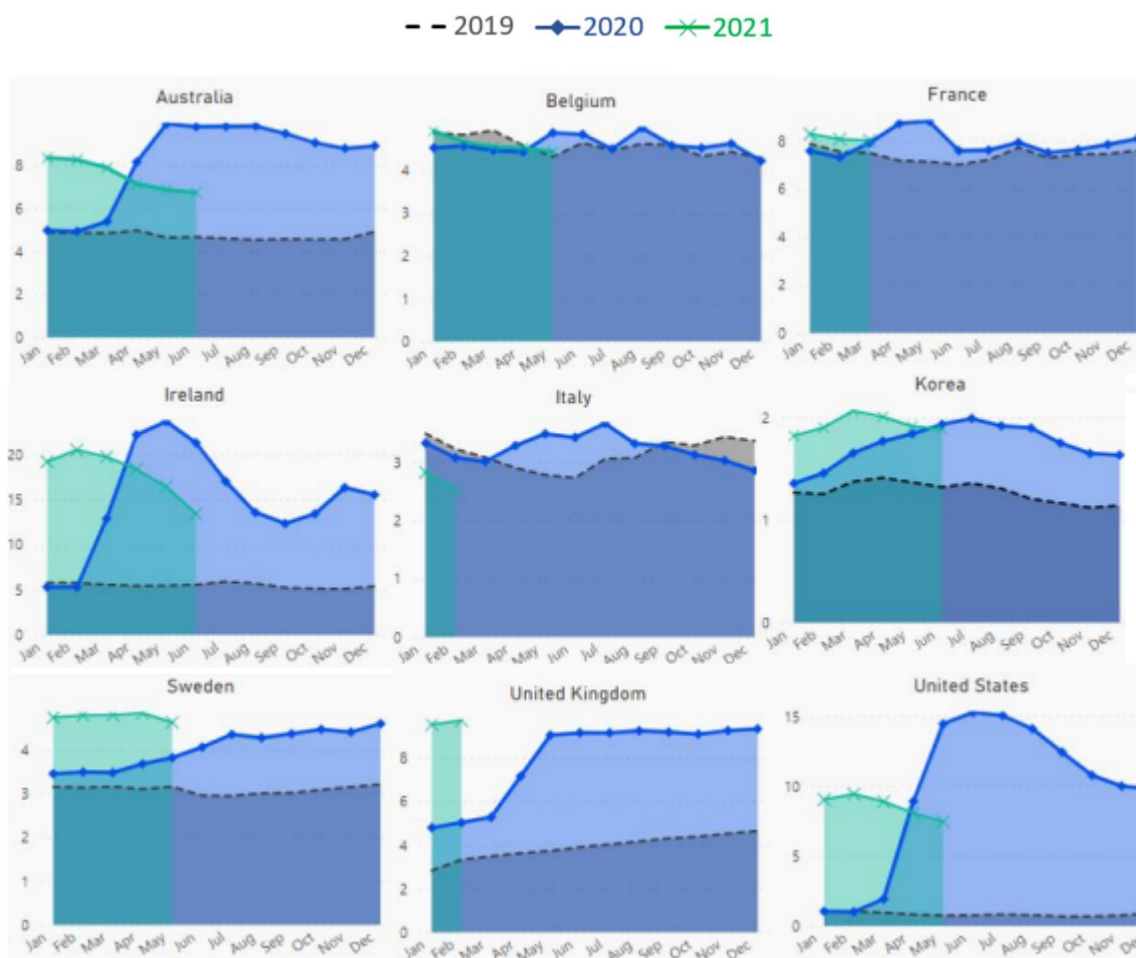


Source: OECD Social Benefit Recipients High Frequency Database (SOCR-HF), accessed June 2022. Note: the selected nine countries are those with graphs available for both indicators.



social insurance. The need for such ad-hoc measures is also evident in the share of new cash transfer programs out of total expansions: as discussed, these are almost 98% in HICs compared to 75% in LICs. In fact, according to the OECD Social Benefits Recipients High-Frequency (SOCR-HF) database<sup>48</sup> with a few exceptions (e.g., Italy) existing minimum income guarantee programs were only marginally scaled up in 2020 and 2021 compared to 2019 (figure 27-A). Instead, unemployment insurance was more widely increased, including with a range of new Covid-specific cash allowances (figure 27-B).

**Figure 27-B. Recipients of unemployment benefits prior and during the pandemic (% of working-age population, select OECD countries)**



Source: OECD Social Benefit Recipients High Frequency Database (SOCR-HF), accessed June 2022. Note: the selected nine countries are those with graphs available for both indicators.

One reason for the introduction of tailored new measures is the perceived speed and administrative simplicity of launching programs *ex novo*. For example, the TOZO scheme in the Netherlands replaced preexisting measures since the latter “... were seen as too complex, the administration as demanding and therefore slow and the coverage as too limited” (Cantillon et al 2021, p.333). And in Ireland, Hick and Murphy (2021) noted that the government “... chose not to rely on existing welfare payments but to



Europe, Italy, Milan December 2020, poor Italian and foreign people with masks lined up at Pane Quotidiano for free food during Covid-19 Coronavirus, increase in unemployed people and economic crisis. By DELBO ANDREA

create a specific Pandemic Unemployment Payment (...) based on a one-page application form to enable rapid administration, with compliance to be monitored ex-post. (...) [PUP] created a clearer discontinuity with the existing social security system, both contributory and means-tested [and] reflected the primacy placed on responsiveness” (p.315 and 318).

There are various examples of cash transfer programs for protecting the self-employed.<sup>49</sup> For example, Germany provided support for 6-9 months without a means test, with retroactive review undertaken under particular circumstances. The UK’s Universal Credit program suspended the ‘minimum income floor’.<sup>50</sup> Some countries reached specific categories, e.g., Italy targeted craftsmen and traders, and Cyprus excluded the least affected (e.g., doctors and grocers). Other countries set ceilings on the number of employees, e.g., in Luxemburg assistance was provided to self-employed with less than ten employees. Austria focused on family-run firm, while Finland reached the solo self-employed. Furthermore, targeting was in some cases dynamic, such as the three TOZO packages in Netherlands.<sup>51</sup> These initially provided broad-based support and encouraged uptake “only if really needed”, and then gradually assisted the hardest hit and solo self-employed exclusively. Italy’s Emergency Income program was designed to “fill the gaps” – i.e., it was intended for vulnerable people not participating in other social protection programs and provided between €400-840/month over a two-month period (Eurofound 2021).

The Irish PUP program offers some interesting insights into linkages between social assistance and active labor market interventions. A week after PUP’s launch in mid-March 2020, a wage subsidy scheme (TWSS) was also introduced for wage employment. A provision in the PUP allowed for payments via employers which, because of PUP and TWSS being mutually exclusive, “... created a momentum towards the out-of-work payment, PuP, especially given its ease of administration administrative simplicity” (Hick and Murphy 2021, p.318). To correct such outflow, the government took four steps: (i) about a month later, it raised TWSS from 70% to 85% of net wages; (ii) in June 2020, a two-tier PUP was created, with those

earning less than €199/week receiving benefits aligned with the Jobseeker Allowance of €203/week; (iii) in the same month, activation and case management measures were reestablished; and (iv) in July, PUP's benefits were further reduced. As a result, PUP claimants dropped from 600,000 in May 2020 to 310,000 in June 2021. In October, however, a new Covid wave, a PUP top-up was included bringing it back to its March level (€350/week). But also wages subsidies were now set for an equal (maximum) amount of support, maintaining parity between schemes.<sup>52</sup>

Over time, research underscored the challenge of aligning Covid and pre-Covid assistance. Cantillon et al (2021) noted that Belgium's approach may have generated inequality in treatment among the unemployed, with those losing jobs due to Covid receiving higher benefits than pre-pandemic claimants. In Ireland, PUP's initial benefits were not only much higher than the Jobseeker Allowance, but also equivalent to 100% of average pay in low-income sectors (Hick and Murphy 2021). Yet as just discussed, additional lockdowns "... thwarted the preferred policy direction of equalising pandemic and pre-pandemic supports" (ibid 2021, p.320).

Yet there are some signs of convergence in better connecting contributory (insurance) and non-contributory arms of social protection systems. The example of Ireland itself shows that as part of the gradual phase out, remaining PUP beneficiaries were to be transferred to the routine system (a social insurance-based jobseeker's benefit and a means-tested jobseeker's allowance). In other cases, linkages were established more explicitly: Portugal's cash transfer of €438 for informal workers established a requirement to join and remain in the social protection system for 30 months after the end of the support. Similar arrangements were adopted in Timor-Leste. Furthermore, Lithuania had a hybrid model whereby new, ad-hoc "job seekers" benefits (€257/month) to unemployed people excluded from insurance (which were about 60% of all unemployed) were combined with job search requirements. Also, eligibility was conditional upon payment of social contributions other than for unemployment (in fact, self-employed normally pay social contributions to some schemes, e.g., health insurance, sickness benefits).

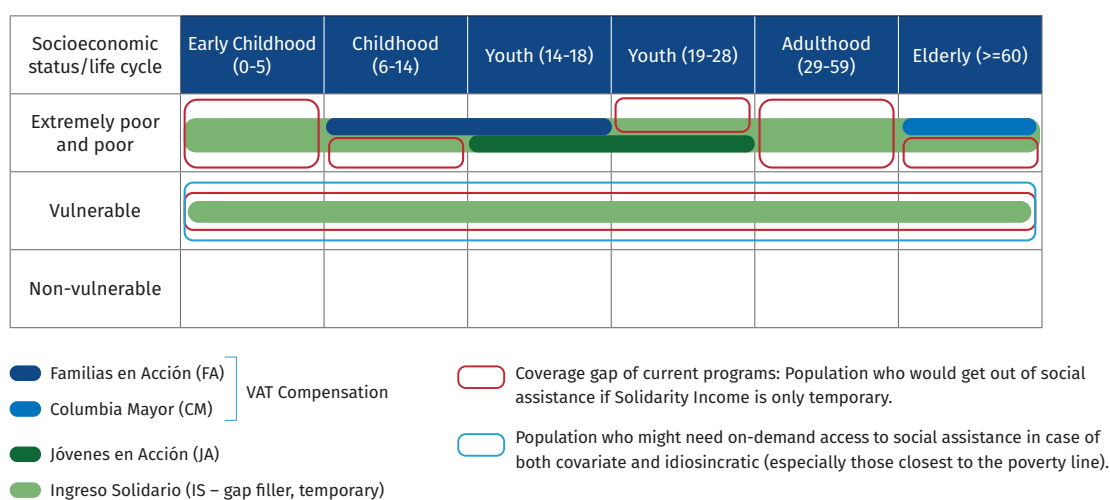
Schemes that were introduced as stop gap measure for informal workers can also open up new space for reimagining unemployment protection. For example, before the pandemic Georgia had limited unemployment insurance in place. However, in June 2020 the government announced that those in the formal sector who had lost their jobs could receive up to six monthly payments of \$65. This was then extended in January 2021. By September 2020, more than 161,000 people had benefitted from the scheme. Meanwhile, the government gave a one-off payment of \$97 to informal or self-employed workers who could show that they had lost work because of the crisis. This might have generated an opportunity to capitalize on the experience to develop a more permanent unemployment scheme (Anderson et al 2022). Such model also emerged in Argentina, which provided a one-off cash transfer for low-income, self-employed domestic workers (Bista et al 2021). This might also apply for programs like wage subsidies which, like in the case of Thailand and Vietnam, have acted as de-facto unemployment insurance (ILO 2020a,b). Similarly, in the Maldives an Income Support Allowance of \$320/month was provided to 23,000 people (or about 5% of the population). The transfer was aligned with the Old Age Basic Pension Scheme, and it was close to the minimum wage level. Interestingly, such experience is generating momentum for extending contributory unemployment insurance (World Bank 2021a).

## 4.2 Reaching informal sector workers

### Colombia

During the Covid-19 crisis, the Colombia faced the challenge of filling structural coverage gaps of a social protection system with limited support to adult workers. To address such gap, the government introduced the temporary *Ingreso Solidario* program (Escobar Correa et al 2021). Reaching an additional 3 million households, *Ingreso* helped extend coverage in two ways: first, it supported populations that wouldn't be included in permanent schemes due to budgetary restrictions (i.e., *Familias en Acción*, *Jóvenes en Acción*, and Colombia Mayor programs). Secondly, it covered profiles of beneficiaries not eligible in those routine social protection interventions, such as low-income households without children or elderly members (figure 28).

**Figure 28. Mapping of Colombia's main social assistance programs across the lifecycle, 2021**



Source: Escobar Correa et al (2021)

About 964,000 beneficiaries were brought into the banking system via payments (Prieto 2022). Such financial inclusion is confirmed by Vera-Cossio et al (2020), whose evaluation found that *Ingreso Solidario* increased the chances of opening of bank accounts by 14 percentage points and the likelihood of using digital tools for financial transactions by 7.7 percentage points.<sup>53</sup>

### South Africa

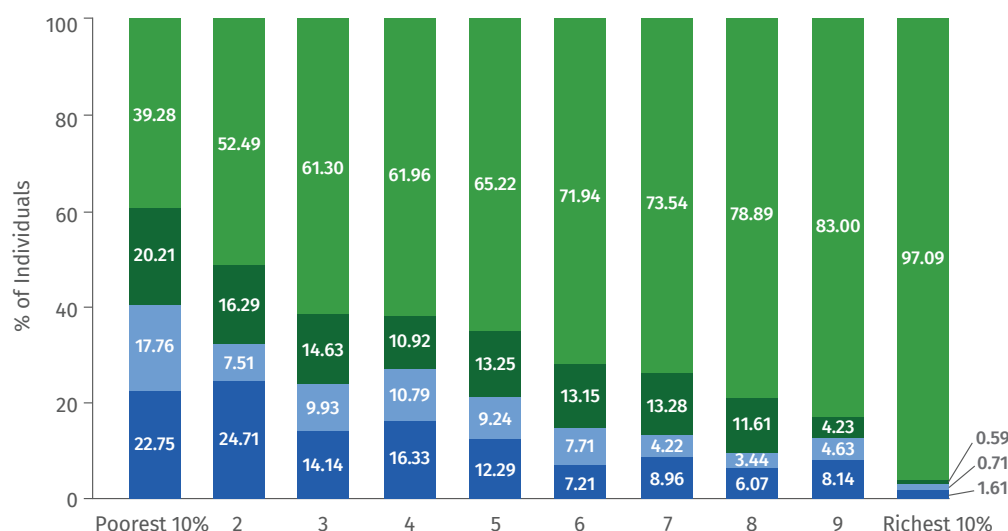
Approximately 18 million people, or nearly one-third of the population, receive a monthly social assistance payment. These chiefly include old age social pensions, disability grants, and child support grants (CSG) at a cost of 3.4% of GDP. Yet, these programs don't explicitly support the working age population. For example, the largest scale intervention, the CSG, only covers 44% of informal workers by virtue of reaching caregivers that happen to be in such occupation. For instance, Jain et al (2020) found that in April 2020 about 37% of those who were put on "paid leave" or laid off temporarily laid-off were not covered by no social protection program.<sup>54</sup>

In order to reach such category of workers deliberately, the new “Special COVID-19 grant” (or Co-G, or R350 program) was launched for one year (with extension of 8 months) targeting adults not formally employed nor being covered by existing social grants (Gronbach et al 2022). The benefit was about 40% of monthly median income. This was akin to a scheme introduced in Namibia.<sup>55</sup> The novelty of the Co-G should not be underplayed: as noted by Kohler and Borat (2021), “... it is the first in the post-Apartheid era to target unemployed adults – a group who had previously been largely unreached by the system” (p.7).

Applications could be made by email, mobile phones (through USSD codes) and WhatsApp (following an earlier unsuccessful test when the app crashed after 91,000 applications).<sup>56</sup> Applicants had to simply record their name, ID number and address, and confirm that they have no other income. No supporting documents were required (Seekings 2020b). While final coverage was significant, the rollout encountered several bottlenecks. Devereux (2021) reported that when announced in April 2020, an estimated 12-15 million people were eligible: one month later, 5.1 million people had applied, 2.6 million applications were processed, and only 11,000 – or 0.2% of applicants – were “about to be paid”. Delivery improved over time: three months after announcement 3 million people had been paid, a level that rose to 5.2-6 million individuals after 6 months (Baskaran et al 2020). The grant, alongside pre-existing grants, may have covered 36 million individuals, or 63% of the population (Bhorat et al 2021).

Once the process improved, the performance of the grant was considerable. Kohler and Borat (2021) found that in October 2020, 58% of recipients were unemployed, and that about 70% of those employed were informal sector workers. As shown in figure 29, the grant reached all deciles: among applicants, 23% of individuals in the poorest 10% of households were successful, while only 0.71% in the richest decile.<sup>57</sup> Such finding is broadly consistent with findings by Bassier et al (2021), who noted that “... when combined, the CSG and the Co-G offer effectively universal coverage of informal-worker households” (ibid, p.7).

**Figure 29. Coverage of special Covid grant in South Africa by decile, November/December 2020**



Source: Kohler and Borat (2021)



## The Philippines

The Philippines illustrates a valuable case study on the opportunities and challenges of a massive scale up of social assistance. The social protection response (SAP) involved a phased approach at a cost of \$4B and 1.1% of GDP, with a rich set of lessons documented in the literature (Cho and Johnson 2022; Cho et al 2021; Gudmalin et al 2021; Ramos 2021). The first tranche (SAP-1) targeted about 18 million households, or 75% of the population. Within such caseload, about 4.3 million were reached via the existing flagship 4Ps programs (via social registry based on 2015 data). Such payment top-up was completed in 13 days. By the end of June 2020, the cash benefits had reached 98% of the target beneficiaries of the first tranche, or 18 million households; for the second tranche, by August 2020, 2 months after the start of distribution of the second tranche, the program had covered 13.3 million families or 94% of target beneficiaries (Gudmalin et al 2022).

Given the absence of registry data for the reminder of beneficiaries, paper applications (vias a Social Amelioration Card, figure 30) and manual registration were undertaken. Local government units provided payments while collecting SACs, with audits conducted at later stage. Various errors in registration led to a considerable backlog in payment, where the delivery of assistance for non-4Ps beneficiaries took over 3 months.

The second phase of social protection response, or SAP-2, scaled up assistance further. This involved 23 million households, reaching nearly an additional 5.3 million “waitlisted” families, mostly in urban areas, that couldn’t receive SAP-1. There were efforts to enhance registration: for example, an app for digital registration (ReliefAgad) was developed by USAID-facilitated volunteers. This was used by both local government units to digitize SACs (replacing Excel/CSV) and beneficiaries to register via mobile phones, tables, etc. The innovation, however, didn’t address the core business process problem, as beneficiaries needed the SAC card with barcodes to start the process (such card/barcode could be damaged, non-readable, etc.). Also, the platform could not be connected to functional IDs (e.g., PhilHealth card) and other programs. As a result, only a portion of ReliefAgad data could be used.

**Figure 30. Sample Social Amelioration Card in the Philippines**

**Social Amelioration Card (SAC)**

Sumulat gamit ang MALAKING TITIK

**PUNO NG PAMILYA** (Kasalukuyan)

Ingalan: \_\_\_\_\_ Kasarian: ☐ Lalaki ☐ Babae

Tirahan: \_\_\_\_\_ Kalye: \_\_\_\_\_ Uri ng ID: \_\_\_\_\_

Ilangay: \_\_\_\_\_ Lungsod/Bayan: \_\_\_\_\_ Numero ng ID: \_\_\_\_\_

Robinsya: \_\_\_\_\_ Rehiyon: \_\_\_\_\_ Petsa ng Kapanganakan: mm-dd-yyyy

Talaba: \_\_\_\_\_ Buhangang Kita: \_\_\_\_\_ Cellphone No: \_\_\_\_\_

Inagatrabahuhan at Lugar: \_\_\_\_\_ Sektor: \_\_\_\_\_ Kondisyon ng Kalusugan: \_\_\_\_\_

☐ Benepisyaryo ng UCT ☐ Benepisyaryo ng 4Ps ☐ Katutubo (Grupo) ☐ Others

Miyembro ng Pamilya (Apelyido, Pangalan, Gitnang Pangalan)	Relasyon sa Puno ng Pamilya	Petsa ng Kapanganakan (mm/dd/yyyy)	Kasarian (M/F)	Trabaho	Sektor (A–F)	Kondisyon ng Kalusugan (1-5)

Isulat: Ang unang dalawang miyembro na nakalista ay magkikilala sa pamamagitan ng pangalan ng punong pamilya.

Sektor: A-Nakakatakdang B-Buntis C-Nagpapasiwang Ina  
D-PWD E-Solo Parent F-Walang Tirahan

Kondisyon ng Kalusugan: 1-Sakit sa Puso 2-Altapresyon  
3-Sakit sa Baga 4-Diyabetis 5-Kanser

Pinapapalitan ko na ang lahat ng mga impormasyong nakasulat dito ay totoo at pampang katutuhan lamang. Batid ko na ako ay maaaring sakaling sakaling mayroong kahit isang impormasyon na hindi totoo o 'di kaya'y sadyang hindi ko itinatayang.

Lagda/Thumbmark ng Puno ng Pamilya Pangalan at Lagda ng Punong Barangay

Petsa ng Pagrehistro Pangalan at Lagda ng DSWD

Dapat sagutan ng Opiyal ng Barangay: Assistance to Individuals in Crisis Situation (AICS) Oo ☐ Hindi ☐

PH-COVID-13-950-1000-000001

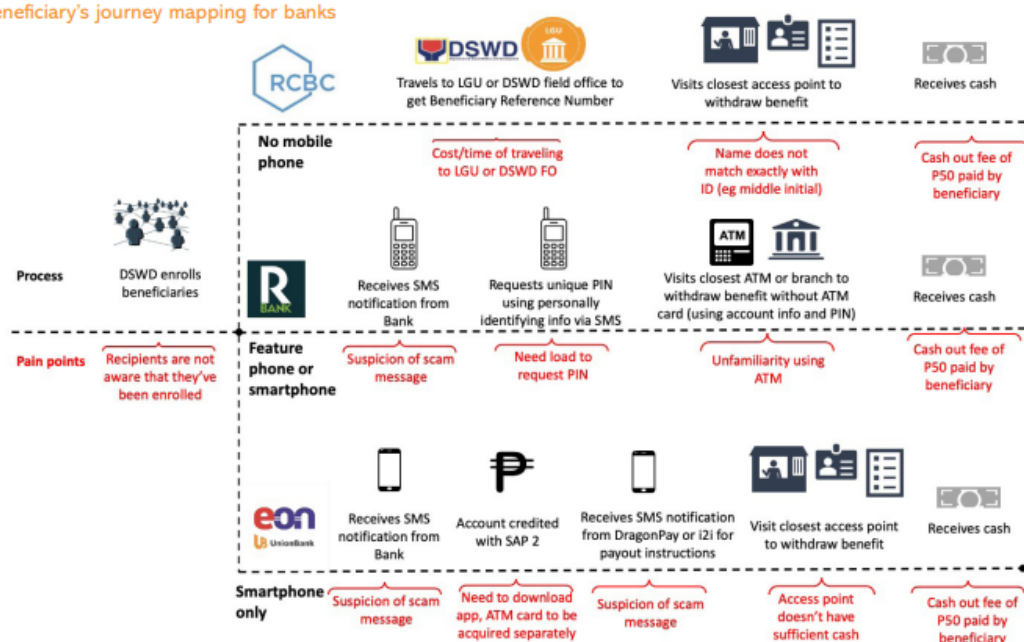
Source: Gudmalin et al (2021)



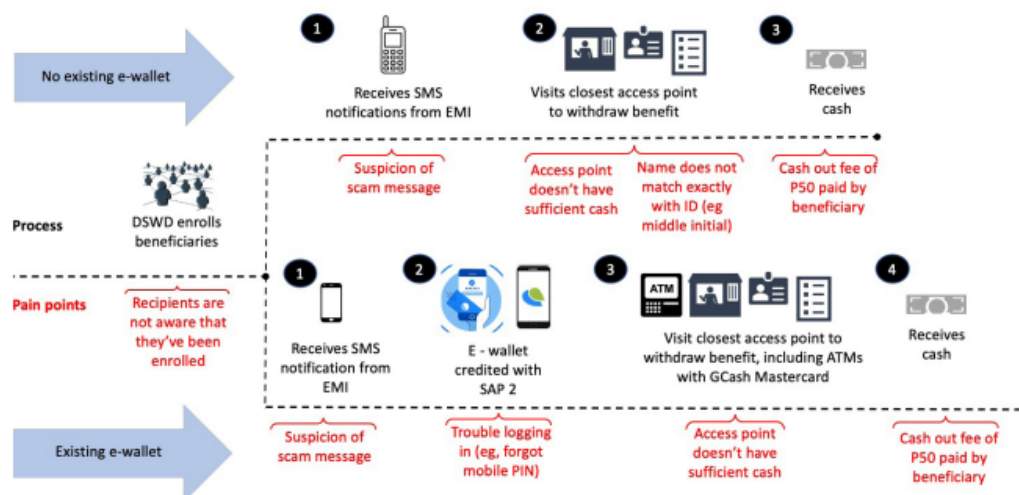
Political pressure to avoid SAP-1 delays and move to digital payments was mounting. This led to a combination of financial service providers including three banks and three e-money issuers (i.e., PayMaya, Gcash, and StarPay). Each involved possible particular challenges at each step of the process (figure 31). To enhance speed and avoid different experiences in the same municipality, the Central Bank assigned financial service providers to areas, i.e., people could not choose FSPs. Whether in the form of e-money or basic bank deposits, the decision was to have “restricted” transaction accounts. These can be opened without IDs; but have a credit ceiling (\$2000/year), they cannot be used for remittances, and can be closed if dormant, e.g., no movements in 12 months. Some provisions to “regularize” accounts through KYC is ongoing.

**Figure 31. Mapping beneficiaries’ journey via banks and e-money issuers (EMIs)**

**Beneficiary's journey mapping for banks**



**Beneficiary's journey mapping for EMIs**



Source: Cho et al (2021)

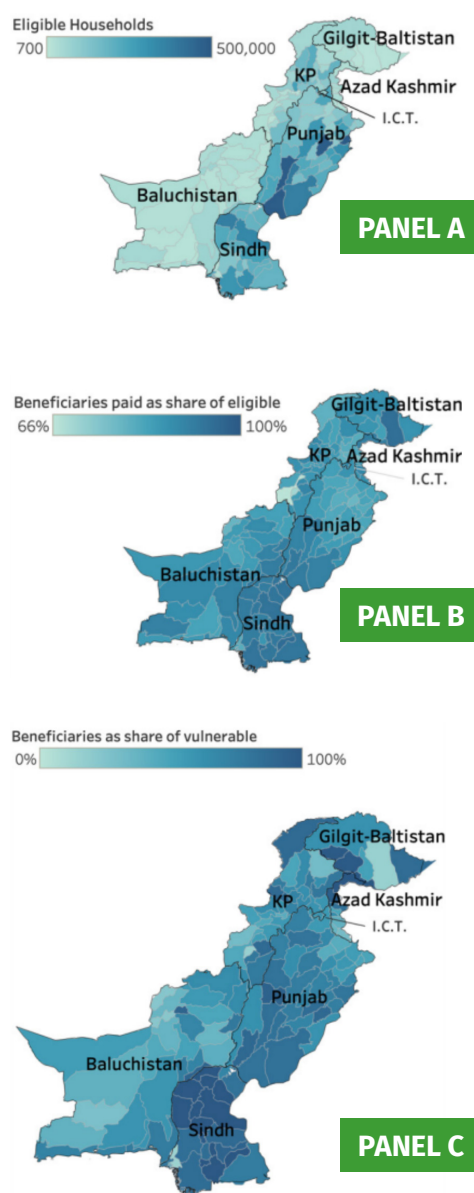
## Pakistan

The Ehsaas strategy, which provided the backbone of the social protection response, built and complemented the NSER social registry (with information on 85% the population, and update since 2010/11) and the regular BISP/Ehsaas Kafaalat program<sup>58</sup> directly tied to it (reaching 7 million households). The main device for scale up was the Ehsaas Emergency Cash (EEC). Overall, the EEC reached up to 16.9 million families, or about 43% the population (Beazley et al 2021; Hassan 2021; Lone et al 2021; Nishtar 2020).

The benefit included a one-off transfer (\$71) equivalent to about 16.5% of expenditures/consumption of the poorest 40% of the population. While one off, the response would cover needs for about 4 months. The response cost \$1.3 billion, with assistance from IFIs for about \$225 million for cash transfer benefit top up. The EEC included beneficiaries from Kafaalat, an additional 4 million drawn from the NSER (higher eligibility cut-off), and about 3.5 million non in NSER and identified by provincial/district administrators (Khan and Jamy 2020). In the latter case, administrators would use a poverty scorecard if available, or average mobile/landline monthly bills less than \$0.6. Provincial and district quotas were introduced, resulting in an estimated 3.7 million potential affected workers and beneficiaries being excluded from potential assistance. The Punjab province also included about 200,000 beneficiaries via local zakat, while various humanitarian programs were also active, e.g., 21,000 beneficiaries reached by WFP in FATA, UNHCR covering 75,000 Afghans, and IRC utilizing NSER for 1250 households.

The EEC launched 10 days after country's lockdown. BISP payments use biometric verification system via two commercial banks, combining a Limited Mandate Account (LMA) with savings. Within 1 week, 46 million requests were processed, and 7.3 million people enrolled (Lone et al 2021). EEC used the same platform, but without savings (LMA only allows cash withdrawal, not other services). Analysis of district-level data by Markhof (2020) offers a glimpse at the EEC performance in the first 5 months of the pandemic: it found that, consistently with population size, most beneficiaries were located in the provinces of Punjab and Sindh (panel a of figure 32); that an average of 86% of identified beneficiaries have received their payments (panel b); and that 66% of a district's vulnerable population were covered (panel c).

**Figure 32. Performance of EEC in Pakistan based on district-level data (2020)**



Source: Markhof (2020)



Pakistani people wears face mask to protect themselves Corona virus ( COVID-19 ) before entered in the historical walled city of Lahore, Pakistan during Government imposed Lock down on June,06,2020. By A M Syed

Interestingly, data analytics was used to exclude 0.8 million “wealthy” households. This involved considering criteria like international travel; expensive ID/passport NADRA processing; car ownership (and land in the case of Punjab); government employment; declared income at tax agency higher than \$285; monthly phone bills over \$6 from telecom authorities. Such “targeting from the top” was also used in other settings (e.g., Bolivia), although at times through taxes such as in Germany.<sup>59</sup>

## ***Togo***

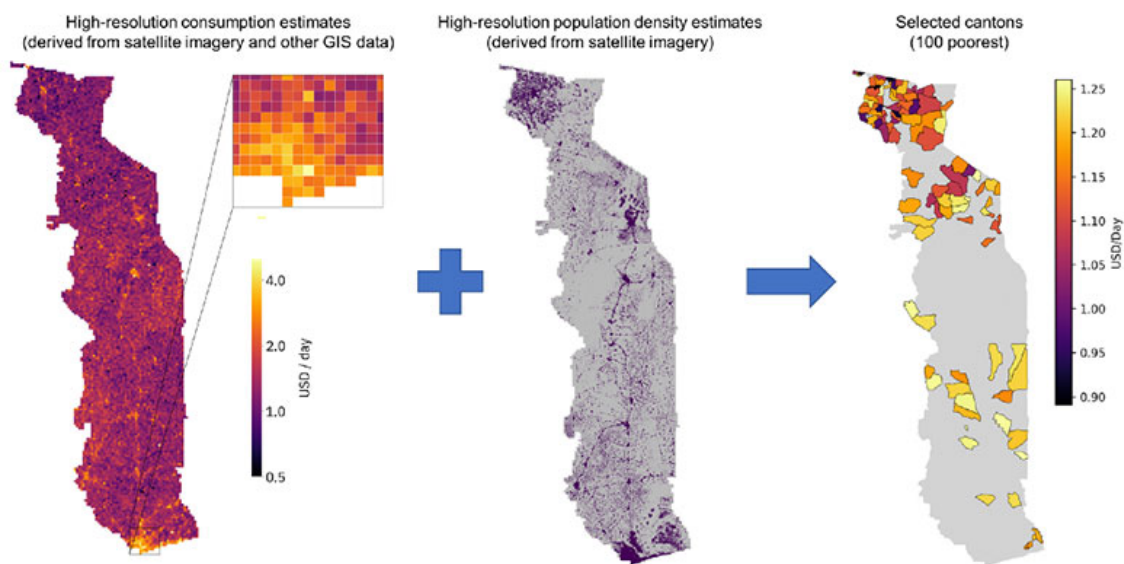
The experience of Togo embodies the positive performance of a trailblazer. At the outset of the pandemic, Togo’s social protection systems were limited. This involved a database with only about 90,000 households in rural areas (or 5% of the population). Because of the country’s substantial scale up was achieved through innovative analytics and evidence-based leadership, Togo has attracted widespread interest in academic and policy circles (Aiken et al 2022; Chowdhury et al 2022; Lawson et al 2022; Debenedetti 2021).

Togo’s response can be divided in two main phases. The first stage of the Novissi program (April-September 2020) provided cash transfers to about 570,00 informal sector workers in the greater Lomé area, the Tchoudjo prefecture, and the Soudou canton. A new digital platform was created in 10 days, establishing an end-to-end system for enrollment and payments via an 8-step process mobile phones. The approach tapped the national voter registration database (including data for over 90% of the 3.8 million adults and inclusive of information on location and occupation). One week after the program was launched, 450,000 beneficiaries had already received their first payment. After a year, Novissi created around 170,280 new mobile money accounts.

There were implementation variants. For example, as lockdowns widened, the program added other workers, including from the public sector like community schoolteachers and public transport operators. Furthermore, in some cantons (Soudou), the program went beyond targeting worker categories and reached 85% of the population (except for civil servants).

The second phase of Novissi shifted to a more spatially tailored, needs-based approach targeting 57,000 beneficiaries in the poorest 100 cantons (World Bank 2021b). This involved various steps. In terms of selecting locations, deep-learning algorithms were applied to high-resolution satellite imagery to produce wealth estimates of 2.4km grid cell (left image in figure 33); these estimates were then combined with information on population density of each grid cell (middle image); finally, such information was used to identify the 100 poorest cantons (right image).

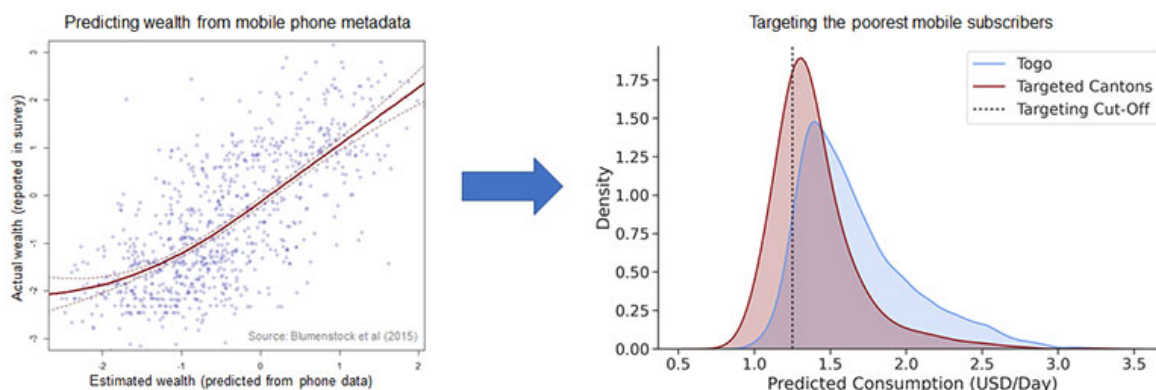
**Figure 33. Identifying poorest cantons in Togo**



Source: World Bank (2021b) as provided by J. Blumenstock

In terms of identifying people, phone surveys provided “ground truths” of living conditions of 10,000 people. Based on such data, machine-learning algorithms estimated the wealth of each mobile subscriber (left image in figure 34). In the 100 poorest cantons (red area in right image), those estimated to consume less than \$1.25/day are prioritized for the Novissi program (dotted vertical line). Such beneficiaries are significantly poorer than the average person in Togo (blue area).

**Figure 34. Identifying poorest people in the poorest cantons in Togo**



Source: World Bank (2021b) as provided by J. Blumenstock



Further research compared different targeting methods, including machine learning and mobile phone data, geographic, occupation-based mythologies (for informal workers and poorest jobs), and a proxy means test (Aiken et al 2022). It found that machine-learning reduces errors of exclusion by 4-21%. However, when relative to scenarios with a hypothetical social registry machine-learning approach would increase exclusion errors by 9-35%.

## Peru

The experience of Peru reveals the gradual expansion of coverage and the construction of a framework incorporating three sequenced programs (Bastagli and Lowe 2021; Lowe et al 2021; Olivera 2021). The first is *Bono Yo Me Quedo en Casa* (Stay at Home Grant) funded through the Reserve Fund, IFI support, and treasury bonds. Payments were made within a week to 2.7 million beneficiaries (31% of the population) with two payments of \$104 based on the existing social registry (itself including information on 75% of the population) (poor in urban areas). Subsequently, the *Bono Independiente* program targeted 773,000 informal sector workers, or 9% of population, with a single payment of \$209. These included people considered “non-poor” in the social registry, but with income less than \$330/month, living in “high health vulnerability areas” and not participating in other programs. Furthermore, the *Bono Rural* (again a single \$209 payment) focused on rural areas and reached 980,000 beneficiaries considered “poor” in the registry, but also not receiving other support. Finally, the *Bono Familiar Universal* integrated programs into a single framework, including the three Bonos schemes plus those not enrolled in any. This brought the total coverage to 8.6 million households, or 68% of the population. Beneficiaries received two payments of \$209, compounded by a mechanism of “targeting from the top”, i.e., all were considered eligible except those in formal employment, excluding interns, in public office, and with income over \$824/month.

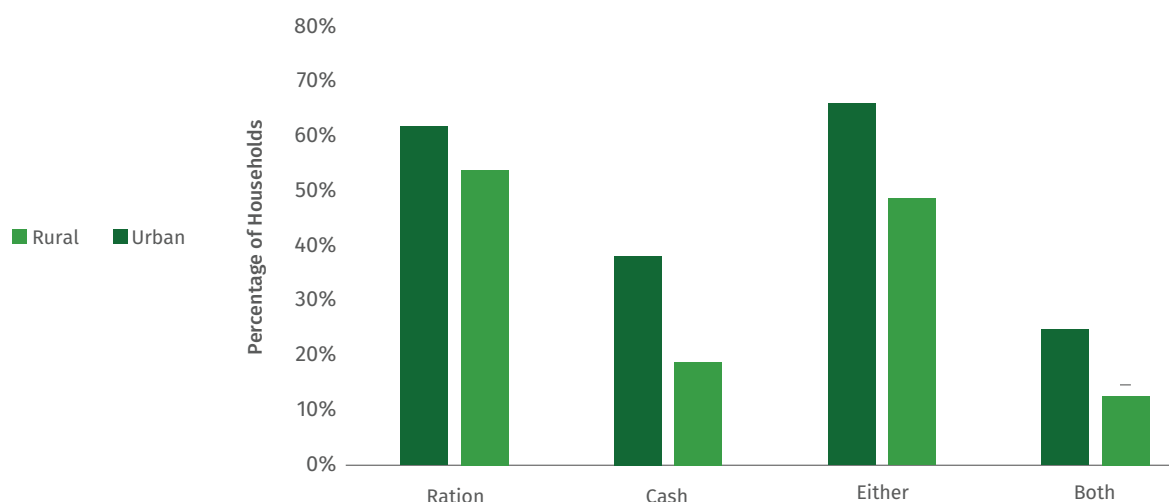


Lima, Peru - April 4 2020: Women lining in a queue practicing social distancing amid coronavirus outbreak in South America. Only woman day, gender-based quarantine, women lined up to buy groceries. By Myriam B

### 4.3 Spatial extensions to urban areas

While the effects of the pandemic had severe consequences for livelihoods in both rural and urban areas (Sitko et al 2022), urban settings had been identified as powerful vectors for spreading the virus: for example, Brown et al (2020) estimated that 96% of housing settlements in Africa weren't compliant with WHO standards. Most countries didn't have an established social protection operational footprint for responding to heightened urban vulnerability. Those structures had in many cases to be introduced ex-novo, especially in large informal settlements.<sup>60</sup> In fact, pre-pandemic data shows that the coverage of safety nets is generally higher in rural than in urban areas: for the poorest quintile, such difference amounts to about 7 percentage points on average (Gentilini et al 2021b). Many factors may contribute to such spatial difference,<sup>61</sup> and the Covid-19 crisis may have mirrored those uneven spatial provisions. For instance, Choudhuri et al (2022) estimated that in India's Delhi National Capital Region the likelihood of urban residents being covered by cash transfers was 8 percentage points lower than among rural dwellers (figure 35).

**Figure 35. Urban and rural coverage of cash and in-kind transfers in India**



Source: Choudhuri et al (2022)

The pandemic crisis prompted the emergence of a new generation of urban cash transfer programs (Gentilini et al 2021b; Roelen et al 2021). Based on 2021 data from 36 programs, urban social assistance planned to cover about 66.5 million beneficiaries globally, with 18.6 million been actually reached (Gentilini et al 2021a). A range of lessons are emerging from those experiences. At design level, satellite images at granular street level are becoming more routinely used and integrated in program design (e.g., see Kinshasa example in this section). Simplified questionnaires for beneficiary intake have been produced (e.g., Liberia comprised 10 questions, Mauritania's "PMT plus" included 15 questions). Also, some delivery functions have been undertaken simultaneously to minimize time between beneficiary registration and payment (e.g., Sierra Leone, Nigeria). Ongoing cross-country studies will provide further insights on the use of big data in urban areas, including comparative effectiveness, efficiency, speed.<sup>62</sup> Interestingly,

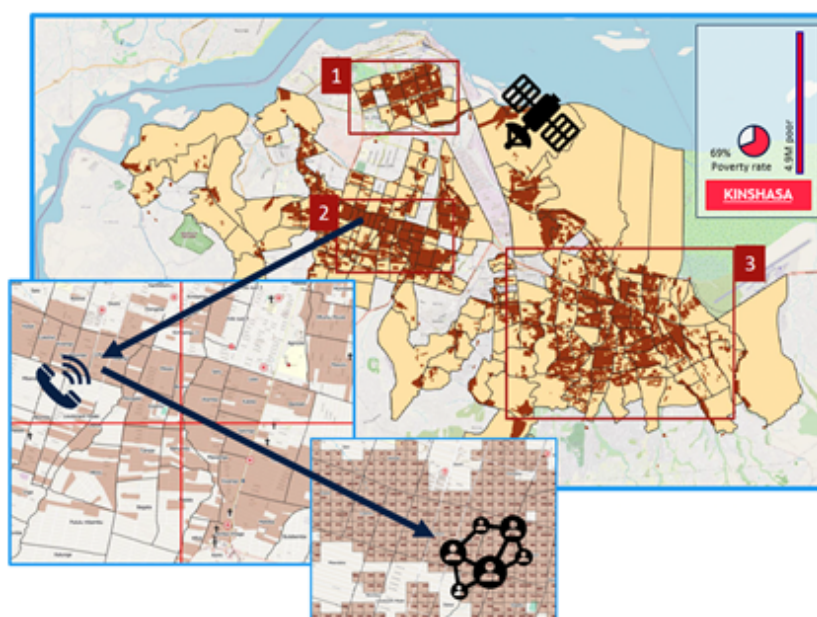


programs have established partnerships with formal and semi-formal local actors to help overcome information constraints on urban informal sector workers, e.g., local city councils, labor and tourism ministries, and MFI and trade associations in Sierra Leone.

Yet challenges remain. These include the difficulty in defining a ‘household’, a ‘community’ and even a ‘neighborhood’ in fluid, informal urban settlements (e.g., Liberia). This posed some hurdles in the applicability of community-based targeting (e.g., Mauritania). But countries shows that urban communities can also be mobilized, such as via Ethiopia’s neighborhood committees. In Madagascar, the Loharano Committee (inclusive of community leaders and chaired by the head of the Fokontany) played a major role in program pre-registration. In Cote d’Ivoire, community leaders or neighborhood chiefs collected information on people’s IDs, vulnerability information, phone number, etc. Political pressure can be exerted and offer both an advantage in rallying efforts as well as present challenges in aligning communication (e.g., Madagascar, Sierra Leone). How to make programs attractive for youth is often a key priority: Kenya’s Covid public works were deliberately designed for that purpose, while Ethiopia’s USPNP scheme found it hard to enroll youth at pre-Covid stage. Furthermore, Covid responses underscored the importance to locate social protection within the framework of city administrators, e.g., how to frame urban public works as part of cities’ sustainable waste management systems.

Turning to specific country cases, Kinshasa’s Step-KIN program was an innovative intervention in a context with no previous exposure to cash transfers. Operating in informal slums, the selection of locations was conducted based on the most flood-prone areas as identified by satellite images (figure 36). Partnerships with mobile phone providers allowed to receive lists of subscribers living in targeted areas.

**Figure 36. Stylized visualization of selecting Kinshasa’s informal settlements**



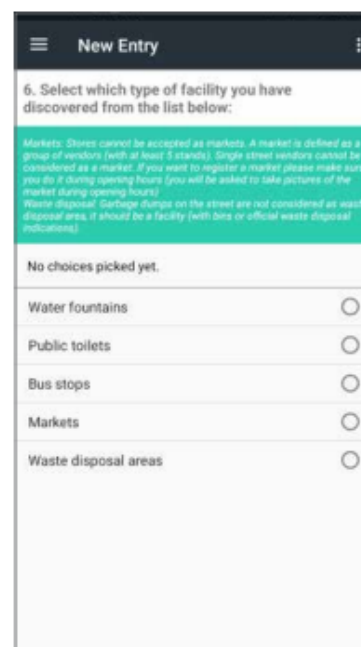
Source: Bance et al (2021)

Non-disclosure agreements with telecom operators were signed to receive those anonymized lists. This generated a “quasi-registry” of potential beneficiaries. Filters were added to eligibility rules (those with smartphones, purchased data plans, or spent more than \$5 on voice/data/SMS combined were excluded). Subsequently, SMS, audio IVR messages were sent to anonymous phone holders to participate and self-register in the program. Once enrollment was completed, mobile money accounts were opened for 100,000 individuals (with simplified KYC). Transfers included \$25/month for a semester. Recent expansion includes, in partnership with Afrimoney, the provision of cash transfers for an additional 150,000 beneficiaries between Nov 2021 to April 2022. Also, a pilot of Mobile Aid model with Give Directly was launched in November 2021 reaching 17,000 beneficiaries (Bance et al 2021)

Because of social distancing protocols, another interesting development during the pandemic has been the acceleration in interest for service-oriented, digital public works (Bance and Gentilini 2020; Weber 2020). In 2020, seven digital public works were piloted under a coherent framework in four African countries, i.e., Mali, Tanzania, Kenya, Sierra Leone (Deparday et al 2022; World Bank 2021c). The initiative engaged low-income and vulnerable populations possessing meeting minimum digital skills, including about 1,300 workers completing over 2.8 million digital tasks. Conducted in partnerships with private sector (e.g., Google, MapSwipe, etc.), activities involved geolocating slum services (Nairobi), streetview prediction verification (Zanzibar) classifying aerial imagery to identify solid waste (Bamako), and building height validation (Dar Es Salaam) (figure 37).

**Figure 37. Digital public works in Africa**

Worker first selected a task, then found the relevant infrastructure to geolocate and characterize them.



Source: World Bank (2021c)

## 4.4 Linkages with health and education

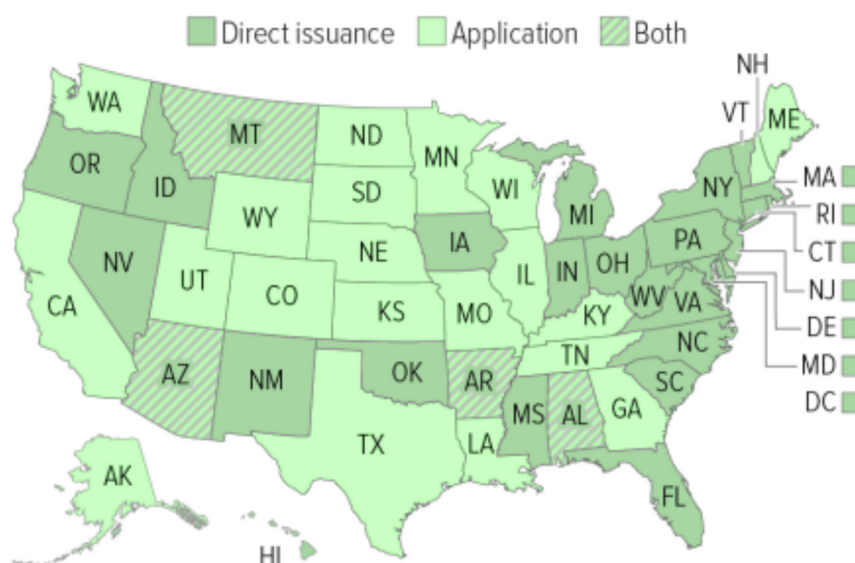
With transfers being made largely unconditionally (see section 2), some of the more direct connections between social assistance, health and education may have been reduced in programmatic terms. Yet those linkages were still present in a number of ways.

For example, Morocco's cash transfer program reached about 5.4 million households, or 65% of the population (Kessaba and Halmi 2021; Mansour 2021). As part of such caseload, the program served 2.8 million RAMED beneficiaries, or those enrolled in the national non-contributory health insurance program, itself reaching 34% population. Differently from the other 2.6 million households, RAMED beneficiaries were already enrolled in database. A new digital platform was created for enrollment. Launched in April 2020, it involved payments via mobile phones. Beneficiaries on the RAMED database received payments within 3 days from inception. RAMED beneficiaries were able to enroll by sending a message to a new SMS platform (1212), while non-RAMED households had to submit a simple form through a new digital platform. The phone-based payment system with 2 options. Beneficiaries received the code by SMS and could withdraw benefits at ATMs. This option was available for beneficiaries who provided a phone number in their name and having ATMs in their locality. Other beneficiaries received the code by SMS and were invited to withdraw the benefit at postal and bank counters. A call center provided support, and by end of May, potential beneficiaries previously rejected could reapply (about 13% of the population. By July, 91% of the announced coverage target was met. Financing included a mix of traditional and non-traditional sources: a Special Fund was set up by the King, including \$1 billion from the treasury and \$2.3 billion from regional authorities and private donors (UN 2021). Similar arrangements were present in countries like Mauritania and Uzbekistan.<sup>63</sup>

In the United States, school closures meant a substantial scale up in food assistance programs. A record spending was recorded on food assistance across 15 programs, including a total of \$122.1 billion in January 2021. In the short term, participants of SNAP, the flagship e-voucher programs, increased by 5 million (from 36.9 million in February 2020 to 42.5 million for the rest of FY20. To facilitate scale up, states allowed a number of waivers, most of which expired in Dec 2021. These allowed for shifts from household eligibility home visits to interviews by phone; no assessment and recertification requirements (with reporting of identity and income only); and adapted telephonic signature procedures. Those streamlined procedures don't seem to have altered performance negatively, and even increased uptake (CBPP 2021).

In parallel, another mainstay of then US safety nets, school meals, were interrupting provisions to nearly 30 million children (Marcus and Yewell 2022). The program was temporarily replaced by the P-EBT scheme: this involved delivering food voucher transfers in lieu of school feeding for a value of at least \$5.7/day. The technology deployed was compatible with SNAP's standard EBT transfers, hence allowing for the upload of benefits on the same EBT card (Waxman et al 2021a).

P-EBT underscores the importance of programs that provide automatic eligibility to each other. For example, Neuberger et al (2021) noted that children in families receiving SNAP qualify to school feeding, hence facilitating automating P-EBT enrollment. Also, 30 states used data on children supported by other schemes that also confer eligibility for free school meals, hence again allowing the issuance of P-EBT benefits directly and without requiring any step taken by perspective beneficiaries. In those circumstances – whether via other programs or because information was provided by schools – P-EBT benefits were issued “directly”; otherwise, they issued new cards through an application process, or some combination of both (figure 38).



The arrangement involved collaboration between education administrators and state SNAP agencies that had not previously existed (Kone cons. 2020). As noted by Waxman et al (2021b), “... P-EBT requires a level of coordination with SNAP that is unprecedented” (p.33). Over an initial year (FY 19/20), main challenges included changing addresses during the pandemic, the logistics of issuing new EBT cards in a short time frame, and handling benefit payments. In the subsequent year, benefits had to be tailored to the wide variety of student learning models, including a shifting mix of fully virtual, hybrid, and in-person formats (Toossi 2021).

# V. LOOKING AHEAD: EMERGING INSIGHTS AND LESSONS

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*Whether Covid-19 is a “historical game changer” depends on where the bar is set.*

The discussion on whether the pandemic is leading to permanent changes in social protection hinges on the definition of “game changer”, and whether expectations are realistic. For example, part of the debate centered on the scale of assistance. If that’s the standard for “making history”, the coverage of assistance is no doubt unparalleled. With 1.3 billion people covered with cash transfers, support has been of unparalleled, historical proportions.

Notwithstanding the special nature of the Covid-19 crisis, the fact that over 200 workers were supported with unconditional transfers is also remarkable. If the bar is set on whether assistance was adequate and “fit for purpose”, it is reasonable to be more skeptical: data shows that responses helped, but were in many cases not in sync with the depth and duration of the crisis. What if the bar was set on “improving” existing systems? Covid has led to some permanent improvements in delivery systems, although the majority of business processes seem to have been “back to normal”. This may appear as a missed opportunity to challenge some assumptions around the need for “control” through particularly demanding design and delivery procedures. What if the bar was about fomenting new or amplifying preexisting public debates on the key role of social protection? Out of the plethora of experiences, some have had profound longer-term effects within countries. For instance, Togo is building a social protection system that was largely absent before 2020; Central Banks in a dozen economies have displayed a readiness to use cash transfers as unconventional monetary policy; and in South Africa, the R350 grant – which is still active at the time of writing this paper – has provided new fuel to pre-existing structural debates on weaving a universal portfolio of social assistance programs (GoSA 2022). In some contexts, those debates on the outlived the programs that sparked them, such as the child tax credit in the US. Finally, if the bar was represented by altering the structural configuration of systems, that was a tall order to meet. Social protection is a means for an end, and the question of fundamental changes in social protection reach and financing would largely depend on changes in power balance in societies. Then the question is not whether Covid led to social protection changes, but whether Covid has altered a power equilibrium – and how that translates into change in social protection. Those power and political dynamics should be fully considered when interpreting future directions for social protection.



### *Assisting unemployed and precarious workers.*

During Covid-19, social assistance acted as de facto insurance against severe welfare losses. To cover for gaps in the social protection systems, countries extended social assistance to large swaths of the population. While formal sector workers benefited from wage subsidies or various forms of unemployment insurance, workers in non-standard employment contracts, self-employed and informal sector workers received cash transfers. This was not without hurdles. Enduring policy and operational difficulties in scaling up Covid responses were rooted, on one hand, in the limits of social insurance for workers in employment arrangements other than stable, formal employment. In fact, insurance mechanisms have traditionally faced a number of limitations as automatic stabilizers in crises. This includes implementation lags and eligibility criteria, e.g., for individuals reaching long-term unemployment (Romer and Romer 2021; Chodorow-Reich and Coglianesi 2019). But barriers also stemmed from a prevailing architecture of social assistance geared for particular populations, which may not cover most workers. This largely includes countries with programs directing resources near-exclusively to the bottom of the distribution as well as encompassing contexts with generous categorical programs for children or seniors. In both cases, social assistance had to be “invented” for informal sector workers that were largely missed by current configurations. Such experience calls for reenergizing of efforts to adapt an extend unemployment (and underemployment) insurance for workers that are currently unreached by those measures. And in doing so, it opens up the possibility of novel approaches and fresh perspectives on how to reimagine the boundaries, interface and connections between social assistance and insurance.

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### *Towards automatic stabilizers.*

Decisions to scale up cash transfers have been largely based on policy preferences, available information, and previous experiences. In a way, choices over “who to cover, how much to provide, for how long” largely relied on informed, discretionary choices. They were much less based on automatic stabilizers, especially in low- and middle-income countries. Those stabilizers are “thermostatic” measures that scale up (and down) based on prearranged, insurance-like triggers.<sup>64</sup> An automatic scale up of social assistance presents three key steps: (i) the selection of risks against which automatic transfers would be triggered; (ii) the operationalization of an architecture of triggers and scale up protocols across institutions; and (iii) the calibration of design choices, particularly on coverage, size, duration of benefits and pre-positioned financing. To inform these steps, more deliberate learning from unemployment insurance would be desirable. Because of possible limitations of insurance measures in crisis situations, an automatic scale up of transfers would build upon insurance principles, but adapting insurance design (e.g., need for a certain number of years of employment experience, duration of unemployment spells, etc.). There is nascent experience in similar anticipatory approaches in ex ante responses to droughts and other climatic hazards (Calcutt et al 2021; Pople et al 2021; Bowen et al 2020). Perhaps there is scope to connect, extend and foment “lateral learning” between such climatic experiences and scale up in the face of different events. One such contingency might be, for example, when unemployment hits a certain level, or if particular decisions are taken such as a declaration of health emergency (Furman 2020; Moffitt



and Ziliak 2020; Boushey and Shambaugh 2019). According to Furman and Summers (2020, p.15), “... [t]his automatic recession insurance could include (...) increased unemployment insurance benefits, or other transfers like nutritional assistance or even across the-board cash transfers”. Others like Hoynes and Schanzenbach (2019) discussed establishing national triggers not to scale up a program per se, but to automatically simplify design (e.g., waiving conditionalities during downturns). Just like financial institutions are regularly stress tested to ascertain their ability to withstand large shocks, countries should stress test their social protection systems. Despite overwhelming evidence on the benefits of crisis preparedness, few tools were available to assess the level of readiness and potential of extending social protection in the short term. Some recent analytical work offers such tool for cash transfers, which also offer the potential for better aligning social protection and humanitarian assistance<sup>65</sup> (World Bank 2021d).

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### ***Creative and diverse financing responses, with trade-offs and fiscal headwinds looming on the horizon.***

With a global investment of at least \$3 billion and average response of 2% of GDP, the fiscal pressure exerted by the pandemic was significant. The Covid-19 response displayed a key role played by domestic funding including in low- and middle-income countries. A range of innovations were recorded, such as contingency financing and new funds being established in lower-income contexts (e.g., Mauritania). Private support also played a significant role in financing responses, such as contributions from the Zakat system. Yet many of those financing practices also present drawbacks. For instance, responses were in various contexts financed by redirecting resources from other sectors. Some of such repurposing might be desirable, like fuel subsidies, while in other circumstances it might be more problematic (e.g., reallocations from other social services and infrastructure). New funds and financing models operating in parallel to government systems might enhance short-term speed and transparency, but may also undermine national structures in the longer run. If debt wasn't a constraint in crisis response, it may be in the post-crisis stage. This indicates that sharp trade-offs might be on the horizon. Romer (2021) articulates this point clearly for high income settings: “... [as policymakers] seek to tackle issues such as climate change, crumbling infrastructure, and persistent poverty, they may find increased opposition to further spending.

Thus, one potential legacy of the extraordinary fiscal actions to fight the pandemic may be that the country fails to deal with other pressing needs” (p.107). Those pressing needs are rising as the ongoing Ukraine war-induced crisis amplified a wave of global inflation, with a palpable fatigue in social protection responses (Gentilini et al 2022b). Gupta and Tovar-Jalles (2022) call for bold reforms in low- and middle-income countries: with rising debt and widening of budget deficits that may persist over time, policymakers are urged to “... reconsider their revenue-raising strategy in favour of an approach that embraces a comprehensive reform package, including policies that have encountered political opposition in the past” (ibid, p.2299). The crisis might present an opportunity to reenergize financing of social protection across a portfolio of options, including for example the relationship between subsidies and transfers, the role of indirect taxes, and innovative earmarked taxation.

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### *The expected multipliers of cash transfers helped fiscal and unconventional monetary policy converge.*

A dozen economies, most of which in East Asia, provided cash payments to all adult individuals or even the entire population. Given the macro contexts, cash transfers were deemed the surest route to reignite consumer demand and economic activity. Emerging evidence shows that up to about 40% of transfers were consumed, possibly generating economic multipliers. It is likely that future recessions entailing strong reductions in consumer demand, temporary large-scale (including universal or quasi-universal) cash transfers would likely become a default option in emergency response – whether through fiscal or monetary policy. Furthermore, the Covid-19 experience may further increase interest in documenting economic multipliers of cash transfers in non-crisis contexts. This, in turn, may help forge a broader definition of fiscal sustainability in ways that account for both economic costs and benefits over time (Aizer et al 2022).

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### *Capitalizing on a new generation of urban social assistance programs.*

Over the past couple of decades, social protection had largely held a rural footprint. The pandemic is providing new impetus in adapting and extending social assistance to populations in peri urban and urban areas. This does not only imply modifications in design and implementation, but also in partnerships and framing. In fact, the urban agenda is inherently multisectoral and involving connections with sectors with which social protection has played a limited role, like urban development, housing, and transport. Emerging experiences from a dozen countries in Africa – e.g., DRC, Liberia, Nigeria, Madagascar, and Togo – suggest that new partnerships with private sector delivery, management of big data, and local actors (local governments, local trader associations, and civil society) may help make assistance more dynamic and apt for urban settings. The jury is still out on the full performance of such novel experiences, but this is an agenda – the extension of social protection in cities – of enormous untapped potential. Operating in urban environments opens the door for accelerating the discussion on mobility, portability of benefits, and individualized assistance as opposed to more traditional, static, and household-based provisions.

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### *Building universal delivery systems.*

Countries entered the pandemic with a range of unsolved questions on social protection. For example, what is an optimal level of social assistance coverage? What would be an ideal composition of social assistance and insurance? More to the point, if social assistance is skewed towards the poorest and the expansion of social insurance is halted by informality, precarious labor contracts, and other barriers, how should universal social protection be attained? The pandemic doesn't solve these puzzles, but it may present some clues to start answering them. To begin with, it might be reasonable to expect that a mere return to pre-pandemic social protection provisions may not address the problem. Policy ideas often rest on worldviews and priorities, and an altered landscape should not be interpreted through the

lens of preexisting narratives. While future possibilities need to be fully mapped out, recent experiences point to practices that may hinder the path to universality. These may include, for example, approaches premised on the traditional nuclear family; programs informed by collection of data occurring with large time lags; benefits that are not spatially portable; bypassing provisions to large informal urban settlements; scale up of assistance based on discretionary policy decisions; and fostering an overall climate of suspicion and distrust towards low-income populations. Covid has enlarged the share of populations exposed to risk, potentially encompassing the entire country population. This means that while countries build their trajectory toward universality, a precondition for such journey would be the availability of universal delivery systems. This would include the ability to outreach, identify, enroll, pay, and have interoperable databases that would operate on a universal basis. The experiences reviewed in this paper show that delivering cash transfers on a universal or quasi-universal basis is no easy task even in high income countries. The extent to which those functions should be digitized depends on both the contextual digital ecosystem and user perspectives and preferences. At what pace countries would travel toward utilizing universal systems in routine programs – i.e., ensuring social protection coverage, adequacy, and comprehensiveness for everyone in society – would depend on a variety of evolving political, economic, operational, and societal factors.

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### ***Benchmarking simplicity.***

One aspect that characterized Covid responses is the simplification of design. Would such simplicity compromise program performance? While the documentation of those practices has been extensive, relatively little is known on whether leaner design may have affected performance compared to pre-pandemic features. The preliminary evidence reviewed in this paper points to the significant contribution of transfers to welfare; but as countries restore traditional design, the idea that programs can be made simpler, leaner, and customer-friendly without necessarily jeopardizing effects is a hallmark of the pandemic response. While comparative evidence on the performance of specific program “with and without” Covid simplification is limited, the pandemic might further foment the benchmarking of programs against the plain-vanilla form of unconditional cash transfers (Kondylis and Loeser 2021). It might be interesting to extend this line of inquiry beyond overall design choices (conditionality and integrated approaches) and benchmark particular delivery aspects as well – for example, whether enrolment could be kept remote instead of in-person; or whether checks on declaration of income could be pursued ex-post on a sample basis instead of ex-ante for everyone.

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### ***Information on global social protection responses.***

Extensive global response monitoring and tracking initiatives were put in place. These entailed a significant level of effort in identifying, codifying, cross-checking, and explaining social protection data. This includes data on basic performance metrics like coverage, adequacy, duration, extensions, and spending. Information was not always published, searchable and accessible. When made available,

countries often adopted different definitions and reporting procedures. The experience from extensive Covid-19 social protection tracking suggests the need for more proactive, comprehensive, coherent, and coordinated reporting systems. Perhaps the development of global standards for social protection response reporting might enhance future tracking endeavors. Initiatives that may help institutionalize the collection, analysis, and dissemination of global data in crisis times might also be better explored. Similarly, there appears to be growing demand for knowledge sharing across the country income spectrum: as governments of Pakistan, Nigeria and others have argued,<sup>66</sup> the pandemic has signaled the need for a permanent virtual room or “knowledge lighthouse”. This might include a regular, virtual government-to-government community of practices offering real-time exchange of strategic and operational issues on social protection.

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***If the present can be interpreted through a global lens, the future can be best understood at country level.***

The response is global in the sense that a large constellation of different lessons and experiences becomes available on the global stage almost real-time. Such knowledge base can be tapped, studied, and modelled to shape present decisions in different contexts. Global knowledge is in a fluid, constantly evolving state that can, if examined systematically, help take the pulse of the current state of social protection. But it is at country level that the fusion of specific political, social, institutional, and fiscal factors occurs – and these are the forces molding the prospects for social protection. Global developments and actors can, to varying degree, influence the formation of future country trajectories; but ultimately, it’s the set of country factors that steer the direction. That’s where we should look for clues on the future.

**Historical antecedents and current experience suggest four scenarios on if and how countries will build on the Covid response experience:<sup>67</sup>**

- **“The ostrich”.** Under this scenario, governments bury their heads in the sand and no change happens. The implication would be to sleepwalk into the next crisis. Policymakers may not grasp the depth and structural nature of problem; and a priori adversarial, ideologically driven stances against social protection harden. Policymakers may be skeptical or dismissive of evidence, and may not be pressed enough for change. This scenario further cements a logic of distrust toward social protection and the need for more social protection in the future.
- **“The refresher”.** This scenario involves governments that do take action, but in a reactive mode. They make some improvements at the margin, but largely keep structures intact. No major system-wide enhancement is made, with the extension of or some increase in coverage of particular programs being the main post-Covid changes.
- **“The constrained reformer”.** This and the former scenario are those that most closely resemble current models. Governments are more proactive than in the refresher scenario, including seriously re-examining programs and initiatives. There is a wider appetite for substantive public discussion and consultation. Yet the constrained reformer “doesn’t pull the trigger” for more thorough and

deliberate innovation. Improvements are less system-wide, and more driven by pragmatic results. The agenda is mostly championed by “social” ministries in a state of constant justification to more conservative and influential actors shaping budgetary decisions.

- **“Beveridge redux”.** Here governments embark on a comprehensive agenda of reform informed by a thorough assessment and rethinking of options. This involves a Beveridge-like, system-wide vision with the ambition to seize Covid as a true opportunity for change. Countries going this path would become trailblazers on particular innovations, and may likely bring to scale ideas that were hitherto only considered as aspirational and conducted on a pilot basis. Under this scenario, countries would combine technical reforms with changes in mindsets. The state would embrace change, take more responsibility, and accept more accountability. It successfully makes the case that social protection encourages common interests, and frames it as an integral part of wealth generation instead of an antagonizing force to economic upward mobility.

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# VII. ANNEX

## CASH TRANSFER PROGRAMS, DESCRIPTIVE STATISTICS (LARGEST COVERAGE PROGRAM ONLY)

Country	Program name	Policy Adaptations	Beneficiaries (actual)	Unit	Coverage	Expenditure (USD)	Benefit amount (monthly USD)
<b>Albania</b>	Support for employees in accommodations (1st package)	Horizontal expansion (new targeted one-off)	176,000	Individuals	6.20%	-	394
<b>Algeria</b>	solidarity transfer	Vertical expansion (one-off)	319,983	Household	4.30%	16,717,821	76
<b>Angola</b>	"Kwenda" Monetary Social Transfer Program	Horizontal expansion (new targeted multiple payments)	5,808	Household	0.10%	-	4
<b>Argentina</b>	Emergency Family Income (IFE)	Horizontal expansion (new targeted multiple payments)	9,000,000	Individuals	19.80%	2,176,278,168	61
<b>Australia</b>	Economic Support Payment	Horizontal expansion (new targeted one-off)	6,800,000	Individuals	26.50%	8,595,904,286	376
<b>Azerbaijan</b>	One-off cash payment	Horizontal expansion (new targeted one-off)	555,000	Individuals	5.50%	-	112
<b>Bangladesh</b>	Poor families cash assistance	Horizontal expansion (new targeted one-off)	3,200,000	Household	8.70%	147,405,660	29
<b>Barbados</b>	Barbados Adopt-A-Family programme	Horizontal expansion (new targeted multiple payments)	3,453	Household	3.50%	6,350,000	300
<b>Belgium</b>	Creative sector workers grant	Horizontal expansion (new targeted one-off)	1,572	Individuals	0.00%	-	1,825
<b>Belize</b>	COVID-19 Cash Transfer Program (BCCAT)	Horizontal expansion (new targeted multiple payments)	21,362	Household	22.00%	12,400,000	150
<b>Bermuda</b>	Supplemental Unemployment Benefit	Horizontal expansion (new targeted multiple payments)	127	Individuals	0.20%	-	1,520
<b>Bhutan</b>	Druk Gyalpo's Relief Kidu – Income support to affected individuals	Horizontal expansion (new targeted multiple payments)	52,644	Individuals	6.80%	2,038,219	136
<b>Bolivia</b>	Bono Contra el Hambre	Horizontal expansion (new targeted one-off)	3,991,179	Individuals	34.20%	576,000,000	145

<b>Brazil</b>	Auxilio Emergencial 1 (AE1)	Horizontal expansion (new targeted multiple payments)	68,300,000	Individuals	32.10%	-	117
<b>Bulgaria</b>	Family targeted monthly allowance	Horizontal expansion (new targeted multiple payments)	35,700	Household	1.20%	45,406,481	560
<b>Burkina Faso</b>	Solidarity Fund	Horizontal expansion (new targeted multiple payments)	69,755	Household	2.00%	9,276,315	
<b>Cambodia</b>	COVID-19 Cash Transfer Programme for ID Poor Households	Horizontal expansion (new targeted multiple payments)	700,000	Household	19.30%	320,000,000	20
<b>Cape Verde</b>	Emergency Social Income for Inclusion	Horizontal expansion (Existing programs)	21,048	Household	19.70%	-	61
<b>Cayman Islands</b>	Permanent Financial Assistance	Vertical expansion (one-off)	1,948	Individuals	3.00%	3,000,000	510
<b>Central African Republic</b>	Service Delivery and Support to Communities Affected by Displacement Project	Horizontal expansion (Existing programs)	15,800	Household	1.60%	8,000,000	15
<b>Chile</b>	Ingreso Familiar de Emergencia	Horizontal expansion & vertical expansion	12,121,438	Individuals	63.40%	6,728,869,087	135
<b>China</b>	Dibao	Horizontal expansion, vertical expansion & admin simplification	83,900,000	Individuals	6.00%	-	
<b>Colombia</b>	Solidarity Income Program	Horizontal expansion (new targeted multiple payments)	3,084,987	Household	21.40%	2,164,021,661	46
<b>Comoros</b>	Social Safety Net Comoros	Horizontal expansion (Existing programs)	21,600	Household	13.30%	6,500,000	
<b>Congo, Rep.</b>	Emergency cash transfer (ECT)	Horizontal expansion (new targeted one-off)	220,000	Household	17.20%	9,276,315	93
<b>Cook Island</b>	School Closure Support (Cook Island)	Horizontal expansion & vertical expansion	4,742	Individuals	27.00%	675,676	135
<b>Costa Rica</b>	Protect Grant	Horizontal expansion (new targeted multiple payments)	723,520	Individuals	14.20%	488,293,670	155
<b>Côte d'Ivoire</b>	Humanitarian Emergency Solidarity and Support Fund - Cash transfer for poor and vulnerable	Horizontal expansion (new targeted multiple payments)	125,000	Household	0.50%	24,674,997	46
<b>Cyprus</b>	Covid unemployed support program	Horizontal expansion (new targeted one-off)	4,060	Individuals	0.30%	-	608

<b>Czech Republic</b>	Tour guides support	Horizontal expansion (new targeted one-off)	404	Individuals	0.00%	1,109,139	1,996
<b>Djibouti</b>	Programme Nationale de Solidarite Famille	Horizontal expansion (Existing programs)	5,750	Household	5.40%	15,000,000	50
<b>Dominican Republic</b>	Stay at Home program	Horizontal expansion & vertical expansion	1,500,000	Household	48.10%	-	86
<b>Ecuador</b>	Bono de Protección Familiar por la Emergencia por la presencia de COVID-19	Horizontal expansion (new targeted multiple payments)	1,430,000	Household	30.60%	57,000,000	60
<b>Egypt</b>	Exceptional cash assistance	Horizontal expansion (new targeted multiple payments)	478,000	Household	1.90%	12,783,964	32
<b>El Salvador</b>	Compensation Bonus	Horizontal expansion (new targeted one-off)	1,230,000	Household	77.20%	450,000,000	300
<b>Estonia</b>	parental allowance for disabled children	Horizontal expansion (new targeted multiple payments)	1,298	Individuals	0.10%	-	967
<b>Eswatini</b>	WFP cash transfer	Horizontal expansion (Existing programs)	94,000	Household	38.10%	127,467	9
<b>Ethiopia</b>	UPSNP - Direct Support component	Advanced payment	220,000	Household	0.90%	-	
<b>Fiji</b>	Poverty Benefit Scheme	Vertical expansion (one-off)	26,000	Household	13.30%	-	48
<b>Finland</b>	cash assistance to workers in cultural and creative arts sector	Horizontal expansion (new targeted one-off)	9,500	Individuals	0.20%	66,933,500	7,302
<b>Gabon</b>	UNDP cash support	Horizontal expansion (new targeted one-off)	500	Individuals	0.00%	-	1,000
<b>Gambia</b>	Nafa Quick program	Horizontal expansion (Existing programs)	78,000	Household	26.60%	-	29
<b>Georgia</b>	One-off compensation	Horizontal expansion (new targeted one-off)	371,233	Individuals	10.00%	9,128,530	91
<b>Ghana</b>	LEAP	Vertical expansion (multiple payments)	334,084	Household	3.80%	-	
<b>Greece</b>	Social Solidarity Income	Vertical expansion (one-off)	256,562	Household	6.10%	-	
<b>Guatemala</b>	Bono Familia	Horizontal expansion (new targeted multiple payments)	2,692,018	Household	76.70%	769,238,166	128
<b>Guinea</b>	COVID-19 economic response, April 6 2020	Horizontal expansion (new targeted multiple payments)	20,000	Household	1.00%	-	26

<b>Guinea-Bissau</b>	Temporary cash transfer for vulnerable families	Horizontal expansion (new targeted multiple payments)	1,587	Household	0.70%	-	74
<b>Guyana</b>	COVID-19 relief package	Horizontal expansion (new universal one-off)	153,000	Household	73.80%	33,573,141	120
<b>Haiti</b>	Transfert en espèces unique (subvention de l'État)	Horizontal expansion (new targeted one-off)	319,959	Individuals	2.80%	12,808,755	39
<b>Honduras</b>	Unique Bonus. Assistance to Independent Workers or Own Account	Horizontal expansion (new targeted one-off)	260,000	Individuals	2.60%	68,000,000	83
<b>Hong Kong</b>	The Cash Payout Scheme	Horizontal expansion (new universal one-off)	6,558,910	Individuals	87.70%	9,102,564,103	1,282
<b>India</b>	PMJDY	Horizontal expansion (new targeted multiple payments)	200,000,000	Individuals	14.50%	-	7
<b>Indonesia</b>	Village Funds Unconditional Cash Transfers	Horizontal expansion (new targeted multiple payments)	11,000,000	Household	15.50%	7,323,738,941	28
<b>Iran, Islamic Rep.</b>	Corona support package	Horizontal expansion (new targeted multiple payments)	3,000,000	Individuals	3.60%	-	36
<b>Iraq</b>	Emergency Grant	Horizontal expansion (new targeted multiple payments)	11,580,000	Individuals	28.80%	230,061,350	23
<b>Israel</b>	Grant to Every Citizen	Horizontal expansion (new universal one-off)	8,820,000	Individuals	95.70%	2,001,539,646	231
<b>Italy</b>	Relaunch Decree	Horizontal expansion (new targeted one-off)	9,840,000	Individuals	16.50%	-	1,217
<b>Jamaica</b>	COVID Allocation of Resources for Employees (CARE)	Horizontal expansion (new targeted one-off)	378,919	Individuals	12.80%	-	70
<b>Japan</b>	Universal \$930 cash handouts	Horizontal expansion (new universal one-off)	116,520,000	Individuals	92.60%	124,171,201,114	963
<b>Jersey</b>	Spend local card	Horizontal expansion (new universal one-off)	105,000	Individuals	97.40%	14,712,629	134
<b>Jordan</b>	Temporary Cash transfer	Horizontal expansion & vertical expansion	237,000	Household	11.00%	277,000,000	
<b>Kazakhstan</b>	Monthly payments of US\$100	Horizontal expansion (new targeted multiple payments)	4,000,000	Individuals	21.30%	-	101
<b>Kenya</b>	National Safety Net Programme (NSNP)	Horizontal expansion (new targeted multiple payments)	1,300,000	Household	8.80%	-	18
<b>Korea, Rep.</b>	COVID-19 relief funds	Horizontal expansion (new universal one-off)	51,606,633	Individuals	99.70%	11,660,000,000	913

<b>Kosovo</b>	One-off assistance for worker	Horizontal expansion (new targeted one-off)	206,852	Individuals	11.70%	-	353
<b>Lebanon</b>	Emergency National Social Solidarity Programme	Horizontal expansion (new targeted multiple payments)	170,000	Household	10.70%	49,751,244	265
<b>Lesotho</b>	Child Grants Programme (CGP) and Old Age Pension (OAP)	Horizontal expansion & vertical expansion	50,000	Household	7.80%	-	
<b>Liberia</b>	Emergency Cash Transfer (SCT-COVID)	Horizontal expansion (Existing programs)	14,855	Household	1.30%	2,700,000	15
<b>Lithuania</b>	temporary jobseeker's allowance	Horizontal expansion (new targeted multiple payments)	266,000	Individuals	9.50%	322,497,773	243
<b>Madagascar</b>	TOSIKA FAMENO	Horizontal expansion (new targeted multiple payments)	215,093	Household	3.80%	15,000,000	27
<b>Malawi</b>	Malawi's National COVID-19 Preparedness and Response Plan	Advanced payment	289,628	Household	6.80%	-	
<b>Malaysia</b>	Cash transfers for e-hailing drivers	Horizontal expansion (new targeted one-off)	1,400,000	Individuals	4.30%	14,792,236	123
<b>Maldives</b>	Special allowance, Income Support Allowance	Horizontal expansion (new targeted multiple payments)	22,946	Individuals	4.20%	54,484,737	1,233
<b>Malta</b>	Parental Benefit	Horizontal expansion (new targeted multiple payments)	8,360	Individuals	1.60%	37,361,063	809
<b>Mauritania</b>	Covid-19 safety net support	Horizontal expansion (new targeted multiple payments)	210,000	Household	30.90%	-	
<b>Mauritius</b>	Self-Employed Assistance Scheme (SEAS)	Horizontal expansion (new targeted one-off)	197,000	Individuals	15.60%	60,357,467	128
<b>Mexico</b>	Pensiones para personas con discapacidad	Advanced payment	801,201	Individuals	0.60%	2,124,786,684	131
<b>Micronesia</b>	Assistance for stranded citizens	Horizontal expansion (new targeted one-off)	535	Individuals	0.50%	-	1,250
<b>Mongolia</b>	Child Money program	Horizontal expansion & vertical expansion	1,186,289	Individuals	36.20%	494,440,578	35
<b>Montenegro</b>	Unemployment benefit	Horizontal expansion (new targeted one-off)	17,157	Individuals	2.80%	1,043,980	



<b>Morocco</b>	Tadamon	Horizontal expansion (new targeted multiple payments)	5,500,000	Household	78.00%	1,282,297,553	112
<b>Mozambique</b>	Post Emergency Direct Cash Transfers Program (PASD-PE Covid)	Horizontal expansion (new targeted multiple payments)	623,500	Household	8.70%	79,000,000	10
<b>Myanmar</b>	COVID-19 Economic Relief Plan (CERP)	Horizontal expansion (new targeted multiple payments)	5,600,000	Household	43.50%	301,839,228	21
<b>Namibia</b>	One-time emergency income grant	Horizontal expansion (new targeted one-off)	867,281	Individuals	34.10%	37,703,444	50
<b>Netherlands</b>	Tofa	Horizontal expansion (new targeted one-off)	7,500	Individuals	0.00%	-	2,008
<b>Niger</b>	Strengthening the Adaptive and Scalable Safety Net System	Horizontal expansion (new targeted one-off)	311,500	Household	7.60%	6,848,306	28
<b>Nigeria</b>	National Social Safety Net Program (NASSP)	Horizontal expansion & vertical expansion	3,700,000	Household	8.80%	-	
<b>North Macedonia</b>	GMI	Horizontal expansion & vertical expansion	4,739	Household	0.80%	-	163
<b>Pakistan</b>	Ehsaas Emergency Cash Programme	Horizontal expansion (new targeted one-off)	17,000,629	Household	52.40%	1,197,901,851	75
<b>Panama</b>	Panama Solidarity Plan	Horizontal expansion (new targeted multiple payments)	442,323	Individuals	10.30%	857,582,100	100
<b>Paraguay</b>	Pytyvõ Program	Horizontal expansion (new targeted multiple payments)	1,200,000	Individuals	16.80%	275,720,791	36
<b>Peru</b>	Bono Familiar Universal	Horizontal expansion (new targeted one-off)	7,749,298	Household	88.20%	1,933,883,341	187
<b>Philippines</b>	Social Amelioration Program	Horizontal expansion (new targeted multiple payments)	17,597,757	Household	67.90%	4,161,142,557	135
<b>Poland</b>	Tourism voucher for families with children	Horizontal expansion (new targeted one-off)	7,000,000	Individuals	18.40%	-	204
<b>Portugal</b>	Proteccion of self-employed and informal workers	Horizontal expansion (new targeted multiple payments)	156,313	Individuals	1.50%	-	533
<b>Russia</b>	Child one-off transfer	Horizontal expansion (new targeted one-off)	22,800,000	Individuals	15.80%	2,663,051,111	135
<b>Rwanda</b>	VUP, Direct Support	Horizontal expansion & vertical expansion	70,634	Household	2.30%	-	

<b>Samoa</b>	National ID project incentive	Horizontal expansion (new universal one-off)	144,275	Individuals	72.70%	4,750,693	20
<b>Serbia</b>	Universal one-off payment	Horizontal expansion (new universal one-off)	6,145,529	Individuals	89.00%	86,405,063,636	122
<b>Sierra Leone</b>	COVID-19 Emergency Cash Transfers	Horizontal expansion (new targeted one-off)	35,816	Household	2.60%	4,000,000	135
<b>Singapore</b>	Care & Support Package one-off assistance	Horizontal expansion (new universal one-off)	4,600,000	Individuals	80.90%	-	450
<b>Somalia</b>	Baxnano program	Horizontal expansion (new targeted multiple payments)	73,478	Household	2.70%	175,000,000	20
<b>South Africa</b>	Child Support Grant	Vertical expansion (multiple payments)	12,337,152	Individuals	20.80%	-	64
<b>Spain</b>	Ingreso Mínimo Vital (GMI)	Horizontal expansion (new targeted multiple payments)	284,000	Household	1.50%	5,398,491,018	572
<b>Sri Lanka</b>	Loss of Livelihood Program	Horizontal expansion (new targeted multiple payments)	1,338,442	Household	23.20%	-	27
<b>St. Lucia</b>	Public Assistance Program (PAP)	Horizontal expansion (Existing programs)	850	Household	1.30%	-	93
<b>St. Vincent and the Grenadines</b>	Social safety net Interim Assistance Benefits	Horizontal expansion (Existing programs)	1,644	Individuals	1.50%	170,370	111
<b>Sudan</b>	The Sudan Family Support Project	Horizontal expansion (new targeted multiple payments)	2,350,000	Household	30.00%	765,000,000	5
<b>Sweden</b>	Housing allowance	Vertical expansion (one-off)	138	Household	0.00%	66,982,914	84
<b>Taiwan, China</b>	Triple stimulus voucher	Horizontal expansion (new targeted multiple payments)	22,970,000	Individuals	96.20%	1,751,988,507	70
<b>Tajikistan</b>	one-time emergency cash support	Horizontal expansion (new targeted one-off)	700,000	Household	44.00%	22,100,000	35
<b>Thailand</b>	Rao Chana	Horizontal expansion (new targeted multiple payments)	21,500,000	Individuals	30.80%	-	465
<b>Timor-Leste</b>	Universal one-off transfer	Horizontal expansion (new universal one-off)	334,000	Household	100.00%	66,856,800	100
<b>Togo</b>	Novissi (Solidarity) UCT.	Horizontal expansion (new targeted multiple payments)	819,972	Individuals	9.90%	20,407,893	21
<b>Tonga</b>	Secondary school students assistance	Horizontal expansion (new targeted one-off)	1,142	Household	6.20%	-	88

<b>Trinidad and Tobago</b>	Income Support Grants	Horizontal expansion (new targeted multiple payments)	25,000	Household	5.90%	-	222
<b>Tunisia</b>	Aide exceptionnelle de 200 dinars	Horizontal expansion (new targeted one-off)	370,000	Household	12.50%	-	73
<b>Turkey</b>	Pandemic Social Support Program	Horizontal expansion (new targeted one-off)	6,200,000	Household	29.90%	-	129
<b>Tuvalu</b>	Universal Cash transfer	Horizontal expansion (new universal multiple payments)	10,507	Individuals	89.10%	-	30
<b>Uganda</b>	Child-Sensitive Social Protection	Horizontal expansion (new targeted one-off)	56,200	Individuals	0.10%	4,000,000	39
<b>Ukraine</b>	One-off support to vulnerable pensioners	Horizontal expansion (new targeted one-off)	10,600,000	Individuals	24.00%	376,290,578	35
<b>United Kingdom</b>	Universal credit standard allowance.	Horizontal expansion & vertical expansion	5,700,000	Household	19.90%	-	1,338
<b>United States</b>	CARES Act stimulus check	Horizontal expansion (new targeted one-off)	162,000,000	Individuals	49.20%	271,000,000,000	1,200
<b>Uruguay</b>	Asignación Familiar Plan de Equidad	Vertical expansion (multiple payments)	372,231	Individuals	10.70%	7,854,515	
<b>Vietnam</b>	Allowance for poor households and near poor households	Horizontal expansion (new targeted one-off)	7,953,060	Individuals	8.20%	298,107,664	22
<b>West Bank and Gaza</b>	Emergency cash transfer	Horizontal expansion (new targeted one-off)	33,487	Household	4.10%	13,900,000	222
<b>Zambia</b>	Cash transfers	Horizontal expansion & vertical expansion	204,000	Household	5.70%	-	10
<b>Zimbabwe</b>	Informal workers support	Horizontal expansion (new targeted multiple payments)	309,146	Individuals	2.10%	-	

# VIII. ENDNOTES

1 See <https://ec.europa.eu/social/main.jsp?langId=en&catId=89&newsId=10101&furtherNews=yes#navItem-1>

2 See for example the *COVID-19 Social Policy Response Series* launched by the Collaborative Research Centre's "Global Dynamics of Social Policy" research program (<https://www.socialpolicydynamics.de/crc-1342-publications/crc-1342-covid-19-social-policy-response-series>), and the UNU-WIDER collection on a range of Covid-related country level analysis (<https://www.wider.unu.edu/article/unu-wider-ongoing-work-effect-covid-19-economies-states-and-societies-global-south>).

3 See <https://www.econ.uzh.ch/en/people/faculty/pomeranz/conferences.html>

4 Keywords used for the search included "conditional cash transfers", "unconditional cash transfers", "cash transfers", "social pensions", "non-contributory pension", "child benefits", "cash grants", "guaranteed minimum income", "basic income", "universal basic income", and "UBI".

5 Keith Hansen, Country Director at the World Bank, put it elegantly: "the Covid pandemic has shown that in times of stress a comprehensive social protection system is as important as a central bank. In its own way, each ensures that shocks do not trigger systemic crises or cause irrevocable losses. Together, they buttress individuals and the economy at large against catastrophic damage" (personal communication).

6 See the compilation of 32 webinars under the *Social Protection Responses to COVID-19 Webinar Series* (<https://social-protection.org/connect/communities/social-protection-responses-covid-19-task-force/3-webinar-series-social>), a dozen events under the RECOVR initiative (<https://www.poverty-action.org/program-area/social-protection/events>), and another collection of 6 webinars (<https://www.povertyactionlab.org/event/webinar-series-strengthening-safety-nets-and-health-care-during-covid-19-pandemic>). Various other events included seminars in April 2020 (<https://www.cgdev.org/event/online-event-cash-transfers-covid-19-low-and-middle-income-countries>), June 2020 (<https://www.ifpri.org/event/virtual-event-social-safety-nets-and-covid-19-can-we-protect-food-security-and-nutrition> and <https://mbrg.bsg.ox.ac.uk/event/webinar-social-protection-response-covid-19-crisis-low-and-middle-income-countries>); September 2020 (<https://avpn.asia/event/avpn-webinar-financing-solutions-for-social-protection-in-covid-19-response-and-recovery/>), as well as <https://interagencystandingcommittee.org/grand-bargain-official-website/webinar-linking-humanitarian-cash-and-social-protection-response>; February 2021 (<https://www.who.int/news-room/events/detail/2021/02/25/default-calendar/who-webinar---confronting-poverty-and-income-insecurity-during-covid-19-through-strengthening-social-protection>); March 2021 (<https://socialprotection.org/discover/multimedia/webinar-presentation-taking-stock-one-year-mark-social-protection-during-covid>); July 2021 (<https://www.adb.org/news/events/social-safety-nets-beyond-covid-19-crisis> and <https://sustainabledevelopment.un.org/index.php?page=view&type=20000&nr=7905&menu=2993>); November 2021 (<https://www.sparkblue.org/event/undp-webinar-next-practices-innovations-covid-19-social-protection-responses-and-beyond> and <https://europeanevaluation.org/events/webinar-where-next-in-digital-social-protection-lessons-from-the-covid-19-crisis-taken-into-the-future/>); and April 2022 (<https://www.adb.org/news/events/think20-associated-webinar-on-rethinking-social-protection-reform-in-the-post-pandemic-recovery>).

7 According to Sedik and Xu (2020), pandemic events lead to significantly higher risk of civil disorder after 14 months, with a peak around 24 months. Five years after the pandemic, civil disorder is 7% higher than the mean of the sampled 133 countries over 2001-2018.

8 Romer (2021) discerns three main differences between Covid-19 and past crises: first, while in ordinary recessions governments try to reignite aggregate demand and restore employment in a variety of ways, options during a pandemic are constrained by public health considerations. In fact, governments can "... stimulate only as much production and employment as can happen relatively safely" (ibid, p.6, emphasis added). Second, distributional impacts (in terms of both unemployment and safety) can be even more unequal than other shocks, especially impacting, at least in the first phases, "essential workers" and vulnerable, low-income workers in sectors particularly affected by the pandemic. And third, "... [t]he usual knock-on effects behind a traditional Keynesian multiplier—spending in one area flows to spending throughout the economy—fail to operate when part of the economy is shut down" (ibid, p.7). In practice, the speed at which the health shock affected the economy was much higher compared to Great Recession's: the latter "... took months and years rather than days and weeks to occur" (Moreira and Hick 2021, p.265).

9 The authors find less encouraging evidence on reforming tax administrative structures: "... [i]t appears pandemic events boost the possibility of certain tax policy reforms but not that of revenue administration" (ibid, p.2299).

10 Note that the figure refers to programs with announcement dates. Such information is available for 73% of measures, or 2,796 in total.

11 This is a conservative estimate: by relaxing particular assumptions, the global level of direct beneficiaries of cash transfers coverage may have been 20% higher. See Annex 4 in Gentilini et al (2022) for a discussion on methodology.

12 The Oxford Stringency Index is a composite indicator measuring the strictness of Covid-19 containment measures. It is a composite indicator with 9 dimensions measuring school closures, workplace closures, and travel bans. The index's values range from 0 to 100, with 100 indicating maximum stringency. For full description, see Hale et al (2021) as well as [https://github.com/OxCGRT/covid-policy-tracker/blob/master/documentation/index\\_methodology.md](https://github.com/OxCGRT/covid-policy-tracker/blob/master/documentation/index_methodology.md). For cash transfers, the duration is calculated as the

average among multiple cash transfer schemes available as Covid-19 responses within a country. The analysis is also conducted for values above 50 as well as by restricting countries where social assistance accounts for more than one-third or at least half of Covid-19 social protection measures. Those scenarios yield results generally consistent with those presented in the text.

13 In absolute terms, monthly transfers were on average \$253, ranging from \$536 in high income countries to \$42 in low-income settings.

14 This is estimated by comparing COVID cash transfer for each country with the 2019 median income or expenditures. Because the latter is estimated on a daily basis, cash transfer programs were also calculated as daily transfers. Data for median income or expenditures is from PovCal.

15 Such country-level perspective should be interpreted in tandem with other supra-national adaptations. For example, Pereira and Pereira (2021) noted that “... the suspension of compliance with the budgetary rules of the Stability and Growth Pact and the massive fiscal solidarity that occurred in the EU are evidence of resilience at the international level” (p.574).

16 Some programs offered amounts equivalent to the cost of the meal, while in most cases cash was a top-up to take-home rations. The state government of Bihar in India provided cash transfers for every child who was receiving a school-based transfer for uniforms. Similarly, back-to-school and other allowances were also provided to ensure continuity of children's learning (e.g., Bolivia and 16 economies). Malaysia provided cash assistance to purchase devices for families with children belonging to the bottom 40% of the income distribution. Another 10 countries have used student relief funds to support their students studying abroad, such as Cyprus (Gentilini et al 2022a).

17 This model is reminiscent of the US system of “blue and orange food stamps” active in the late 1930s.

18 See <https://www.service.nsw.gov.au/campaign/covid-19-help-businesses/grants-loans-and-financial-assistance>

19 Malaysia subsidized childcare for working parents with e-vouchers worth about \$471 (Hammad et al 2021).

20 An internal review of 2,121 pre-Covid programs included in the ASPIRE database identified 1465 cash-based measures. Out of the latter, 1,180 were unconditional cash transfers, which therefore represented 80.5% of the cash-based portfolio (conditional cash transfers amounted to 96 programs and public works accounted for 189 interventions). Total unconditional transfers, including both cash and in-kind measures, were 78% of the portfolio. Note that the ASPIRE database has limited information for HICs, hence data should be interpreted cautiously.

21 This doesn't consider the substantial share of fee waivers as they are not “transfers”, but discounts or payment postponements. Those instruments represented between 25-38% of social assistance across country income levels and have been used extensively in Africa. For example, see Berkouwer et al (2022) for Ghana's experience.

22 Note that universal transfers occurred in 13 economies, but involved 16 programs due to three interventions by Taiwan (April 2020, June 2020, and September 2020) and two by Singapore (February and May 2020).

23 This includes 28 cases where programs identified beneficiaries that were waitlisted in or had graduated from existing program databases. For example, this allowed Iraq to expand coverage of its Social Safety Net Program by 60,000 beneficiaries. Note that data on identification and registration presented by Hammad et al (2021) doesn't include most high-income countries.

24 A related issue in India's initial response was communication and beneficiaries' awareness of transfers. A survey by Gelb et al (2022c) found that in April 2020, all respondents were enrolled in at least one transfer program that utilized DBT, yet only 76% reported not knowing that a payment had been made in their account.

25 Nonparametric correlation of 0.370 significant at the 1% level. Coverage refers to ‘direct’ and ‘actual’ beneficiaries (see Gentilini et al 2022a, Annex 4 for definitions).

26 The extremes include Colombia program “Cash transfers for positive COVID test individuals”, which took only two days, and Singapore's “One-off GST Voucher”, which took nearly four months.

27 About 83% of funding to local and national actors is directed to national governments (\$624 million).

28 The OECD (2022) shows that while COVID-19 provided a window of opportunity to include refugees in national social protection systems, de jure access to programs was not necessarily ensured de facto. This is also reflected in the case of Venezuelan migrants: preexisting cash transfer programs were generally not adapted to include those mobile populations (IPC-IG et al 2021). Yet there are cases where assistance during Covid-19 was provided to displaced populations and host communities, such as Cameroon (for 10,000 people) and Djibouti (1,000 urban refugee and asylum seekers, and 200 host families) (UNHCR 2021)

29 Cho and Johnson (2022) also reported that food transfers reached most households within two weeks of the first lockdown; instead, it took between “... few weeks to several months for SAP beneficiaries to receive their cash” (p.22).

30 Such proportion is also reflected in the broader size of the fiscal stimulus packages. Romer (2021) note that the average fiscal package early in the pandemic was 5.2% (with a median of 4.4%), while the average package early in the Great Recession was 1.4% GDP (median of 1.6%).

31 The authors found that since 1980, OECD countries with initial debt ratios one standard deviation below the sample mean decreased their high-employment surpluses by over 3% of GDP in response to significant financial distress. Conversely, countries with initial debt ratios one standard deviation above the sample mean actually increased their high-employment surpluses by 2 to 3% of GDP, i.e., they adopted highly contractionary fiscal policy.

32 This section draws heavily from discussion in Gentilini et al (2022), Annex 1.

33 For a thought-provoking discussion on Africa, see Arezki (2021).

34 See <https://www.youtube.com/watch?v=mBn59ij3ICY>.

35 There are examples of “lighter” integration. For example, UNHCR (2022) shows that high-frequency phone surveys conducted by national statistical offices and development partners included forcibly displaced persons in 12 countries (i.e., Bangladesh, Burkina Faso, Chad, Costa Rica, Djibouti, Ethiopia, Iraq, Jordan, Kenya, Mexico, Uganda, and Yemen). These provided the “first systematically collected data on refugees and hosts during a global shock” (ibid p.11).

36 See <https://www.workandincome.govt.nz/covid-19/leave-support-scheme/index.html>

37 Some studies examined sectoral effects. For example, see Varshney et al (2020) for an analysis of the impacts of cash transfers among Indian farmers’ purchases of agricultural inputs. In Kenya, a one-off cash transfer for female microentrepreneurs of \$50 (equal to approximately 1 month of average profits) provided at the very early stages of the pandemic doubled weekly business profits, recouping about one-third of initial losses that occurred between January and May 2020 (Brooks et al 2022). Also, beneficiaries increased spending on personal protective equipment by 17% and increased an index of mitigation practices such as hand washing and mask wearing by 0.23 standard deviations.

38 A forthcoming report by the World Bank (2022a) presents fresh analysis on the performance of cash transfers on parameters like, among others, poverty reduction, adequacy, targeting, and incidence

39 See Devereux et al (2021) for a conceptual and methodological discussion on the impacts of the pandemic on food security.

40 Of course, such broad-brush categorization withholds considerable variation on the extent to which impacts were mitigated. For example, within such yellow band, in some cases mitigation was relatively substantial (e.g., Colombia) while in others more limited (e.g., Uruguay). Also, a country may appear in different color bands pending on studies’ timing, scope and methodologies (e.g., South Africa). In a narrower number of cases, social assistance mitigated more than half – or even fully countered – the effects of the pandemic. In the case of poverty and food security, this involved instances of generous, large-scale provisions in Brazil and South Africa. With regards to health, particularly striking are cross-country results by Aminjonov et al (2021) and estimates on lives saved by Ashaw (2021). In a range of “red” cases, welfare effects of responses were modest. This mostly involves a compilation of tax-benefit microsimulations from Sub-Saharan Africa and as well as the notable case of Mexico.

41 There are at least four main channels through which cash transfers generate multipliers, namely through effects on firms, wages and employment; integration of economies and retail-level spending; indirect effects; and through marginal propensity to consume.

42 This is not to say that all one-off universal transfers are HM. For example, Hong Kong government’s 2020 universal transfers were financed, along with all the measures in the emergency package, by raising money on the bond markets.

43 Unemployment insurance appears to have bolstered a higher MPC: Farrell et al (2020) estimate that the spending of those benefit increased \$0.73 for every \$1 of additional benefit received by beneficiaries.

44 Put in (recent) historical perspective, results are consistent with 2001 tax rebates (Shapiro and Slemrod 2003; Johnson 2006; Agarwal et al 2003); and they are slightly higher than 30% MPC recorded for the 2008-9 stimulus (Parker et al 2013; Sahm et al 2010). They are also generally line with n line with 40% MPC found for Australia in 2008-09 (Leigh 2012).

45 A multi-arm experiment by Jaroszewicz et al (2022) found that “... cash allowed participants to spend more money, improving objective financial outcomes for the few weeks immediately following the transfer and then dissipating thereafter” (p.4).

46 Another key activation measure, trainings, included 140 programs in 77 countries (Gentilini et al 2022a). For example, Indonesia adapted the design of the Kartu Prakerja (Pre-Employment Card) program and doubled the initial budget. The program targets both informal and formal workers with vocational training, cash and credit. In Singapore, the SGUnited Skills Program aimed to support 30,000 jobseekers with subsidized training courses for industry-relevant skills. The Seychelles Employee Transition Scheme intended to support workers made redundant by encouraging re-entry through retraining, up-skilling, and providing temporary work placement services. And in Belgium, a platform helped facilitate job matching between employers and students working part-time (especially hospitality and non-food sectors).

47 For example, Portugal provided hiring subsidies of around €5000/employee, specifically targeted at young workers and the long-term unemployed. Croatia announced a scheme of \$645/employee to support employers organized as sheltered workshops, integrative workshops, and employment units for people with disabilities that experienced a decrease in turnover of at least 50%.

48 See <https://www.oecd.org/els/soc/recipients-socr-hf.htm>

49 In addition, about 36% of low- and middle-income countries established measures that deliberately encouraged the unemployed and other target groups to become self-employed (De La Flor et al 2021).

50 Normally, benefits for a claimant that has been self-employed for a certain amount of time are calculated “... as if they earned the National Minimum Wage for the hours they are expected to work, even if their actual earnings are lower. This was therefore a considerable improvement for the self-employed” (Seemann et al 2021, p.561).

51 TOZO differs from “regular” social assistance as it does not take property and capital into consideration for eligibility, although it includes other forms of income in the household.



52 It's interesting to note how the Irish experience with PUP contrasts with the UK's extension of an existing scheme, the Universal Credit program: while PUP was extended three times (initially set for 3 months, then extended for an additional 2, then for other 7 months), the UC increased benefits (by £20/week, bringing it to £94) and eased access for a full year from the start.

53 Vera-Cossio et al also found that *Ingreso* transfers increased household expenditures on education, and increased the probability that school-aged children spent at least four hours on virtual schooling activities by 11 percentage points. The program also increased the time students spent on education by 27-46 minutes. Yet it didn't reduce the probability of domestic violence (a concern during the pandemic with lockdowns).

54 Beyond cash-based measures, see Seekings (2020a) for a discussion on the implications of suspending the national school meal program.

55 Namibia provided a one-off grant (R750) for people aged 18-59 who have lost informal livelihoods or were already unemployed with an application process by phone. People with work, including all people with formal employment, were excluded, as was anyone who already received one or other social grant. Anyone who had been formally employed but had lost their job would be supported through a separate scheme via Namibia's Social Security Commission. About 739,000 people were estimated to be eligible to the grant: three days after the application process was opened, 350,000 applications had been received. Such wave of interest overwhelmed the SMS applications system which had to be redesigned quickly, leading to minor delay. Applications rose to 579,000 after a week. At that point, about 20% of the target population was reached (Seekings et al 2020).

56 The WhatsApp platform was subsequently hosted by a private company (GovChat) instead of the Department of Health used in the test.

57 They also found that the main profiles of beneficiaries were young, relatively low-education, black males.

58 The Kafaalat program replaced BISP just before the pandemic in February 2020. According to Bourgault and O'Donnell (2020), Kafaalat "... uses an updated door-to-door digital survey to identify recipients, and the payments are dispersed monthly (PRK 2,000/month, or about USD \$12) rather than quarterly as under BISP. And though the BISP program did not automatically set up bank accounts for intended payment recipients, the Kafaalat program opens bank accounts for women in a conscious effort to increase their access to financial services" (p.2)

59 For example, Cantillon et al (2021) show that in Germany, "... all families were entitled to an additional €300 for every child. The top 20% of income earners, that is, those with an annual income of more than 67,816 Euros, only benefitted partially or not at all, due to the relevant offsetting with child tax allowances" (p.334).

60 The informal networks and governance of such informal settlements is an important dimension to consider. Based on phone surveys of 321 leaders across 79 settlements in Bhopal and Jaipur, India, Auerbach and Thachil (2020) show that in the early phases of the pandemic, slum leaders help with day-to-day problem-solving; handle request for government relief (especially food assistance); make claims; and collect administrative information. However, they also rely on partisan networks, which can affect and politically skew some of their activities.

61 For example, techniques for conceptualizing and diagnosing urban poverty may underestimate the problem; there could be skeptical urban attitudes and adversarial narratives around social assistance (e.g., transfers not needed because "there are jobs opportunities in cities"); related fears of "dependency" and inducing migration could be amplified among local government authorities; and, critically, adapting design of social assistance to dynamic urban livelihoods has received relatively little attention, alongside solving specific data, delivery and institutional issues.

62 See for example World Bank (2022b).

63 In the case of Mauritania, a special fund for social solidarity involved a state contribution of \$170 million; similarly, in Uzbekistan \$44.8 million was raised through public-private partnerships, including donations from individuals and businesses to support the "Kindness and Support" program of the government (Almenfi et al 2020).

64 Rutkowski (personal communication, 2022) noted that social insurance was conceived as an "automatic stabilizer", albeit for idiosyncratic risks and not for systemic shocks. If risks could be properly predicted and estimated, provisions could be made through risk mitigation with no need for last resort risk coping through social assistance.

65 Stress test appraisals may provide a measurable understanding of how much existing systems could be scaled up; they may help identify gaps and areas for strengthening; they may enhance accountability by linking stress test results with investments in crisis preparedness; they may foster coherence and reduce fragmentation across sectors involved in crisis responses (e.g., social protection and disaster management authorities); and finally help ensure that national structures are the default option for social protection, thereby using "parallel systems" only in exceptional circumstances. This may include cases of pure humanitarian action and contexts where scale up efforts may "overheat" domestic systems (World Bank 2021).

66 See <https://www.africa-newsroom.com/press/sapm-dr-sania-nishtar-briefs-diplomatic-corps-on-declaration-on-establishing-a-global-social-protection-knowledge-platform?lang=en>

67 The framework was inspired by Acemoglu (2020) and his broader reflections on the post-pandemic state. Clearly, the current "triple blow" of pandemic-displacement-inflation is redefining the scenarios. As such, future pathways may be interpreted in light of all the concomitant shocks, and not necessarily Covid alone.

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**“Over the course of 2020-2021, social protection was rapidly elevated as a fundamental component of countries’ response framework. This has energized an intense debate on the future of social protection, including whether a radical disruption like the pandemic could alter the long-term, structural equilibrium of social protection coverage, adequacy, and comprehensiveness.”**

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