Expanding Social Protection Coverage
Across the Humanitarian-Development Nexus

Guidance Package on Social Protection across the Humanitarian-Development Nexus
This Brief contributes to the European Commission Guidance Package on Social Protection across the Humanitarian-Development Nexus (SPaN).\textsuperscript{1} It provides insights into the question of programme design (section D1 of the SPaN guidance reference document) and how applying a longer-term lens can result in more sustainable and inclusive coverage in both crisis and development contexts. It draws primarily on experiences of the ‘Improving Synergies between Social Protection and Public Finance Management’ programme (SP-PFM), an EU-funded initiative implemented jointly by the International Labour Organization (ILO), UNICEF, and the Global Coalition for Social Protection Floors (GCSPF).\textsuperscript{2} The lessons are relevant for development and humanitarian partners and governments working in the fields of social protection, disaster risk management, and humanitarian response.

### Key Lessons

- Investing in social protection systems with comprehensive coverage and robust delivery mechanisms provides a strong foundation for emergency preparedness and response.

- When expanding social protection in response to shocks, timely, comprehensive, and inclusive coverage can be maximised by combining instruments and expansionary measures, adapting registration and payment processes to minimise exclusion errors, and implementing specific schemes for vulnerable groups such as people with disabilities.

- Adopting integrated approaches between social protection instruments and with other sectoral programmes can promote more sustainable outcomes for crisis-affected populations, especially vulnerable groups.

- Where social protection systems are absent, weak, or compromised, parallel interventions to meet humanitarian needs should be coordinated and, as far as possible, aligned or harmonised with existing or potential future social protection programmes.

- Political momentum, learning, and practical opportunities resulting from crises and parallel interventions can be leveraged to further the expansion of national social protection systems.

### 1. Expanding Social Protection Coverage Across the Nexus

Universal access to social protection is enshrined in international human rights frameworks and is central to achieving the Sustainable Development Goals (SDG).\textsuperscript{3} Moreover, well-functioning social protection systems with high levels of coverage can provide the best foundation for responding to the needs of people affected by crises in a timely manner, at-scale, and efficiently.\textsuperscript{4} **There are substantial cost-benefits to investing in shock-responsive social protection systems rather than repeated humanitarian response.**\textsuperscript{5}

However, while global coverage has been increasing in recent years, access to social protection remains low, especially in the most fragile and crisis-prone contexts.\textsuperscript{7} Those most excluded from social protection include children, workers in the informal economy, people with disabilities, marginalised social groups, and displaced populations. In fragile and low-income contexts, social protection systems are often weak and struggle to sustain or expand coverage in anticipation of or when crises occur, especially for the most vulnerable. Moreover, where
there is conflict, working with national social protection systems may undermine the humanitarian principles of humanity, neutrality, impartiality, and independence.

**Figure 1:**
*A Virtuous Cycle of Expanding Social Protection Across the Nexus*

Nevertheless, opportunities exist across the humanitarian-development nexus to create a virtuous cycle of expanding social protection coverage (Figure 1) that aligns with the OECD Development Assistance Committee (DAC) recommendations on programming across the nexus (Box 1). With a focus on ensuring inclusive coverage and sustainable outcomes, this Brief highlights recent approaches taken in Cambodia, Cabo Verde, Ethiopia, Nepal, and Nigeria to expand social protection at different moments along the humanitarian-development continuum, including the following:

▶ During stable times, progressively expanding social protection and the underlying systems for delivering routine support (e.g., social registries) to enhance resilience and build a foundation for providing additional assistance during crises.

▶ During crises, ensuring continuity of routine social protection provision and, where appropriate, prioritising the use of existing systems to respond to new needs.

▶ Enhancing coverage through implementation of, or coordination with, parallel interventions to reach groups that are excluded from social protection systems.

▶ During recovery, leveraging crisis response to promote permanent expansion of the social protection system towards universal coverage, further enhancing the ability of the system to respond to future shocks and reducing reliance on parallel interventions and external financing.

**BOX 1. How does expanding social protection systems align with the DAC recommendations on the Humanitarian-Development-Peace (HDP) Nexus?**

Supporting investment to expand social protection systems aligns with the DAC recommendations on better programming within the HDP Nexus to prevent humanitarian needs from arising. This includes promoting social cohesion and building household and individual resilience, supporting responses to future crises by integrating a risk-focus into social protection policy and programming, and investing in national capacities to deliver.
2. Country Experiences and Lessons

2.1 Expanding Social Protection Systems as a Foundation for Shock Response

Expanding access to social protection systems during stable times can provide a strong foundation for responding to crises. In the years preceding the COVID-19 pandemic, Cambodia, Nigeria and Cabo Verde all established national social cash transfer programmes and strengthened and extended their social registries. While these programmes were not necessarily designed as shock responsive, they allowed for large-scale and timely responses to the pandemic through the horizontal expansion of existing cash programmes and implementation of new temporary schemes using established operational systems to reach vulnerable groups excluded from the social protection system.

In all three countries, there was political will to expand the social protection system in the first place, and systems were not compromised by the crisis itself. Several factors related to pre-crisis reforms generated confidence among decision makers to rapidly commit resources to the post-crisis expansion, including the following:

### CASE STUDY:
Expanding Social Protection in Cambodia Prior to the COVID-19 Pandemic

Historically, Cambodia’s social protection system had been highly fragmented, with very low coverage. The “IDPoor” social registry was introduced in 2006 to target the Health Equity Fund and other small-scale social programmes using a proxy means test. The registry was updated and expanded every three years, reaching nationwide coverage in 2016. In 2019, the government introduced the first nationwide cash transfer programme for pregnant women and children under the age of 2 years. A robust digital operational system was established that was interoperable with IDPoor for programme targeting. A further development was the piloting of on-demand registration in 2019 to overcome the static nature of the social registry. These investments in expanding and strengthening the regular social protection system were instrumental in the rapid launch of the COVID-19 Cash Transfer Programme (CTP) for poor and vulnerable households. The COVID-19 CTP went from inception to reaching more than 500,000 households within a period of 3-4 months, before expanding to reach nearly 700,000 households, approximately 20 per cent of the population, through a rapid registration process. Additional benefits were provided to young children, the elderly, people living with disabilities, and people living with HIV.

- First, social protection programmes and registries were embedded in legal and policy frameworks prior to the pandemic. In Cambodia, this was seen as a key enabler of the rapid expansion of support across the country. In Nigeria, the government had adopted a new social protection policy in 2017 which was in the process of being integrated into State level policies (and was further reviewed in 2022), creating greater coherence across the federal system.
- Second, to varying degrees, all three countries had established nationwide coverage of the registry and delivery systems. In both Cambodia and Cabo Verde, this correlated with very high coverage of post-pandemic social assistance. Cambodia’s COVID-19 CTP reached about 20 per cent of the population compared to before the pandemic when just 6 per cent of the population was covered by at least one social protection scheme of any kind. Cabo Verde’s Rendimento do Inclusao Social (RSI) cash
transfer expanded by more than 400 per cent to reach around 138,000 people, nearly 25 per cent of the total population. However, in Nigeria, while doubling the number of National Cash Transfer Programme (NCTP) beneficiaries was commendable, the scheme only reached 5-6 per cent of the population overall due to the low pre-pandemic coverage.

Third, as well as expanding coverage, all countries had invested in strengthening the operational functionality of the registry and payment mechanisms, allowing them to better absorb the rapid increase in demand, in some cases with adapted processes to expedite new registrations and payments (discussed further in the following section).

KEY LESSON: Build Strong Foundations During Times of Stability

Experiences in responding to the socio-economic impacts of the COVID-19 pandemic highlight that expanding social protection systems during stable times has substantial benefits in terms of a country’s capacity to respond to shocks. To generate confidence in the social protection system for timely and large-scale shock response, policy makers and development partners should: ensure that social protection systems are embedded in legislation and policy; maximise coverage nationwide with the aim to achieve universal access to social protection; and invest in robust operational systems.

2.2 Expanding Social Protection to Prepare for and Respond to Shocks

During crises, regular social protection programmes should be maintained and can be expanded to respond to new needs. It is important that this response is inclusive of vulnerable and marginalised groups and supports sustainable outcomes for all covered.

Ensuring inclusive coverage

To reach all those affected by a crisis, particularly the most vulnerable, it is necessary to consider the overall combination and potential coverage of social protection programmes, as well as how programme design and implementation can affect access to benefits.

Social protection targeting typically focuses on income, demographic or social characteristics to identify beneficiaries. Eligibility criteria do not necessarily account for covariate risks such as climate change and conflict, nor overlap with crisis-affected populations. To maximise coverage of people affected by the pandemic, many countries were required to consider how combinations of programmes worked together and, where necessary, introduce new schemes for excluded groups. For example, the existing cash transfer programmes in Nigeria and Cabo Verde targeted mostly poor rural households, but the pandemic had severe impacts on informal workers, the self-employed and small businesses in urban areas. As such, both countries introduced a temporary scheme to extend coverage beyond those currently eligible for social assistance, for example, the Urban Cash Transfer Programme (UCTP) in Nigeria. Moreover, most countries around the world implemented several measures to support workers in the formal sector. Cabo Verde, for example, subsidised salaries by up to 35 per cent, suspended social security contributions for up to three months, and reduced qualifying periods for unemployment insurance.
Crisis-affected households or individuals can also be excluded from social protection because the data in single or social registries is not up-to-date and omits both existing and newly vulnerable people. Recognising this gap, Cambodia, Nigeria, and Cabo Verde introduced measures for rapid registration of new beneficiaries. Nigeria, for example, established a Rapid Response Register (RRR) linked to the National Social Registry to implement the UCTP. Cambodia adopted an on-demand registration process for the IDPoor registry that had been trialled prior to the crisis, and which involved working closely with communities and local government.\(^{17}\)

Inclusive and timely response can also be enhanced through expanding social registries or establishing contingency registries that pre-identify those who may be vulnerable to future crises but are not currently eligible for existing social protection schemes. Following the initial pandemic response, Cambodia continued to expand IDPoor to include the near poor and at-risk households, which enabled more than 1 million people affected by floods and inflation to benefit from cash transfers in late 2022.\(^{18}\) In Nepal, local governments in flood-prone areas surveyed the entire population to establish contingency registries, and registered households were supported to open bank accounts for potential future cash assistance, increasing rates of financial inclusion in the process.\(^{19}\)

Ultimately, social protection management information systems should aim to cover the entire population. In some cases, specific measures may be required to ensure inclusion of the most vulnerable or excluded groups, such as persons with disabilities or displaced populations. Following the onset of the pandemic, Cambodia established the national Disability Identification Mechanism, registering more than 240,000 people in the first ever national database of persons with disabilities. This process has increased access for persons with disabilities to both the COVID-19 cash transfer and to other forms of social protection and care programmes.\(^{20}\)

Using single or social registries to respond to crises also comes with potential trade-offs between the longer-term goals of expanding social protection and ensuring an inclusive response. In Nigeria, when expanding the NCTP and the Rapid Response Register (RRR) in response to the pandemic, officials prioritised minimising inclusion error during implementation over a “no-regrets” approach of rapid identification and delivery due to concerns about fraud and the focus on building national systems.\(^{21}\) The no-regrets approach emerges from the humanitarian principle of addressing human suffering independent of political, economic or other objectives.\(^{22}\) This trade-off highlights the need to build understanding of humanitarian principles and approaches among social protection policy makers and implementers, especially when responding to acute crises.

**KEY LESSON:**
*Leave No One Behind*

Following shocks, ensuring that social protection responses are timely, and that coverage is inclusive of vulnerable and marginalised groups, requires adopting specific approaches across several dimensions of programme design and implementation. In most cases, a combination of expansionary approaches across different social protection instruments will be needed, including introducing new programmes. In addition, social registries can be expanded with contingency registries that pre-identify those who may be vulnerable to future crises and measures adopted for rapid registration of new beneficiaries. Specific programmes and measures will be required to ensure inclusion of the most vulnerable and excluded groups such as people with disabilities. In crisis contexts, greater emphasis should be placed on minimising exclusion error than on reducing inclusion error.
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Sustainable outcomes
Support to people affected by crises can often be short-term and tends to prioritise basic food and access to critical services and material needs. Responding to the range of needs that are necessary for more sustained outcomes throughout the period of recovery requires more joined-up programming approaches. As discussed above, Cabo Verde, Nigeria and Cambodia all utilised and expanded national social registries as the basis for their social protection response. This meant that, in addition to the COVID-19 cash programmes, newly registered individuals were able to access other social protection and care services such as the Health Equity Fund in Cambodia and electricity and water subsidies and housing support in Cabo Verde.

Increasingly, integrating social protection with other sectoral programmes and services such as health, nutrition, education, and employment services is seen as an effective way to meet a more holistic range of needs for specific population groups. For example, Nepal, in response to the pandemic, implemented a cash plus programme including top-up payments to existing beneficiaries of the child grant and access to information and services for nutrition, health, and child protection through a combination of local government and NGO partners. While the cash component and information provision were implemented effectively, there were challenges in providing other services, especially for child protection, due to the low capacity of local partners and funding constraints. This demonstrates that effective service integration in crisis response requires substantial investment in policy coherence, coordination, and operational integration prior to a crisis.

At the same time, one of the main challenges in responding to crises is the trade-off between coverage and adequacy. In Nigeria, due to concerns about fiscal sustainability, the government prioritised horizontal expansion to reach greater numbers of people over vertical expansion to increase benefit levels. While this resulted in higher coverage, it potentially limited the sustainability of outcomes given that transfer values were generally inadequate to meet household needs.

KEY LESSON:
Create Lasting Benefits

As well as responding to people’s immediate needs, crisis response needs to promote recovery and more sustainable outcomes, especially for vulnerable groups. Experiences in responding to the COVID-19 pandemic highlight two approaches to provide a more holistic response. First, using national single or social registries can facilitate beneficiaries to access other social protection and care programmes such as health insurance. Second, social protection can be integrated with other sectoral programmes and services such as education, health, child protection and employment. At the same time, it is necessary to be transparent about the inevitable trade-offs between coverage and adequacy.

2.3 Using Parallel Responses to Complement Social Protection Coverage

Parallel interventions – whether delivered by humanitarian or state agencies – continue to play a necessary role in providing timely assistance to crisis-affected populations in line with humanitarian principles, especially in contexts where social protection coverage is low, delivery systems are under-developed, systems are compromised due to conflict, or certain groups such as refugees and internally displaced people (IDP) are excluded from social protection programmes.
Development and humanitarian agencies that provided post-pandemic assistance in Nigeria’s conflict-affected north-eastern states found that there were benefits to **aligning programme design and implementation with existing social protection schemes**, but that trade-offs may occur when trying to provide timely and adequate support to the population. Members of the Social Protection Working Group (SPWG) including FAO, UNDP, Save the Children and Mercy Corps, created linkages between the COVID-19 cash programmes for IDPs and the social protection system through the National Social Registry (NSR), which was used to support targeting and to ensure equitable coverage. However, delays resulted from an initial lack of clarity about what data was available, the absence of data sharing protocols, and the varied levels of coverage and capacity of the NSR in different locations. Since then, the government and development partners have consolidated several registries for IDPs into a single Unified Registry of Beneficiaries (URB) and developed interoperability between the URB, the RRR, and the NSR, providing a strong platform for more coordinated social protection and humanitarian programming. Some SPWG agencies also aligned benefit values and targeting criteria with the NCTP to avoid creating tension within communities. However, pre-crisis benefit levels were already very low, and other humanitarian agencies used their own targeting criteria to set higher benefit levels based on a food minimum expenditure basket.

In some cases, **government agencies may be well placed to implement emergency cash transfer programmes to fill gaps in social protection coverage**. In Ethiopia, for example, the Ministry of Women and Social Affairs (MOWSA) launched its first shock responsive cash transfer programme for IDPs to overcome rigidities and resource constraints within the Productive Safety Net Programme (PSNP). The MOWSA cash transfer had several advantages over UN- or NGO-implemented schemes including greater timeliness and lower administrative costs, which increased the potential to attract further donor funding. However, while the government programme was able to access certain sensitive areas of the country more easily than NGOs, the programme was not implementable in Tigray, where government services had been compromised by ongoing conflict.

**KEY LESSON:**

*Coordinate, Align, Harmonise*

Parallel interventions continue to play a vital role in meeting humanitarian needs, especially where social protection programmes are absent or weak. Recognising that cooperation with government will not always be appropriate, especially in conflict settings, different strategies can be taken to ensure that parallel interventions complement and potentially strengthen national social protection programmes. Ideally, data sharing protocols and mechanisms should be established between social protection and humanitarian registries prior to crises to facilitate coordinated targeting, as long as beneficiaries are not put at-risk. The design parameters of parallel interventions can be aligned with existing social protection programmes while recognising there may be trade-offs with providing adequate support. Development partners can also consider how to support government-led emergency cash programmes, where appropriate, in terms of access, timeliness, efficiency, and sustainability.
2.4 Leveraging Crises and Crisis Interventions to Expand Social Protection Systems

The pandemic revealed gaps and weaknesses in social protection systems but also created political momentum and practical opportunities to expand social protection. First, the unprecedented level of support to the post-pandemic response has generated further political momentum around expanding social protection systems and opening additional fiscal space. In Cambodia, the COVID-19 CTP was initially designed as a short-term response to the pandemic, but has been maintained now for nearly three years. While Cambodia was already working towards a more comprehensive package of social assistance measures prior to the pandemic, the COVID-19 CTP is planned to transition into the Family Package Policy, a consolidation of four social transfer schemes covering pregnant women and young children, youth with scholarships, the elderly, and people with disabilities, and plans to enhance service integration across social assistance, complementary programmes and other social services. In Cambodia, the COVID-19 CTP is planned to transition into the Family Package Policy, a consolidation of four social transfer schemes covering pregnant women and young children, youth with scholarships, the elderly, and people with disabilities, and plans to enhance service integration across social assistance, complementary programmes and other social services. In Cambodia, the COVID-19 CTP is planned to transition into the Family Package Policy, a consolidation of four social transfer schemes covering pregnant women and young children, youth with scholarships, the elderly, and people with disabilities, and plans to enhance service integration across social assistance, complementary programmes and other social services. In Cambodia, the COVID-19 CTP is planned to transition into the Family Package Policy, a consolidation of four social transfer schemes covering pregnant women and young children, youth with scholarships, the elderly, and people with disabilities, and plans to enhance service integration across social assistance, complementary programmes and other social services.30 In Cambodia, the COVID-19 CTP is planned to transition into the Family Package Policy, a consolidation of four social transfer schemes covering pregnant women and young children, youth with scholarships, the elderly, and people with disabilities, and plans to enhance service integration across social assistance, complementary programmes and other social services.30

In Nigeria, a high-level forum following the pandemic identified priority policy areas for reform within the social protection sector. The National Social Safety Net Coordination Office (NASSCO), responsible for social protection at the federal level, observed renewed commitment within high levels of government to further expand social protection.31 At the same time, expansion of the National Social Registry (NSR) has provided a foundation for this to happen.

Second, crises can also provide practical opportunities to expand social protection through integrating new beneficiaries into national registries and adapting the operating modalities of social protection programmes. An important step in this process is to ensure harmonisation between humanitarian and social protection registries. In Nigeria, interoperability between the National Social Registry (NSR) and humanitarian Unified Beneficiary Registry (UBR) has created opportunities for state agencies responsible for other schemes, such as health insurance, to identify and enrol new beneficiaries. In Ethiopia, with the pandemic compounding the effects of conflict, IDPs have been formally integrated into the Urban Productive Safety Net Programme (UPSNP) by modifying components of the registry and payroll systems. Since 2021, MOWSA and respective Regional Bureaus have reached over 200,000 IDPs and returnees, and UPSNP has integrated more than 600,000 IDPS into the social protection system.32

**KEY LESSON:**

*Seize the Moment, Think Long Term*

Crisis tend to reveal gaps and weaknesses in social protection systems but also provide opportunities to expand social protection systems through both political and operational avenues. Political momentum for expansion generated by crises can be leveraged through high-level dialogue and development or reform of strategies for expansion. At the same time, social protection regulations and operating procedures can be modified to extend access to excluded groups such as displaced populations, while crisis interventions and operational mechanisms can be designed to facilitate the transfer of beneficiaries of emergency assistance into social protection registries.
Endnotes

1. The SPaN Guidance Package is available here.
2. More information on the SP-PFM programme is available here. While most examples relate to the COVID-19 pandemic, other contexts, including more acute humanitarian crises, are integrated where appropriate.
5. The term “shock responsive” is used in a broad sense to mean the role that social protection can play in advance of, and in response to, covariate shocks for immediate, medium- and longer-term support, alongside other sectors.
9. This approach of developing and strengthening measures of social protection as a means of preventing crises, enabling recovery, and building resilience, is at the core of the ILO Employment and Decent Work for Peace and Resilience Recommendation, 2017 (No. 205). Link.
15. Ibid.
22. See the SPaN technical guidance (Section A2) for a discussion of the convergence between social protection and humanitarian approaches. Link.
27. Ibid.
29. SP-PFM (2021) Appendix 6, Ethiopia. Link; Key Informant Interviews.
32. SP-PFM (2021) Appendix 6, Ethiopia. Link; Key Informant Interviews.
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