

Social protection landscapes and perspectives

Comprehensive national reviews of the systems and reforms of ESCWA member countries

Template for authors







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ESCWA, an innovative catalyst for a stable, just and flourishing Arab region

## Mission

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Together, we work for a sustainable future for all.

## Social protection landscapes and perspectives

Comprehensive national reviews of the systems and reforms of ESCWA member countries

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Comprehensive national reviews of the systems and reforms of ESCWA member countries

## Preface

In recent years, Arab countries have undertaken, or initiated large-scale reforms aimed at adapting their social protection (SP) systems to the changing social, economic, and demographic conditions. Reflecting the considerable heterogeneity of the region, these reforms have been driven by varied objectives, notably, extending effective coverage to the most vulnerable and enhancing overall efficiency.

The COVID-19 pandemic and its socioeconomic repercussions have further highlighted two seemingly paradoxical aspects of SP systems in the region: on the one hand, the inability of existing arrangements to provide sufficient support to those who are not usually considered poor, but whose living conditions may rapidly deteriorate in the event of a shock (e.g. workers in non-standard contractual arrangements), yet on the other hand, the great ability of the said SP systems to adapt rapidly and scale up coverage.

These two contradictory aspects of SP systems in the Arab region were highlighted during the 2021 Arab Ministerial Forum on the Future of Social Protection in the Arab Region: Building a Vision for a Post COVID-19 Reality. The high-level deliberations and the resulting declaration catalysed further SP reforms and encouraged policymakers to share lessons learned.

Within this context, ESCWA has partnered with the International Policy Centre for Inclusive Growth (IPC-IG) to create a standard Template for drafting and publishing Comprehensive Country Profiles of National Social Protection and Relevant Reforms. The template in question not only provides policymakers with a detailed baseline for their respective SP systems in terms of design, delivery mechanisms, and organizational setup, but also charts out reform needs and available options vis-à-vis international best practices and provide a standardized basis for cross-country comparison and learning.

The main audience of the Template are policymakers and experts likely to be involved in drafting comprehensive national Social protection and reforms country profiles, most importantly, members of the Group of Experts on Social Protection Reform<sup>01</sup>. However, it may also be of value to a broader audience beyond those interested in mapping and appraising SP systems.

01. The Group of Experts on Social Protection Reform was formed based on the recommendation of the 12th session of the Commission for Social Development (Beirut, 8-9 October, 2019), and includes ESCWA member State senior government officials in charge of social protection.

iv

## Acknowledgements

This Template to produce comprehensive national social protection and reforms country profiles for ESCWA member States was conceived by the ESCWA Social Protection Team and devised by the International Policy Centre for Inclusive Growth (IPC-IG), in close collaboration with ESCWA. The IPC-IG team was led by Krista Joosep Alvarenga, Researcher, under the supervision of Fabio Veras Soares, Research Coordinator, IPC-IG. The Template was drafted by Marina Andrade, Isabela Franciscon, Krista Joosep Alvarenga, Alina Sara Czyzewski, Adewale Olowode Olushola, Camila Pereira, Julia Coimbra Borges, Beatriz Burattini, Maya Hammad, and Nicolo Bird. It was thoroughly reviewed by ESCWA Social Protection Team members: Marco Schaefer, George Azzi, Anton Bjork, Mona Fattah, Harald Braumann, and Xingyi Zhou, who provided the necessary guidance for its development.

We would like to acknowledge several toolkits, as the Template is in part informed by previous social protection and health systems appraisal templates, such as the Inter Agency Social Protection Assessment (ISPA) Core Diagnostic Instrument (CODI) for structure and specific questions, the ILO Assessment-based National Dialogue (ABND) Guide, including its Rapid Assessment Protocol (RAP) cost-estimation tool, and OECD Social Protection System Review (SPSR) for some equity and efficiency assessment indicators and references. In terms of the general approach towards author guidance, as well as the visual and structural layout, the template has benefitted from the Health Systems in Transition: template for authors of the European Observatory on Health Systems and Policies.

## Contents

| Prefa | ace  | iii   |
|-------|--|-------|
| Ackn  | owledgements   | iv    |
| Note  | s for authors  | xi    |
| Glos  | sary   | xxvi  |
| Abbr  | eviations and acronyms   | xxxii |
| 1.    | Country context  | 1     |
| 1.1   | Geographical and political overview  | 2     |
| 1.2   | Macroeconomic overview   | 3     |
| 1.3   | Demographic overview   | 5     |
| 1.4   | Labour market overview   | 8     |
| 1.5   | Poverty, inequality, and vulnerability   | 11    |
| 2.    | SP system overview and policy context  | 13    |
| 2.1   | Historic SP pathways   | 14    |
| 2.2   | SP policy, legal and regulatory frameworks   | 16    |
| 2.3   | Monitoring and evaluation (M&E) system framework                                   | 28    |
| 2.4   | Coverage by SP function  | 30    |
| 2.5   | Public financing and expenditure   | 37    |
| 2.6   | Institutional structure  | 46    |
| 3.    | SP programme mapping, design, implementation, and organizational setup             | 55    |
| 3.1   | SP programmes: inventory, coverage, expenditure, and integration across programmes | 56    |
| 3.2   | Design of main SP programmes   | 78    |
| 3.3   | Delivery mechanisms of main SP systems   | 94    |
| 3.4   | Financing sources  | 112   |
| 3.5   | Organizational setup   | 113   |
| 4.    | Current and future reform trajectories and policy recommendations                  | 117   |
| 4.1   | Current reform trajectories  | 118   |
| 4.2   | Summary of appraisals and policy recommendations                                   | 119   |

| 4.3   | Costing policy recommendations/options 1   |   |     |  |
|-------|--|---|-----|--|
| 4.4   | Affordability of implementing policy options and possible resource mobilization strategies |   |     |  |
| 4.5   | Overvi   | ew of future reform needs and main takeaways  | 137 |  |
| Refe  | erences  |   | 138 |  |
| Ann   | exes   |   | 143 |  |
| Anne  | ex I. Mo   | del country profile outline   |     |  |
| Anne  | ex II. Pro   | ogramme inventory   |     |  |
| Anne  | ex III. So   | ocial assistance target population and benefit payment  |     |  |
| Anne  | ex IV. So  | ocial insurance target population and benefit payment   |     |  |
| Anne  | ex V. So   | cial assistance programme coverage  |     |  |
| Anne  | ex VI. So  | ocial insurance and labour market programme coverage  |     |  |
| Anne  | ex VII. E  | xpenditure  |     |  |
| List  | of table   | es<br>S   |     |  |
| Table | ə <b>1.1</b>   | Economic indicators; selected years (example similar to Bahrain)  | 4   |  |
| Table | e <b>1.2</b>   | Trends in population/demographic indicators; selected years (example based on Bahrain)  | 7   |  |
| Table | ə <b>2.1</b>   | Year of signature or ratification of/accession to relevant international instruments (example of Algeria)   | 17  |  |
| Table | e <b>2.2</b>   | Key extracts of SP national legal and regulatory frameworks (example of Egypt)  | 20  |  |
| Table | e 2.3  | Functions (as listed in SDG Indicators 1.3.1, 3.8.1, etc.) explicitly covered in national SP legal framework (example of Bahrain)   | 22  |  |
| Table | e 2.4  | SP strategy summary – (i) countries that mention SP in<br>development strategy and/or in other relevant documents (Qatar<br>Second National Development Strategy example) | 25  |  |
| Table | e <b>2.</b> 5  | SP strategy — (ii) countries with a specific strategy for SP (example of Jordan)  | 27  |  |
| Table | e 2.6  | Effective coverage (function indicators)  | 31  |  |
| Table | e 2.7  | National Actors in SP and their roles and responsibilities (example of Libya)   | 48  |  |

| Table 2.8    | Summary of coordination structures and practices (example of Morocco)   | 51  |
|--------------|---|-----|
| Table 2.9    | Levels of cooperation (explanatory table; not to be reproduced by country-report authors)   | 52  |
| Table 2.10   | Control and accountability mechanisms summary (example of India)  | 53  |
| Table 2.11   | Appraisal of human resources  | 54  |
| Table 3.1    | Annex II. Programme inventory   | 59  |
| Table 3.2    | Annex III. Social assistance target population and benefit payment  | 60  |
| Table 3.3    | Annex IV. Social insurance target population and benefit payment  | 61  |
| Table 3.4    | Annex V. Social assistance programme coverage   | 64  |
| Table 3.5    | Annex VI. Social insurance and labour market programme coverage   | 66  |
| Table 3.6    | Annex VII. Expenditure  | 71  |
| Table 4.1    | Appraisal summary template  | 121 |
| Table 4.2    | Application of SP basic costing tool in costing policy recommendations  | 122 |
| Table 4.3    | Translation of policy recommendation into policy options or scenarios   | 123 |
| Table 4.4    | Bundling low and high policy scenario packages  | 123 |
| List of figu | res   |     |
| Figure 1.1   | Share of manufacturing sector in GDP; selected years (example of Bahrain)   | 5   |
| Figure 1.2   | Population pyramid, Morocco example in 2000 (left) and 2020 (right)   | 8   |
| Figure 1.3   | Proportion of employed population below poverty line (SDG<br>indicator 1.1.1) vs. Public SP expenditure (including health)<br>per capita (PPP Intl\$); graph displaying values for all Arab<br>countries, in addition to world and some regional averages; latest<br>available year | 11  |
| Figure 1.4   | Human Development Index (HDI) vs. Public SP expenditure<br>(including health) per capita (PPP Intl\$); latest available year  | 12  |

- Figure 2.1 Percentage of total population covered by at least one SP benefit 33 (effective coverage, SDG indicator 1.3.1, point a); bar chart (or map) displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.2 Percentage of total population covered by at least one SP benefit; 33 graph displaying values for all Arab countries, in addition to world and some regional averages; earliest available year vs. latest available year
- Figure 2.3 Percentage of children receiving child and family cash benefits 34 (SDG indicator 1.3.1, point b); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.4 Percentage of persons with severe disabilities receiving disability 34 cash benefits (contributory vs. non-contributory, if available) (SDG indicator 1.3.1, point d); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.5 Percentage of women giving birth covered by maternity benefits 35 (contributory vs. non-contributory, if available, SDG indicator 1.3.1, point c); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.6 Percentage of unemployed receiving unemployment cash benefits 35 (SDG indicator 1.3.1, point e); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.7 Percentage of workers covered for employment injury (SDG 36 indicator 1.3.1, point f); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.8 Percentage of persons above statutory retirement age receiving a 36 pension (SDG indicator 1.3.1, point g); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year
- Figure 2.9 Percentage of working age population or economically active 37 population (EAP) contributing to/covered by a pension scheme; bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year; by gender if possible
- Figure 2.10 Ivory Coast: share of budget allocated to SP vis-à-vis other 39 sectors in 2022 budget

| Figure 2.11 | Template graph for shares of sources of revenue for SP  | 41 |
|-------------|---|----|
| Figure 2.12 | Public SP expenditure (including health) per capita vs. GDP per capita (PPP Intl\$)   | 43 |
| Figure 2.13 | SP Spending Prioritization: Public SP expenditure (including health) per capita (percentage of GDP) in 2010-11 vs. 2020 (or latest available year)  | 43 |
| Figure 2.14 | SP Spending Prioritization: Public SP expenditure (including health) (percentage of GGE) vs. GDP per capita (PPP Intl\$)  | 44 |
| Figure 2.15 | SP Spending Prioritization: Public SP expenditure on children<br>(excluding health) per child (aged 0-14) (percentage of GDP) vs.<br>share of children (aged 0-14) of total population  | 45 |
| Figure 2.16 | SP Spending Prioritization: Public SP expenditure on working<br>age adults (excluding health) per adult (aged 15-59 or 15-64)<br>(percentage of GDP) vs. share of working age adults (aged 15-59<br>or 15-64) in total population           | 45 |
| Figure 2.17 | SP Spending Prioritization: Public SP expenditure on elderly<br>(excluding health) per elder (above statutory retirement age,<br>percentage of GDP) vs. share of elderly population (above<br>statutory retirement age) of total population | 46 |
| Figure 2.18 | Organogram of Main National Actors involved in SP (example of Libya)  | 48 |
| Figure 3.1  | Integration of delivery systems across SP programmes or services (illustrative examples)  | 75 |
| Figure 3.2  | Data Integration Arrangement through a national social registry (example of Chile)  | 77 |
| Figure 3.3  | Coverage of beneficiaries and expenditure for breadwinner-loss allowance in Uzbekistan, 2015-18   | 82 |
| Figure 3.4  | Legal replacement rate for disability   | 85 |
| Figure 3.5  | Legal replacement rate for maternity leave  | 86 |
| Figure 3.6  | Average net pension replacement rate at retirement in public pension schemes  | 86 |
| Figure 3.7  | Benefit incidence per income quintile from the Bolsa Família programme of Brazil  | 92 |
| Figure 3.8  | Most effective poverty reduction programme (PKH) of Indonesia   | 94 |
| Figure 3.9  | Common phases in SP delivery chains   | 94 |

| Figure 3.10  | Example of process mapping: intake, registration, and<br>assessment of needs and conditions in the Integrated Social<br>Assistance System (ISAS) of Türkiye   | 95  |
|--------------|---|-----|
| Figure 3.11  | Programme information available through outreach  | 97  |
| Figure 3.12  | Intake modalities   | 98  |
| Figure 3.13  | Hints to appraise identification systems  | 100 |
| Figure 3.14  | Common M&E statistics   | 107 |
| Figure 3.15  | A model of organizational setup of an SP programme  | 115 |
| Figure 3.16  | Some typical functions of programme MIS   | 115 |
| Figure 4.1   | Structure of appraisal table  | 119 |
| Figure 4.2   | Common policy gap, design, implementation, and administration issues  | 120 |
| Figure 4.3   | Structure of Social Protection Basic Costing Tool   | 124 |
| Figure 4.4   | Template of 'benefits' sheet in Social Protection Basic<br>Costing Tool   | 125 |
| Figure 4.5   | Cost projection of low and high policy scenarios (percentage of GDP)  | 128 |
| Figure 4.6   | Cost projection of low and high policy scenarios (percentage of government expenditure)   | 129 |
| Figure 4.7   | Fiscal space (percentage of GDP) at status quo, low and high policy scenarios   | 129 |
| Figure 4.8   | Indicators of SP financing  | 136 |
| List of boxe | esta de la construcción de la const<br>Esta de la construcción de la constr |     |
| Box 2.1      | Key messages  | 14  |
| Box 3.1      | Key messages  | 56  |

Box 4.1Key messages and policy recommendations118

Comprehensive national reviews of the systems and reforms of ESCWA member countries

## **Notes for authors**

### **Template aim**

This self-explanatory Template provides high-level officials, SP expert teams and departments of relevant ministries in ESCWA member States with hands-on guidance, enabling them to produce Comprehensive National Social Protection and Reforms Country Profiles. These serve as a knowledge foundation, establishing a coherent overview of SP systems in Arab countries, and helping policymakers identify reform options.

Furthermore, the country profiles promote peer-learning within the region and beyond, in addition to providing member-State Governments with a baseline of key SP features against which to measure progress. The wealth of information collected also facilitates periodic reporting by countries on their fulfilment of international commitments.

The Template guides writers in mapping out and taking stock of the SP system. Section 1 includes a number of indicators relating to the demographic and socioeconomic situation in the country. In section 2, the public policy and regulatory context is appraised. Section 3 focuses first on mapping out all SP programmes and secondly on taking an in-depth look at the design, delivery mechanisms, and organizational setup of selected key programmes. Section 4 provides tools for costing some of the policy options from previous sections and outlines recommendations and reform options.

### Team of authors

As explained further below, a Country Profile Report (CPR) will be primarily written by a team of authors as per the template, in close collaboration with ESCWA technical editors. The team of authors would ideally consist of a high-level government representative (government author) and a local collaborator.

The government author is expected to be knowledgeable about SP systems in the country, while the local collaborator can be contracted by ESCWA from a research organization, academia, or a consulting firm, and is expected to have solid knowledge and experience of social policy. He or she would be assisted by researchers having various research skills, ideally from the same organization.

### **Role of authors**

The authors should adhere to the structure, writing instructions, and requirements stipulated by the Template. They would jointly manage the deadlines for submitting the draft and final versions of the CPR.

The respective roles of the government author and the local collaborator are outlined below:

- The Government author:
  - Ensures that the data and information from various government sources as required by the Template are made available.
  - Facilitates communication between the local collaborator and relevant stakeholders.
  - Provides overall guidance and facilitates the overall process from the government side.
- The local collaborator:
  - Takes on the actual writing of the draft CPR in line with the Template and functions as the focal point of ESCWA.

Assembles a team of co-authors approved by the concerned ministry and ESCWA, which would ideally comprise:

- Researcher with qualitative skills:
  - > Conducts qualitative data collection and literature review.
  - > Engages in drafting the CPR.
- Researcher with quantitative skills:
  - > Conducts quantitative data collection.
  - > Engages in producing figures.
- Ensures that the relevant data and information necessary for drafting the CPR are collected.

Coordinates with the government author and requests data and information as necessary via government entities.

• Ensures that the word limit is not exceeded and that the CPR is finalized within the set timeline, which should not exceed 12 months.

### **Role of technical editors**

The ESCWA Social Protection Team (hereafter called "technical editors") act as technical editors,<sup>02</sup> undertaking the following activities/roles:

- Identifying and proposing a local collaborator, in close collaboration with the government.
- Providing authors with the Template and associated documents/tools, including:
  - Associated figures and annexes, comprising annex tables and standard figures.
  - SP Programme Basic Costing Tool for use in costing policy recommendations (as needed/relevant).
- Providing technical guidance, in particular:
  - Responding to questions from the local collaborator, e.g. on whether to include non-essential insertions.
  - Reviewing and editing drafts, as well as providing feedback and further technical guidance.
  - Scheduling validation meetings based on the agreed upon timeline to review the draft and final versions of the CPR.
  - If required, managing and coordinating external review processes.

<sup>02.</sup> In this context, the term "editors" refers to technical editing of the various drafts, not to language or copy editing of final drafts.

- Organizing key events, including:
  - A national inception workshop to brief the government and local collaborator on requirements for preparing and drafting the CPR, including the drafting process timeline and deadlines.
- A launch conference to announce the final CPR.

### Authorship policy

The CPR authorship policy is based on international academic norms. Its objective is to give credit to all those who make substantive writing or editing contributions to the report. Generally, first authorship would be held by the Government author(s), followed by other authors and co-authors who have written parts of the CPR, and finally by the technical editors.

### Writing instructions

Below are key explanations of how the Template is built and CPRs are written:

In this Template, everything that relates directly to the content of the CPR is placed on the **left side** of the page, including the **'what'**, i.e. the type of information that should be included in each subsection.

The **right side** of the page provides the **'how'**, i.e. further information and instructions on indicators, calculations, explanations of concepts, examples, good-practice instances, and suggested data sources.

Explanatory text, tips, guidance, indicators, data sources would be found on the right of the Template pages.

Information on the right side would mostly not be reproduced in the CPRs.

Note: When writing the CPR, authors should not divide pages into two columns as is in the Template.

#### **CPR structure and inputs**

When drafting the CPRs, authors are requested to follow the detailed structure set out in sections 1 to 4 of the Template, as well as the model Country Profile outline (see annex I). However, depending on the national context or the programme in focus, some aspects of the Template may not be applicable. In these cases, authors are asked to specify in the draft report why a particular aspect is not relevant. Furthermore, it may be necessary to deviate partially from the set-out structure (see examples to the right). Authors should discuss these cases with the technical editors. Many aspects included in section 3 pertain specifically to poverty-targeted social assistance programmes (for instance, aspects related to proxy means testing (PMT)). Naturally, such aspects are not relevant to consider in the case of, for example, social insurance schemes or universal social assistance programmes.

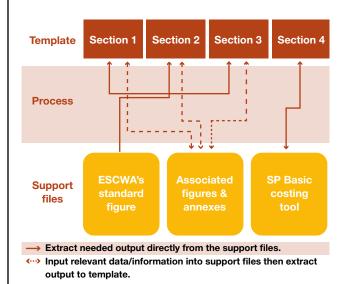
In section 3, authors are instructed to detail and discuss a variety of aspects on a programme-byprogramme basis. However, in practice, two or more programmes may be integrated such that they share the same design features, delivery Associated figures and annexes: In sections 1, 2, and 3, authors are asked to use the Excel file associated figures and annexes to collect information on the features and expenditures of SP programmes.

Authors should first insert this information in the relevant Excel sheet and, where applicable, make the necessary calculations. Thereafter, the filledout tables or generated figures should be copypasted into the CPR. Further explanations are provided within associated figures and annexes.

**Social Protection Basic Costing Tool:** 

In section 4, authors are guided to use the Social Protection Basic Costing Tool to estimate costs of recommended SP policy scenarios as a proportion to GDP and total government expenditure. In addition to guidance provided in section 4 and in the Tool itself, the technical editors can provide further support to authors in using the Tool. mechanisms, funding sources, or organizational setup. For instance, a country may have a social registry used to target beneficiaries of multiple social assistance programmes. In such cases, authors should not repeat the same information under each programme; instead, they could discuss the relevant aspects under the first programme in focus, and then refer to them as needed when discussing other programmes. Alternatively, if it appears more suitable given the specific context, authors could discuss the integrated features in section 3.1.4 (Integration across programme) and refer to them under each relevant programme.

The Template has seven annexes. Annex I, which presents a Model Country Profile Outline, is provided at the end of this Template document, while the remaining six are provided in an associated figures and annexes Excel document (explained below).



The associated figures and annexes and the Social Protection Basic Costing Tool both provide further guidance on how to fill in the various tables and worksheets.

References within the Template to the associated figures and annexes and the Social Protection Basic Costing Tools are in dark red to better distinguish them.

The ESCWA technical editors will provide the co-authors with the two mentioned Excel Tools.

#### Key messages

At the beginning of each of the four sections of the CPR, write into a small standardized 'key messages box' 5-6 bullet points with key messages from that section. For sections 2 and 3, up to two key messages should concern shock responsiveness.



**OUTPUT:** Descriptions, provided to summarise the content, are to be inserted under the subsection.

| ł | Box          |  |
|---|--------------|--|
|   | Key messages |  |
|   | 1.           |  |
|   | 2.           |  |
|   | 3.           |  |
|   |              |  |
|   |              |  |

#### Essential versus non-essential insertions

This icon indicates that the insertion is essential and should be included in the CPR unless it is inapplicable to the national context or to programme in focus (see above).



This icon indicates that the insertion is non-essential and should be included only if data and information are available, if they are relevant to the SP system in focus, and if space allows. Such insertions are highlighted in pink. It is important that the authors include the 'essential' insertions in the report. When writing the report, authors should not reproduce the icons, for they are only meant for the organization of the Template.

If data are available, the insertion should be included if the information is pertinent and reliable, and taking into consideration the availability of time to undertake the appraisal.

#### Word limits

The CPR needs to remain within the limit of 36,000 words, including references, annexes, boxes, tables, etc. Below are suggested word limits for each section. Further suggested limits have been added for some subsections.

Authors should constantly check back on the number of words in the report to stay within the limit of 36,000 words. Follow guidance on word limit for each section.

| Section   | Word limit |
|---|------------|
| Preface (preliminary pages,<br>executive summary, and<br>glossary)                          | 3,500      |
| 1. Country context  | 2,500      |
| 2. SP system overview and policy context  | 8,000      |
| 3. SP programme mapping,<br>design, implementation<br>features, and organizational<br>setup | 13,000     |
| 4. Current and future reform trajectories and policy recommendations                        | 6,000      |
| Annexes, references   | 3,000      |
| Total word count  | 36,000     |

#### Appraisals

Appraisal refers to an assessment of a specific topic relevant to SP, based on steps to be taken or questions to be answered. It can be further measured against good practice or examples from around the world. These are shown in pink boxes, and provide co-authors with a notion about what could be achieved or recommended vis-à-vis the issue at hand.

Special attention is given to shock-responsive social protection (SRSP), and under sections 2 and 3 specific questions are included regarding shock responsiveness of the issue at hand.



Shock responsiveness appraisals are indicated by this symbol.

Often, further instructions are given on the right side for authors to undertake the appraisal.

Good practice indicators or measures, against which the aspect under appraisal can be assessed, are provided in a yellow box on the right.

#### Examples and glossary

The Template includes a glossary and several examples that serve as guiding references for authors in the writing process. The Glossary is denoted by a brick orange colour to remind authors to check back to it. In the glossary, underlined text indicates that there is a separate entry for the term or concept. Further examples are provided for authors, mostly on the right. They are denoted by [Ex] and are there only to guide understanding of the subject matter, and provide authors with potential language and aspects they should consider when appraising a certain point.

The Glossary has been added to the Template to provide definitions of some technical or discussed terms. Hovering over the word and clicking the link takes the author to the Glossary.

#### System level versus programme level

#### Section 2 of the Template focuses mainly on the system level, whereas section 3 discusses mainly the programme level.

System level refers to the broader overarching structure. Therefore, section 2 has a stronger focus on policy roles and responsibilities (as opposed to programme level, which is focused on implementation and administrative roles and responsibilities).

#### Methodology and calculations

Guidance on methodology and calculations is provided on the right side of the Template. Further instructions on how to carry out certain calculations are provided in the associated figures and annexes. When doing calculations or following a methodology, avoid using data from different sources as definitions, coverage, and methodologies used may differ. Using more than one source may jeopardize comparability of indicators and trends over time.

Ideally, data on the same country or region should be for the same year, especially when comparing SP expenditure to overall public expenditure or per capita GDP. If population data for the same year are not available, try to use projections for that year or estimates from other years and add a disclaimer about this limitation.

If data from different sources need to be used, indicate this in a disclaimer.

#### Indicators and further suggested data sources

A set of indicators and their data sources are proposed throughout the Template. Some allow doing cross-country comparisons, as they are derived from the same sources and based on the same methodology and data.

#### **Data sources**

When drafting the CPR, authors are expected to rely on a variety of sources. Some data and information may be publicly available, for instance on websites or in annual reports of government ministries, or agencies. However, it is critical that authors collaborate closely with the Government to access additional data and information as needed.

In addition, authors are encouraged to undertake key informant interviews (KIIs) with relevant stakeholders, who may include, but are not limited to, policymakers, programme administrators, and academics.

Often, the Template indicates where certain information can be found. However, these are merely suggestions.

The charts for cross-country comparisons will be provided by the ESCWA technical editors. To know which ones, see "Standard tables, figures, and annexes" below.

#### **Cross-referenced tables and figures**

Tables and figures are denoted by bold black colour. Hover over the title/figure and an in-text link to the table will appear.

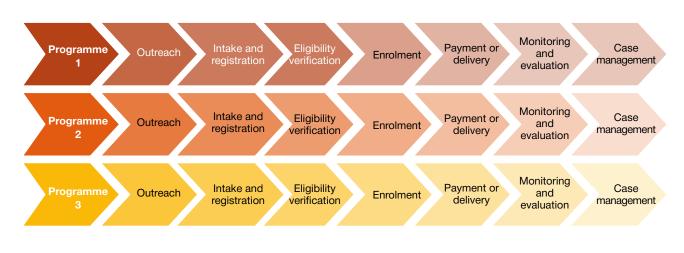
### Tables and figures are cross-referenced and denoted by bold black colour like in table 1.

If authors wish to use the cross-referencing feature in the CPR, use the Word Document tool under references cross referencing.

#### **Developing storyboards (in Miro)**

Section 2 has an organogram and section 3 has two types of charts that should be edited for each CPR. Authors can use Miro storyboards to create the organogram and various types of charts. Simply create your own Miro account by clicking this link.

Templates for the organogram and charts can be found through links in each related section. Authors can simply copy-paste the templates into their own Miro accounts to edit them.



#### **Recommendations, costing, and conclusions**

In section 4.2, authors are asked to summarise general system-level and programme-level appraisals in table 4.1. This table also gives guidance on how to draft policy recommendations based on the findings of the appraisals. Recommendations regarding introduction, expansion, or design adjustments of non-contributory schemes are subjected to a costing exercise in section 4.3. Affordability of the recommendations provided by the authors is to be analysed in section 4.4. In section 4.5, the most pressing challenges facing the SP system of the country are briefly revisited, along with recommendations and possible resource mobilization strategies that can be adopted by governments to finance them.

#### Standard tables, figures, and annexes

The Template for national authors contains several standardised tables, annexes, and figures. The standard tables and figures are listed below. Some of the figures will be provided by the ESCWA technical editors, while others are to be filled by the authors. For all monetary amounts, the currency is usually the Local Currency Unit (LCU). When monetary amounts need to be expressed in Intl\$, they should be calculated in Purchasing Power Parity (PPP).

Symbol used to indicate figures provided by ESCWA SP Team.

| S | ection | Standard tables, figures, and annexes  | Responsibility |
|---|--------|--|----------------|
|   |        | Section 1  |                |
|   | 1.2    | Table 1.1Economic indicators; selected years(example similar to Bahrain)                                   | Authors        |
|   | 1.2    | <b>Figure 1.1</b> Share of manufacturing sector in GDP; selected years (example of Bahrain)                | Authors        |
|   | 1.3    | Table 1.2 Trends in population/demographic           indicators; selected years (example based on Bahrain) | Authors        |
|   | 1.3    | Figure 1.2 Population pyramid, Morocco example in 2000 (left) and 2020 (right)                             | Authors        |

xix

| s          | Section | Standard tables, figures, and annexes  | Responsibility |
|------------|---------|--|----------------|
|            |         | Section 1  |                |
|            | 1.4     | <b>Figure 1.3</b> Proportion of employed population<br>below poverty line (SDG indicator 1.1.1) vs. Public<br>SP expenditure (including health) per capita<br>(PPP Intl\$); graph displaying values for all Arab<br>countries, in addition to world and some regional<br>averages; latest available year | ESCWA SP team  |
|            | 1.5     | <b>Figure 1.4</b> Human Development Index (HDI) vs.<br>Public SP expenditure (including health) per capita<br>(PPP Intl\$); latest available year  | ESCWA SP team  |
|            | 1       | Section 2  |                |
|            | 2.2.1   | Table 2.1 Year of signature or ratification of/accession to relevant international instruments(example of Algeria)   | Authors        |
|            | 2.2.2   | Table 2.2 Key extracts of SP national legal andregulatory frameworks (example of Egypt)  | Authors        |
|            | 2.2.2   | Table 2.3 Functions (as listed in SDG Indicators1.3.1, 3.8.1, etc.) explicitly covered in national SPlegal framework (example of Bahrain)  | Authors        |
| Subsection | 2.2.3   | <b>Table 2.4</b> SP strategy summary – (i) countries that<br>mention SP in development strategy and/or in<br>other relevant documents (Qatar Second National<br>Development Strategy example)  | Authors        |
| งี         | 2.2.3   | Table 2.5 SP strategy — (ii) countries with aspecific strategy for SP (example of Jordan)  | Authors        |
|            | 2.4     | Table 2.6 Effective coverage (function indicators)   | Authors        |
|            | 2.4     | <b>Figure 2.1</b> Percentage of total population covered<br>by at least one SP benefit (effective coverage,<br>SDG indicator 1.3.1, point a); bar chart (or map)<br>displaying values for all Arab countries, in addition<br>to world and some regional averages; latest<br>available year               | ESCWA SP team  |

| ٤          | Section | Standard tables, figures, and annexes   | Responsibility |
|------------|---------|---|----------------|
|            |         | Section 2   |                |
|            | 2.4     | <b>Figure 2.2</b> Percentage of total population covered<br>by at least one SP benefit; graph displaying values<br>for all Arab countries, in addition to world and<br>some regional averages; earliest available year vs.<br>latest available year   | ESCWA SP team  |
|            | 2.4     | <b>Figure 2.3</b> Percentage of children receiving child<br>and family cash benefits (SDG indicator 1.3.1,<br>point b); bar chart displaying values for all Arab<br>countries, in addition to world and some regional<br>averages; latest available year  | ESCWA SP team  |
| tion       | 2.4     | <b>Figure 2.4</b> Percentage of persons with severe<br>disabilities receiving disability cash benefits<br>(contributory vs. non-contributory, if available)<br>(SDG indicator 1.3.1, point d); bar chart displaying<br>values for all Arab countries, in addition to world<br>and some regional averages; latest available year | ESCWA SP team  |
| Subsection | 2.4     | <b>Figure 2.5</b> Percentage of women giving birth<br>covered by maternity benefits (contributory vs.<br>non-contributory, if available, SDG indicator 1.3.1,<br>point c); bar chart displaying values for all Arab<br>countries, in addition to world and some regional<br>averages; latest available year                     | ESCWA SP team  |
|            | 2.4     | <b>Figure 2.6</b> Percentage of unemployed receiving<br>unemployment cash benefits (SDG indicator 1.3.1,<br>point e); bar chart displaying values for all Arab<br>countries, in addition to world and some regional<br>averages; latest available year  | ESCWA SP team  |
|            | 2.4     | <b>Figure 2.7</b> Percentage of workers covered for<br>employment injury (SDG indicator 1.3.1, point f);<br>bar chart displaying values for all Arab countries,<br>in addition to world and some regional averages;<br>latest available year  | ESCWA SP team  |

xxii

| s          | ection | Standard tables, figures, and annexes  | Responsibility |
|------------|--------|--|----------------|
|            |        | Section 2  |                |
|            | 2.4    | <b>Figure 2.8</b> Percentage of persons above statutory<br>retirement age receiving a pension (SDG indicator<br>1.3.1, point g); bar chart displaying values for all<br>Arab countries, in addition to world and some<br>regional averages; latest available year  | ESCWA SP team  |
|            | 2.4    | <b>Figure 2.9</b> Percentage of working age population<br>or economically active population (EAP)<br>contributing to/covered by a pension scheme;<br>bar chart displaying values for all Arab countries,<br>in addition to world and some regional averages;<br>latest available year; by gender if possible | ESCWA SP team  |
|            | 2.5.1  | <b>Figure 2.10</b> Ivory Coast: share of budget allocated to SP vis-à-vis other sectors in 2022 budget   | Authors        |
| tion       | 2.5.2  | Figure 2.11 Template graph for shares of sources of revenue for SP   | Authors        |
| Subsection | 2.5.3  | <b>Figure 2.12</b> Public SP expenditure (including health) per capita vs. GDP per capita (PPP Intl\$)   | ESCWA SP team  |
|            | 2.5.3  | <b>Figure 2.13</b> Public SP expenditure (including health) per capita (percentage of GDP) in 2010-11 vs. 2020 (or latest available year)  | ESCWA SP team  |
|            | 2.5.3  | <b>Figure 2.14</b> SP Spending Prioritization: Public SP expenditure (including health) (percentage of GGE) vs. GDP per capita (PPP Intl\$)  | ESCWA SP team  |
|            | 2.5.3  | <b>Figure 2.15</b> Public SP expenditure on children<br>(excluding health) per child (aged 0-14) (percentage<br>of GDP) vs. share of children (aged 0-14) of<br>total population   | ESCWA SP team  |

| Section    |       | Standard tables, figures, and annexes   | Responsibility |
|------------|-------|---|----------------|
|            |       | Section 2   |                |
|            | 2.5.3 | <b>Figure 2.16</b> Public SP expenditure on working<br>age adults (excluding health) per adult (aged<br>15-59 or 15-64) (percentage of GDP) vs. share<br>of working age adults (aged 15-59 or 15-64) in<br>total population           | ESCWA SP team  |
| uo         | 2.5.3 | <b>Figure 2.17</b> Public SP expenditure on elderly<br>(excluding health) per elder (above statutory<br>retirement age, percentage of GDP) vs. share of<br>elderly population (above statutory retirement age)<br>of total population | ESCWA SP team  |
| Subsection | 2.6.1 | <b>Figure 2.18</b> Organogram of Main National Actors involved in SP (example of Libya)   | Authors        |
|            | 2.6.1 | <b>Table 2.7</b> National Actors in SP and their roles and responsibilities (example of Libya)  | Authors        |
|            | 2.6.2 | Table 2.8 Summary of coordination structures and practices (example of Morocco)   | Authors        |
|            | 2.6.3 | Table 2.10Control and accountability mechanismssummary (example of India)   | Authors        |
|            | 2.6.4 | Table 2.11 Appraisal of human resources   | Authors        |
|            |       | Section 3   |                |
|            | 3.1.1 | Annex II Programme inventory  | Authors        |
|            | 3.1.1 | Annex III Social assistance target population and benefit payment   | Authors        |
| ction      | 3.1.1 | Annex IV Social insurance target population and benefit payment   | Authors        |
| Subsection | 3.1.2 | Annex V Social assistance programme coverage  | Authors        |
|            | 3.1.2 | <b>Annex VI</b> Social insurance and labour market programme coverage   | Authors        |
|            | 3.1.3 | Annex VII Expenditure   | Authors        |

xxiv

| Section    |        | Standard tables, figures, and annexes   | Responsibility |
|------------|--------|---|----------------|
|            |        | Section 3   |                |
|            | 3.1.4  | <b>Figure 3.1</b> Integration of delivery systems across<br>SP programmes or services (illustrative examples)   | Authors        |
|            | 3.1.4  | <b>Figure 3.2</b> Data Integration Arrangement through a national social registry (example of Chile)  | Authors        |
|            | 3.2.2  | <b>Figure 3.3</b> Coverage of beneficiaries and expenditure for breadwinner-loss allowance in Uzbekistan, 2015-18   | Authors        |
|            | 3.2.3  | Figure 3.4 Legal replacement rate for disability  | Authors        |
|            | 3.2.3  | Figure 3.5 Legal replacement rate for maternity leave   | Authors        |
| Subsection | 3.2.3  | <b>Figure 3.6</b> Average net pension replacement rate at retirement in public pension schemes  | Authors        |
|            | 3.2.9  | Figure 3.7 Benefit incidence per income quintile from the Bolsa Família programme of Brazil   | Authors        |
|            | 3.2.10 | Figure 3.8 Most effective poverty reduction programme (PKH) of Indonesia  | Authors        |
|            | 3.3    | Figure 3.9 Common phases in SP delivery chains  | Authors        |
|            | 3.3.1  | <b>Figure 3.10</b> Example of process mapping: intake,<br>registration, and assessment of needs and<br>conditions in the Integrated Social Assistance<br>System (ISAS) of | Authors        |
|            | 3.5    | <b>Figure 3.15</b> A model of organizational setup of an SP programme   | Authors        |
|            |        | Section 4   |                |
|            | 4      | Box 4.1 Key messages and policy recommendations   | Authors        |
| Subsection | 4.2    | Figure 4.1 Structure of appraisal table   | Authors        |
|            | 4.2    | Table 4.1 Appraisal summary template  | Authors        |
|            | 4.3.1  | Table 4.2Application of SP basic costing tool incosting policy recommendations  | ESCWA SP team  |

| Section    |       | Standard tables, figures, and annexes  | Responsibility |  |  |
|------------|-------|--|----------------|--|--|
| Section 4  |       |  |                |  |  |
| Subsection | 4.3.1 | Table 4.3 Translation of policy recommendation           into policy options or scenarios          | ESCWA SP team  |  |  |
|            | 4.3.1 | Table 4.4 Bundling low and high policy scenariopackages  | ESCWA SP team  |  |  |
|            | 4.3.2 | Figure 4.3 Structure of Social Protection Basic Costing Tool                                       | ESCWA SP team  |  |  |
|            | 4.3.2 | Figure 4.4 Template of 'benefits' sheet in Social Protection Basic Costing Tool                    | ESCWA SP team  |  |  |
|            | 4.3.2 | Figure 4.5 Cost projection of low and high policy scenarios (percentage of GDP)                    | ESCWA SP team  |  |  |
|            | 4.3.2 | Figure 4.6 Cost projection of low and high policy scenarios (percentage of government expenditure) | ESCWA SP team  |  |  |
|            | 4.3.2 | <b>Figure 4.7</b> Fiscal space (percentage of GDP) at status quo, low and high policy scenarios    | ESCWA SP team  |  |  |

\* If data are available for the country.

## Glossary

- Active labour-market policies: Policies aiming to increase opportunities for those seeking employment and increase human capital. They may include, for example, vocational training, assistance in job search, wage subsidies, public works, and support to micro-enterprises or independent workers. **Beneficiaries:** Individuals or households benefitting from a social protection measure or entitlement. Beneficiary operations management: The set of recurring activities that usually occur between payment/service delivery periods. Throughout these periods, a number of activities are carried out in a coordinated manner to engage, collect, and validate needed inputs. Capacity building: Measures aiming to develop and strengthen the skills, abilities, and resources of individuals, households, or communities. Case management: Comprehensive approach aiming to identify and address the different challenges faced by households, often provided as a complement to cash transfers, and, at times, aiming to facilitate out-of-poverty graduation. Case management is frequently carried out by a social worker, who regularly interacts with the household to monitor its evolving situation and determine its need for support and referrals, for example in terms of psycho-social care or skills development. Cash transfers: Conditional or unconditional social assistance benefits in the form of monetary payments, often targeted to poor or vulnerable households or individuals. Categorical targeting: A targeting method whereby beneficiaries are selected on the basis of specific observable characteristics. Examples include defining eligibility of a group of population based on age, for instance older persons. Child/family benefits: Incorporates financial aid awarded to households with the aim of reducing the load represented by birth and upbringing of children, in addition to maintenance of other family members. This includes maintenance of income for working women in the period prior to, and/or following childbirth. In addition, this function includes all social services earmarked for protection of the family institution and children in particular, such as accommodation in special centres or private homes, or nursery services, all except healthcare.
  - **Community-based targeting:** Targeting method whereby beneficiaries are selected on the basis of an assessment undertaken by community members/leaders.
  - **Complementary programmes:** Programmes put in place to complement SP programmes, often aiming to promote graduation (e.g. technical and vocational education and training (TVET) provided to cash-transfer beneficiaries).

xxvii

- **Conditional cash transfers:** Cash transfers provided on the condition that beneficiaries comply with certain conditions, often related to human capital development (e.g. attending health appointments or school enrolment). Their aim is to have both protection against food-insecurity in the short-term, and reduce intergenerational transmission of poverty and vulnerability in the long-term.
- **Contributory social protection:** Social protection mechanisms that are in principle financed through contributions paid by employers and/or employees, though, in practice, they are sometimes subsidised from general government revenue. Eligibility criteria of such mechanisms include being a contributor (e.g. in the case of old age pensions), or a dependent of one (e.g. in the case of health insurance).
- **Covariate**: May pertain to risks or shocks that affect a large proportion of the population at a time, and that occur randomly or repeatedly (e.g. floods, economic crises, armed conflicts).
- **Coverage gap:** Difference between legal coverage and effective coverage (when the latter is lower than the former).
- **Coverage:** See effective coverage and legal coverage.
- **Direct means test:** A targeting method whereby eligibility of applicants is determined on the basis of their income, assets, or wealth, either as reported by them, or as stated in administrative records.
- **Disability pensions/benefits:** Contributory or non-contributory benefits to support physically or mentally disabled people to engage in economic and social activities, including income maintenance, and cash and in kind support (except healthcare).
- **Effective coverage:** Share of population benefitting from a social protection measure. In the case of contributory social protection, it also includes the share of population contributing to a scheme.
- **Eligibility criteria:** Criteria that households or individuals should meet to qualify for a social protection measure (e.g. age, socioeconomic situation, disability status, geographic location). Contributory mechanisms typically require, in addition, that contributions have been paid during a certain period.
- **Employment injury benefits:** Specific short-term incapacity benefits, as well as long-term disability pensions, in case of occupational (employment related) accidents and disease.
- **Exclusion error:** Proportion of population who meet eligibility criteria for a social protection measure but are not effectively covered by it.
- **Geographical targeting:** A targeting method whereby beneficiaries are selected on the basis of where they live. For instance, a programme may be targeted to all residents of a certain municipality or state, or to all rural dwellers.
- **Government-to-person (G2P) payments:** Monetary transfers from government to individuals, including, for example, public sector salaries and tax-refunds, as well as pensions, cash transfers, and other social protection benefits.
- **Graduation measures:** Social protection measures that are time-bound, meaning beneficiaries leave the programme once they reach a wellbeing threshold and acquire the necessary resources to equip them for a higher-income future livelihood. Such measures are often complemented by other interventions that enable beneficiaries to support themselves at some stage, providing a phased,

sequenced, intensive, and holistic package of support. They usually include regular cash transfers, productive assets, access to savings facilities, and livelihood training and coaching.

- **Graduation:** The point at which beneficiaries may exit a social assistance programme because they no longer need it (e.g. when a household having increased its income from labour is able to exit a cash transfer scheme without consequently falling back into poverty).
- **Health insurance:** Financial protection for healthcare treatment, covering all or part of the costs. A distinction may be made between private health insurance and social health insurance.
- **Healthcare:** Service needed to maintain, restore, or improve health of protected people, irrespective of the origin of the disorder.
- **Horizontal expansion:** Extension of coverage to additional beneficiaries, either through expansion of an existing programme, or through implementation of a supplementary one.
- Housing benefits: Help towards cost of housing.
- **Idiosyncratic:** May pertain to risks or shocks that affect households or individuals throughout the life cycle, such as old age, unemployment, death of a breadwinner, etc., as opposed to those affecting a large proportion of the population randomly or repeatedly.
- **Inclusion error:** Proportion of population effectively covered by an SP measure despite not meeting its eligibility criteria.
- **Indexation:** Mechanism linking the level of benefits (contributory or non-contributory) to wages or prices, such that it increases (or decreases) in line with these.

In-kind benefits: Non-cash benefits, usually in the form of a commodity good such as food.

- **Integrated beneficiary registry:** Registry containing data relating to beneficiaries of two or more SP programmes.
- **Integrated management information system (MIS):** System through which information is shared among and across SP programmes. See also programme management information system (MIS).
- **International poverty line:** The poverty line defined by the World Bank, whereby those living on PPP Intl\$1,90 a day or less qualify as extremely poor.
- **Invalidity benefits:** A periodic payment made to persons who have been rendered permanently incapable of engaging in any gainful activity, to an extent prescribed, usually after sustaining an injury, or developing a long-term illness.
- **Labour market programmes (LMPs):** Programmes intended to facilitate employment through various means, including labour-market training, for people of working age in need of employment (also in the context of social assistance).
- **Legal coverage:** Share of population eligible to benefit from an SP measure, or who are eligible or obliged to contribute to a social insurance scheme.

Lifecycle approach: Considers that individuals face different risks and vulnerabilities throughout their life and that SP should be designed to address these risks. For this, it is necessary to consider the specific risks that individuals encounter during life stages: early childhood, school age and youth, working age, and elderly.

**Maternity benefits:** Benefits provided to pregnant women and mothers during the period defined as maternity.

**Means test:** Targeting method that selects beneficiaries based on their income or wealth, through direct means testing or proxy means testing.

Monitoring and evaluation mechanisms: Mechanisms to survey implementation and outcomes of an SP measure in order to assess its effectiveness and efficiency.

**National poverty line:** Poverty line established by the national government based on national definitions and criteria.

**Non-contributory social protection:** SP measures financed by general government revenue, rather than by contributions. See also social assistance.

**Old age pension/benefit:** Monetary benefit provided to individuals having reached a specific age threshold. It covers all benefits designed to mitigate consequences of old age (except healthcare), including loss of income, loss of autonomy in carrying out everyday activities, and reduction in social activity. Old age pension/benefit is usually contributory, though certain countries provide non-contributory (social) pensions.

**Poverty gap:** Average difference between income of poor people and the poverty line.

**Poverty line:** Level of income necessary for meeting the minimum requirements for feeding oneself adequately or fulfilling basic needs. Monetary poverty line refers to establishing a minimum level of income as a threshold for those who can be qualified as poor. See international poverty line and national poverty line.

**Poverty:** Income poverty refers to people who are poor with respect to a money-based poverty line for income. Multidimensional poverty refers to deprivations faced by people in their lives (poor health and education, hazardous environment, etc.).

**Private health insurance:** Generally, refers to voluntary health insurance mechanisms financed by risk-related contributions.

**Programme management information system (MIS):** System through which a social protection programme is implemented. It ensures the delivery of operational processes, for instance intake and registration, enrolment, and benefit payment. See also integrated management information system (MIS).

**Proxy means test (PMT):** Targeting method using an indirect means test based on easily observable characteristics that correlate with income or wealth. The indicators in a PMT formula are weighted and used to determine whether an applicant qualifies as poor.

**Public works programme:** Programme offering cash or in-kind benefits in exchange for participation in labour-intensive work projects.

Comprehensive national reviews of the systems and reforms of ESCWA member countries

**Risk:** Probability of individuals, households or populations being affected by an unexpected and uncertain situation (e.g. unemployment, natural disaster). Risks may be idiosyncratic or covariate.

School feeding programme: Programme providing meals to children attending school.

**Shock:** An exceptional event that negatively affects welfare of individuals, households, or populations. Shocks may be idiosyncratic or covariate.

**Sickness benefits:** Monetary benefits that substitute for the loss of income due to illness, excluding disability benefits and healthcare expenditure.

**Social assistance:** Largely synonymous with non-contributory social protection, but often refers more specifically to measures intended for poor and vulnerable groups rather than universal ones.

**Social health insurance:** Health insurance mechanisms that are in principle financed by non-risk-related contributions, though the government may pay the contributions of some population groups, and/or provide general subsidies to a social health insurance scheme. Enrolment is in general mandatory for all, or a part of the population. Depending on context, social health insurance is sometimes considered as part of the social insurance (or social security) package, and sometimes as separate from it.

**Social insurance:** Largely synonymous with contributory social protection, providing, for example, maternity, old-age, and work-related contingency benefits. Depending on context, social health insurance is sometimes considered as part of the social insurance package, and sometimes as separate from it.

**Social protection:** A set of public policies and programmes intended for ensuring an adequate standard of living and access to healthcare throughout the life cycle. Social protection benefits can be provided in cash or in kind through universal or targeted non-contributory schemes, contributory schemes, such as pensions, and complementary measures for building human capital, creating productive assets, and facilitating access to employment.

**Social registry:** Registry containing data on the socioeconomic characteristics of potential beneficiaries of non-contributory social protection schemes, and it may be used to select beneficiaries of one or several programmes. The proportion of total population included in a social registry may vary.

**Social safety net:** Usually synonymous with social assistance, but sometimes used to refer to certain social insurance mechanisms. ESCWA encourages authors to avoid the term.

**Social security:** Usually synonymous with social insurance, but sometimes used interchangeably with SP more broadly and in some national contexts refers to specific social assistance programmes. ESCWA encourages authors to use the term with caution and, as far possible, rely on social protection, social insurance, and social assistance.

**Social protection components:** For the purpose of this document, this term refers to the four broad components used to classify SP programmes, namely non-contributory social assistance, contributory social insurance, selected labour-market measures and services, and universal subsidies.

**Social protection floors:** An integrated set of social policies aimed at guaranteeing income security and access to services for all. This set includes basic income security (in the form of social transfers), and universal access to essential social services. The Social Protection Floors Recommendation (ILO

Recommendation No. 202) provides guidance to member States on how to establish and maintain social protection floors as an element of their social security systems and on how to implement social protection floors within strategies for extending social security.

- **Subsidies:** Market intervention aiming to lower the consumer cost of a certain good or commodity, such as energy products or food. While most subsidies are universal, some are targeted, meaning that only some households or individuals are entitled to purchase the subsidised products.
- **Survivors' benefits:** Include all the economic benefits granted to a beneficiary, who has lost his or her main breadwinner. These benefits comprise both survivor pensions, and charges resulting from death, such as funeral expenses.

**Target population:** The population meeting the eligibility criteria for a non-contributory SP measure.

- **Targeting method:** Mechanism used to identify households and individuals belonging to the target population. See categorical targeting, community-based targeting, geographical targeting, means test, and proxy means test.
- **Unemployment benefits:** Compensate for the loss of income resulting from involuntary unemployment. They aim to reduce consequences of lack of paid employment, preventing and alleviating unemployment situations, including (partial or complete) subsistence income, or are early retirement pensions, provided that the cause of retirement lay in the labour-market situation.
- **Vertical expansion:** Increase in benefit value, duration of benefits or other programme aspects, targeted at beneficiaries of existing social protection programmes.
- **Vulnerability:** The condition determined by physical, social, economic, and environmental factors or processes that increase susceptibility of an individual, a community, assets, or systems to the impacts of hazards.

# **Abbreviations and acronyms**

| AAAQ   | availability, affordability, acceptability, and quality                           |  |
|--------|---|--|
| ABND   | Assessment-Based National Dialogue  |  |
| ACRWC  | African Charter on the Rights and Welfare of the Child                            |  |
| ALMP   | active labour market policy   |  |
| ANAM   | Agence Nationale de l'Assurance Maladie   |  |
| AR     | Activity Rate Worksheet (RAP Model)   |  |
| ASPIRE | Atlas of Social Protection Indicators of Resilience and Equity                    |  |
| ATM    | automated teller machine  |  |
| BOMS   | beneficiary operations management system  |  |
| CCA    | climate change adaptation   |  |
| ССТ    | conditional cash transfer   |  |
| CEDAW  | Convention on the Elimination of all Forms of Discrimination Against Women        |  |
| CERD   | International Convention on the Elimination of All Forms of Racial Discrimination |  |
| CESCR  | United Nations Committee on Economic, Social, and Cultural Rights                 |  |
| CODI   | Core Diagnostic Instrument  |  |
| CPI    | Consumer Price Index  |  |
| CPR    | Country Profile Report  |  |
| CRPD   | Convention on the Rights of Persons with Disabilities                             |  |
| CSO    | civil society organizations   |  |
| DA     | Development Account   |  |
| DHS    | Demographic and Health Survey   |  |
| EAP    | economically active population  |  |
| ECO    | Macroeconomic Framework Worksheet (RAP model)                                     |  |
| ECOFIN | Economic and Financial Affairs Council  |  |
| EFC    | error, fraud, and corruption  |  |



| EGSPF   | Expert Group on Social Protection Reform                        |  |  |  |
|---------|---|--|--|--|
| ESCWA   | Economic and Social Commission for Western Asia                 |  |  |  |
| FSPC    | Fonds Special de la Pharmacie Centrale                          |  |  |  |
| GCC     | Gulf Cooperation Council  |  |  |  |
| GDP     | gross domestic product  |  |  |  |
| GGE     | general government expenditure                                  |  |  |  |
| GGO     | General Government Operations Worksheet (RAP Model)             |  |  |  |
| G2P     | Government-to-person  |  |  |  |
| HDI     | Human Development Index   |  |  |  |
| нн      | household   |  |  |  |
| ні      | high income   |  |  |  |
| ICESCR  | International Covenant on Economic, Social, and Cultural Rights |  |  |  |
| IDP     | internally displaced persons                                    |  |  |  |
| ILO     | International Labour Organization                               |  |  |  |
| ILOSTAT | International Labour Organization Department of Statistics      |  |  |  |
| IMF     | International Monetary Fund                                     |  |  |  |
| Intl\$  | international dollar  |  |  |  |
| IPC-IG  | International Policy Centre for Inclusive Growth                |  |  |  |
| ISPA    | Inter-Agency Social Protection Assessment Tools                 |  |  |  |
| KII     | key informant interview   |  |  |  |
| KYC     | know your customer  |  |  |  |
| LCU     | local currency unit   |  |  |  |
| LMI     | lower-middle income   |  |  |  |
| LM      | labour marker   |  |  |  |
| LMP     | labour-market programme   |  |  |  |
| LI      | low income  |  |  |  |
| LPR     | Labour Participation Rate Worksheet (RAP Model)                 |  |  |  |
| M&E     | monitoring and evaluation                                       |  |  |  |
| MIS     | management information system                                   |  |  |  |
| NPL     | national poverty line   |  |  |  |
| NSO     | national statistical office                                     |  |  |  |
| ODA     | official development assistance                                 |  |  |  |
| OECD    | Organization for Economic Co-operation and Development          |  |  |  |

| OPEC   | Organization of the Petroleum Exporting Countries        |  |  |
|--------|--|--|--|
| PIN    | personal identification number                           |  |  |
| POP    | Population Worksheet (RAP Model)                         |  |  |
| PPP    | purchasing power parity                                  |  |  |
| PSP    | payment service provider                                 |  |  |
| PwD    | people with disabilities                                 |  |  |
| RAP    | Rapid Assessment Protocol                                |  |  |
| SA     | social assistance  |  |  |
| SDG    | Sustainable Development Goals                            |  |  |
| SI     | social insurance   |  |  |
| SP     | social protection  |  |  |
| SQ     | status quo   |  |  |
| SPF    | social protection floors                                 |  |  |
| SPSR   | Social Protection System Review                          |  |  |
| TVET   | technical and vocational education and training          |  |  |
| UCT    | unconditional cash transfer                              |  |  |
| UDHR   | Universal Declaration of Human Rights                    |  |  |
| UMI    | upper-middle income                                      |  |  |
| UNDP   | United Nations Development Programme                     |  |  |
| UNDESA | United Nations Department of Economic and Social Affairs |  |  |
| UNGA   | United Nations General Assembly                          |  |  |
| UNICEF | United Nations Children's Fund                           |  |  |
| UNFPA  | United Nations Population Fund                           |  |  |
| WFP    | World Food Programme                                     |  |  |
| WHO    | World Health Organization                                |  |  |
| WSPR   | World Social Protection Report                           |  |  |

# **01** Country context



# **Section purpose**

- Introducing the national geographical, political, demographic, fiscal, and socioeconomic context.
- Presenting key socioeconomic, demographic, and labour-market related indicators.
- Describing main economic sectors and recent economic growth trends, as well as major crises and disruptions.
- Setting context for findings and recommendations in the rest of the CPR.

Maximum length of this section is 2,500 words (including tables, boxes, associated annexes, and references).

| 1.1 Geographical and political overview  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| <b>OUTPUT:</b> Summary of political structure and key geographical and economic classifications. |  |  |  |  |  |  |
| Provide information on the following aspects and indicators:                                     |  |  |  |  |  |  |
| Geographical classifications   | • [Ex] North African countries or Gulf Cooperation Countries.  |  |  |  |  |  |
|  | <ul> <li>Suggested data sources: Country maps, United<br/>Nations maps, ISO 3166 Country Codes.</li> </ul>   |  |  |  |  |  |
| Economic classifications   | <ul> <li>Country income levels:         <ul> <li>High income (HI).</li> <li>Upper-middle income (UMI).</li> <li>Lower-middle income (LMI).</li> <li>Low-income country (LI).<br/>Suggested data source: World Bank.</li> </ul> </li> <li>United Nations economic classification of country, e.g.:         <ul> <li>Developed economies.</li> <li>Economies in transition.</li> <li>Developing economies.</li> <li>Least developed countries, etc.<br/>Suggested data source: UN Classification.</li> </ul> </li> </ul> |  |  |  |  |  |
| <ul> <li>Structure of government, political, and<br/>administrative system</li> </ul>            | <ul> <li>[Ex] Spain is a constitutional monarchy. It has<br/>a bicameral parliament consisting of a lower<br/>house, elected on the basis of proportional<br/>representation, and an upper house, in part<br/>elected by popular vote and in part appointed by<br/>the regional breacher and in part appointed by</li> </ul>   |  |  |  |  |  |

the regional legislatures. The executive branch

Comprehensive national reviews of the systems and reforms of ESCWA member countries

is made up of a Council of Ministers headed by the Prime Minister. The country is divided into 17 autonomous communities and 2 autonomous cities. The autonomous communities are divided into 50 provinces that are in turn divided into municipalities.

#### **1.2 Macroeconomic overview**

**OUTPUT:** Overview of key macroeconomic and fiscal features, including size of the economy, growth rates, remittances, inflation, and current crises or disruptions affecting the economy.

Provide information on the following aspects and indicators:

- Economy and economic growth
  - For size of economy and economic growth per sector, fill table 1.1.
  - Briefly describe size of economy, according to main economic sectors as a share of GDP (per capita PPP in Intl\$), visualizing data as a line graph over a relevant time span, as in figure 1.1.
  - Explain the economy in terms of employment per type of economic activity.

#### **Potential national sources:**

- National statistical office.
- Ministry of Labour or Ministry of Economy.

#### Suggested data sources:

- World Bank on the size of economy.
- ESCWA database on the type of economic activity.

**Figure 1.1** charts the share of the manufacturing sector in GDP in Bahrain.

Note: To produce the chart, start by entering data into associated figures and annexes, then generate the chart/ figure, and copy-paste it into the country profile. Authors may use **figure 1.1** as an example.

#### Remittances

Describe remittances as share of GDP per capita, filling out table 1.1.

#### Suggested data sources:

- ESCWA volume of remittances.
- World Bank data on remittances.

Remittances generate several important positive contributions to economic development. They tend to reduce poverty and inequality in recipient countries, as well as increase aggregate investment and growth (World Bank, 2008).

| <ul> <li>Inflation rate</li> <li>Describe annual inflation rates in the country, using table 1.1.</li> </ul>  | <ul> <li>Suggested data sources:</li> <li>ESCWA Annual inflation rate.</li> <li>The annual inflation rate of a country measures changes in purchasing power of its currency.</li> <li>It is used by government for budget planning.<br/>Hence, it is important for SP spending.</li> </ul> |
|---|--|
| <ul> <li>Provide an overview of major crises and disruptions. Important themes may include:</li> <li>Internal migration (urban-rural).</li> <li>Impact of international migration (immigration and emigration) on the economy.</li> <li>Climate related shocks and their impacts.</li> <li>Conflict.</li> </ul> | <ul> <li>Suggested data sources:</li> <li>United Nations data on migration.</li> </ul>   |

### Table 1.1 Economic indicators; selected years (example similar to Bahrain)

| Macroeconomic indicators   | Y-4 | Y-3 | Y-2 | Y-1 | Latest available year (Y) |
|--|-----|-----|-----|-----|---------------------------|
| GDP per capita in current LCU  |     |     |     |     | 7,540.14 (BD)             |
| GDP per capita, purchasing power parity (PPP) (constant 2017 Intl\$) |     |     |     |     |                           |
| GDP (per capita) by type of economic activity                        |     |     |     |     | 12,986,749,823            |
| Mining   |     |     |     |     | 1,600,630,914             |
| Manufacturing  |     |     |     |     | 2,381,858,817             |
| Agriculture  |     |     |     |     | 40,848,838                |
| Construction   |     |     |     |     | 1,082,610,824             |
| Oil/gas  |     |     |     |     |                           |
| Others   |     |     |     |     |                           |

| Remittances as share of GDP (percentage of GDP)                                 | 2.5 |
|---|-----|
| Annual Inflation rate (percentage change in purchasing power in local currency) | 6.7 |





#### Source: Template authors, based on ESCWA database.

#### **1.3 Demographic overview OUTPUT:** Overview of key demographic and population features, including population size, population pyramid, stage of demographic transition, dependency ratio, and non-citizen population. Provide information on the following aspects and indicators, and fill in table 1.2. Population size, distribution, fertility, and Potential data sources: mortality rates • ESCWA data portal. Briefly describe population size and • UNDESA World Population Prospects. > distribution, using the fertility and • UNFPA Dashboard. mortality rates in table 1.2.

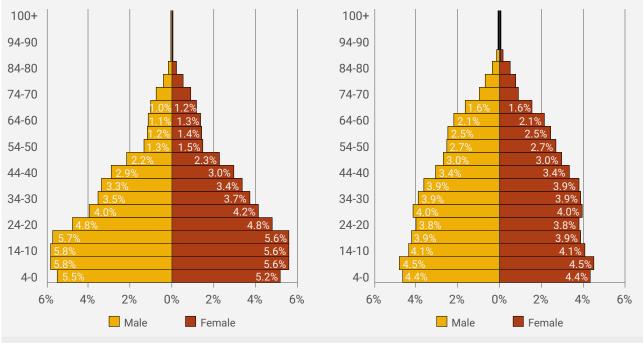
| <ul> <li>Population pyramid</li> <li>Insert a population pyramid that depicts<br/>the age-sex population distribution.</li> </ul>  | <ul> <li>Figure 1.2 shows the population pyramid of<br/>Morocco in 2000 and 2020. First enter data into<br/>associated figures and annexes, then generate the<br/>chart/figure and copy-paste it into the CPR.</li> <li>Suggested data sources:</li> <li>UNDESA World Population Prospects.</li> <li>ESCWA data portal.</li> </ul>  |
|--|---|
| <ul> <li>Stage of demographic transition (DTT)</li> <li>Briefly describe the demographic trends relevant to SP, including fertility rate, mortality rate (child and infant mortality), and life expectancy at birth.</li> </ul>  | DTT has four stages:Stage 1: High birth and death rates, low<br>population growth.Stage 2: High birth rate and low death rate, high<br>population growth.Stage 3: Gradually decreasing birth rate and low<br>death rate, declining population growth.Stage 4: Low birth and death rates, low<br>population growth.Depending on the stage of the DTT, countries can<br>design SP programmes strategically targeted towards<br>children, working age people, or old age people. |
| <ul> <li>Dependency ratio</li> <li>Describe the dependency ratio in a line chart, using the data in table 1.2.</li> </ul>  | <ul> <li>Potential data sources:</li> <li>UNDESA.</li> <li>The dependency ratio (DR) relates the number of children (e.g. 0-14 years old) and older persons (e.g. 65 years or over) to the working age population (e.g. 15-64 years old).</li> </ul>  |
| <ul> <li>Non-citizen and migration population,<br/>including:</li> <li>International migrant flows.</li> <li>Humanitarian migrants.</li> <li>Undocumented migrants.</li> <li>Net migration.</li> <li>Internally displaced persons.</li> <li>Refugee population.</li> </ul> | <ul> <li>Potential data sources:</li> <li>Internal displacement: Global Internal<br/>Displacement Database (GIDD).</li> <li>Net migration: World Bank (net migration).</li> <li>International migrant workers: ESCWA<br/>(international migrant stock).</li> <li>Refugee population: ESCWA; UNHCR.</li> </ul>   |

| Demographic indicators (unit)   | Y-20 | Y-15 | Y-10 | Y-5 | Latest available year (Y) |
|---|------|------|------|-----|---------------------------|
| Total population  |      |      |      |     | 1,472.204                 |
| Male population   |      |      |      |     | 925,036                   |
| Female population   |      |      |      |     | 547,168                   |
| Male population aged 0-14   |      |      |      |     | 152,765                   |
| Female population aged 0-14   |      |      |      |     | 146,986                   |
| Male population aged 15-24  |      |      |      |     | 105,383                   |
| Female population aged 15-24  |      |      |      |     | 78,297                    |
| Male population aged 25-64  |      |      |      |     | 641,201                   |
| Female population aged 25-64  |      |      |      |     | 299,519                   |
| Male population aged 65+  |      |      |      |     | 25,687                    |
| Female population aged 65+  |      |      |      |     | 22,366                    |
| Dependency ratio (percentage<br>of dependents to working<br>age population) |      |      |      |     | 26.48%                    |
| Child dependency ratio  |      |      |      |     | 23.12%                    |
| Elderly dependency ratio  |      |      |      |     | 3.36%                     |
| Fertility rates (TFR) (per woman of childbearing age)                       |      |      |      |     | 1.84                      |
| Life expectancy (Total population, years)                                   |      |      |      |     | 77.10                     |
| Male life expectancy (years)  |      |      |      |     | 76.3                      |
| Female life expectancy (years)  |      |      |      |     | 78.2                      |

#### Table 1.2 Trends in population/demographic indicators; selected years (example based on Bahrain)

| Demographic indicators (unit)                                | Y-20 | Y-15 | Y-10 | Y-5 | Latest available year (Y) |
|--|------|------|------|-----|---------------------------|
| Life expectancy at age 60 (years)                            |      |      |      |     | 19.1                      |
| Infant mortality rate (per 1,000<br>live birth)              |      |      |      |     | 6.50                      |
| Maternal mortality ratio (per 100,000 live births)           |      |      |      |     | 3.0                       |
| Prevalence of disability<br>(percentage of total population) |      |      |      |     | 2.41                      |
| Net migration rate   |      |      |      |     | 8.41 per 1,000 people     |
| Refugee population (# in country)                            |      |      |      |     | 251                       |

#### Figure 1.2 Population pyramid, Morocco example in 2000 (left) and 2020 (right)



Source: ESCWA SP teams, based on UNDESA World Population Prospects 2019.

#### 1.4 Labour market overview

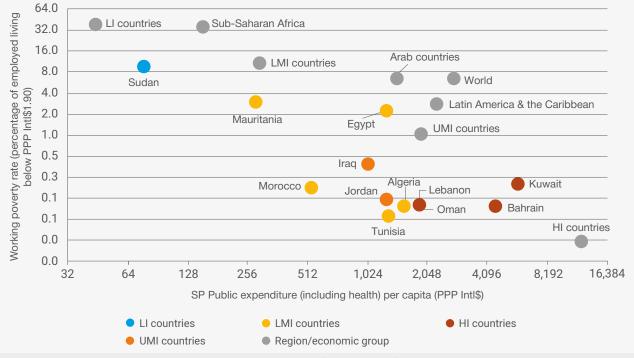
 $\bigcirc$ 

**OUTPUT:** Overview of key labourmarket measures, including employment, unemployment, and labour-force participation, as well as employment per economic sector, quality of employment, and migrant employment.

|   | Briefly discuss the following topics and indicators:   |   |
|---|--|---|
| + | <ul> <li>Employment, unemployment, and labour-force participation</li> <li>Describe the employment, unemployment, and labour-force participation situation in the country by age, gender, sub-national region, and citizen/non-citizen status.</li> <li>Illustrate trends over time in a chart, showing also regional unemployment and labour-force participation rate.</li> </ul> | <ul> <li>The standard indicator for employment is the employment to population ratio.</li> <li>Potential data sources: <ul> <li>ILO database.</li> <li>ESCWA database.</li> <li>World Bank database.</li> </ul> </li> <li>The standard indicator for unemployment is the unemployment total (percentage of total labour force).</li> <li>Potential data sources: <ul> <li>ILO database.</li> <li>ESCWA database.</li> </ul> </li> <li>Potential data sources: <ul> <li>ILO database.</li> <li>ESCWA database.</li> </ul> </li> <li>Potential data sources: <ul> <li>ILO database.</li> <li>ESCWA database.</li> </ul> </li> <li>The standard indicator for labour-force participation is the number of employed and unemployed individuals divided by the total working age population (aged 15+).</li> </ul> |
| • | <ul> <li>Employment per economic sector</li> <li>Describe type of employment in sectors of importance in the economy, which may be industry, services, trade, agriculture, etc.</li> </ul>   | <ul> <li>Potential data sources:</li> <li>ESCWA database.</li> <li>ILO database.</li> <li>Potential national sources: <ul> <li>National statistical office.</li> <li>Ministry of Labour or Ministry of Economy.</li> <li>National labour surveys.</li> </ul> </li> </ul>  |
| • | <ul> <li>Quality (vulnerability) of employment</li> <li>Describe vulnerable employment, with the following indicators:</li> <li>Number of family workers or own account workers.</li> <li>Insert figure 1.3. Employed population below poverty line (SDG indicator 1.1.1) vs. Public</li> </ul>  | Suitable indicators to estimate vulnerable<br>employment are: number of contributing family<br>workers, number of own-account workers, and<br>working poverty rate.<br>Suggested data sources:<br>ILO database.<br>ESCWA database.<br>World Bank database.  |

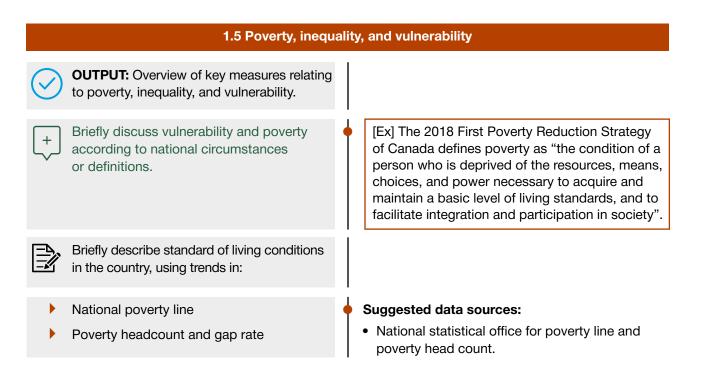
| SP expenditure per capita (PPP<br>Intl\$), which displays, for the<br>latest available year, values<br>for selected Arab countries,<br>in addition to world and Arab<br>countries' averages, and World<br>Bank income groups.                    | Figure 1.3 will be provided by ESCWA technical editors.  |
|--|--|
| > Human capital index (HCI).   | <ul> <li>HCI measures the human capital of a country to infer productivity of the next generation of workers, by looking at indicators of health and education, among others.</li> <li>Suggested data sources:</li> <li>World Bank.</li> </ul>   |
| <ul><li>Average wage of employees.</li><li>Statutory minimum wage.</li></ul>   | <ul> <li>Suggested data sources:</li> <li>ILO database.</li> <li>National labour surveys.</li> <li>ESCWA database.</li> <li>If available, include data on real wages disaggregated by gender.</li> </ul>   |
| Informal and/or irregular employment.  | <ul> <li>If relevant, use national definition of informal employment.</li> <li>Preferred data source: <ul> <li>National statistical office.</li> </ul> </li> <li>Suggested data sources: <ul> <li>ILO statistical report on the global informal economy.</li> <li>ILO latest global statistical report.</li> </ul> </li> </ul> |
| <ul> <li>Migrant employment</li> <li>Share of international migrant workers<br/>in workforce of the country by gender<br/>and age.</li> <li>Describe the most common<br/>types of employment available to<br/>international migrants.</li> </ul> | <ul> <li>Suggested data sources:</li> <li>ILOSTAT database.</li> </ul>   |

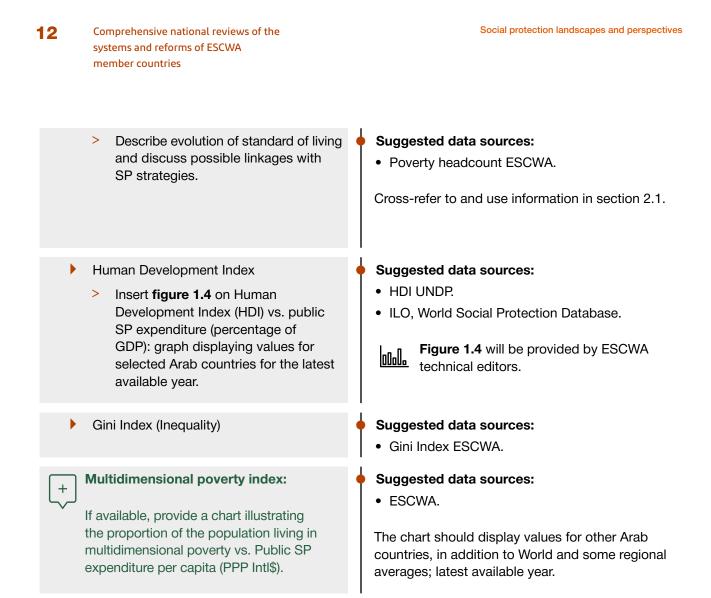
**Figure 1.3** Proportion of employed population below poverty line (SDG indicator 1.1.1) vs. Public SP expenditure (including health) per capita (PPP Intl\$); graph displaying values for all Arab countries, in addition to world and some regional averages; latest available year



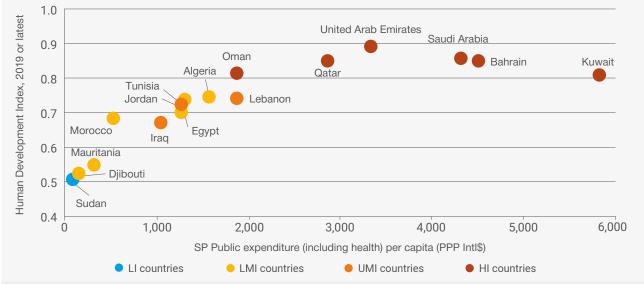
**Source:** Calculations by ESCWA SP teams, based on: SP expenditure data (excluding health) retrieved from ILO World Social Protection Data Dashboard, government health expenditure data retrieved from WHO Global Health Expenditure Database (GHED), GDP data and PPP conversion factor retrieved from World Bank Open Data, Classification of countries by income retrieved from World Bank World Development Indicators (WDI), and population data retrieved from UNDESA World Population Prospects 2022. Working poverty data retrieved from the World Bank Poverty and Equity database and ESCWA SDG data.

Note: Data for each country are for the latest year with available SP expenditure data.





# **Figure 1.4** Human Development Index (HDI) vs. Public SP expenditure (including health) per capita (PPP Intl\$); latest available year



**Source:** Calculations by ESCWA SP teams, based on: SP expenditure data (excluding health) retrieved from ILO World Social Protection Data Dashboard, government health expenditure data retrieved from WHO Global Health Expenditure Database (GHED), GDP data and PPP conversion factor retrieved from World Bank Open Data, classification of countries by income retrieved from World Bank World Development Indicators (WDI), and population data retrieved from UNDESA World Population Prospects 2022. HDI data retrieved from UNDP Human Development Index online database (as of 21 July 2022).

# **02** SP system overview and policy context

# **Section purpose:** providing a short history of national SP system

- Identifying legal and regulatory frameworks and appraising them against key SP international treaties.
- Identifying whether there is an SP strategy and appraising its alignment to the country risks and vulnerabilities profile.
- Identifying whether there is an established M&E system at the national level and appraising its effectiveness.
- Presenting the level of coverage, disaggregated by SP function.
- Identifying whether financing for SP is reflected in the budget of the country, the mix of SP revenue sources, and whether spending composition is aligned with the SP strategy and with the risk and vulnerabilities profile.
- Mapping key actors and their roles and responsibilities, highlighting gaps, overlaps, and synergies.
- Identifying and discussing coordination practices and structures, as well as the level of decentralization within the SP governance system.
- Identifying control and accountability mechanisms and appraising their effectiveness.
- Appraising human resources and institutional capacity of the SP system.

Maximum length of this section is 8,000 words (including tables, boxes, associated annexes and overall references).



Provide 5-6 key messages in bullet points, up to two of which should concern shock responsiveness. At the end of the drafting of the CPR, insert a few bullet points summarizing the findings from the section.

Insert the key messages in a standardized box, as shown below.

Box 2.1

| Key messages |  |  |
|--------------|--|--|
| 1.           |  |  |
| 2.           |  |  |
| 3.           |  |  |
| 4.           |  |  |
| 5.           |  |  |

#### 2.1 Historic SP pathways



**OUTPUT:** A short history of the SP system, agenda, and reform of the country in recent

decades, highlighting main advancements, and pinpointing challenges.

Sketch out key milestones and developments, including:

- Historic system background (e.g. inheritance of colonial SP system).
- Adoption of legal and regulatory frameworks and reforms, if any.
- Changes in priorities and initiatives.
- Launch of flagship programmes and major improvements in SP system design.

#### **Potential sources:**

- Government official communication portals, specifically under ministries managing the SP agenda.
- Literature review.

#### [Ex] Yemen

Before the establishment of the Republic of Yemen in 1990, when it was still divided into the Yemen Arab Republic and the People's Democratic Republic of Yemen, a comprehensive SP system was not in place. It was after unification that the government started focusing on SP, with the implementation of the Economic, Financial, and Administrative Reform Programme (EFARP) in 1995.

Within this plan, the country started the Social Safety Net, which comprised several SP programmes and funds, such as the Social Welfare Fund, Social Fund for Development, Agricultural and Fishery Promotion Fund, Public Works Programme, Family Productive Programme, and Small and Medium Enterprises Fund. The Net provides cash assistance to poor households, implements projects related to job creation, asset accumulation, or access to social services, and provides old-age and sickness benefits to employees, as well as supports productive activities in rural areas. Since then, the country began introducing various policies focused on reducing poverty and sustainable development. In 1996, a social welfare law was promulgated, and the first five-year development plan (1996-2000) was launched.

Subsequently, further development plans were implemented, with the third (2006-2010) emphasizing the importance of supporting SP institutions and expanding the range of available SP programmes. These plans envisaged expansion of the social safety net and targeting mechanisms (in 2009, capacity was expanded to cover 1.5 million beneficiaries), expansion of programmes for small and medium projects (training Comprehensive national reviews of the systems and reforms of ESCWA member countries

> programmes and skills guidance), extension of social insurance coverage to all employees, giving priority to labour-intensive investments in all economic areas, preparation of national strategies in SP and food security, and making loans available to the rural poor.

In 2011, with the Arab Spring, political stability and security deteriorated. A Transitional Programme for Stability and Development was implemented, aimed at expanding SP to all governorates, stimulating microfinance and micro-loans to rural areas and beneficiaries of the Social Welfare Fund, and expanding labour-intensive programmes. A public works emergency programme, focused on poor families affected by the food crisis, was also implemented.

However, from 2011 to 2014, Yemen suffered from several political and security setbacks. In 2014, due to conflict in the north of the country, the number of internally displaced people escalated. Moreover, large numbers of refugees from Ethiopia, Somalia and Syria established themselves in Yemen. In March 2015, Yemen descended into a military conflict that resulted in the suspension of the Social Welfare Fund, the largest SP programme in the country. Currently, national SP programmes, namely the Emergency Crisis Response Project and the Emergency Cash Transfer Project, are supported by UNICEF, the UNDP, the World Bank, and other partners (Azaki, 2015; Machado and others, 2018).

#### 2.2 SP policy, legal and regulatory frameworks

#### 2.2.1 Legal commitments based on international instruments

**OUTPUT:** Inventory of international instruments related to SP to which the country is signatory or State party.

In this subsection, include the following:

#### **Potential sources:**

• Legal and regulatory frameworks.

Literature review, possibly complemented by structured or semi-structured Klls.

Identify SP-relevant international instruments, to which the country is signatory or State party, including legally non-binding instruments.<sup>03</sup>

Reasons for mapping instruments that are not legally binding

Certain instruments cannot legally hold countries accountable, as they are not treaties. This is the case of the Universal Declaration of Human Rights, for example. Nonetheless, mapping such instruments still holds value, as they indicate commitments and priorities of the country. Therefore, this may influence creation of new SP and human rights instruments imposing country legal obligations. One way in which this may occur is when national judicial systems adapt such instruments to create new legislation (Bilo and Machado, 2018).

Organize a table summarizing key findings. See table 2.1 below.

#### Table 2.1 Year of signature or ratification of/accession to relevant international instruments (example of Algeria)<sup>a</sup>

| International instrument  | No<br>action    | Signatory (to<br>legally binding<br>instruments) | State party (to<br>legally binding<br>instruments) | Adopted internally as<br>national legislation (for<br>instruments that are not<br>legally binding)   |
|---|-----------------|--|--|--|
| Universal Declaration of<br>Human Rights (UDHR)   | NA <sup>b</sup> | NA   | NA   | Mentioned in Preamble to the<br>Constitution: "The Algerian<br>people express their full<br>commitment to human rights,<br>as specified in the Universal<br>Declaration of Human Rights<br>of December 10, 1948" |
| International Covenant on<br>Economics, Social, and<br>Cultural Rights (ICESCR)             | -               | 1968   | 1989   | NA   |
| Convention on the<br>Elimination of all Forms<br>of Discrimination Against<br>Women (CEDAW) | -               | NA   | 1996<br>(accession)                                | NA   |
| Convention on the<br>Elimination of All Forms of<br>Racial Discrimination (CERD)            | -               | 1996   | 1972   | NA   |
| Convention on the Rights<br>of Persons with Disabilities<br>(CRPD)                          | -               | 2007   | 2009   | NA   |

03. A State party to an instrument is a country that has ratified it, while a signatory State is one that has signed the instrument but has not yet ratified it through internal procedures. An accession happens when a State ratifies an instrument already signed and negotiated by other States, and has the same effect as ratification.

| International instrument  | No<br>action | Signatory (to<br>legally binding<br>instruments) | State party (to<br>legally binding<br>instruments) | Adopted internally as<br>national legislation (for<br>instruments that are not<br>legally binding) |
|---|--------------|--|--|--|
| Convention Relating to the Status of Refugees   |              | -  |  |  |
| General Comment No.<br>19 of the Committee on<br>Economic, Social, and<br>Cultural Rights (CESCR) |              | -  |  |  |
| Social Security (Minimum<br>Standards) Convention,<br>1952  |              | -  |  |  |
| Social Protection Floors<br>Recommendation 202, 2012  |              | -  |  |  |
| Employment Injury Benefits<br>Convention, 1964 (No. 121)  |              | -  |  |  |
| Medical Care and Sickness<br>Benefits Convention, 1969<br>(No. 130)                               |              | -  |  |  |
| Invalidity, Old-Age,<br>and Survivors' Benefits<br>Convention, 1967 (No. 128)                     |              | -  |  |  |
| Employment Promotion<br>and Protection Against<br>Unemployment Convention,<br>1988 (No. 168)      |              | -  |  |  |
| Maternity Protection<br>Convention, 2000 (No. 183)  |              | -  |  |  |
| Maintenance of Social<br>Security Rights Convention,<br>1982 (No. 157)                            |              | -  |  |  |
| African Charter on Human<br>and People's Rights   |              | -  |  |  |
| African Charter on the Rights<br>and Welfare of the Child<br>(ACHR)                               |              | -  |  |  |
| Arab Charter on Human<br>Rights   |              | -  |  |  |

| International instrument                     | No<br>action | Signatory (to<br>legally binding<br>instruments) | State party (to<br>legally binding<br>instruments) | Adopted internally as<br>national legislation (for<br>instruments that are not<br>legally binding) |
|--|--------------|--|--|--|
| Covenant on the Rights of the Child in Islam |              | -  |  |  |
| Arab Charter on the Rights of the Child      |              | -  |  |  |

Source: Government of Algeria, 2020; United Nations Treaty Body Database (n.d.).

a. The insertions are brief examples of how the table could be completed. This is not an extensive and final analysis of Algeria's signature or ratification of/accession to relevant international instruments. The three dots (...) mean that authors of the template did not search for information regarding the specific instrument.

b. In this table, NA means not applicable. Note that the third and fourth columns are applicable to legally binding documents only, whereas the fifth column refers only to documents that are not legally binding.

#### 2.2.2 SP legal and regulatory frameworks

| lega<br>sho | <b>TPUT:</b> Overview and appraisal of SP<br>al and regulatory frameworks, highlighting<br>ortcomings, and opportunities for<br>engthening SP rights in legislation. |  |
|-------------|--|--|
| In the      | his subsection, include the following:   |  |
| inst        | ntify key legal and regulatory<br>truments, framing SP entitlements,<br>mulation, and delivery.  | <ul> <li>National instruments to be considered:</li> <li>Constitution.<sup>04</sup></li> <li>Laws adopted by legislative branch:         <ul> <li>Labour laws.</li> <li>Social security framework laws.</li> <li>Specific social security/protection legislation.</li> <li>Laws making provisions for administration, financial management, and delivery enforcement.</li> </ul> </li> <li>Regulations adopted by the executive branch.<sup>05</sup></li> <li>Regulations<sup>06</sup> governing implementation.</li> <li>Ministerial decrees.</li> <li>Circulars.</li> <li>Ordinances.</li> </ul> |

<sup>04.</sup> Bilo and Machado 2018, found that out of 19 Arab countries under consideration, 17 had, in their constitution, a legal guarantee to SP; the two exceptions are Djibouti and Lebanon (Bilo and Machado, 2018).

<sup>05.</sup> Legal and regulatory frameworks still under elaboration and/or that are not in force yet should be discussed in section 4.1: Current reform trajectories.

<sup>06.</sup> While laws and regulations pertaining to specific programmes should be listed (further discussed under section 3), discussion in this subsection should focus on the system level of SP.

- ° Government strategies.
- ° Policies.
- ° Action plans.
- ° Standards of services.
- ° Operations manuals.

#### Potential sources:

• Legal and Policy Frameworks search database at SocialProtection.org.

 Organize a table summarizing key information. See model table 2.2 below.

#### Table 2.2 Key extracts of SP national legal and regulatory frameworks (example of Egypt)

| Legal instrument   | Extract from or aim of the instrument  |
|--|--|
| Constitution of Egypt  | The 2014 Constitution establishes the right to social security, healthcare, decent housing, and food. Further, it establishes poverty eradication as a State obligation. Protection of children, PwD, and the elderly is also enshrined.   |
| Law No. 148 on Social<br>Insurance and Salaries<br>(2019)  | The Law covers various categories of workers, including public and private-<br>sector employees, business owners, Egyptians working abroad, and informal-<br>sector and irregular workers. It also provides for subsidises to the contributions<br>of informal workers, through obliging the Treasury to make a 12 per cent<br>contribution on their behalf. |
| Law No. 2 on Universal<br>Health Insurance (2018)  | The Law establishes an obligatory contributory health insurance scheme for all Egyptian citizens. However, it also provides for exemptions to segments of the population who are unable to pay.  |
| Cabinet Decree No. 540<br>(2015)   | The Decree clarifies the various benefit amounts for the Takaful and Karama conditional cash-transfer programmes.  |
| Ministry of Social<br>Solidarity Decree No.<br>86 on the Conditions,<br>Situations, Rules,<br>and Mechanisms<br>for Distribution of<br>Exceptional Assistance<br>in times of Personal<br>and Public Crises and<br>Disasters (2019) | The Decree stipulates that poor households benefiting from Ministry of Social<br>Solidarity provisions are also eligible for Exceptional Assistance benefits in<br>times of personal loss, such as death or injury.  |

Source: Bilo and Machado, 2018; Andrade and others, 2021a; Government of Egypt, 2015, 2018, 2019.

Note: This table does not necessarily provide a complete representation of the Egypt case, but merely offers examples to illustrate how to fill in the entries.



Appraise whether the national legal framework covers all SP functions.

Discuss to which extent the national legal framework enshrines the rights of SP functions listed in the SDG Indicator 1.3.1, other SDGs and those listed under associated annexes ReadMe tab (further explanation can be found in the notes for authors in this Template).

- Summarize key information, as in the table 2.3 example.
- Discuss whether the SP-related legal framework is gender sensitive and whether it covers migrants, refugees, expats and/or non-citizens.

Potential sources:

- Constitution and statutory laws.
- Legal Coverage indicators at the World SP Data Dashboards ILO STAT.

**SP functions** are used here to refer broadly to various population groups or types of contingencies, e.g. old age, unemployment, or housing, as defined in the associated figures and annexes, ReadMe tab, which are legally covered or guaranteed by statutory policies in the country.

## Legal best practices to cover migrants and refugees:

- Ratify international treaties that recognize the rights of migrants and refugees.
- Establish a comprehensive legal and regulatory framework explicitly setting SP rights, and the right to work for all residents.
- Guarantee legal status for all undocumented individuals.
- Enact agreements to protect social-insurance rights of migrant workers.

#### [Ex] Egypt

"At the statutory level, Egypt has national laws and international obligations to protect migrants. [...] Moreover, the Egyptian Constitution (2019) affirms that all citizens have the right to social security and health insurance. Other national laws on access to the labour market, social insurance, and social assistance establish rights for non-nationals. At the same time, these laws have limitations such as: restrictions on non-nationals working in certain sectors, limited health insurance coverage for migrants working in the informal sector or who are undocumented, and the requirement of possessing/

|   | presenting a national identity document to receive<br>benefits from social assistance programmes".<br>Source: Andrade and others, 2021b.   |
|---|--|
| Appraise shock responsiveness of SP-<br>system legal and policy frameworks  | [Ex] Lebanon   |
| <ul> <li>How are vulnerabilities defined and measured in relation to various risks?</li> <li>Do SP legal and policy frameworks include provisions relating to covariate shocks? If the country has a crisis response plan or similar, does it contain provisions relating to SP?</li> </ul> | The Lebanese 2022-2023 Crisis Response Plan<br>includes several provisions relating to SP. For<br>instance, one section is devoted to the "basic<br>assistance sector", the intended outcomes of<br>which include "effective and efficient service<br>delivery through strengthened linkages with<br>national social safety net programmes and<br>SP systems". |
| <ul> <li>Policy principle or enforceable right?<br/>If applicable, analyse:</li> <li>Draft conclusions on legal coverage of<br/>functions within the country, mentioning<br/>which SP functions are covered and<br/>where the gaps are.</li> </ul>  | It matters whether SP is solely a guiding principle,<br>or an enforceable right. It is important to note that<br>whereas a guiding principle may still be useful in<br>providing a goal for SP, such provisions tend to<br>not provide a legal basis for citizens to claim SP as<br>their right, and hold States accountable (Bilo and<br>Machado, 2018).      |

**Table 2.3** Functions (as listed in SDG Indicators 3.8.1 ,1.3.1, etc.) explicitly covered in national SP legal framework (example of Bahrain)

| Function (group<br>and contingency) | Is function<br>explicitly<br>mentioned as<br>entitled to SP<br>rights?<br>Yes No |  | Relevant legal instrument and article,<br>if applicable   | Is the<br>entitlement<br>a policy<br>principle or an<br>enforceable |
|-------------------------------------|--|--|---|---|
|                                     |  |  |   | right?  |
| Old age                             | [see footnote 9]   |  |   |   |
| Disability (invalidity)             | -  |  |   |   |
| Survivors                           | -  |  |   |   |
| Sickness                            | -  |  |   |   |
| Maternity/<br>paternity             |  |  | -   |   |
| Child and family<br>benefits        | x  |  | Article 5c of Constitution: "The State<br>guarantees the requisite social security<br>for its citizens in [] orphanhood".<br>Law No. 18 on Social Security (2006)<br>includes children below 18 as an<br>eligible category. |   |

| Function (group<br>and contingency) | Is function<br>explicitly<br>mentioned as<br>entitled to SP<br>rights? |    | Relevant legal instrument and article,<br>if applicable  | Is the<br>entitlement<br>a policy<br>principle or an<br>enforceable |
|-------------------------------------|--|----|--|---|
|                                     | Yes  | No |  | right?  |
|                                     |  |    | Although Law No. 37 on Children (2012)<br>does not mention SP specifically, it<br>stipulates that the State is responsible<br>for the protection of childhood and<br>motherhood, and for caring for children<br>and facilitating their growth in a positive<br>environment. The Law also prioritises<br>provision of services and assistance<br>to children in times of crises, natural<br>disasters and wars. |   |
| Unemployment                        | x  |    | Article 5c of Constitution: "The State<br>guarantees the requisite social security for<br>its citizens in [] unemployment".<br>Ordinance related to Law No. 78 on<br>Unemployment Insurance (2006) stipulates<br>the categories of workers entitled to<br>unemployment insurance benefits.   |   |
| Employment injury                   | x  |    | The Basic Social Insurance Law (1976)<br>provides work-injury victims with a variety<br>of benefits that are financed through<br>employer contributions.   |   |
| LMPs                                |  |    | -  |   |
| Healthcare                          |  |    | -  |   |
| Housing                             |  |    | -  |   |
| Poverty and social exclusion        | x  |    | Law No. 18 on Social Security (2006)<br>stipulate, under the social assistance<br>scheme, unconditional cash transfers<br>(UCT) for the poor and vulnerable.   |   |
| Other support/<br>assistance        |  |    | -  |   |

**Source:** Government of Bahrain, 1976, 2006a, 2006b, 2012, 2017.

Note: This table does not necessarily provide a complete representation of the Bahrain case, but merely offers examples to illustrate how to fill in the entries.

#### 2.2.3 SP vision and strategy

**OUTPUT:** Overview and appraisal of the SP strategy of the country, highlighting shortcomings and opportunities for improvement.

|   | In this subsection, include the following:   |   |
|---|--|---|
|   | Identify SP vision and strategy of the<br>country at the time of writing the CPR.<br>If there is no standalone document,<br>identify whether there are efforts to<br>develop one. Alternatively, investigate<br>whether other strategy documents, such<br>as development and poverty reduction<br>plans, include a SP vision and strategy. <sup>07</sup>   | <ul> <li>Note: There is no single approach for establishing<br/>a SP vision and strategy. Rather, these are<br/>structured in various ways; for instance:</li> <li>As a standalone SP strategy.</li> <li>In several relevant documents (as part of overall<br/>development strategies, or health, education and<br/>labour-market policies).</li> <li>Furthermore, a country may not possess an<br/>overall SP strategy despite having introduced<br/>SP programmes (ISPA, n.d.: 20).</li> </ul>  |
| • | Identify whether the country has a<br>definition of SP and, if so, discuss briefly<br>how it compares with international<br>definitions and whether there are any<br>hints that this vision is shared by all<br>stakeholders in the country, or there are<br>disagreements around it.  | See definition of SP in Glossary.   |
| • | Organize a table summarizing key<br>information. See model table 2.4 for<br>countries that do not have a specific SP<br>strategy, and model table 2.5 for those<br>that do.  | Note: The format of the table should be organized<br>also to accord with the structure of the SP vision<br>and strategy of the country.   |
|   | <ul> <li>Discuss gaps and points for improvement.<br/>Guiding questions:</li> <li>Are the strategy and objectives<br/>informed by empirical evidence?</li> <li>Are the strategy and objectives<br/>informed by international legal<br/>instruments (use information gathered<br/>in section 2.2.1)?</li> <li>Were relevant stakeholders and social<br/>groups consulted throughout the<br/>development of the vision and strategy?</li> <li>Are there clearly defined objectives,<br/>goals, targets, and milestones, as well<br/>as a clear-cut action plan?</li> </ul> | <ul> <li>[Ex] Qatar (brief discussion example)</li> <li>In Qatar, the SP strategy is a component of the broader social development strategy, the Qatar Second National Development Strategy (NDS-2) 2018-2022. The SP strategy is in line with the Qatar National Vision 2030 aspirations of providing an effective SP system for all Qataris by 2030. It provides an overview of the SP system up to 2018 and the main challenges faced. It also sets new targets for its development, as detailed in table 2.4 below.</li> <li>The SP strategy also presents the programmes and projects through which implementing agencies can help achieve well-defined and</li> </ul> |

07. Countries in the Arab region tend to lack strategies exclusively focused on SP. Instead, they often incorporate SP within their poverty reduction or development strategies (Bilo and Machado, 2018).

- Does the action plan lay out actions to address gaps in policy design and carry out implementation?
- > Are responsible actors identified?
- > Is there a clearly defined timeline?
- Are financial requirements and funding sources clearly established (including a long-term vision of the financial commitments required)?
- Are reporting and monitoring arrangements clearly established? (ISPA, n.d.: 20).

quantifiable targets, while related goals are quite broad. However, there are no milestones or a clear definition of SP, and only limited instructions for the development of an action plan and clearly defining financial requirements. Monitoring and evaluation (M&E) of the SP sector would benefit from a standalone arrangement.

While goals tend to be broad and express general intentions, objectives are usually narrower and more precise. Targets are even more specific than objectives and are often quantifiable. Progress towards a specific target is sometimes measured through indicators.

Note: Definitions of goals, objectives, targets, and indicators may vary, and one or more levels are at times excluded. For instance, the United Nations 2030 Agenda consists of goals, targets, and indicators, but has no stated objectives.

In case the SP vision and strategy of the country consist of a range of documents relevant to SP (read more in the right column above), discuss to which extent the various documents are aligned.

# **Table 2.4** SP strategy summary – (i) countries that mention SP in development strategy and/or in otherrelevant documents (Qatar Second National Development Strategy example)

| In relation<br>to SP, is/are<br>there well-<br>established? | No | Partially | Yes | Relevant<br>document(s),<br>if applicable           | Relevant extract(s), if applicable/<br>observations   |
|---|----|-----------|-----|---|---|
| Definition of SP  | x  | NAª       | NA  | NA  | NA  |
| Goals   |    | x         |     | Qatar Second<br>National<br>Development<br>Strategy | "Representatives of stakeholders have<br>unanimously identified the sectoral<br>strategic outcome priorities as follows:<br>1. An integrated, effective, and<br>sustainable social welfare system; 2.<br>A strong, cohesive, and empowered<br>Qatari family; and 3. Widened scope<br>and increased effectiveness of<br>social capital". |

| In relation<br>to SP, is/are<br>there well-<br>established? | No | Partially | Yes | Relevant<br>document(s),<br>if applicable           | Relevant extract(s), if applicable/<br>observations  |
|---|----|-----------|-----|---|--|
| Objectives  |    |           | x   | Qatar Second<br>National<br>Development<br>Strategy | Building "an effective SP system<br>for all Qataris that ensures their civil<br>rights, values their contribution to<br>the development of their society, and<br>ensures an adequate income to maintain<br>a healthy and dignified life. [] Transition<br>from the reactive state of simple social<br>welfare policies to a proactive state<br>by enabling all social segments to<br>participate in national development". |
| Targets (or<br>strategic<br>objectives) and<br>milestones   |    | X         |     | Qatar Second<br>National<br>Development<br>Strategy | There are nine targets, such as "1.1<br>Develop three SP regulations and<br>legislations by the end of 2022; 1.2<br>Promote job and social qualification<br>opportunities for 70 per cent of the<br>working age vulnerable groups who<br>are able to work, during 2018-2022",<br>but no milestones.  |
| Action plan   |    | X         |     | Qatar Second<br>National<br>Development<br>Strategy | In annex 6 of the Strategy, there<br>are programmes and projects listed<br>for each target. However, finalizing<br>the plans and preparing necessary<br>processes will be the responsibility of<br>the respective ministry or entity.  |
| Responsible<br>actors                                       |    |           | x   | Qatar Second<br>National<br>Development<br>Strategy | In annex 6 of the Strategy, there<br>is a list of implementing and<br>support agencies.  |
| Timeline  |    |           | x   | Qatar Second<br>National<br>Development<br>Strategy | 2018-2022  |
| Financial<br>requirements                                   | x  | NA        | NA  | NA  | It is maintained that resource<br>requirements will be detailed in specific<br>sector strategies.  |
| Monitoring<br>and evaluation<br>arrangements                |    | x         |     | Qatar Second<br>National<br>Development<br>Strategy | The Strategy includes a "Strategic<br>Performance Management System",<br>though not specific to the SP sector.   |

Source: Government of Qatar, 2018.

**Note:** This table does not necessarily provide a complete representation of the Qatar case, but merely offers examples to illustrate how to fill in the entries. a. In this table, NA means 'not available'.

| Are there well-<br>established?                        | No | Partially | Yes | Relevant extract, if applicable/<br>observations.   |
|--|----|-----------|-----|---|
| Objectives   |    |           | x   | "All Jordanians enjoy a dignified living,<br>decent work environment, and empowering<br>social services".   |
| Goals  |    |           | X   | <ol> <li>"Government ensures a just, private-<br/>sector-focused labour market, based on<br/>decent working conditions and social<br/>security. Government enables families to<br/>be economically self-sufficient".</li> <li>"Government provides universal,<br/>high-quality, basic services, including<br/>education, healthcare, and services to<br/>special-need individuals that allow them to<br/>remain integrated within their families and<br/>communities". 3. "Government provides<br/>targeted, temporary social assistance to<br/>citizens who are unable to be economically<br/>self-sufficient, allowing them to maintain a<br/>basic level of consumption".</li> </ol> |
| Targets (or strategic<br>objectives) and<br>milestones |    | X         |     | There are strategic objectives under each<br>goal, for instance "increase work related<br>protection" and "expand employment<br>opportunities, accessibility, and the quality of<br>jobs", but there are no milestones.   |
| Action plan  |    |           | X   | An action plan has been circulated to responsible entities, but it was not published.   |
| Responsible actors                                     |    |           | X   |   |
| Timeline   |    |           | x   | 2019-2025   |

#### Table 2.5 SP strategy — (ii) countries with a specific strategy for SP (example of Jordan)

| Are there well-<br>established?             | No | Partially | Yes | Relevant extract, if applicable/<br>observations.   |
|---|----|-----------|-----|---|
| Financial<br>requirements                   | x  |           |     | The Ministry of Finance is required to amend<br>budgets of responsible entities to achieve<br>the directions of the strategy. |
| Monitoring<br>and financial<br>requirements |    | x         |     | Ministry of Social Development is responsible for planning through a dedicated Unit.  |

Source: Hashemite Kingdom of Jordan, 2019.

Note: This table does not necessarily provide a complete representation of the Jordan case, but merely offers examples to illustrate how to fill in the entries.

#### 2.2.4 Alignment of the SP vision and strategy in relation to lifecycle needs and vulnerabilities

**OUTPUT:** Appraisal of whether the SP vision and strategy are in line with the risk and vulnerability profile of the country.

| -//   |
|-------|
|       |
| <br>- |

28

In this subsection, include the following:

- Making use of the previous section, discuss alignment of the SP vision and strategy of the country in relation to country needs.
  - Focus on the vulnerabilities and risks profile. Making use of section 1 indicators and section 2.2.3, discuss the SP vision and strategy vis-à-vis the vulnerability and risks profile of the country.
  - Preferably, consider as reference the lifecycle approach to SP. See the Glossary.

#### [Ex] Philippines

"The stated focus on protection from short-term collapses in consumption/income is sensible in a country where natural disasters are a regular occurrence and employment levels are fairly sensitive to shifting international economic forces. The stated objectives of building adaptability and capacity for human capital accumulation are sensible, given the human capital deficiencies, especially with respect to education and nutrition. [...] The concentration on labour-protection measures and productive inclusion makes sense in a country where a significant share of the population is in the informal wage employment sector" (World Bank, 2018).

#### 2.3 Monitoring and evaluation (M&E) system framework



**OUTPUT:** Overview of SP M&E mechanisms at the national level.



In this subsection, include the following:

Potential sources:

- Legal and regulatory frameworks and strategies.
- Literature review.

Make use of information collected in subsections 2.2.2 and 2.2.3, complementing it with other sources if necessary, to identify whether there is a national framework for monitoring and evaluating public policies and, if applicable, specifically regarding the SP system of the country.

#### If an M&E framework exists:

- Describe its nature, including whether it fulfils the information needs of various groups, such as the policymakers, implementers, donors, civil society, and the media.
- Discuss whether system level M&E is undertaken on an ad-hoc basis, or systematically by the national auditor, the parliament, or other actors.

## M&E functions on system level (in contrast to those on programme level)

On the system level, M&E focuses on strategies, policies, and implementation, including concerns with enhancing coordination among stakeholders, increasing efficiency of SP spending, or making better policies based on the numbers of those in need and those actually provided with assistance.

Furthermore, M&E on the system level entails the capacity to gather evidence on past actions, and use lessons learned as a foundation for future endeavours. Reliable data and analysis are key.

The goals of M&E typically include:

- Improvement of management, planning, prioritisation, and budgeting to guarantee effectiveness and efficiency.
- Ensuring internal and external accountability.
- Guaranteeing transparency.

#### [Ex] Uzbekistan

SP monitoring at the national level is the responsibility of Parliament, overseen by the Committee on Labour and Social Issues in the Legislative Chamber, and the Committee on Budget and Economic Reform, and the Committee on Science, Education, and Healthcare in the Senate. Overall reporting is the responsibility of the Information Analytical Department of the Cabinet of Ministers, the budget and expenditure monitoring is the responsibility of the Department of Financial Control, and financial monitoring is carried out in each ministry, agency, and local government unit. Each institution also monitors the documentation for eligibility in the programmes.

However, there is no integrated M&E framework, with clear targets and indicators, on neither system nor programme level. Monitoring concentrates on financial audits and checks, as well as on ensuring that paperwork is in order. Also, none of the programmes has been evaluated, apart from ALMPs, which were evaluated only superficially (Papa and others, 2020).

|           | 2.4 Coverage by SP function   |  |  |  |  |  |  |  |
|-----------|---|--|--|--|--|--|--|--|
| $\oslash$ | OUTPUT: Presentation of indicators showing<br>effective coverage of SP functions (including<br>as per SDG indicators 1.3.1 and 3.8.1).  |  | As also shown in section 2.2.2, SP functions<br>are used broadly to refer to various population<br>groups (e.g. refugees, old aged), or types of<br>contingencies (e.g. unemployment or sickness),<br>as defined by ISPA CODI (ISPA (n.d.)), by ILO<br>Convention, 1952 (No. 102), and by a few other<br>SDG indicators related to SP (associated<br>annexes tab and table 2.6).<br>SP functions compile the important vulnerabilities<br>people may experience during their lifetime<br>that render them eligible for SP interventions.<br>Finding whether these groups or contingencies<br>are effectively covered helps to identify potential<br>SP gaps.   |  |  |  |  |  |
|           | For effective coverage of functions, use <b>table 2.6</b> indicators.   |  | ESCWA provides the <b>figures 2.1-2.8</b> on SDG indicator 1.3.1 and <b>figure 2.9</b> .   |  |  |  |  |  |
| •         | If data are available, include effective<br>coverage in figures 2.1-2.9 for key SP<br>functions and some other SDG indicators<br>related to SP, so as to illustrate effective<br>coverage and draw conclusions based on<br>international comparisons, as shown on<br>the right for the case of Lebanon. After<br>each figure, discuss the level of coverage<br>and how it compares with other Arab<br>countries, with other regions, and with<br>the world. If possible, also state what the<br>explanations for the variations observed<br>could be.<br>In addition to the country under appraisal,<br>include regional averages for other Arab<br>countries with available data, Latin<br>America and the Caribbean (LAC), Sub-<br>Saharan Africa (SSA), and the global<br>average (world). |  | [Ex] North African countries or Gulf Cooperation<br>Countries. Figure 2.8 shows that the proportion of<br>persons above statutory retirement age receiving<br>a pension is higher in Jordan (57.3 per cent)<br>than in the Arab region overall (34.42 per cent).<br>A partial explanation may be that Jordan has a<br>relatively low level of economic informality. Its<br>social insurance schemes, including those for<br>private-sector workers, have existed for decades.<br>Thus, many of those who are older today could<br>join and pay contributions when they were still of<br>working age. The other 'extra figures' mentioned in table 2.6 should<br>be produced by authors if data are available from<br>United Nations sources. Authors can use associated<br>figures and annexes to gather the data and produce<br>the figures. No dummy figures are provided. |  |  |  |  |  |

Suggested sources:

• Table 2.6 data sources or ILO for coverage equations for SDG 1.3.1: ILO indicators, Social Protection Platform (social-protection.org).

#### Table 2.6 Effective coverage (function indicators)

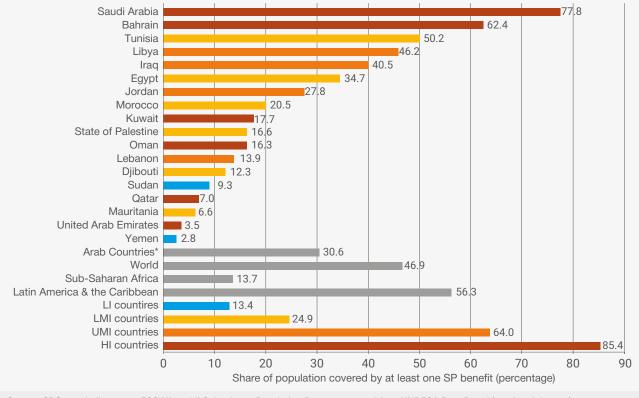
| Function                            | Effective coverage indicator  | Sources  | Figure # in this subsection |
|-------------------------------------|---|--|-----------------------------|
| Overall SP<br>effective<br>coverage | Share of total population receiving at least one<br>contributory or non-contributory cash benefit, or<br>actively contributing to at least one social security<br>scheme (SDG indicator 1.3.1, point a) | ESCWA  | 2.1 and 2.2                 |
| Child and<br>family benefit         | Proportion of children/households receiving child/<br>family cash benefits to total number of children/<br>households with children (SDG indicator 1.3.1,<br>point b)                                   | ESCWA  | 2.3                         |
| Maternity                           | Share of women receiving maternity cash benefits<br>to women giving birth in the same year (SDG<br>indicator 1.3.1, point c)  | ESCWA  | 2.5                         |
| Disability                          | Share of persons receiving disability cash benefits<br>to number of persons with severe disabilities<br>(SDG indicator 1.3.1, point d)  | ESCWA  | 2.4                         |
| Unemployment                        | Share of recipients of unemployment cash<br>benefits to number of unemployed persons (SDG<br>indicator 1.3.1, point e)  | ESCWA  | 2.6                         |
| Employment<br>injury                | Share of workers covered for employment injury<br>out of all working age population (SDG indicator<br>1.3.1, point f)   | ESCWA  | 2.7                         |
|                                     | Share of older persons above statutory retirement age receiving a pension (including contributory and non-contributory) (SDG indicator 1.3.1, point g)  | ESCWA  | 2.8                         |
| Old age                             | Share of working age population or economically<br>active population (labour force) contributing to a<br>pension scheme   | World Social<br>Protection<br>Data<br>Dashboards | 2.9                         |

Comprehensive national reviews of the systems and reforms of ESCWA member countries

32

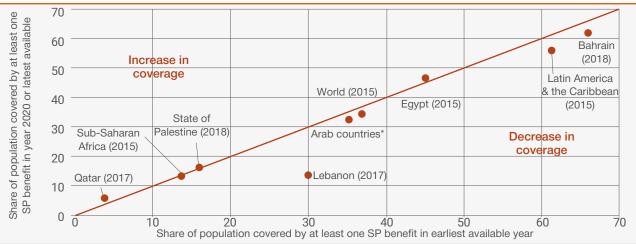
| Function  | Effective coverage indicator  | Sources   | Figure # in this subsection |
|---|---|---|-----------------------------|
| Survivorships                                     | No comparable international effective coverage indicators   |   |                             |
| Sickness  | Share of working age population receiving sick-<br>leave cash benefits out of those legally covered<br>by SP schemes in the case of sickness in the<br>respective year  | lf data are<br>available  | Additional figure           |
| Active labour-<br>market<br>programmes            | Coverage for active labour market; all labour<br>market; public works. Data availability may be<br>limited (ASPIRE indicators on share of population<br>participating in SP and labour-market programmes,<br>including direct and indirect beneficiaries)   | ASPIRE;<br>consult<br>national<br>statistical<br>office on<br>available<br>household<br>surveys | Additional figure           |
| Healthcare  | An index of coverage of essential health services<br>(universal health coverage), defined as the average<br>coverage of essential services based on tracer<br>interventions that include reproductive, maternal,<br>new-born and child health, infectious diseases,<br>non-communicable diseases, and service capacity<br>and access, among populations generally and<br>most disadvantaged (SDG indicator 3.8.1) | WHO and<br>World Social<br>Protection<br>Data<br>Dashboard                                      | Additional figure           |
| Food and<br>nutrition<br>(additional<br>function) | Share of those moderately or severely food insecure out of whole population (SDG Indicator 2.1.2)   | FAO   | Additional figure           |
| Housing   | Share of urban population living in slums, informal settlements, or inadequate housing out of total population (SDG Indicator 11.1.1)   | UN-Habitat  | Additional figure           |
| Poverty<br>and social<br>exclusion                | Share of social assistance recipients to total<br>number of vulnerable persons (defined as all<br>children and adults not covered by contributory<br>benefits, and persons above retirement age not<br>receiving contributory benefit pensions) (SDG<br>indicator 1.3.1)  | ESCWA   |                             |
| (general social<br>assistance)                    | Proportion of poor population receiving social<br>assistance cash benefit: ratio of social assistance<br>recipients to population living below the national<br>poverty line   | ESCWA   |                             |

**Figure 2.1** Percentage of total population covered by at least one SP benefit (effective coverage, SDG indicator 1.3.1, point a); bar chart (or map) displaying values for all Arab countries, in addition to world and some regional averages; latest available year



**Source**: SDG 1.3.1 indicators at ESCWA and ILO database. Population figures extracted from UNDESA Data Portal (as of 21 July 2022). \* Average value for 18 countries with available data.

# **Figure 2.2** Percentage of total population covered by at least one SP benefit; graph displaying values for all Arab countries, in addition to world and some regional averages; earliest available year vs. latest available year



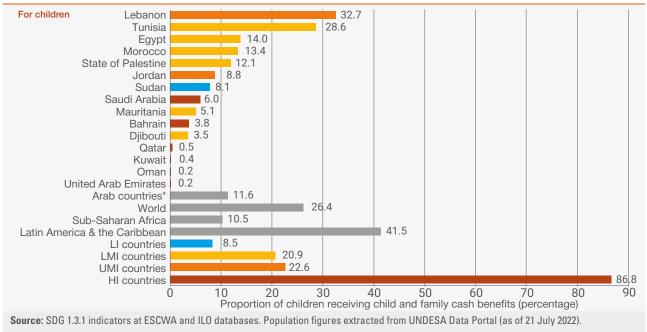
Source: SDG 1.3.1 indicators at ESCWA and ILO databases (as of 6 January 2022).

Note: Values between parentheses represent earliest available year.

\* Average value for five countries with available data.

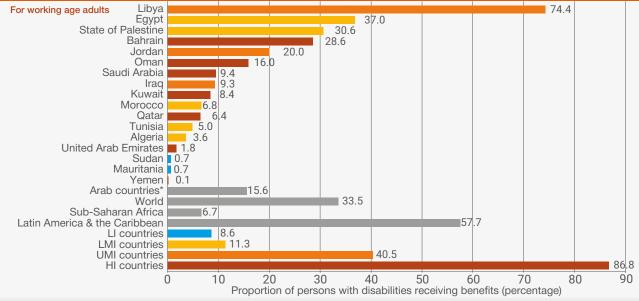
**Doll.** An updated figure 2.2 will be provided by ESCWA technical editors, if available.

**Figure 2.3** Percentage of children (aged 0-14 years) receiving child and family cash benefits (SDG indicator 1.3.1, point b); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year



\* Average value for 15 countries with available data.

**Figure 2.4** Percentage of persons with severe disabilities receiving disability cash benefits (contributory vs. non-contributory, if available) (SDG indicator 1.3.1, point d); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year

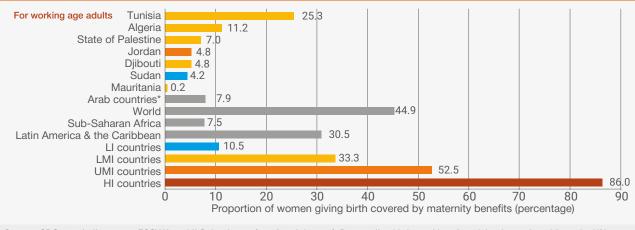


Source: SDG 1.3.1 indicators at ESCWA and ILO databases. Population figures extracted from UNDESA Data Portal (as of 21 July 2022).

**Note:** Following the approach used in ILO 2020-2022 World Social Protection Report, the ratio of persons with severe disabilities is calculated as the product of prevalence of disability ratios (estimates published for each country group by the WHO) and population size of each country (see Note 4, Table A4.2, Statistical Annex, ILO World Social Protection Report 2020-2022).

\* Average value for 17 countries with available data

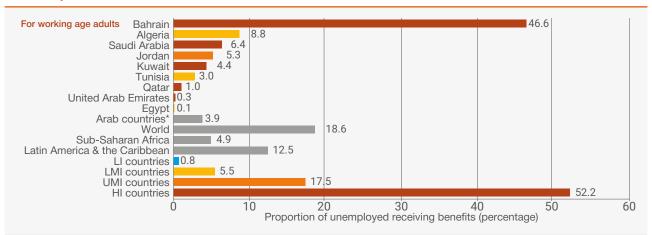
**Figure 2.5** Percentage of women giving birth covered by maternity benefits (contributory vs. noncontributory, if available, SDG indicator 1.3.1, point c); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year



Source: SDG 1.3.1 indicators at ESCWA and ILO databases (as of 21 July 2022). Data on live births and late foetal deaths retrieved from the UN Demographic Yearbook 2020, ESCWA Data Portal, United Nations Population Prospects 2022, Jordan Statistical Yearbook, 2021; Lebanon Central Administration of Statistics.

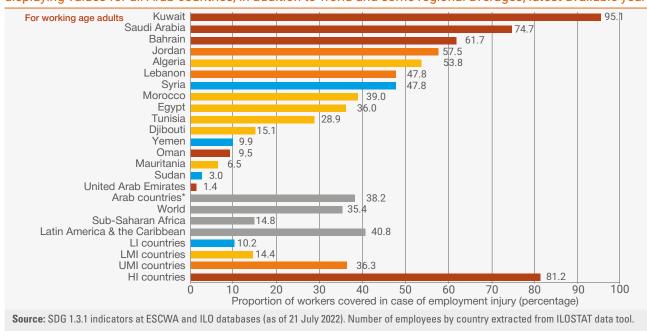
\* Average value for seven countries with available data.

**Figure 2.6** Percentage of unemployed receiving unemployment cash benefits (SDG indicator 1.3.1, point e); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year



Source: SDG 1.3.1 indicators at ESCWA and ILO databases (as of 21 July 2022). Unemployment rates and labour-force data extracted from ILOSTAT data tool.

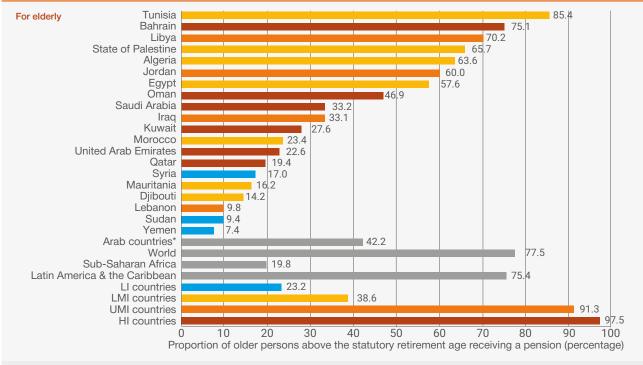
\* Average value for nine countries with available data.



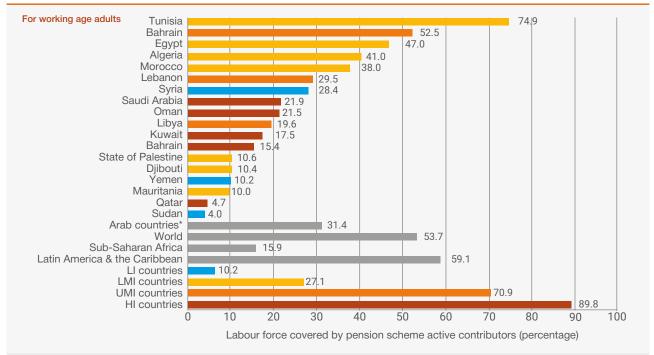
**Figure 2.7** Percentage of workers covered for employment injury (SDG indicator 1.3.1, point f); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year

\* Average value for 16 countries with available data.

**Figure 2.8** Percentage of persons above statutory retirement age receiving a pension (SDG indicator 1.3.1, point g); bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year



**Source:** SDG 1.3.1 indicators at ESCWA and ILO databases. Population figures retrieved from UNDESA Data Portal (as of 21 July 2022). \* Average value for 20 countries with available data. **Figure 2.9** Percentage of working age population or economically active population (EAP) contributing to/ covered by a pension scheme; bar chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year; by gender if possible



Source: ESCWA and ILO databases. Labour force data extracted from ILOSTAT data tool (as of 21 July 2022).

\* Average value for 18 countries with available data.

### 2.5 Public financing and expenditure

### 2.5.1 Budget planning and responding to shocks

**OUTPUT:** Overview of how SP is reflected in national budget and of amount allocated to SP vis-à-vis other sectors.



Þ

In this subsection, include the following:

Identify whether SP is included as a specific spending category in national budget, and, if possible, what this category comprises. If the budget is presented according to an established public spending classification system (for instance the OECD Classification of the Functions of Government (COFOG)), rely on this to show proportion of spending dedicated to SP, and how this spending is in turn divided among SP categories.

### [Ex] Ivory Coast

The Ivorian Ministry of the Budget and the State Portfolio presents national spending according to the OECD Classification of the Functions of Government (COFOG). In the 2022 budget, 1.1 per cent of total spending went to SP. The COFOG SP function comprises 9 sub-groups. However, in Ivory Coast, SP spending is disaggregated by only two: family and children (0.2 per cent), and SP not elsewhere classified (0.9 per cent). 38

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| Use a pie chart, figure 2.10, to illustrate  |
|--|
| share allocated to SP (or social policies if |
| data specific to SP are not available) vis-  |
| à-vis other sectors. Note that components    |
| of the graph (SP, health, education,         |
| defence) vary depending on how the           |
| budget of the country is organized.          |

[Ex] Ivory Coast

In Ivory Coast, SP was the one of the 10 COFOG functions that received the least proportion of spending (1.1 per cent). In comparison, 3.8 per cent of the budget went to defence spending.

### Suggested sources:

• Ministry of Finance and national budget.

### **Optimal data sources:**

**Guiding topics:** 

• IMF Government Expenditure.

Clear rules and regulations.

macroeconomic scenario).

If data are available, discuss degree to which the SP budget planning, approval, and execution process is well established, predictable, transparent, and sustainable, i.e. good financial governance.

dependency ratio).Periodic fiscal equilibrium actuarial studies.

· Realistic revenue predictions (consistent

with past revenues and with the

• Realistic costing of policies/programmes (e.g. assumptions about inflation and exchange rates).

 Budget based on realistic macroeconomic and demographic scenarios (e.g. reviews of old age pensions taking into consideration changes in

- Actors requested to conduct periodic audits and actuarial valuations in line with accounting standards.
- Information regularly produced and published (e.g. financial records (monthly, mid-year, annual) and fiscal reports).
- Statistical data timely produced, compiled, and made available.
- Independent auditor reviews. (ISPA (n.d.); Potter and Diamond, 1999; TRANSFORM, 2017c).

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Assess whether SP financing encompasses shocks typically faced in the country.

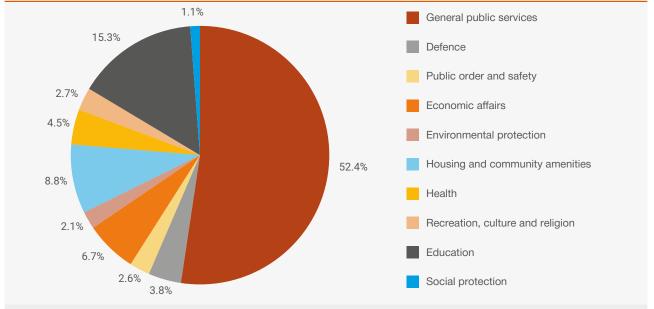
Are there legal provisions to respond to shortfalls? (A shortfall occurs when additional funds are needed in case of shocks, e.g. COVID-19 crisis).

### Usual funding tools to respond to shocks

Costs in emergencies should be estimated in advance to be added to programme budgets. Financial resources should also be secured through an allocation plan: what will be financed, when, and how (TRANSFORM, 2020).

- Is there a budget for predictable/recurrent emergencies (seasonal food insecurity)?
- Are there additional resources available for scaling up response in case of a shock?
- Maintain domestic contingency funds, e.g. Calamity Relief Fund of India.
- Definition of pre-agreed shock triggers for quick funding mobilization when needed.
- Contingent credit facilities (pre-agreement with commercial banks to access loans in case of shocks, at a pre-agreed rate).
- Risk insurance, e.g. Caribbean Catastrophe Risk Insurance Facility and African Risk Capacity (Oxford Policy Management, 2017; UNDESA, 2020).





Source: Ministry of the Budget and the State Portfolio of Government of Ivory Coast (n.d.).

### 2.5.2 Sources of revenue



**OUTPUT:** Overview of sources of revenue allocated to SP.

In this subsection, include the following:

Identify sources of revenue and use a pie chart, figure 2.11, to illustrate the share of each. Use the budget of the country to collect information for the chart. [Ex] SP usual revenue sources:

- General government revenues.
- · Earmarked taxation.
- Social insurance contributions to government schemes (e.g. pension funds and sickness funds).

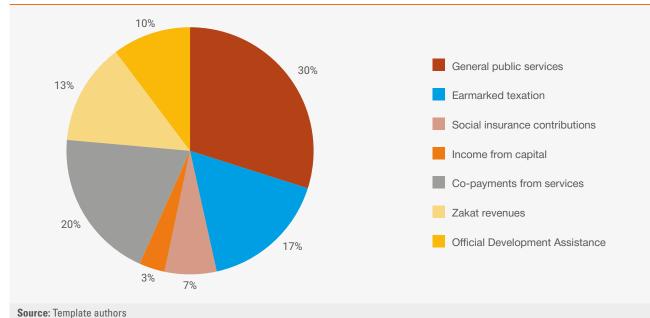
**40** 

|   | <ul> <li>Income from capital.</li> <li>Co-payments for services.</li> <li>Zakat revenues, if applicable.</li> <li>Official development assistance (ODA),<br/>if applicable (TRANSFORM, 2017c).</li> <li>Donations.</li> </ul>   |
|---|---|
| + If data are available, carry out the following appraisals:  |   |
| Discuss how progressive (or regressive)<br>the mix of revenue sources is. Consider<br>the overall taxation system of the country,<br>and who is paying social insurance<br>contributions or co-payments for services,<br>according to wealth level (make use of<br>information collected in section 3.2). | Direct taxes (levied on incomes, property,<br>and wealth) tend to be progressive as<br>they "put a higher proportional burden on<br>wealthier individuals, which leads to more<br>favourable distributional outcomes". Indirect<br>taxes (levied on goods and services) tend<br>to be more regressive since all groups will<br>pay the same tax amount regardless of their<br>wealth level (TRANSFORM, 2017c: 35). To<br>illustrate, Bastagli (2015) shows that in the<br>OECD countries she analysed, direct taxes<br>and transfers lead to a 30 per cent reduction<br>in income inequality, on average. However, in<br>Latin American countries direct taxes decrease<br>inequality only by 3.6 per cent. |
| Discuss adequacy of the share of<br>earmarked taxation of general government<br>revenues (according to country context and<br>SP system development).   | <ul> <li>Earmarked revenues refer to shares of government funds that are reserved, via legislation, for specific sectors.</li> <li>Potential advantages: <ul> <li>Predictability.</li> <li>Guaranteed funds for SP in face of short-term fluctuations (and, consequently, favourable to long-term developmental goals).</li> </ul> </li> <li>Potential disadvantages: <ul> <li>Lack of flexibility (can lead to inefficient use of funds).</li> <li>Hampering new/reviewed programmes or development strategies.</li> <li>Reduced room for manoeuvre in case of shocks (OECD, 2020).</li> </ul> </li> </ul>   |

Discuss whether the country is dependent on official development assistance and to which extent, taking into consideration the country context.

In the Arab region, ODA levels are relatively low and mostly channelled to countries facing humanitarian crises. Nonetheless, ODA is an initial alternative for countries that are unable to fund their SP floors (Bloch and others, 2019). Over the long-term, however, donors should support the transition to nationally financed SP systems, since ODA is not a reliable longstanding financing source and should not be regarded as so.





### 2.5.3 Public expenditure on SP

**OUTPUT:** Appraisal of public expenditure on SP, including whether its composition is aligned with the SP strategy and the risk and vulnerability profile.

- When considering SP expenditure, one needs to consider the definition of SP used. In this Template, public spending on SP includes social assistance, social insurance, and complementary measures aimed at building human capital, creating productive assets, and facilitating access to employment (see Glossary).
- In view of the importance of universal subsidies in some countries in the region, for the purposes of this Template, they may also be included in SP expenditure. If possible, differentiate between subsidy spending and other types of SP spending.

- Discuss for the country the level of public spending on SP, comparing it with other countries and available regional data. In particular, comparison with countries on the same level of economic development makes sense. Include the following figures:
- Figure 2.12: Public SP expenditure per capita vs. GDP per capita (PPP Intl\$) for Arab countries, Arab countries' average, World average, other regional averages, and averages for World Bank Income Groups (LI, LMI, UMI, HI).
- Figure 2.13: Public SP expenditure per capita (percentage of GDP) in 2010-11 vs. year 2020 (or latest available year) for Arab countries, Arab countries' average, World average, other regional averages, and averages for World Bank Income Groups (LI, LMI, UMI, HI).
- Figure 2.14: Public SP expenditures (including health) (percentage of general government expenditure) vs. GDP per capita (PPP Intl\$) for Arab countries, Arab countries' average, World average, other regional averages, and averages for World Bank Income Groups (LI, LMI, UMI, HI).

Discuss whether public spending is aligned with priorities of the SP strategy of the country, and the vulnerability and risk profile of the population.

- Public expenditure on other social sectors, such as education and social care, are not included (Mathai and others, 2020).
- 00.00.
  - **Figures 2.12, 2.13,** and **2.14** will be provided by ESCWA technical editors.

### Note to ESCWA technical editors:

In **figure 2.12**, country SP expenditure should be the latest available, and the GDP per capita should be for the same year.

In **figure 2.12,** for comparison, data should be in PPP Intl\$. For ECSWA countries, there is a PPP currency converter.

Aggregate data should be for the same year. Other data should not be more than five years old. Note that countries may calculate SP expenditure differently, e.g. some may not count subsidies, and others may count healthcare expenditure.

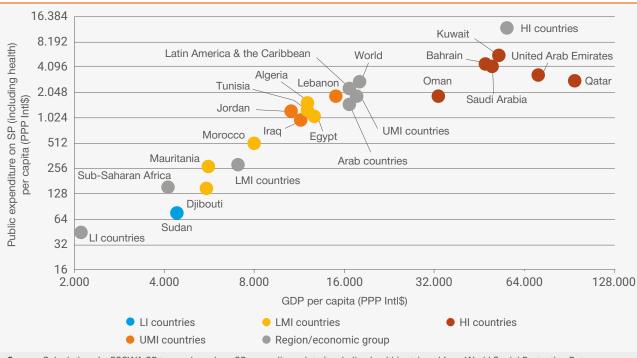
### National data sources:

- Ministry of Finance.
- National Statistics Institutes.
- Line ministries responsible for SP.

### International comparative data:

- ILO WSPR.
- ILO Social Protection Dashboard.
- WHO Global Health Expenditure Database (GHED).
- ESCWA Data Portal.
- UNDESA World Population Prospects.
- United Nations Data.
- Economic commissions of the various United Nations regions.
- Data related to Social Expenditure Monitor: ESCWA.
- GDP in PPP Intl\$: World Bank.
- GDP per capita in PPP Intl\$: World Bank.

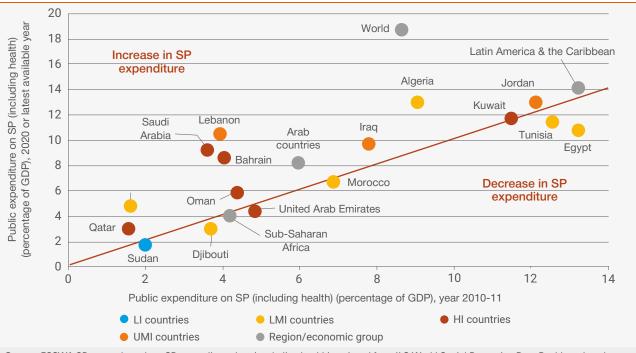
Reflecting on section 1 and subsection 2.2.3, discuss whether resources spent reflect priorities of SP strategy of the country, and/or address vulnerability and risk profile of the population.



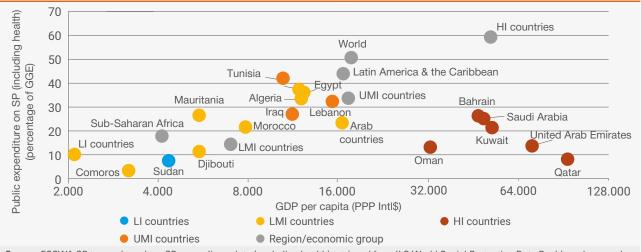
### Figure 2.12 Public SP expenditure (including health) per capita vs. GDP per capita (PPP Intl\$)

**Source:** Calculations by ESCWA SP teams, based on: SP expenditure data (excluding health) retrieved from World Social Protection Data Dashboard, government health expenditure data retrieved from WHO Global Health Expenditure Database (GHED), GDP data and PPP conversion factor retrieved from World Bank Open Data, classification of countries by income retrieved from World Bank World Development Indicators (WDI), and population data retrieved from UNDESA World Population Prospects 2022.

# **Figure 2.13** Public SP expenditure (including health) per capita (percentage of GDP) in 2010-11 vs. 2020 (or latest available year)



**Source:** ESCWA SP teams, based on: SP expenditure data (excluding health) retrieved from ILO World Social Protection Data Dashboard, and government health expenditure data retrieved from WHO Global Health Expenditure Database (GHED).



# **Figure 2.14** SP Spending Prioritization: Public SP expenditure (including health) (percentage of GGE) vs. GDP per capita (PPP Intl\$)

**Source:** ESCWA SP teams, based on: SP expenditure data (excluding health) retrieved from ILO World Social Protection Data Dashboard, general government expenditure, and government health expenditure data retrieved from WHO Global Health Expenditure Database (GHED).

Where data for the above figures are lacking, include the following figures if their requisite data are available:

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- Figure 2.15: SP Spending Prioritization: Public SP expenditures on children (excluding health) per child (aged 0-14) (percentage of GDP) vs. share of children (aged 0-14) of total population, for Arab countries, Arab countries' average, World average, other regional averages, and averages for World Bank Income Groups (LI, LMI, UMI, HI).
- Figure 2.16: Public SP expenditures on working age adults (excluding health) per adult (aged 15-59 or 15-64) (percentage of GDP) vs. share of working age population (aged 15-59 or 15-64) of total population, for Arab countries, Arab countries' average, World average, other regional averages, and averages for World Bank Income Groups (LI, LMI, UMI, HI).
- Figure 2.17: Public SP expenditures on elderly (excluding health) per elderly (above statutory retirement age) (percentage of GDP) vs. share of elderly population (above statutory retirement age) of total population, for Arab countries, Arab countries' average, World average, other regional averages, and averages for World Bank Income Groups (LI, LMI, UMI, HI).

# Updated figures 2.15, 2.16, and 2.17 will be provided by ESCWA technical editors, if available.

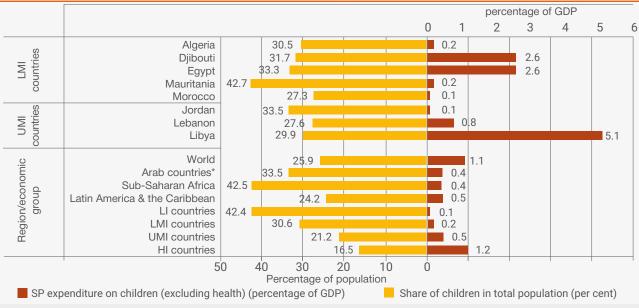
### Note to ESCWA technical editors:

International comparative data.

- Expenditure data: ILO and WHO.
- Population data: UNDESA.
- GDP data: World Bank.

Currently SP expenditure data should be as percentage of GDP for comparison purpose with proportion of demographic groups (children, adults, or elderly) in a population.

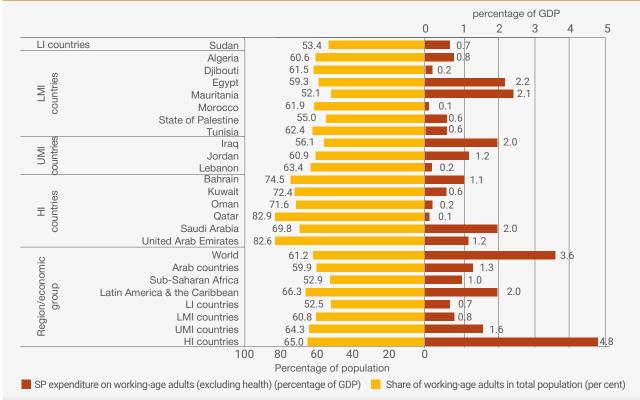
Aggregate data should be from the same year. Other data should not be older than five years. Note that countries may differ in calculating SP expenditure; e.g. some may not count subsidies, and others may count healthcare expenditure.



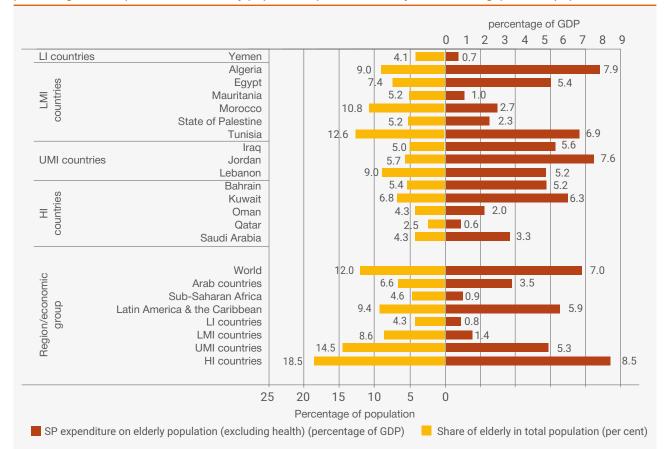
# **Figure 2.15** Public SP expenditure on children (excluding health) per child (aged 0-14) (percentage of GDP) vs. share of children (aged 0-14) of total population

**Source:** SP expenditure data (excluding health), retrieved from ILO World Social Protection Data Dashboard. GDP data retrieved from World Bank Open Data. Classification of countries by income retrieved from World Bank World Development Indicators (WDI). Population data retrieved from UNDESA World Population Prospects 2022.

# **Figure 2.16** Public SP expenditure on working age adults (excluding health) per adult (aged 15-59 or 15-64) (as percentage of GDP) vs. share of working age adults (aged 15-59 or 15-64) in total population



Source: SP expenditure data (excluding health), retrieved from ILO World Social Protection Data Dashboard. GDP data retrieved from World Bank Open Data. Classification of Countries by income retrieved from World Bank World Development Indicators (WDI). Population data retrieved from UNDESA World Population Prospects 2022.



# **Figure 2.17** Public SP expenditure on elderly (excluding health) per elder (above statutory retirement age, percentage of GDP) vs. share of elderly population (above statutory retirement age) of total population

Source: SP expenditure data (excluding health), retrieved from ILO World Social Protection Data Dashboard. GDP data retrieved from World Bank Open Data. Classification of Countries by income retrieved from World Bank World Development Indicators (WDI). Population data retrieved from UNDESA World Population Prospects 2022.

### 2.6 Institutional structure

### 2.6.1 Roles and responsibilities of key actors

**OUTPUT:** Overview of key actors and their roles and responsibilities, appraisal of the extent to which these are anchored in the legal framework, and the degree of integration or fragmentation.



In this subsection, include the following:

### Note

Mandates of actors will likely be the key source for this subsection. It is possible, though, that mandates are not clearly defined or that actual practice is at variance with the roles and responsibilities defined in the regulatory framework. Hence, it is important to complement data collection with KIIs. Map the actors responsible for SP formulation and delivery chain, in accordance with the structure below.

- Policymaking roles and responsibilities. Where applicable, outline roles and responsibilities regarding:
  - Formulation of policies, legal, and regulatory frameworks, as well as other guidelines for the SP system as a whole.
  - Support for intersectoral coordination, i.e. map financial and institutional arrangements for facilitation of coordination among various actors and social policy sectors.
  - Selection of programmes and setting of their objectives.
  - > Oversight.
- Programme and administrative roles and responsibilities. Where applicable, outline roles and responsibilities:
  - Translating systems/policy level guidelines/regulations into concrete and specific tasks at lower government levels.
  - > Improving programme design.
  - Promoting programme harmonization and linkages.
  - Conducting oversight across programmes.
- Discuss whether (or to which extent) the roles and responsibilities are anchored in the legal and regulatory frameworks.

### Note

- This subsection considers the system level, i.e. it takes an overview approach to the SP structure of the country. Note that while actors with programme and administrative responsibilities should be identified, more detailed discussions on programme implementation should be held in section 3.3.
- If applicable, also map key international actors, such as UNICEF, WFP, and World Bank, especially for crisis affected countries.

[Ex] The Ministry of Social Affairs of Libya.

"[The Ministry is] specifically mandated to work on advancing all areas of social development, including developing the Libyan society, and protecting it from factors of vulnerability and disintegration, through developing programmes, and policies, and coordinating efforts to achieve comprehensive social development" (Hammad and others (forthcoming)).

[Ex] Subsidiary autonomous bodies under the Ministry of Social Affairs of Libya

"[The Ministry] has several subsidiary autonomous bodies, the most relevant of which are: the Social Security Fund (SsecF), the Social Solidarity Fund (SsolF), and the Centre for Social Research. The Ministry is responsible for overseeing the work of its subsidiary bodies, but is currently also implementing, through its respective departments, programmes similar to those offered by the SsolF in terms of social assistance and care services for elderly PwDs, and children without family care" (Hammad and others (forthcoming)). Comprehensive national reviews of the systems and reforms of ESCWA member countries

48

- Organize a summary table indicating the role and responsibilities of each actor. See table 2.7 below.
- Organize an organogram to illustrate the SP formulation and delivery chain, and the actor(s) responsible for each task category. See **figure 2.18** below.
- Identify and discuss gaps and overlaps, but also potential complementarities and synergies.
- Appraise the level of fragmentation of the SP system, and the level of integration among programmes and policies.

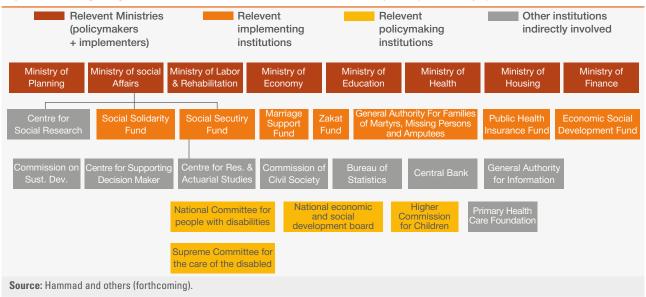
Figure 2.18 can be edited using Miro or other tools.

The two basic categories of tasks are: policymaking and administration/implementation. However, other, or additional, categories may be used, depending on country context.

### Appraisal of level of fragmentation/integration

Are there relatively few institutions that implement multiple programmes under one umbrella (e.g. one institution overseeing one core programme that provides multiple modalities for various groups), or are several actors responsible for a number of programmes?

### Figure 2.18 Organogram of Main National Actors involved in SP (example of Libya)



### Table 2.7 National Actors in SP and their roles and responsibilities (example of Libya)

|  |        | Level                              |   |
|--|--------|------------------------------------|---|
| Actor  | Policy | Programme<br>and<br>administrative | Roles and responsibilities  |
| Ministry of<br>Social Affairs                                | x      | X                                  | Develops programmes, policies, and coordinates various efforts<br>to achieve comprehensive social development. Subsidiary<br>autonomous bodies have programme and administrative functions. |
| Social<br>Solidarity Fund<br>– Ministry of<br>Social Affairs |        | x                                  | Oversees the distribution of non-contributory benefits.<br>Manages care centres for PwDs, elderly and juveniles,<br>nurseries, and care centres for women.                                  |

|  |        | Level                              |   |
|--|--------|------------------------------------|---|
| Actor  | Policy | Programme<br>and<br>administrative | Roles and responsibilities                            |
| Social Security<br>Fund – Ministry<br>of Social<br>Affairs |        | X                                  | Oversees the implementation of contributory benefits. |
| Ministry of<br>Finance                                     | x      | X                                  | Finances and implements most subsidy programmes.      |

Source: Hammad and others (forthcoming).

Note: This table does not necessarily provide a complete representation of the Libya case, but merely offers examples to illustrate how to fill in the entries.

### 2.6.2 Coordination structures and practices

**Potential sources: OUTPUT:** Overview of coordination structures and practices, and appraisal of • Legal and regulatory frameworks. the level of integration. · Possibly complemented by structured or semistructured Klls. In this subsection, include the following: Identify vertical and horizontal structures What are coordination structures and practices? and practices of coordination among the actors. Coordination ranges from less complex arrangements, such as a simple networking, to more complex, integrated arrangements where objectives, activities, and resources may be shared. See explanatory table 2.9, which illustrates this continuum of relationships (TRANSFORM, 2017b). [Ex] coordination practices: Knowledge sharing. • Shared or merged human and IT resources. · Contractual agreements. Pooled resources. • Shared management agency. Multi-agency plans. · Shared objectives and targets (ILO and others, 2020; TRANSFORM, 2017a).

Vertical and horizontal coordination

2017d). There are three main approaches

to decentralization:

Vertical coordination is that among actors at different hierarchical levels (i.e. between the policy level and the programme and implementation levels), while Horizontal coordination is that among actors at the same hierarchical level (TRANSFORM, 2017a). [Ex] Vertical coordination The Brazilian Bolsa Família Programme requires coordination between central government, which pays the cash benefit, and the municipalities, which are responsible for the social registry, and for providing the social services linked to that benefit. Several coordination tools, such as multiannual plans and integrated MIS to monitor performance and compliance with conditionalities, were developed (ILO, 2021). Horizontal coordination The Egyptian Ministerial Social Justice Committee, established in 2014, is responsible for ensuring harmonization of the social inclusion agenda of the country. For implementation of the Egyptian Takaful and Karama programme, the Ministry of Social Solidarity, Ministry of Education, and Ministry of Health and Population have signed memoranda of understanding to monitor compliance with conditionalities and ensure availability of services (ESCWA, 2019). Note: Use structured or semi-structured KIIs to complement data collection. Organize a table summarizing the structures and practices found. See model table 2.8 below. Discuss level of coordination (see table 2.9 Note: Table 2.9 is meant to guide analysis of level below), gaps, and points for improvement. of coordination; it is not to be reproduced in the country report. Identify and discuss level of decentralization Decentralization refers to the level of "transfer within the system, including whether there is of authority and functional responsibility from a clear institutionalized distinction between the central government to other government the policymaking level and the policy organizations, including local government implementation level. or autonomous agencies" (TRANSFORM,

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Assess extent of shock responsiveness of SP governance framework:

- Map relevant stakeholder informal channels or formal coordination arrangements among them, including clarity on roles and responsibilities.
- Understand who is responsible for which type of decision making, and whether local levels of administration have a role in planning a shockresponse strategy.
- > Are there any horizontal coordination mechanisms encompassing government and non-government actors?
- Is there vertical coordination between the SP sector and crisis-related sectors?

### Table 2.8 Summary of coordination structures and practices (example of Morocco)

| Coordination structure<br>or practice                                | Actors involved   | Vertical or<br>horizontal? | Level of cooperation   |
|--|---|----------------------------|--|
| Ministerial SP System<br>Reform and Governance<br>Steering Committee | Head of Government, 14<br>ministers, President of the<br>Supervisory Authority of<br>Insurance and Social Welfare,<br>general director of CNSS<br>(Caisse Nationale de Sécurité<br>Sociale), and directors of<br>CMAM (Caisse Marocaine<br>de l'Assurance Maladie) and<br>ANAM (Agence Nationale de<br>l'Assurance Maladie) | Horizontal                 | Integration, since there is<br>a formal relationship (an<br>organizational mandate),<br>as well as shared agencies<br>and integrated planning: the<br>Interministerial Technical<br>Committee, functioning as<br>a Secretariat, and specific<br>interministerial steering<br>and technical committees<br>established to enable<br>the RSU (Single Social<br>Registry) and NPR (National<br>Population Registry). |

### Source: ESCWA, 2019.

Note: This table does not necessarily provide a complete representation of the Morocco case, but merely offers examples to illustrate how to fill in the entries.

### **De-concentration**

Transfer of administrative responsibility from central government to sub-national levels that then function as extensions of the central level.

### Delegation

Transfer of administrative responsibility from central government to semi-autonomous agencies at sub-national levels.

### **Devolution**

Transfer of authority (policy and administrative) to autonomous tiers at sub-national levels (TRANSFORM, 2017d).

| Level                       | Networking                                       | Coordination                                     | Cooperation   | Collaboration   | Integration   |
|-----------------------------|--|--|---|---|---|
|                             | Exchange of<br>information for<br>mutual benefit | Exchange of<br>information for<br>mutual benefit | Exchange of<br>information for<br>mutual benefit<br>and a common<br>purpose | Exchange of<br>information for<br>mutual benefit<br>and a common<br>purpose                               | Integrated<br>information<br>sharing (e.g. a<br>single database<br>of beneficiaries)        |
|                             | Informal<br>relationship                         | Formal<br>relationship                           | Formal<br>relationship  | Formal<br>relationship  | Formal<br>relationship  |
| Coordination                | Minimal time<br>and trust<br>required            | Moderate<br>time and trust<br>required           | Substantial<br>time and trust<br>required                                   | Extensive<br>time and trust<br>required   | Extensive<br>time and trust<br>required   |
| structures and<br>practices | No sharing of resources                          | Minimal sharing<br>of resources                  | Sharing<br>resources<br>to achieve<br>a common<br>purpose                   | Sharing<br>resources and<br>enabling mutual<br>enhancement<br>of capacity to<br>achieve common<br>purpose | Merging<br>resources<br>(human,<br>financial,<br>IT facilities,<br>property etc.)           |
|                             | Limited<br>alteration of<br>activities           | Alteration of<br>activities                      | Alteration of<br>activities and<br>some sharing<br>of risks and<br>rewards  | Alteration of<br>activities and<br>sharing of risks,<br>responsibilities,<br>and rewards                  | Integrated<br>(joint) planning<br>and delivery of<br>programmes/<br>agencies/<br>structures |
| Source: TRANSFORM           | alteration of<br>activities                      |  | activities and<br>some sharing<br>of risks and                              | activities and<br>sharing of risks,<br>responsibilities,  | (joii<br>anc<br>pro<br>age  |

### Table 2.9 Levels of cooperation (Explanatory table; not to be reproduced by country-report authors)

2.6.3 Control and accountability mechanisms



**OUTPUT:** Overview of control and accountability mechanisms, and appraisal of their effectiveness.



In this subsection, include the following:

Identify key control and accountability mechanisms, and summarize the information in a table. See model table 2.10 below.

### **Potential sources**

- Legal and regulatory frameworks
- Possibly complemented by structured or semistructured KIIs.
- [Ex] Controls and accountability mechanisms provide oversight by verifying enforcement rules and whether incentives function adequately, i.e. lead to best practice or to underperformance. Examples include:
- Internal compliance inspections.
- Data crosschecks.
- Spot checks.

- Tribunals, courts, and ombudsmen.
- Scrutiny by Parliament.
- Supreme audit institutions.
- Financial audits.
- Social audits.
- Citizen report cards and community scorecards.
- Social control committees.
- Ensuring civil society has access to information.
- Third party audits.

(Bassett and others, 2012; TRANSFORM, 2017f).

- Discuss gaps and points for improvement
  - Conduct KIIs to investigate whether control and accountability mechanisms work in practice, providing the right incentives.

### Table 2.10 Control and accountability mechanisms summary (example of India)

| Mecl  | hanism  | Function/observations  | Legal or regulatory instrument<br>and/or relevant extract,<br>if applicable  |
|-------|---|--|--|
| Natio | al audits of Mahatma Gandhi<br>onal Rural Employment<br>rantee Scheme (MGNREGA) | Collective social accountability<br>mechanism used to monitor the<br>national-level programme at scale | Mahatma Gandhi National Rural<br>Employment Guarantee<br>Act mandates that social audits<br>be carried out in each Gram<br>Panchayat every 6 months                                |
| Right | t to Information Act (2005)   | Entitles citizens to request government information  | "An Act to provide for setting out<br>the practical regime of right to<br>information for citizens to secure<br>access to information under the<br>control of public authorities". |

Source: Schjødt, 2018; Government of India, 2005.

Note: This table does not necessarily provide a complete representation of the India case, but merely offers examples to illustrate how to fill in the entries.

### 2.6.4 Human resources and institutional capacity

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**OUTPUT:** Appraisal of human resources and institutional capacity of SP system.



In this subsection, include the following:

### **Potential sources:**

- Regulatory framework.
- Literature review.
- Possibly complemented by structured or semistructured KIIs.

- Discuss whether SP system has access to adequate resources to perform its role satisfactorily. Guiding questions:
  - > Are responsible agencies delivering their assigned services according to established standards?
  - If not, why? What are the causes behind shortfalls? What are areas for improvement?

## Types of resources to be considered (TRANSFORM, 2017d):

- Financial.
- Infrastructure.
- Equipment.
- Human resources (quantity and skill level).
- Laws, regulations, and institutional relationships.

[Ex] Building staff skills in Australia

In 2014-2015, the Department of Human Services of the Government of Australia innovated in its approach to improving staff skills a mandatory refresh training and a clearly defined servicedelivery standard (TRANSFORM, 2017d).



54

### Assessing shock-responsiveness

- > Are there strategies for adapting capacity across/within departments/institutions?
- Is training on early action and preparedness provided for national or local actors?



Appraise human resources at the system level. Search for the information indicated in model **table 2.11** below.

### Table 2.11 Appraisal of human resources



Source: Template authors, based on Save the Children and TRG, 2013.

<sup>a</sup> This is hard to assess and will more likely be an estimate of number of posts related to social protection. Consider policy and implementation/ administrative roles and responsibilities, as explained in section 2.6.

<sup>b</sup> Authors will need to specify whether the budget is institution or programme-based.

# **03** SP programme mapping, design, implementation, and organizational setup

# **Section purpose**

- Making a comprehensive inventory/mapping of SP programmes in the country, including their basic features.
- Collecting coverage and expenditure data on all SP programmes and appraising the level of integration across them.
- Providing detailed information on design, implementation features, funding sources, and organizational setup of selected programmes.
- Findings from this section will be summarized to feed policy recommendations in section 4.

Maximum length of this section is 13,000 words (including tables, boxes, associated annexes, and references).



56

Provide 5-6 key messages in bullet points, up to two of which should concern shock responsiveness. At the end of the drafting of the CPR, insert a few bullet points summarizing the findings from the section.

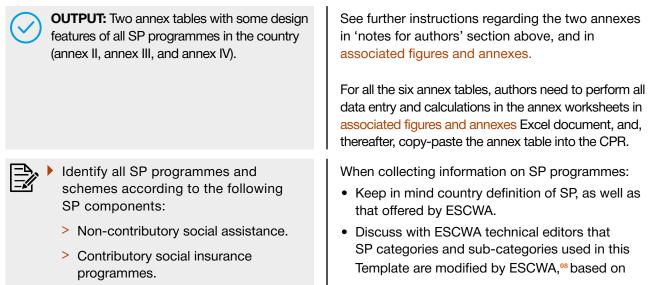
Insert the key messages in a standardized box, as shown below.

### Box 3.1

| Key messages |  |  |
|--------------|--|--|
| 1.           |  |  |
| 2.           |  |  |
| 5.           |  |  |

### 3.1 SP programmes: inventory, coverage, expenditure, and integration across programmes

### **3.1.1** Programme inventory



08. Labour-market policies have been adapted by ESCWA, focusing on LMPs more related to SP. Do not include social-care services in the inventory.

- > Selected labour-market measures and services.
- > Universal subsidies.

These four components are further divided into categories and sub-categories (cash transfers, in-kind transfers, old age pensions, employment incentives, etc.). Include also complementary programmes and approaches (e.g. ones related to productive inclusion).

Record programmes in the components, categories, and sub-categories in **table 3.1** in annex II.

For each SP programme, include in annex II, annex III, and annex IV further information on the general design features listed below:

### Annex II. Programme inventory

- Name of programme (in English, French and/or Arabic).
- SP Functions (cross-refer to section 2.4).
- Overall benefit category.
- Benefit sub-category.
- Main objective (e.g. poverty alleviation or increased access to medical care).
- Complementary measures.

ISPA CODI data collection framework categories. See categories and sub-categories and instructions in associated figures and annexes: ReadMe tab.

**Note:** It is important not to map broader social policy initiatives (see 2.5.3. Public Expenditure for help in defining which programmes to map) since social policy encompasses other dimensions besides SP, such as education.

### Data sources (examples):

- Any recently conducted assessments (any mapping exercises by the United Nations, World Bank, etc.).
- Admin data (data on beneficiaries collected for administrative purposes by government or programme implementers), and operational data.
- Implementation, annual, M&E, and operational reports.
- Programme specific documents.
- National laws, decrees, resolutions, and other documents that regulate programme operation.
- Policy and legal documents on national SP strategy and objectives.
- socialprotection.org programme profiles.
- Klls with programme administrators.

See descriptions of and information on indicators in associated figures and annexes: ReadMe tab.

### See Glossary for definitions

| Responsible implementing agency.  |   |
|---|---|
| Programme initiation year (and whether it is<br>a pilot, i.e. in one geographic region only). |   |
| Annex III. Social assistance target population and benefit payment                            | See table 3.2 example of the annex III. |
| Target population by:   |   |
| > Age group.  |   |
| <ul> <li>Poverty status.</li> </ul>   |   |
| <ul> <li>Employment status.</li> </ul>  |   |
| > Economic sector.  |   |
| > Demographic/social group.   |   |
| > Geographical area.  |   |
| <ul> <li>Targeting method.</li> </ul>   |   |
| Periodicity.  |   |
| Indexation.   |   |
| Maximum Duration (short-term benefit).  |   |
| Annex IV. Social insurance target population  | See table 3.3.                          |
| and benefit payment   |   |
| Target population by:   |   |
| <ul> <li>Labour sector.</li> </ul>  |   |
| > Employment status.  |   |
| <ul> <li>Economic sector.</li> </ul>  |   |
| > Geographical area.  |   |
| <ul> <li>Eligibility criteria:</li> </ul>   |   |
| <ul> <li>Contribution period required to receive benefit.</li> </ul>                          |   |
| > Normal Retirement Age.  |   |
| > Age limit to benefit (short-term benefits).   |   |
| Periodicity.  |   |
| Indexation.   |   |
| Maximum Duration (short-term benefit).  |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

|   | ,   |   |   |  |   |                                    |  |  |
|---|---|---|---|--|---|------------------------------------|--|--|
| lable annex II:<br>programme<br>inventory             |   | Genera  | General information                             |  | Objectives  | S                                  | Governance<br>fe                             | Governance and operational<br>features                   |
| Name of<br>programme/<br>benefit in English<br>[fill] | Name of<br>programme in<br>local language<br>[fiil] | Social Protection<br>Functions<br>[multiple choice<br>dropdown] | Overall benefit<br>category (1-4)<br>[dropdown] | Benefit sub-<br>category<br>[dropdown]       | Main objectives (e.g.,<br>poverty alleviation or<br>increase access to<br>medical care) [multiple<br>choice dropdown] | Complementary<br>programmes [fill] | Responsible<br>implementing<br>agency [fill] | Programme's<br>initiation year &<br>is it a pilot [fill] |
| Takaful and<br>Karama in Egypt                        | تكافل وكرامة في<br>مصر                              |   |   | -  |   | _                                  |  |  |
| Takaful   | تكافل   | Poverty and social<br>exclusion                                 | 1.<br>Non-contributory<br>social assistance     | 1.1.1.<br>Poverty targeted<br>cash transfers | Promote school<br>attendance/ enrollment,<br>Poverty alleviation,<br>Improve nutrition                                |                                    |  |  |
| Karama  | كرامة   | Disability, old كرامة<br>Age, poverty and<br>social exclusion   | 1.<br>Non-contributory<br>social assistance     | 1.1.1.<br>Poverty targeted<br>cash transfers | Poverty alleviation   |                                    |  |  |
| Benefit 3   |   |   |   |  |   |                                    |  |  |
| Programme B   |   |   |   |  |   |                                    |  |  |
| Benefit 1   |   |   |   |  |   |                                    |  |  |
| Benefit 2   |   |   |   |  |   |                                    |  |  |
| Benefit 3   |   |   |   |  |   |                                    |  |  |
| Programme C   |   |   |   |  |   |                                    |  |  |
| Benefit 1   |   |   |   |  |   |                                    |  |  |
| Benefit 2   |   |   |   |  |   |                                    |  |  |
| Benefit 3   |   |   |   |  |   |                                    |  |  |
| Programme D   |   |   |   |  |   |                                    |  |  |
| Benefit 1   |   |   |   |  |   |                                    |  |  |
| Benefit 2   |   |   |   |  |   |                                    |  |  |
| Benefit 3   |   |   |   |  |   |                                    |  |  |

# Table 3.1 Annex II. Programme inventory

| Table annex III:<br>SA target<br>population<br>and benefit<br>pavment   |                               |                                    | Target                                   | Target population and eligibility      | 1 eligibility                                     |                                   |  | Pa          | Payment of benefits | its   |                        |
|---|-------------------------------|------------------------------------|--|--|---|-----------------------------------|--|-------------|---------------------|---|------------------------|
|   |                               |                                    | Target populat                           | Target population and eligibility      | ity   |                                   | Targeting                                  | Periodicity | Indexation          | Max.  | Notes (for<br>, other' |
| Name of<br>programme [in<br>English and<br>Arabic or local<br>language] | By age<br>group<br>[dropdown] | By poverty<br>status<br>[dropdown] | By<br>employment<br>status<br>[dropdown] | By<br>economic<br>sector<br>[dropdown] | By<br>demographic/<br>social groups<br>[dropdown] | By<br>geographical<br>area [fill] | method<br>[multiple<br>choice<br>dropdown] | [dropdown]  | [fiii]              | duration<br>(short-term<br>benefits) [fill] | specifications)        |
| Programme A<br>[Ex] recurrent<br>cash<br>assistance                     |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 1   | Children<br>(0-4)             | Poor<br>(means<br>tested)          | n/a                                      | n/a                                    | n/a   | Entire<br>territory               | Income/<br>means                           |             |                     |   |                        |
| Benefit 2   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 3   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Programme B   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 1   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 2   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 3   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Programme C   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 1   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 2   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 3   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Programme D   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 1   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 2   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |
| Benefit 3   |                               |                                    |  |  |   |                                   |  |             |                     |   |                        |

Table 3.2 Annex III. Social assistance target population and benefit payment

60

| Table annex   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
|---|----------------------------------|--|--------------------------|-----------------------------------|---------------------------------------|------------------------------------|---------------------|--|---------------------------|----------------------|---------------------------------|--|
| N:<br>SI target<br>population<br>and benefit<br>payment |                                  | Target po                                  | Target population        |                                   |                                       | Eligibility criteria               | criteria            |  | Pay                       | Payment of benefits  | fits                            | Notes (for   |
| Name of<br>programme<br>[in English                     | By labour<br>sector<br>[multiple | By<br>employment<br>status                 | By<br>economic<br>sector | By<br>geographical<br>area [fill] | Contribution<br>period<br>required to | Normal<br>retirement age<br>[fill] | nal<br>nt age<br>]] | Age limit<br>to benefit<br>(short-term | Periodicity<br>[dropdown] | Indexation<br>[fill] | Max.<br>duration<br>(short-term | <sup>,</sup> other <sup>,</sup><br>specifications) |
| and Arabic<br>or local<br>language]                     | choice<br>dropdown]              | [dropdown]                                 | [dropdown]               |                                   | receive the<br>benefit [fill]         | Male                               | Female              | benefits)<br>[fill]                    |                           |                      | benefits)<br>[fill]             |  |
| National<br>Social<br>Insurance<br>Fund                 |                                  |  |                          |                                   |                                       | -                                  |                     |  |                           | -                    |                                 |  |
| Old-age<br>pension                                      | Civil<br>servants                | Wage<br>workers<br>in formal<br>employment | Other                    | n/a                               | 25 years                              | 55                                 | 60                  | 60                                     | Monthly                   | n/a                  | 3 months                        |  |
| Old-age<br>pension                                      | Private<br>sector                | Wage<br>workers<br>in formal<br>employment | n/a                      | n/a                               | 25 years                              | 64                                 | 64                  | 64                                     | Monthly                   | Linked to<br>CPI     | 3 months                        |  |
| Benefit 3   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Programme B   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 1   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 2   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 3   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Programme C   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 1   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 2   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 3   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Programme D   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 1   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 2   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
| Benefit 3   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |
|   |                                  |  |                          |                                   |                                       |                                    |                     |  |                           |                      |                                 |  |

Table 3.3 Annex IV. Social insurance target population and benefit payment

| 3.1.2 | Programme-s | pecific | coverage |
|-------|-------------|---------|----------|
|       |             |         |          |

**OUTPUT:** Annex table with SA specific coverage for all mapped programmes, and other annex tables with Contributory SI and LMP programme-specific coverage for all mapped programmes.

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Complete **table 3.4,** annex V, with coverage indicators for all mapped programmes, including:

- Beneficiary type (individual or household).
- Benefit level (minimum monthly amount paid, for latest available year and up to five years ago).
- Benefit level (average monthly amount paid).
- Number of legally covered beneficiaries.
- Number of direct beneficiaries, disaggregated by gender if data are available.

### Suggested data sources

- Administrative data.
- Interview questions to programme administrators.
- ILO WSPR and IPC-IG reports on Arab countries for coverage data of some SP programmes.
- Population data from national statistical office.

[Ex] Legal coverage would be the number of people covered or targeted by the programme, e.g. if law on social pension stipulates that all those aged 65 or older are eligible for social pension, use number of those aged 65 and older.

- Effective coverage rate calculations, disaggregated by gender.
- Include a paragraph on coverage of each programme, describing trends over time, and/or highlight gaps in legal and effective coverage.

For total population numbers, cross-refer to section 1.3.

Effective coverage for an SA programme can be calculated as a share of total population.

-----

- Coverage for a non-contributory =
- Number of beneficiaries Total country population

SA programme

, .

For example, the effective coverage of female population can be calculated as the proportion of female beneficiaries for a certain year to the total female population for that year.



### Complete table 3.5 annex VI. Coverage of contributory SI and LM programmes, including:

- Beneficiary type (individual or household).
- Benefit size (minimum monthly amount paid).

- Benefit level (average monthly amount paid).
- Mandatory or voluntary membership.
- Number of legally covered beneficiaries.
- Number of contributors, disaggregated by gender if data are available.
  - > Number of direct beneficiaries, disaggregated by gender.
- Effective coverage rate calculations, disaggregated by gender.
- Include a paragraph on coverage of each programme, describing trends over time, and/or highlight gaps in legal and effective coverage.

Cross-refer to section 1.3 for numbers of pensioners and section 1.4 for total labour force and unemployment.

Effective coverage for social insurance (SI) programme can be calculated as the proportion of active contributors to the total labour force, or as a proportion of beneficiaries of the specific SI benefit to the intended population targeted by the programme. For example, effective coverage of a contributory pension programme can be calculated as the proportion of active contributors to that programme to the total labour force. Effective coverage of an unemployment benefit is the proportion of those unemployed receiving benefits to all unemployed, or the proportion of active contributors to unemployment insurance programmes to the total labour force, depending on preferred representation and available demographic data.

\_\_\_\_\_ Coverage of contributory SI programmes and LM measures and services

Number of active contributors

Working age population (Or total labour force)

Effective coverage of female population, for example, can be calculated as the proportion of women active contributors to the female labour force.

Coverage of pensions

Number of recipients

Total target population at or above retirement age

Effective coverage of female pensioners, for example, can be calculated as the proportion of women recipients of pensions to the total number of females at or above retirement age.

Table 3.4 Annex V. Social assistance programme coverage

|   |  |   |   |   |               | For  | social assis | For social assistance programmes | ammes  |  |
|---|--|---|---|---|---------------|--|--------------|----------------------------------|--|--|
| Table annex V:<br>SA coverage               | Beneficiary<br>type [fill<br>individual or<br>household] | Benefit level<br>(minimum monthly<br>amount paid in LCU,<br>if applicable) [fill] | Benefit level<br>(average<br>monthly<br>amount paid<br>in LCU) [fiil] | Number of<br>legally covered/<br>targeted<br>beneficiaries [fill<br>from legislation] | )<br>Mun<br>N | Number of beneficiaries<br>(annually) [fiil] | viaries<br>J | Effective o                      | overage (percentage                                  | Effective coverage (percentage of total population) [fill] |
| Name of<br>programme/ benefit<br>in English |  |   |   | Total   | Total         | Female                                       | Male         | Total                            | Female (percentage<br>of total female<br>population) | Male (percentage of<br>total male population)              |
| Programme A                                 |  |   |   |   |               |  |              |                                  |  |  |
| Benefit 1                                   | Household  |   |   |   |               |  |              |                                  |  |  |
| Most recent year (Y)                        |  | JOD 50  | JOD 145   |   | 378,432       |  |              | 17.06%                           |  |  |
| Year Y-1                                    |  | JOD 50  | JOD 145   |   | 157,969       |  |              | 7.35%                            |  |  |
| Year Y-2                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-3                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-4                                    |  |   |   |   |               |  |              |                                  |  |  |
| Benefit 2                                   | Individual   |   |   |   |               |  |              |                                  |  |  |
| Most recent year (Y)                        |  | 1 kg bag of flour   |   |   |               |  |              |                                  |  |  |
| Year Y-1                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-2                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-3                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-4                                    |  |   |   |   |               |  |              |                                  |  |  |
| Benefit 3                                   |  |   |   |   |               |  |              |                                  |  |  |
| Most recent year (Y)                        |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-1                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-2                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-3                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-4                                    |  |   |   |   |               |  |              |                                  |  |  |
| Programme B                                 |  |   |   |   |               |  |              |                                  |  |  |
| Benefit 1                                   |  |   |   |   |               |  |              |                                  |  |  |
| Most recent year (Y)                        |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-1                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-2                                    |  |   |   |   |               |  |              |                                  |  |  |
| Year Y-3                                    |  |   |   |   |               |  |              |                                  |  |  |
|   |  |   |   |   |               |  |              |                                  |  |  |

64

|   |  |   |   |   |           | For  | For social assistance programmes | stance proç | grammes  |  |
|---|--|---|---|---|-----------|--|----------------------------------|-------------|--|--|
| Table annex V:<br>SA coverage                   | Beneficiary<br>type [fiil<br>individual or<br>household] | Benefit level<br>(minimum monthly<br>amount paid in LCU,<br>if applicable) [fill] | Benefit level<br>(average<br>monthly<br>amount paid<br>in LCU) [fiil] | Number of<br>legally covered/<br>targeted<br>beneficiaries [fill<br>from legislation] | )<br>Numb | Number of beneficiaries<br>(annually) [fill] | ciaries<br>I]                    | Effective   | Effective coverage (percentage of total population) [fill] | of total population) [fill]                |
| Name of<br>programme/ benefit<br>in English     |  |   |   | Total   | Total     | Female                                       | Male                             | Total       | Female (percentage<br>of total female<br>population)       | Male (percentage of total male population) |
| Year Y-4  |  |   |   |   |           |  |                                  |             |  |  |
| Programme C                                     |  |   |   |   |           |  |                                  |             |  |  |
| Benefit 1                                       |  |   |   |   |           |  |                                  |             |  |  |
| Most recent year (Y)                            |  |   |   |   |           |  |                                  |             |  |  |
| Year Y-1  |  |   |   |   |           |  |                                  |             |  |  |
| Year Y-2  |  |   |   |   |           |  |                                  |             |  |  |
| Year Y-3  |  |   |   |   |           |  |                                  |             |  |  |
| Year Y-4  |  |   |   |   |           |  |                                  |             |  |  |
| Data for<br>calculations                        |  |   |   |   |           |  |                                  |             |  |  |
| Total country<br>population                     |  |   |   |   |           |  |                                  |             |  |  |
| Most recent year (Y)                            | 10,203,140   |   |   |   |           |  |                                  |             |  |  |
| male  | 5,670,434  |   |   |   |           |  |                                  |             |  |  |
| female  | 4,532,706  |   |   |   |           |  |                                  |             |  |  |
| Year Y-1  | 10,101,694   |   |   |   |           |  |                                  |             |  |  |
| male  |  |   |   |   |           |  |                                  |             |  |  |
| female  |  |   |   |   |           |  |                                  |             |  |  |
| Average family size<br>(individuals per family) |  |   |   |   |           |  |                                  |             |  |  |
| Most recent year (Y)                            | 4.60   |   |   |   |           |  |                                  |             |  |  |
| Year Y-1  | 4.70   |   |   |   |           |  |                                  |             |  |  |
| Year Y-2  |  |   |   |   |           |  |                                  |             |  |  |
| Year Y-3  |  |   |   |   |           |  |                                  |             |  |  |
| Year Y-4  |  |   |   |   |           |  |                                  |             |  |  |

Table 3.5 Annex VI. Social insurance and labour market programme coverage

| Table annex VI:<br>SI and LMP<br>coverage   |                                   |  |  |  | Fo  | or contrib | utory social                     | insurand | se progra     | ammes ar                                    | nd labou | For contributory social insurance programmes and labour market measures | asures  |   |
|---|-----------------------------------|--|--|--|---|------------|----------------------------------|----------|---------------|---|----------|---|---|---|
|   | Beneficiary<br>type<br>[dropdown] | Benefit size<br>(minimum<br>monthly<br>amount paid | Benefit size<br>(average<br>monthly<br>amount<br>paid in | Mandatory<br>or voluntary<br>membership?<br>[dropdown] | Number<br>of legally<br>covered<br>(targeted)<br>members [fill] | Numbe      | Number of contributors<br>[fill] | utors    | Numbe<br>bene | Number of (current)<br>beneficiaries [fill] |          | Effec<br>(1) contri<br>force<br>(2) benefi<br>targeted (pe              | Effective coverage:<br>(1) contributors/total labour<br>force (percentage);<br>(2) beneficiaries/ population<br>targeted (percentage) [calculate] | e:<br>labour<br>∋);<br>ulation<br>alculate] |
| Name of<br>programme/ benefit<br>in English |                                   |  | rcu) [fiii]  |  | Total   | Total      | Female                           | Male     | Total         | Female                                      | Male     | Total   | Female  | Male  |
| Programme A                                 |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Benefit 1                                   | Individual                        |  |  | Mandatory  |   |            |                                  |          |               |   |          |   |   |   |
| Most recent year (Y)                        |                                   | JOD<br>1,000,000                                   |  |  |   | 70,954     |                                  |          | 7,222         |   |          | 0.36%   |   |   |
| Year Y-1                                    |                                   | JOD<br>1,032,000                                   |  |  |   | 71,546     |                                  |          | 5,859         |   |          | 0.29%   |   |   |
| Year Y-2                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-3                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-4                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Benefit 2                                   |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Most recent year (Y)                        |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-1                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-2                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-3                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-4                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Benefit 3<br>Most recent year (Y)           |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-1                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-2                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-3                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-4                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Programme B                                 |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Benefit 1                                   |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Most recent year (Y)                        |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |
| Year Y-1                                    |                                   |  |  |  |   |            |                                  |          |               |   |          |   |   |   |

Comprehensive national reviews of the systems and reforms of ESCWA

member countries

|   |                                   |  |  |  | Fe  | pr contrib | utory socia                      | l insuran | ce progr     | ammes ar                                    | id labou     | For contributory social insurance programmes and labour market measures | easures   |  |
|---|-----------------------------------|--|--|--|---|------------|----------------------------------|-----------|--------------|---|--------------|---|---|--|
| Table annex VI:<br>SI and LMP<br>coverage   | Beneficiary<br>type<br>[dropdown] | Benefit size<br>(minimum<br>monthly<br>amount paid | Benefit size<br>(average<br>monthly<br>amount<br>paid in | Mandatory<br>or voluntary<br>membership?<br>[dropdown] | Number<br>of legally<br>covered<br>(targeted)<br>members [fill] | Numbe      | Number of contributors<br>[fill] | utors     | Numb<br>bene | Number of (current)<br>beneficiaries [fill] | ent)<br>iii] | Effec<br>(1) contri<br>force<br>(2) benef<br>targeted (pe               | Effective coverage:<br>(1) contributors/total labour<br>force (percentage);<br>(2) beneficiaries/ population<br>targeted (percentage) [calculate] | ge:<br>I labour<br>e);<br>oulation<br>calculate] |
| Name of<br>programme/ benefit<br>in English |                                   |  | rcu) [fiii]  |  | Total   | Total      | Female                           | Male      | Total        | Female                                      | Male         | Total   | Female  | Male   |
| Year Y-2                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Year Y-3                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Year Y-4                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Programme C                                 |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Benefit 1                                   |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Most recent year (Y)                        |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Year Y-1                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Year Y-2                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Year Y-3                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
| Year Y-4                                    |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |
|   |                                   |  |  |  |   |            |                                  |           |              |   |              |   |   |  |

| Data for calculations<br>Total labour force |           |
|---|-----------|
| Most recent year (Y)                        |           |
| Year Y-1                                    |           |
| Year Y-2                                    |           |
| Year Y-3                                    |           |
| Year Y-4                                    |           |
| Share of people<br>above retirement age     |           |
| Most recent year (Y)                        |           |
| Year Y-1                                    | 2,588,725 |
| Year Y-2                                    | 2,633,530 |
| Year Y-3                                    |           |
| Year Y-4                                    |           |
|   |           |

### 3.1.3 Expenditure

| $\bigcirc$     |
|----------------|
| $(\checkmark)$ |
| $\sim$         |

**OUTPUT:** Annex VII on collected expenditure data for all SP programmes in the country.

Compile **table 3.6** in annex VII - Expenditure (see associated figures and annexes) information on expenditure per programme and per SP component (non-contributory SA, contributory SI, LMPs, and universal subsidies).

Produce figures summarizing expenditure for each SP component in relation to total SP expenditure (e.g. a pie chart or a stacked column/bar chart) and GDP, or figures on individual programme expenditure as a share of SP component or total SP expenditure.

In paragraph format, describe main SP expenditures. Analyse values for each SP component and provide some explanation for main trends, based on relevant government policies during period in question.

To perform calculations, include in annex VII for required years, in millions of LCUs in current prices:

- Nominal GDP.
- Total annual public expenditure on SP for several years.
- National or international poverty line.

Indicators include:

Annual expenditure as a share of GDP (percentage) for several years. Authors need to perform all data entry and calculations in annex VII in associated figures and annexes, and thereafter copy-paste the table into the CPR.

Completed annex VII table allows expenditure analysis for individual programmes and SP components, as well as analysis for expenditure trends over time.

Perform a set of calculations to fill in annex VII -Expenditure (see associated figures and annexes).

Cross-refer to section 2.5.3, and make sure not to repeat the same discussion as in section 2.5.

Data over several years will provide an assessment of expenditure trends over time. For comparability, values over time should be presented either as a share (percentage of GDP), or in real terms (i.e. accounting for inflation).

### Suggested data sources:

- Finance Ministry and annual budgets for several years.
- Administrative data of SP programme.
- Local/regional government.
- Social insurance organisations.
- Line-ministries responsible for programme administration.

Cross-refer to section 2.5 (Public financing and expenditure) for information on public expenditure and sections 1.2 (Macroeconomic overview) and 1.5 (Poverty, inequality, and vulnerability) respectively for information on GDP and poverty line.

Annual SP expenditure should be collected in LCU. However, expenditure in USD is more appropriate for charts and tables focused on crosscountry comparisons.

Calculate the per cent share of GDP for each year and each programme separately, and record it in the Excel table.

| Annual expenditure  | Annual programme     |
|---------------------|----------------------|
| as a share          | expenditure (Year t) |
| of GDP (percentage) | GDP (Year t)         |

| Annual expenditure as a share of total SP<br>expenditure (percentage) for several years.  | Programme expenditure as a share of total spending<br>on SP indicates the size or importance of the<br>programme relative to the SP sector. Calculate this<br>for each year and each programme separately and<br>  |
|---|--|
| Expenditure per beneficiary in LCU (in<br>brackets, also add equivalent amount in<br>USD, using actual exchange rate at date of | Indicator is obtained using the calculation below.<br>Both values would preferably be for the same year,<br>although some discretion is possible in case of  |
| drafting the CPR).  | minor differences.<br>$ \begin{array}{r} Programme annual \\ expenditure \\ Expenditure per \\ beneficiary = \frac{(LCU; Year t)}{Number of programme} \\ beneficiaries (Year t) \end{array} $ Cross-refer to section 3.1.2 (annex III and annex IV)   |
| Expenditure per beneficiary as a share of NPL (percentage).   | to get the number of beneficiaries.Expenditure per beneficiary measured as a share<br>of the national poverty line indicates benefit<br>adequacy. Both numerator and denominator should<br>be for the same year, or the closest available one.<br>   |
| Expenditure on benefits in LCU.   | Programme expenditure on benefits (LCU) comprises<br>benefits disbursed directly to beneficiaries. This<br>information should be available in budget or<br>expenditure reports. It can also be calculated directly<br>by subtracting administrative and other costs from<br>total programme expenditure. All data used should be<br>for the same year. |

Comprehensive national reviews of the systems and reforms of ESCWA member countries

|   | Method 1:<br>reported directly<br>(LCU)Expenditure on<br>benefits(LCU)Method 2:<br>Total Programme<br>Expenditure –<br>administrative and<br>other Costs<br>(both LCU)                          |
|---|---|
| Administrative expenses (staff, operating,<br>and other costs) in LCU.                  | Data source: Reported in programme/budget<br>or expenditure reports. Estimates can also be<br>obtained by subtracting programme expenditure on<br>benefits from total expenditure.              |
| <ul> <li>Administrative expenses as percentage of<br/>programme expenditure.</li> </ul> | Administrative expenses as a share (percentage) of<br>total expenditure per SP programme is an indicator<br>for programme cost-efficiency. Data for both values<br>should be for the same year. |
| Total revenue (millions in LCU current prices).   | See section 2.5 (Public financing and expenditure).<br>Data sources: most information can be<br>found in programme-specific budget and<br>operational documents.                                |

70

| Table annex<br>VII:<br>Expenditure        | Social<br>protection<br>function<br>[multiple<br>choice | Total annual<br>expenditure (in<br>LCU current prices)<br>(add in prackets | Annual<br>expenditure as<br>a share of GDP<br>(percentage) [fill]<br>expenditure as | Annual<br>expenditure<br>as a share of<br>total public<br>spending | Annual expenditure<br>per beneficiary (or<br>annual average<br>expenditure per<br>individual or<br>household) (in LCU) | Annual<br>expenditure<br>per beneficiary<br>as a share<br>of national | Benefits<br>expenditure<br>(in LCU<br>current | Administrative<br>expenses<br>(millions in<br>LCU current | Administrative<br>expenses as a<br>share of total<br>expenditure<br>per | Total<br>revenue<br>(in LCU<br>current |
|---|---|--|---|--|--|---|---|---|---|--|
| Name of programme/<br>benefit in English  | dropdown]   | the equivalent in<br>USD) [fili]   | a share of GDP<br>(percentage)<br>[fill]  | on SP<br>(percentage)<br>[fill]                                    | (add in brackets the<br>equivalent in USD)<br>[fiil]   | poverty line<br>(percentage)<br>[fiil]                                | prices) [fill]                                | prices) [fill]  | programme<br>(percentage)<br>[fiil]                                     | prices)<br>[fill]                      |
| Social assistance<br>programme A          |   |  |   |  |  |   |   |   |   |  |
| Benefit 1                                 |   |  |   |  | Individual   |   |   |   |   |  |
| Most recent year (2020)                   |   | JOD 8,680,022  | 0.03%   | 0.56%  | JOD 22.94<br>(USD 32)  |   |   |   |   |  |
| Year 2019                                 |   | JOD 6,725,740  | 0.02%   | 0.42%  | JOD 42.24<br>(USD 59)  |   |   |   |   |  |
| Benefit 2                                 |   |  |   |  |  |   |   |   |   |  |
| Most recent year (Y)                      |   |  |   |  |  |   |   |   |   |  |
| Year Y-1                                  |   |  |   |  |  |   |   |   |   |  |
| Year Y-2                                  |   |  |   |  |  |   |   |   |   |  |
| Total for social<br>assistance programmes |   |  |   |  |  |   |   |   |   |  |
| Most recent year (Y)                      |   |  |   |  |  |   |   |   |   |  |
| Year Y-1                                  |   |  |   |  |  |   |   |   |   |  |
| Year Y-2                                  |   |  |   |  |  |   |   |   |   |  |
| Year Y-3<br>Year Y-4                      |   |  |   |  |  |   |   |   |   |  |
| Social insurance<br>programme A           |   |  |   |  |  |   |   |   |   |  |
| Benefit 1                                 |   |  |   |  |  |   |   |   |   |  |
| Most recent year (Y)                      |   |  |   |  |  |   |   |   |   |  |
| Year Y-1                                  |   |  |   |  |  |   |   |   |   |  |
| Year Y-2                                  |   |  |   |  |  |   |   |   |   |  |
| Year Y-3                                  |   |  |   |  |  |   |   |   |   |  |
| Year Y-4                                  |   |  |   |  |  |   |   |   |   |  |
| Total for social insurance<br>schemes     |   |  |   |  |  |   |   |   |   |  |
|   |   |  |   |  |  |   |   |   |   |  |

Comprehensive national reviews of the

systems and reforms of ESCWA

member countries

| Table annex<br>VII:<br>Expenditure       | Social<br>protection<br>function<br>[multiple<br>choice | Total annual<br>expenditure (in<br>LCU current<br>prices) (add in<br>brackets the | Annual<br>expenditure as<br>a share of GDP<br>(percentage)<br>[fiil]<br>expenditure as | Annual<br>expenditure<br>as a share of<br>total public<br>spending | Annual expenditure<br>per beneficiary (or<br>annual average<br>expenditure per<br>individual or<br>household) (in LCU) | Annual<br>expenditure<br>per beneficiary<br>as a share<br>of national | Benefits<br>expenditure<br>(in LCU<br>current | Administrative<br>expenses<br>(millions in<br>LCU current |                                     | Total<br>revenue<br>(in LCU<br>current |
|--|---|---|--|--|--|---|---|---|-------------------------------------|--|
| Name of programme/<br>benefit in English | dropdown]   | equivalent in USD)<br>[fiil]  | a share of GDP<br>(percentage)<br>[fill]   | on SP<br>(percentage)<br>[fill]                                    | (add in brackets<br>the equivalent in<br>USD) [fill]   | poverty line<br>(percentage)<br>[fill]                                | prices) [fill]                                | prices) [fill]  | programme<br>(percentage)<br>[fill] | prices)<br>[fill]                      |
| Most recent year (Y)                     |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-1                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-2                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-3                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-4                                 |   |   |  |  |  |   |   |   |                                     |  |
| Labour market programme<br>A             |   |   |  |  |  |   |   |   |                                     |  |
| Most recent year (Y)                     |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-1                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-2                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-3                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-4                                 |   |   |  |  |  |   |   |   |                                     |  |
| Total for labour market                  |   |   |  |  |  |   |   |   |                                     |  |
| Most recent year (Y)                     |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-1                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-2                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-3                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-4                                 |   |   |  |  |  |   |   |   |                                     |  |
| Universal subsidy A                      |   |   |  |  |  |   |   |   |                                     |  |
| Most recent year (Y)                     |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-1                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-2                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-3                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-4                                 |   |   |  |  |  |   |   |   |                                     |  |
| Total for universal subsidies            |   |   |  |  |  |   |   |   |                                     |  |
| Most recent year (Y)                     |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-1                                 |   |   |  |  |  |   |   |   |                                     |  |
| Year Y-2                                 |   |   |  |  |  |   |   |   |                                     |  |

72

| Total<br>revenue<br>(in LCU<br>current<br>prices)<br>[fill]  |          |
|--|----------|
| Administrative<br>expenses as a Total<br>share of total revenue<br>expenditure (in LCU<br>per current<br>programme prices)<br>(fill]   |          |
| Benefits Administrative<br>xpenditure expenses<br>(in LCU (millions in<br>current LCU current<br>prices) [fill]  |          |
| Benefits<br>expenditure<br>(in LCU<br>current<br>prices) [fiil]  |          |
| Annual<br>expenditure<br>per beneficiary<br>as a share<br>of national<br>poverty line<br>(percentage)<br>[fill]  |          |
| Annual expenditure<br>per beneficiary (or<br>annual average<br>expenditure per<br>individual or<br>household) (in LCU)<br>(add in brackets<br>the equivalent in<br>USD) [fiil] |          |
| Annual<br>expenditure<br>as a share of<br>total public<br>spending<br>on SP<br>(percentage)<br>[fill]  |          |
| Annual<br>expenditure as<br>a share of GDP<br>(percentage)<br>[fill]<br>expenditure as<br>a share of GDP<br>(percentage)<br>[fill]   |          |
| Social Total annual protection expenditure (in function LCU current [multiple prices) (add in choice brackets the dropdown] equivalent in USD) [fill]                          |          |
| Social<br>protection<br>function<br>[multiple<br>choice<br>dropdown]   |          |
| <b>Table annex</b><br>VII:<br>Expenditure<br>Name of programme/<br>benefit in English  | Year Y-3 |

# Year Y-4

Data for calculations

| Nominal GDP (LCU current<br>prices)   |                    |
|---|--------------------|
| Most recent year (2020)   | JOD 31,025,840,000 |
| Year 2019   | JOD 31,600,130,000 |
| Year 2018   | JOD 29,402,230,000 |
| Year Y-3  |                    |
| Year Y-4  |                    |
| Total annual public<br>spending on SP (LCU<br>current prices)   |                    |
| Most recent year (2020)   | JOD 1,551,292,000  |
| Year 2019   | JOD 1,580,006,500  |
| Year 2018   | JOD 1,470,111,500  |
| Year Y-3  |                    |
| Year Y-4  |                    |
| National or international<br>poverty line (LCU current<br>prices) [Ex - absolute<br>poverty line in Jordan] |                    |
| Most recent year (2020)   | JOD 68             |
| Year 2019   | JOD 68             |
| Year 2018   | JOD 68             |
| Year Y-3  |                    |

Year Y-4

#### 3.1.4 Integration across programmes

**OUTPUT:** Appraisal of degree of integration across SP programmes, including integration of delivery systems, and whether there is a social registry, an integrated beneficiary registry, and/or and integrated MIS used by multiple programmes.

#### 3.1.4.1 Delivery system integration

SP programmes or services can have separate, partially integrated or completely integrated delivery systems.

Use **figure 3.1** to indicate whether delivery phases have some level of integration across specific programmes and/or services, and describe integrated elements.

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Identify coordination structures overseeing implementation of SP programmes and analyse factors that may be creating delivery inefficiencies, including:

- Repetition of administrative efforts across programmes.
- Overlap across programme objectives, with gaps in coordination among them.
- Limited information sharing across coordination structures that may hinder referrals among programmes.

When programmes are implemented through separate delivery systems, the risk is higher of having a fragmented, less efficient SP system. Coordination of programmes throughout delivery chains increases harmonization and facilitates referrals or bundling of benefits and services (Lindert and others, 2020).

**Figure 3.1** provides examples of various levels of integration across three hypothetical programmes. **Figure 3.2** provides an example of data integration in the Chilean Registro Social de Hogares (Social Registry of Households). The figure can be edited using Miro or other tools.

In addition to, or in lieu of, integration of all delivery phases, programmes may have (Lindert and others, 2020, p. 32):

- Shared client interface.
- Inter-institutional coordination.
- Integration or interoperability of information systems.
- Common payment platforms.
- Integrated service approaches.

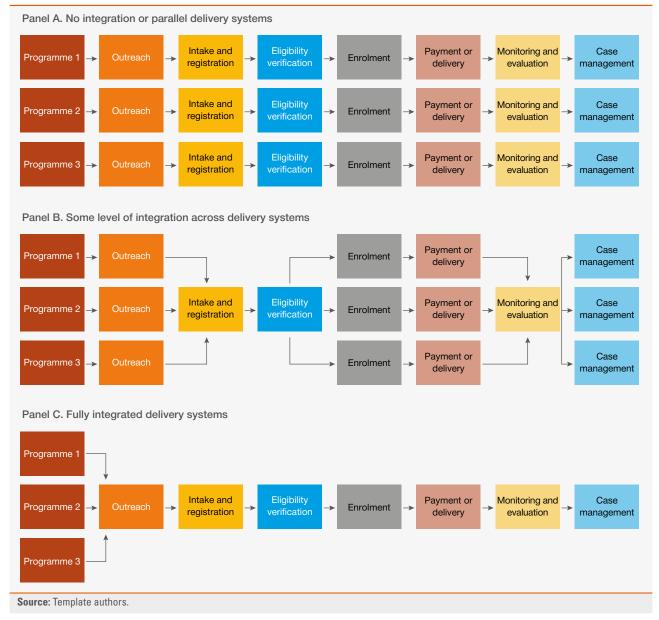
Section 3.5 below provides further instructions on appraising potential integration of administrative processes across programmes.

Good practice examples of coordination at programme level would address the following questions:

- Is there a coordination structure at the national level that leads to integrated SP programme planning, harmonization, and budgeting, as well as integrated and coherent programme implementation?
- Or has full integration taken place by an agency established to integrate programmes under one implementation structure?
- Has the coordination entity undertaken integrated programme planning with clearly identified outcomes?

- Have beneficiary needs been included in programme planning?
- Has an integrated M&E framework for SP been developed?

### Figure 3.1 Integration of delivery systems across SP programmes or services (illustrative examples)



#### **3.1.4.2** Data and information management integration



In this subsection, include the following:

See Glossary for:

- Programme MIS.
- Integrated MIS.
- Integrated beneficiary registry.
- Social registry.

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> and information management. Furthermore, the same term is frequently given different meanings, for instance "single registry" may, depending on context, refer to registries of very different scope and character. When drafting the CPRs, authors are, therefore, encouraged to focus on the functionalities of IMSs and registries, rather than on how they are labelled.

Note: Numerous other terms, in addition those listed above, exist in the field of data integration

A well-functioning and integrated MIS is a crucial step in building an effective SP system, for it enables the flow of real-time data and information within the system, and often also beyond it with other social sectors, such as health and education (Barca and Chirchir, 2019), thus tending to lead to higher time and cost efficiency. Nonetheless, an MIS may not be feasible or a priority in all contexts, since its success is highly dependent on the existence of a foundational ID system with (Lindert and others, 2020):

- Good coverage of groups targeted in SP programmes and services.
- Standardized information across government information systems.
- Digitization of relevant administrative records.

# [Ex] Morocco

Once rolled out nationally, the Unified Social Registry (Registre Social Unifié—RSU) will be key for the Moroccan SP system, substituting the various registry systems used. It seeks to cover the shortfalls of the system, aligning data collection, and storing it in a single place. Also, the new system employs unique identification numbers and biometric data, thus channelling and concentrating identification and selection of beneficiaries. Another important objective is reducing exclusion errors to improve efficiency of SP spending (Jaïdi and Dytz, 2021). As of July 2022, the registry has been implemented in the region Rabat-Salé-Kénitra.

[Ex] Examples of other governmental administrative systems:

Identify whether there is an integrated MIS used to support the SP system.

Identify whether there is a social registry and/or integrated beneficiary database.

76

- If there is a social registry, to what extent is it dynamically linked/interoperable with other government administrative systems, and for which programmes is it used?
- If there is an integrated beneficiary registry, is it currently integrated with the MIS?
- If a national MIS, a social registry, or an integrated beneficiary registry exists, list the SP programmes whose information system is integrated or communicates with any of them.

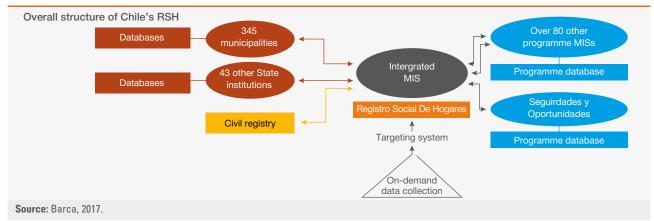
- If either a social registry and/or an integrated beneficiary registry exists, address the following questions:
  - > Which data, i.e. which variables, are being collected and stored?
  - > How are data updated?
  - > Which data sources are used and how?
  - > Do data exchanges take place in real time?
  - > What is the level of guaranteed security/ data privacy?
- Create a figure similar to figure 3.2 below, illustrating the overall structure of social registries and the integrated beneficiary registry.

- Civil registries (for births and deaths).
- Tax authority systems.
- Vehicle registration agencies.
- Housing and property registries.
- Systems related to social security contributions, delivery of pensions, and health insurance.

# [Ex] Türkiye

The Integrated Social Assistance System of Türkiye links information from 24 different public authorities automatically to facilitate management of SP programmes, including intake and registration phases, coordination among institutions, and better use of local offices (Lindert and others, 2020).

# Figure 3.2 Data Integration Arrangement through a national social registry (example of Chile)



|           | 3.2 Design of ma  | in SP programmes   |
|-----------|---|--|
| $\oslash$ | <b>OUTPUT:</b> Development of key design features and possible gaps of selected SP programmes.  |  |
|           | Start by summarizing in a paragraph<br>information from associated figures and<br>annexes (a paragraph per each selected<br>programme), and include an overview of<br>past reforms of the programme/scheme.   | <ul> <li>[Ex] The Tayssir CCT programme in Morocco.</li> <li>In 2008, Morocco began piloting Tayssir, a conditional cash-transfer programme, focused on enhancing children's enrolment in school. Originally limited to certain rural areas, Tayssir has since been extended to the entire country. The number of beneficiary families increased from 47,052 in 2008 to 1,266,855 by the end of 2019. As a result of ongoing reforms of the SP sector and implementation of a comprehensive social registry, the methodology used for targeting Tayssir beneficiaries will change in the near future.</li> </ul> |
|           | Thereafter, taking programme design features<br>as in section 3.2, programme implementation<br>elements as in section 3.3, funding sources<br>as in section 3.4, and organizational setup<br>of programmes as in section 3.5, organize,<br>for each programme, the next section in<br>the CPR per SP component (SI, SA, ALMP,<br>and universal subsidies). See the annotated<br>Country Profile Outline in annex I. | <ul> <li>Subsections 3.2, 3.3, and 3.4 should focus on a selected number of programmes.</li> <li>Select programmes and schemes across SP components (annex II).</li> <li>Decide the number and types of programmes together with the ESCWA technical editors.</li> </ul>   |
|           | Select the main SP programmes to undergo<br>a more detailed appraisal.<br>In most cases, the aim should be to have<br>one social assistance programme, one<br>social insurance programme, one labour<br>market policy, and one subsidy programme.<br>However, exceptions may be made<br>depending on the country context.<br>Selection is carried out in collaboration with<br>ESCWA technical editors.             | <ul> <li>Select programmes based on effective coverage and/or share of expenditure of GDP (good indicators of significance).</li> <li>See Annex V (Social assistance programme coverage), Annex VI (Social insurance and labour market programme coverage) and Annex VII (Expenditure), in the associated figures and annexes. Also consider ease of access to information on programmes to be appraised.</li> <li>Appraisal method</li> <li>A deeper appraisal should be carried out by answering various types of questions, based on</li> </ul>   |
|           |   | a desk review and qualitative research methods,<br>e.g. structured or semi-structured KIIs with<br>stakeholders, and, at times, some calculations.   |
|           | Thereafter, for each of the programme or<br>scheme appraised, include information<br>on design features (note that only   | Data collection methodologies adopted should be defined in advance in consultation with ESCWA technical editors.   |

a few of these apply to universal subsidies), specifically:

- Eligibility criteria and targeting.
- Coverage and expenditure.
- Benefit level and adequacy.
- Benefit indexation.
- Frequency of benefit transfers.
- Duration of benefits.
- Benefit exit rules and conditionalities.
- Incentives provided by benefits.
- Equity of benefits (optional, requires HH microdata).
- Efficiency of benefits (optional, requires HH microdata).

In the subsections below, various programme and scheme design features are explained in detail.

#### 3.2.1 Eligibility criteria and targeting

For selected programmes, give an overview of eligibility criteria and associated conditions, including in a paragraph information such as:

- Target group and its definition within the programme.
- Proxy-means Testing (PMT). PMT is a very common targeting mechanism in SA programmes. If the programme uses this mechanism, include further information on:
- The PMT formula used to calculate the score, and the indicators it is based on.
- The survey year the formula is based on.
- How often the formula is updated.

Eligibility criteria include target group and conditions (see Glossary).

Due to multiplicity of programme objectives, along with issues of clarity, and transparency, eligibility criteria may be very complex giving rise to implementation challenges. However, such complex eligibility criteria and associated benefit conditions may be required to ensure a minimum level of income to everyone, as well as prioritize the poorest households.

Target groups are identified and selected by targeting mechanisms, such as labour sector/ employment status targeting, community-based targeting, geographical targeting, and means testing. See Glossary.

[Ex] Examples of common programme eligibility criteria and target groups:

- Poverty/income status.
- Demographic characteristics (gender, marital status, and age).
- Educational attainment.

- Labour sector (private sector, public sector, civil servants, military, etc.).
- Employment status (employed, selfemployed, employer, unemployed, unpaid family worker).
- · Sector of activity.
- Duration/number years of contributions.
- Geographic location.
- Health status.
- Belonging to a particular group (disabled, refugees, IDPs, disaster victims, conflict victims, ethnicity, etc.)

[Ex] Paragraph on eligibility under a specific programme from the CODI of Uzbekistan country report (Papa and others, 2020).

Breadwinner loss allowance.

"Family members, who are dependents of a person, and not eligible for a contributorybased breadwinner-loss pension, have the right to an allowance in the event of the loss of the breadwinner".

See Glossary: Inclusion error and Exclusion error.

When data and literature are available, discuss inclusion and exclusion errors of programmes.

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- Conditionalities, if defined as a condition that participants need to fulfil to be entitled to receive or keep receiving the benefit.
  - Is there any effort made so that compliance does not become a responsibility of women only in the household?
- Are the target group and conditions specified by law?

[Ex] For SI, some minimum contributory period, a normal retirement age for old age benefits, or an age limit to be eligible for short-term benefits could be among the requirements. For SA, conditions may be specific: nationality, residential status/period, and/or behavioural conditions (such as school attendance or health check-ups).

Conditionalities should be simple, and, where applicable, coordinated with requirements of the service providers, such as schools or health systems (e.g. for school attendance or health check-ups and vaccinations).

80

| + | <ul> <li>Appraise</li> <li>Are eligibility criteria transparent, reasonable, feasible, objective, and responsive to special needs, rights, and dignity?</li> <li>Are criteria in line with socioeconomic and demographic characteristics and special needs of the country, as well as with gender equality?</li> </ul> | [Ex] The normal retirement age needs to be<br>related to life expectancy at retirement. Moreover,<br>some retirement schemes require different normal<br>retirement ages according to gender.  |
|---|--|--|
|   | Appraise shock responsiveness of eligibility criteria and conditionality, by answering:  | This exercise may be more useful for programmes that have larger coverage.   |
|   | What is the overlap between eligibility<br>criteria and characteristics of vulnerable<br>and shock-affected populations for<br>various types of shocks?  | To have a shock-responsive programme, the<br>eligibility criteria should be based on a solid<br>understanding of the risks and shocks that the<br>country typically faces. Coverage gaps limit the<br>response to shocks, especially for those groups<br>that face barriers (women, children, elderly,<br>disabled persons, and marginalized persons). |
|   | Are vulnerable-to-shock individuals or<br>households included or excluded by<br>eligibility criteria?  | Using the household survey, gather data on who is<br>covered by the eligibility criteria, and identify those<br>who are vulnerable to shocks, such as households<br>headed by informal workers or women, the elderly,<br>the poor, and the quasi-poor. If there are vulnerable<br>groups that are not covered, there is a gap.                         |
|   | In eligibility verification, is there potential<br>for triggering temporary modifications<br>during shocks (e.g. relaxing/waiving<br>eligibility criteria and inclusion of<br>new caseload)?   | Using legal frameworks, check whether there is<br>a possibility for temporary modifications to the<br>programmes during an emergency.  |
|   | Does conditionality impose an access<br>barrier for the most vulnerable to shocks?<br>Can there be temporary modifications<br>during shocks?   | Use a literature review to identify whether the conditionality imposes a barrier during shocks.  |
|   |  |  |

#### 3.2.2 Coverage and expenditure

The coverage and expenditure joint appraisal subsection should include:

Bar and line chart for each programme showing effective coverage over several years, as well as programme expenditure for the same years. Use annex V and annex VI for the total number of beneficiaries and benefit size for several years to ascertain trends of coverage. Use annex VII for expenditure data. Create the charts in associated figures and annexes, and copy-paste them into the CPR.

| Describe trends in coverage and<br>expenditure, including any out-of-ordinary<br>changes that may be attributable to<br>new legislation, or implementation/<br>design issues.  | See figure 3.3 for a bar chart example. "The<br>number of beneficiaries of the breadwinner-loss<br>social allowance increased from 19,461 people<br>to 27,848 between 2015 and 2018" (Papa and<br>others, 2020). |
|--|--|
| <ul> <li>The administrative expenses appraisal subsection should include:</li> <li>Bar chart for each programme, showing the trend of administrative expenses (percentage of programme expenditure) over several years.</li> </ul> | Use annex VII for data on administrative expenses.<br>Create the charts in the associated figures and<br>annexes, and copy-paste them into the CPR.  |
| Describe trends in administrative<br>expenses and compare their level with<br>those in other similar programmes,<br>including the ceiling on administrative<br>expenses as specified in programme<br>regulations, if any.          |  |

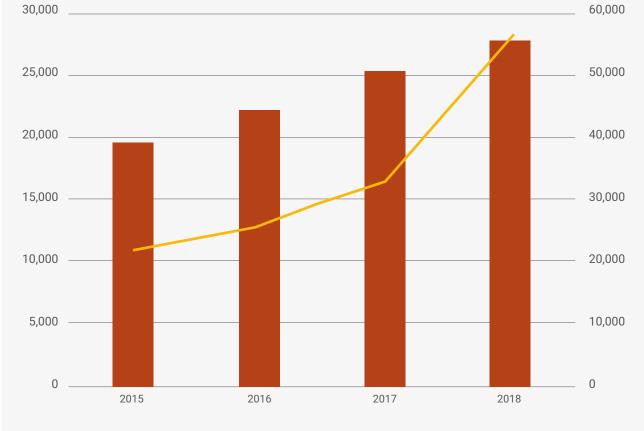
Comprehensive national reviews of the

systems and reforms of ESCWA

member countries

82

# Figure 3.3 Coverage of beneficiaries and expenditure for breadwinner-loss allowance in Uzbekistan, 2015-18



Number of beneficiaries (thousand people)- left scale \_\_\_\_\_ Expenditure for breadwinner-loss allowance (million UZS) – right scale **Source:** Ministry of Employment and Labour Relations, 2018; State Statistical Committee, 2020.

# 3.2.3 Benefit level and adequacy

|  | From annex III and annex IV, take for each programme the benefit level (size) for the most recent year and describe how the level is determined.   |   | [Ex] Is the size of benefit dependent on how many<br>children the family has?<br>[Ex] Benefit levels can be determined by:  |
|--|--|---|---|
| Als  | o include:   | Ĭ | <ul> <li>National SP objective.</li> </ul>  |
| <ul> <li>*</li> <li>*</li> <li>*</li> <li>*</li> </ul> | Does the law specify benefits and<br>benefit levels?<br>For cash transfers, who is the designated<br>recipient (e.g. female of the HH)?<br>What is the average value (LCU) of the<br>benefit (indicate time frame: month, year,<br>or one-off benefit)?<br>What is the value of benefit for women, if<br>different from men?<br>Describe how benefit levels vary in<br>relation to eligibility criteria (e.g. number<br>of children, etc.) |   | <ul> <li>Needs of population.</li> <li>Value of necessary goods and services.</li> <li>Programme sustainability and<br/>available financing.</li> <li>National (or an international) poverty line.</li> <li>Minimum wage.</li> <li>GDP/capita.</li> <li>Economy wide average earnings, or similar.</li> </ul>   |
|  | How does the benefit compare<br>with SP needs, and with national or<br>programme objective?  | • | <ul> <li>[Ex] Benefit alignment with programme objectives.</li> <li>In Jordan, the National Aid Fund provides Recurring Cash Assistance aimed at covering the basic needs of families living below the poverty line (JOD 68 in 2017), with a poverty gap greater than JOD 50. The programme provides basic monthly assistance (JOD 45-200), and an additional monthly grant that amounts to 23 per cent or more of the poverty line. The total benefit can reach JOD 300. Thus, it is in line with the income poverty gap of those receiving the benefit (socialprotection.org (n.d.b)).</li> </ul> |
|  | cuss the level of subsidies, whether<br>versal or targeted.  |   | <ul> <li>[Ex] Benefit level of universal subsidies. In the<br/>Arab countries, fuel, food, and housing subsidies<br/>are a common SP instrument. Several Arab<br/>countries are net importers of food, and, thus, are<br/>subject to potential risks of food-price volatility<br/>(ESCWA, 2014).</li> <li>Cross-refer to section 3.1.3 for an example of<br/>Government expenditure on the universal subsidy<br/>as a share of all SP expenditure.</li> <li>Suggested data sources:<br/>Ministry of Finance or Economy; national budget.</li> </ul>   |

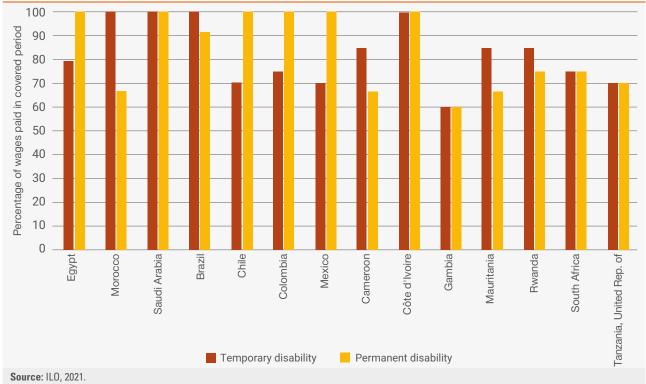
| 84 | Comprehensive national reviews of the systems and reforms of ESCWA member countries  | Social protection landscapes and perspectives  |
|----|--|--|
|    | Appraise shock responsiveness of benefit level by answering:   | Additional data sources:<br>IMF data: on energy subsidies.<br>IMF Energy Subsidy Estimates Dataset (Garcia-<br>Escribano and Yue Liu, 2017).   |
| •  | Can temporary modifications be<br>triggered during shocks? Is there a legal<br>framework allowing modifications to the<br>benefit level? Is there an established<br>communication strategy, explaining the<br>rationale for change?  | To allow for temporary modifications of the<br>benefit level, some conditions have to be<br>met: assessment on how needs may change<br>due to a shock, legislation allowing for<br>vertical expansions during a shock, and a<br>communication strategy explaining the reason<br>for the change and that it is temporary.   |
| +  | If data are available, include in the report<br>appraisals on if the benefit levels are<br>adequate. Since benefit levels vary as per the<br>SP programme component, the appraisals of<br>their adequacy also vary.  | Discuss with the ESCWA technical editors if, and<br>on which programmes, assessment of adequacy<br>should be undertaken. Further guidance notes<br>are available with ESCWA on how to do it for<br>different programmes.   |
|    | <ul> <li>Social assistance programmes (cash) – the level of benefit should be set to provide, at minimum, effective protection against monetary poverty.</li> <li>Assess the level of the benefits as a percentage of the poverty line and other minimum income standards.</li> <li>Social assistance programmes (in kind) – to assess adequacy. Similar principles apply for in-kind transfers as for cash transfers if the goal is to transfer income to the households.</li> <li>Healthcare programmes – to be considered adequate, should provide essential health, maternity, and preventive care, making sure that the services are available, accessible, and of an acceptable and adequate quality, including in remote areas of the country.</li> </ul> | <ul> <li>[Ex] In Iraq, for example, the national poverty line was around IQD 110,000 per person per month in 2017/18 (UNICEF Iraq and others, 2020). Its cash transfer programme, called Social Protection Network, provides a benefit of IQD 125,000 for a one-person female-headed household (socialprotection.org (n.d.c)). It represents a ratio of 1,14 times the poverty line, suggesting that the programme is adequate to raise them to a non-poor level.</li> <li>[Ex] In Yemen, the sickness benefit level is established based on the employee earnings. In the first two months, it corresponds to 100 per cent of earnings, then 75 per cent in the third and fourth month, and 50 per cent in the following, up to eight months (SSA, 2018).</li> <li>Data sources on availability and accessibility (immunization, maternal mortality, child mortality, availability, etc.):</li> <li>ESCWA (data).</li> <li>WHO (data).</li> </ul> |
| a  | Social insurance programmes – benefit level<br>adequacy is set to mirror the overall level of  |  |

contributions paid while ensuring access to basic income and services. Authors may use

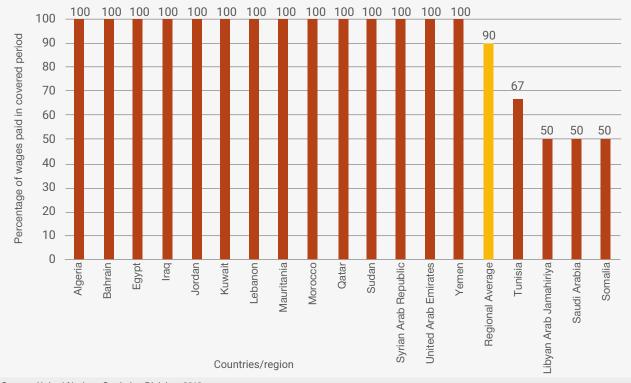
the following indicators to reflect whether benefits fulfil these functions. Figure 3.4 legal replacement rates for permanent and temporary disability in employment injury schemes, bar or column chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year.

 Figure 3.5 legal replacement rates for maternity leaves (level of maternity cash benefits as a percentage of previous earnings), bar or column chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year. Figure 3.6 average net pension replacement rates in public pension schemes, bar or column chart displaying values for all Arab countries, in addition to world and some regional averages; latest available year (vs. for the year 2000 or 2010).

Universal subsidies – carry out an adequacy appraisal below section on equity, as the adequacy assessment will show how much those that need SP benefit from it. See section 3.2.9 Equity of benefits below.



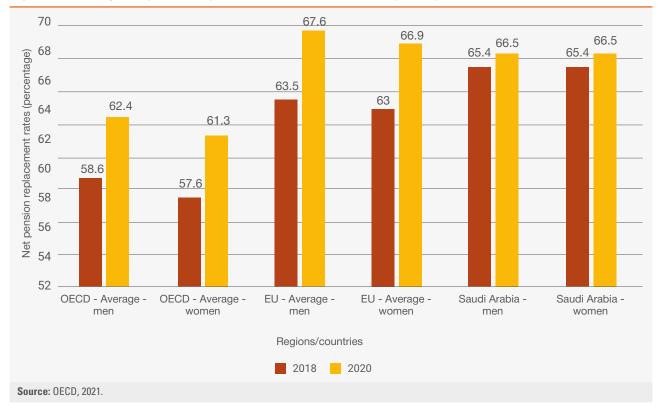
# Figure 3.4 Legal replacement rate for disability



# Figure 3.5 Legal replacement rate for maternity leave

Source: United Nations Statistics Division, 2013.

Note: For the United Arab Emirates, Tunisia, Libya and Saudi Arabia, different rates were reported for women working under different conditions. The rates illustrated by this graph were chosen based on assumptions regarding which types of working conditions seemed the most common for women requesting maternity leave.



# Figure 3.6 Average net pension replacement rate at retirement in public pension schemes

86

# 3.2.4 Benefit indexation

| J.Z.4 Denent Indexation   |  |
|---|--|
| Paragraph per programme on indexation should explain:   | Indexation means that benefits should be protected<br>against inflation or the risk of inflation. It is<br>particularly important for long term-based benefits,<br>as the real value of the benefit and the purchasing<br>power of the beneficiary decline over time.  |
| For cash benefits, the arrangements to adjust benefit level.  | <ul> <li>[Ex] Cash benefit possible indexation arrangements</li> <li>None.</li> <li>Discretionary (specify rules).</li> <li>Automatic (specify indexation reference value).</li> <li>According to inflation.</li> <li>According to wages (public sector, private sector, minimum wage, to be specified).</li> <li>According to the availability of resources.</li> <li>Are the floor and ceiling benefit levels also indexed?</li> </ul> |
| Is indexation frequent to keep up with economic indicators?   | Frequency of indexation can be triggered annually<br>or based on changes in level of earnings or cost<br>of living in the country. The frequency of changing<br>indexation should guarantee maintaining the<br>intended purchasing power that the benefit is<br>supposed to provide to the beneficiary.  |
| <ul> <li>What was the last increase and by how much (percentage)?</li> <li>Are indexation arrangements specified in national laws and regulations?</li> </ul> | <ul> <li>[Ex] Uzbekistan old age pension</li> <li>"The size of the old age social pension [] was set administratively and was increased during the 2015-18 period because of annual indexation, based on increases in the minimum wage" (Papa and others, 2020).</li> </ul>  |
| <ul> <li>Appraise shock responsiveness of indexation, by answering:</li> <li>Is the benefit value eroded by inflation?</li> </ul>                             | Benefit levels should be regularly adjusted for<br>inflation (automatic indexation mechanisms),<br>or frequently updated, especially during<br>emergency context.  |
| 3.2.5 Frequency of benefit transfers  |  |
| <ul> <li>Sentence/paragraph per programme on frequency of transfers should explain:</li> <li>How often payments are made.</li> </ul>                          | Frequency of transfer is the periodicity of the transfer. It should be in line with beneficiaries' consumption needs, administrative capacities, and programme objectives.   |
| Is frequency appropriate according to<br>consumption needs, administrative<br>capacities, and the programme objectives?                                       | According to Laamanen and others (2019),<br>paying benefits more than once a month could<br>lead to a smoother consumption pattern.  |
|   |  |

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88

If the frequency of payments in line with:

- > The consumption needs of beneficiaries.
- The customary frequency of the payment of earnings.
- The timeframes for the payment of essential goods and services (e.g. housing, utilities, etc.).
- The administrative and delivery capacity of the scheme.

Appraise the shock responsiveness of frequency of payments by answering:

Can the frequency and timing of benefit distribution be modified in the event of a shock?

#### 3.2.6 Duration of benefits



Sentence/paragraph per programme on duration of transfers explaining/describing:

- The benefit duration determination.
- The length of beneficiary entitlement to receive a benefit for any one given case.
- If benefit duration is prescribed by law.
- The maximum and minimum duration periods (specify for each benefit under a programme).
- If the duration considers the existence of other income-generation opportunities/programmes.
- Is the duration appropriate to achieve programme intended objectives?

On the other hand, Aguila and others (2017) state that more frequent payments (e.g. monthly) are associated with more consistent spending on basic needs (e.g. food staples and doctor visits), while less frequent payments (e.g. bimonthly) allow for larger purchases (e.g. durable goods).

Cross-refer to annex III and IV on 'periodicity' of transfers.

Benefits timing should be tied with specific situations that correspond to a shock. For example, a benefit could be linked with the seasonality of agriculture, being provided at specific periods of the agricultural production.

Duration of benefits is the time over which the beneficiary receives the benefit.

The ideal appropriate duration of the benefit differs for each type of programme.

Public works programmes: Benefit duration should consider if there are other income-generating opportunities from which individuals can benefit. It also depends on the programme objectives.

Unemployment, sickness, and disability benefits: compare the average unemployment duration with the unemployment benefit duration (check for examples, labour-market surveys). Old age benefits: the years of retirement depend on the normal retirement age and the life expectancy at retirement. By calculating the increase/decrease in the national life expectancy at the current normal retirement age – typically, for the latest available year vs. the latest year in which the normal retirement age had been amended in the past – assess the required increase/decrease in retirement age vis-à-vis change in life expectancy at retirement across the past years (cross-refer to section 1.3).

LMP: research indicates that the LMP may be more cost effective over the long term (3-10 years) (Brown and Koettl, 2012).

Social assistance: benefit duration should be enough to fulfil the programme objective.

#### 3.2.7 Benefit exit rules and conditionalities

On exit rules include a few sentences per programme. The information may include:

- The rules and non-compliance with conditions that end participation in the programme or suspend a benefit.
- When do memberships/benefits of contributory/non-contributory labourmarket programme end?
- Are there any complementary measures to promote graduation (measures that promote productive inclusion, e.g. via formal employment or self-employment).
- If graduation implies loss of benefits from other programmes or schemes.
- If exit rules are appropriate and help to meet the programme goals.
- Any negative coping mechanisms after leaving the programme.

Programmes that are not mandatory usually have exit rules and exit conditionalities. Exit rules mean the conditions according to which participation in a programme is terminated. Exit is usually linked to re-verification or recertification of eligibility, which is usually checked periodically, e.g. every few years.

Complementary measures to promote out-ofpoverty graduation frequently fall into categories: (a) those that promote integration into the formal labour market, e.g. via upskilling or job-placement, and (b) those promoting productive inclusion by stimulating self-employment via asset transfer and/ or coaching:

[Ex] Key graduation approaches:

BRAC's graduation programme for the ultra-poor:

While the components of this approach vary across contexts, it frequently targets beneficiaries of poverty-targeted cash transfer programmes, who receive coaching for selfemployment, one-time productive asset transfers (e.g. life stock), financial services and financial literacy training, and/or other forms of empowerment.

[Ex] Jordan's labour market integration for children of NAF programme beneficiaries:

Jordan's National Aid Fund (NAF) provides children of cash transfer beneficiary families with additional funds to pay for vocational training expenses, as well as with a lump sum for a limited period to cover living expenses during the training period. As of 2022, NAF beneficiaries have been also able to sign up to the Sajjil platform established by Jordan's Ministry of Labour, which enables (semi)qualified beneficiaries to get access to partially subsidised employment.

| Consider desirable and undesirable<br>incentives SP programmes create<br>for different categories. In addition to<br>beneficiaries, relevant categories may<br>include non-beneficiaries and applicants (in<br>the case of non-contributory programmes),<br>or contributors and non-contributors (in the<br>case of contributory programmes). | Incentives are a complex topic to appraise. In this<br>CPR focus on reviewing literature and conduct KIIs<br>to find any relevant information rather than doing an<br>in-depth analysis.   |
|---|--|
| <ul> <li>Depending on the type of programme, include the following:</li> <li>If the programme provides incentives to those able to work.</li> <li>To join or stay in the labour force, and to join or stay in the formal economy.</li> </ul>  | <ul> <li>[Ex] A poverty-targeted, non-contributory programme may, in the worst case, create an incentive to "stay poor". If this happens, beneficiaries or applicants could be reluctant to join the workforce, or to take up more well-paid employment. It could also encourage informal employment since the revenues of beneficiaries and applicants are then "hidden" to the government.</li> <li>Benefits provided through contributory schemes can be a major incentive for workers to join the formal economy. At the same time though, the contributions could be a strong disincentive for employers and employees alike. Policymakers should, therefore, calibrate the parameters of contributory SP schemes bearing in mind both the importance of incentives to join and remain in the formal economy, and the financial sustainability of the schemes.</li> <li>Cross-refer to section 1.4 (Labour market overview) to get labour market indicators.</li> </ul> |
| <ul> <li>Whether there are measures in place that affect scheme administrator or service provider incentives:</li> <li>Register persons with the scheme or programme.</li> <li>Deliver benefits or provide services.</li> </ul>   | <ul> <li>[Ex] Service providers may have incentives not to register persons entitled to benefits or not to provide services to beneficiaries.</li> <li>[Ex] Scheme administrators may have incentives to expand coverage and register additional eligible persons whenever budget transfers are used to subsidise the delivery of services (e.g. subsidized healthcare).</li> <li>Pay reimbursements timely. Subsidies should be adequate to cover all the direct and indirect costs.</li> </ul>   |

#### 3.2.9 Equity of benefits

If data are available and time allowing, appraise if the programmes and schemes are equitable, distributing benefits to those that need it, and using resources that have been mobilised progressively (reducing inequality).

- Include charts or tables displaying the results.
- Include an appraisal of equity on general subsidies in countries where general subsidies make up a big part of government expenditure (see following subsection).

More precise results may be obtained from analyses of recent and nationally representative household survey microdata.

#### **Recommended data sources:**

- Recent household microdata.
- Economic Research Forum data portal for microdata sources.
- The national statistics office.

# United Nations data sources:

- United Nations microdata sources.
  - ° World Bank (ASPIRE).
  - ° ESCWA (data).

Ask the ESCWA technical editors for more instructions on progressive resource mobilisation and imputations.

# Methodology

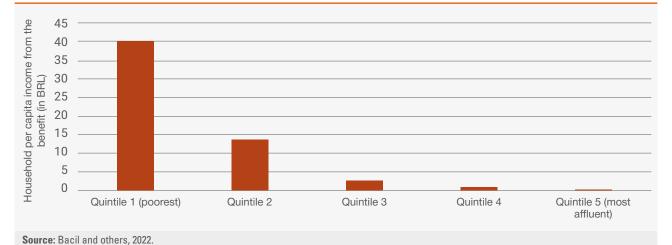
The household microdata analyses require a team member capable of using statistical data processing software or support from the national statistical office.

#### Imputations

Note that not all household surveys have data on the programme being appraised. In this case, the research team may need to impute (i.e. infer) beneficiary data into the respective dataset. These imputations may need to rely on two steps:

- 1. A comparison between household survey microdata, and coverage data from administrative registries of the programme.
- 2. An analysis of programme design to understand what characteristics of beneficiaries need to be used to impute beneficiaries.

**Figure 3.7** shows that Bolsa Família is distributed progressively, as benefit incidence is highest among the poorest income quintile, and becomes lower among the more affluent quintiles. Note, however, that this graph does not consider the programme funding source.



#### Figure 3.7 Benefit incidence per income quintile from the Bolsa Família programme of Brazil

☐ If data are available and

If data are available and time allowing, appraise the equity of universal subsidies, including:

Who benefits from the subsidy? Include a chart showing where the subsidies benefits are concentrated, showing the share of the overall expenditure spent on subsidies that reaches the bottom 10 or 20 per cent (or x per cent) of the distribution of households.

Based on the chart, explain by which quintile of the society, and to what extent the subsidised good is consumed, allowing an appraisal of whether the good has regressive or progressive tendency.

#### Who will lose out from removing subsidies?

Have any temporary and/or permanent programmes been put in place or amended to absorb the social repercussions of dismantling universal subsidies?

#### Potential data sources:

- Energy and fuel subsidies calculations based on household living standard measurement survey, which has indicators on household consumption and spending on subsidised products and services.
- Consumer price subsidies, household survey, and imputation calculations.

Refer to the ESCWA technical editors for further instructions.

#### Methodology

Who benefits from the subsidies, use latest household survey on expenditure and answer how different forms of subsidies that reduce household expenditures on the subsidised product/service benefit different households (Olivier and Laderchi, 2018).

**Note:** Consumer price subsidies are less straight forward to assess. As household surveys rarely include the amounts of subsidised products consumed (a household benefits from a price subsidy by consumption of the subsidised good), the quantities consumed need to be imputed.

When subsidies are dismantled, higher prices imply real income losses, as well as indirect losses caused by higher prices of other goods that use it as intermediate goods in the production process (especially in case of energy and fuel).  Summarize the impacts graphically, highlighting the incidence or poverty indicators after price change for income groups or poverty and non-poverty levels.

#### Methodology

After price increase, based on real income or expenditure distribution, calculate poverty incidence or other poverty indicators (use poverty lines), such as depth, severity, or the number of new poor (Olivier and Laderchi, 2018).

This analysis will be more accurate and better defined if indirect effects are also taken into consideration.

#### 3.2.10 Efficiency of benefits

If data are available and time allowing, appraise if social assistance programmes and schemes and universal subsidies are efficient in reducing poverty or achieving their other objectives proportional to the costs of the programme.

Include indicators, such as:

- Reduction in poverty associated with SP programmes.
- Benefit cost ratio associated with programme.

#### Suggested data sources:

- Qualitative data on programme design (legislative framework and programme manuals) provide information on benefit types and amounts, target groups, and other characteristics that often already hint at existing problems, such as overlapping mandates of stakeholders, the exclusion of certain groups by design, and inadequate benefit types (OECD, 2018).
- Quantitative data from administrative registries on beneficiaries, benefits, and, if applicable, contributions of beneficiaries, household surveys (OECD, 2018), and, when these two sources are not available, United Nations data sources.

#### United Nations data sources:

- ESCWA spending on social assistance programme, expenditure on SP system.
- World Bank (ASPIRE database).

A simple way to calculate the efficiency of SP programmes, is by calculating the reduction in poverty as a proportion of cost.

| Poverty                | • | Reduction in poverty |
|------------------------|---|----------------------|
| reducing<br>efficiency |   | Cost of programme    |

**Figure 3.8** below shows poverty reduction efficiency of Indonesia's PKH as a measure by changes in the poverty gap for every 100 IDR spent on the programme (OECD, 2018). These calculations can further be complemented by looking at the composition of social expenditure, and identifying the amount (proportion) given to programme administrative costs.

93

# Figure 3.8 Most effective poverty reduction programme (PKH) of Indonesia

|                     | Disbursed amount<br>(IDR trillion) | Poverty headcount reduction | Extreme poverty headcount reduction | Poverty gap<br>reduction<br>(IDR million) | Extreme poverty<br>gap reduction<br>(IDR million) |
|---------------------|------------------------------------|-----------------------------|-------------------------------------|---|---|
| Absolute number     | 5.35                               | 1 806 063.00                | 2 069 845.00                        | 2 362 689.69                              | 979 580.90  |
| Percentage of GDP   | 0.05                               | 5.71                        | 25.91                               | 11.92                                     | 30.94   |
| Source: OECD, 2018. |                                    |                             |                                     |   |   |

| 3.3 Delivery mechanisms of main SP systems  |  |  |  |
|---|--|--|--|
| $\oslash$   | <b>OUTPUT:</b> Elaboration of the delivery<br>mechanisms of selected SP programmes,<br>and the identification of potential<br>shortcomings and challenges. |  |  |
| Similar to section 3.2, collect data and<br>provide appraisal on delivery systems of SP<br>schemes, following the general guidance<br>provided below. |  | Follow guidance in annex I on CPR Outline to structure the report. |  |
| Programme implementation appraisals should include the following areas:   |  |  |  |
| Process mapping (e.g. swimlane diagram) of<br>delivery chains.  |  |  |  |
| Delivery phases (figure 3.9):   |  |  |  |
| Outreach, information dissemination, and<br>awareness raising.  |  |  |  |
| >   | Intake and registration.   |  |  |
| > Eligibility verification.   |  |  |  |
| > Enrolment.  |  |  |  |
| > Benefit payment/service delivery.   |  |  |  |
| Monitoring and evaluation (M&E), and data<br>and information management.  |  |  |  |
| >   | Recurring beneficiary operations.  |  |  |

# Figure 3.9 Common phases in SP delivery chains



Swimlane diagrams (figure 3.10) are a common tool

responsibilities, in which actors involved in delivery

Note: Different programmes may have different

ordering of implementation phases, or may

combine phases along the delivery chain.

used in process mappings. An editable swimlane diagram such as the one depicted in figure 3.10

can be edited using Miro or other tools.

Cross-refer to subsection 2.6.1 Roles and

of SP programmes were identified.

#### 3.3.1 Process mapping of delivery systems

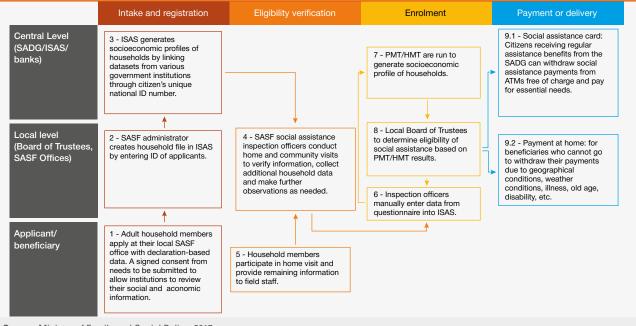
| -// |
|-----|
|     |
|     |

Provide a process mapping of delivery chain of the programme.

- The process mapping diagram should include (Lindert and others, 2020):
  - > A 'swimlane' or horizontal bar for each actor involved, or for each level of public administration.
  - > Their roles and responsibilities along each phase of the delivery chain.
  - Steps for carrying out implementation of each phase.
  - > Sequencing of these steps.
- Examine steps mapped for carrying out implementation, and identify potential issues or challenges concerning:
- Vertical coordination for programme implementation.
- Bureaucracy levels.
- Use of digital technologies.
- Other efficiency aspects.

[Ex] Steps in implementation that could be skipped or cut.

# **Figure 3.10** Example of process mapping: intake, registration, and assessment of needs and conditions in the Integrated Social Assistance System (ISAS) of Türkiye



Source: Ministry of Family and Social Policy, 2017.

#### 3.3.2 Delivery phases

For each implementation phase identified in the delivery chain of the scheme in section 3.1.4. Integration across programmes, follow guidance provided below to investigate potential implementation issues at programme or service level. Authors should follow the guidance of this section only for implementation phases applicable to the SP scheme being appraised.

For instance, if a programme does not have a specific outreach strategy being implemented in the context of the programme, authors shall consider whether that in itself constitutes an implementation issue, instead of following guidance provided under the Outreach section below.

## 3.3.2.1 Outreach, information dissemination, and awareness raising

|  | onocorraining  |
|--|--|
| Examine processes in place to reach<br>and inform intended populations about<br>the programme or service, as well as<br>encourage them to engage, register, and<br>provide personal information.   | <ul> <li>Potential sources of data:</li> <li>Desk review by the authors may already raise information on the outreach and dissemination efforts of the programme.</li> <li>Programme administrators are the most likely to be able to provide relevant information.</li> <li>Structured or semi-structured KIIs or focus group discussions with applicants/beneficiaries of the programme could add valuable insights to the findings.</li> </ul>  |
| <ul> <li>Provide an overview of outreach and dissemination efforts in place in the programme context. Relevant issues may include:</li> <li>Who are the intended populations?</li> <li>If the most vulnerable or marginalized groups are reached.</li> </ul> | Cross-refer to subsection 3.2.1 and subsection 3.1.1.  |
| <ul> <li>The extent to which outreach measures are tailored to the intended target populations of the scheme.</li> <li>The main challenges in reaching them.</li> </ul>  | Specific groups may face different challenges in<br>accessing information about the programme. For<br>instance, people living below the poverty line –<br>especially in rural areas – are more likely to suffer<br>limitations in terms of literacy and digital access.<br>If relevant, examine the characteristics of the<br>populations the programme intends to reach, and<br>identify potential challenges in communicating<br>information about the programme to them.<br>Information on registration rates in the programme or<br>service, especially among populations with access<br>barriers, can provide indication on whether outreach<br>efforts of the programme or service are effective.<br>Evaluations may also indicate the rate of awareness<br>among the population or of a population group. |

 Dissemination of information about different aspects of the programme (figure 3.11).

Shock-responsiveness:

- Diversity of communication channels in place, e.g. SMS, social media, hotlines, word of mouth.
- Reach of outreach channels to groups in more risk-prone areas, including during or after shocks.
- Coordination channels with other government agencies or humanitarian actors that can be used to leverage administrations' outreach capacity during crises.

[Ex] Takaful and Karama in Egypt

An evaluation of the Takaful and Karama programme in Egypt found that 82 per cent of the total population had heard of the programme. In the poorest quintile, the number was 85 per cent. This suggests that the outreach campaign had been quite successful, and that it had largely reached the target population. Moreover, while 35 per cent of the overall population reported having applied to Takaful and Karama, 50 per cent of the poorest decile had done so.

Surveys, interviews, or focus group discussions may indicate to what extent people are informed about specific aspects of a programme.

**Figure 3.11** is for reference only and does not need to be reproduced by the authors.

Programme communications need to reach groups that are more likely to be affected by a shock or that have already been affected by it.

Usual communication and outreach strategies may not be functional during or after shocks.

During crises, active outreach and hotlines can overburden programme staff; existing coordination channels with other actors could potentially allow scaling-up outreach efforts in these scenarios (Smith and Bowen, 2020).

## Figure 3.11 Programme information available through outreach

Programme information that can be disseminated through outreach

- Programme objectives
- Characteristics of the intended population and eligibility criteria
- Points of contact, and how to access them
- Timing and place of intake/registration
- Programme rules
- Programme duration
- Benefit entitlements
- Delivery process, including frequency of payment/delivery
- Rights and responsibilities as registrants or beneficiaries, including possible conditionalities
- Suspension and exit rules
- Channels for filling grievances
- Functional ID systems and civil registration, social registries

Source: Template authors, based on ESCAP report 2018.

97

#### 3.3.2.2 Intake and registration



Examine processes related to intake and registration:

- Intake.
- Identification of applicants.
- Registration/application.

The end goal of these processes is to have complete, validated and verified information on applicants of all SP programmes and services (World Bank, 2020).

#### Figure 3.12 Intake modalities

#### On-demand

- The applicant takes the initiative to apply.
- Applicants engage separately, i.e. can be registered individually.
- Applicants can apply at a time of their own choosing.
- Can be used for idiosyncratic or covariate shocks.
- Health insurance, pensions, and labour market schemes usually allow dvnamic intake.

#### Administrator-driven

- The programme/social registry initiates registration.
- Applicants engage as a group, i.e. individuals are registered at the same time/occasion as others found eligible.
- Application timetable depends on financing and capacity.
- More common in poverty-targeted responses to covariate shocks.
- Social assistance programmes tend to be more administrator-driven.
- more administrator driven.

Source: Template authors, based on Lindert and others, 2020; TRANSFORM, 2017b.

- Data from different databases are integrated to identify those eligible.
- Applicants do not need to engage again. Application timetable depends on
- programme managing integration.Common where there is sufficient
- capacity to manage integration.

# Intake

Identify the intake approach used by the programme and discuss potential challenges and opportunities associated with it. Relevant issues may include:

Use of social registry of the country or of an

integrated beneficiary database to identify

potential programme beneficiaries.

Intake refers to processes of gathering basic personal information from intended populations or information systems (World Bank, 2020). It also involves establishing mechanisms of identification (ID) of applicants.

Intake modalities are often classified within the spectrum of on-demand, administrator-driven, and data integration approaches. See further characterization of these approaches in **figure 3.12** above. The figure is for reference only, and does not need to be reproduced by the author.

See definitions of terms in glossary.

[Ex] In Malawi, the Social Cash Transfer programme and the Public Works programme access household data in the single social registry to create potential beneficiary lists; these lists are then validated by community workers to create a list of beneficiaries to be enrolled in the programme (Lindert and others, 2020).

If relevant, refer back to section 3.1.4.2.

- If on-demand intake is required, describe:
  - The availability of multiple access channels to intended target populations.
  - > Whether application windows are wide enough to allow dynamic inclusion. Can people apply whenever they need it most?

#### Identification

+

For countries where national registration systems are not fully implemented, examine mechanisms used to collect basic personal identification (ID) information, e.g. names, birthdate, birthplace, and sex at birth, from those without official ID, so as to enable them to access the scheme.

+

Describe mechanisms adopted in the programme context to collect ID information and establish a unique identifier for registrants.

#### Access channels may be:

- Offsite, with temporary service desks.
- Technology assisted, via website or telephone.
- In-situ, via home visits.
- Via referrals.
- In person, at a local office.

In many countries, persons in most need of routine SP benefits or services tend to have lower rates of national ID ownership than the general population, or the national ID system may allow duplication of ID records, for example.

To address these issues, alternatives to foundational ID documents are often used to support the identification and verification processes in implementation of SP programmes, such as health record books, voter IDs, immunization cards, school registries, taxation, and licensing records.

To find out about coverage of the ID system, review literature on vital registration, civil registration, and national ID systems of the country. Examine the estimated registration rate in the country and among the poorest segment of the population. It is also important to look for evidence on whether the administrative process to obtain an ID is potentially excluding poor and vulnerable persons (ISPA, 2016a).

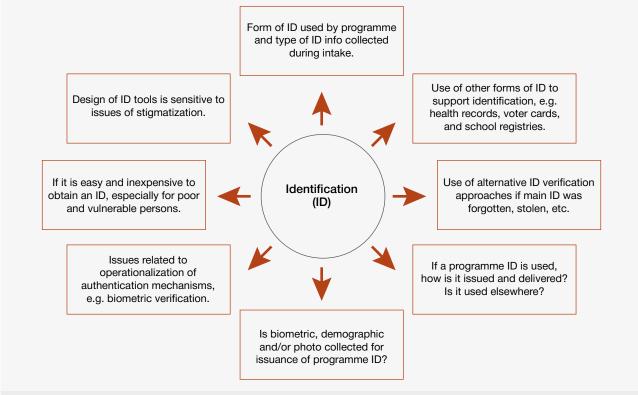
Follow hints in figure 3.13 to appraise the identification mechanism implemented in the context of the programme and possible related issues. The figure is for reference only and does not need to be reproduced by the authors.

If the programme being appraised targets elderly persons, for example, investigate possible gaps in ID ownership among the elderly, as well as system-wide issues that may hamper use of national ID to register in the programme, such as possibility of duplication.

In the absence of a national ID system, or low level of national ID ownership, an SP programme may ensure uniqueness of application/beneficiaries by issuing its own programme ID, or by using biometrics for example, such as fingerprints and facial or iris recognition (ISPA, 2017).

Inclusive SP schemes can establish mechanisms to enable those without official documentation to access them, by accepting alternative proof of identity, and providing opportunities for issuance of official ID documentation to those without access (TRANSFORM, 2017a; ISPA, 2017).





Source: Template authors, based on ISPA, 2016a. The figure is for reference only and does not need to be reproduced by authors.



#### Registration

Provide an overview of registration procedures in place in the context of the programme. Relevant issues may include: Registration or application consists of recording ID information of applicants, collecting additional information via forms or interviews, and verifying/validating that information (World Bank, 2020).

After ID and other basic information is collected during intake, programmes collect additional or cross-check information of applicants with information in other administrative systems. These cross-checks are considered part of quality control mechanisms, to ensure information is complete and consistent with information previously collected by other government agencies, programmes, or services (World Bank, 2020).

Intake and registration may also happen

|  | simultaneously depending on the type of intake approach being implemented.   |
|--|--|
| <ul> <li>Application/registration barriers:</li> <li>Accommodation strategies in place to<br/>address possible barriers in application.</li> <li>Discuss whether additional strategies<br/>should be adopted to facilitate access of<br/>potentially eligible persons currently out<br/>of the programme.</li> </ul> | Access barriers may be physical, preventing<br>persons with disabilities or who need to travel<br>from reaching the registration point. They may<br>also be informational, hampering access to<br>persons with low literacy levels, or who do not<br>speak the local language.<br>Depending on the context, accommodation<br>strategies to reduce barriers may include mobile<br>teams visiting potential applicants, utilisation<br>of simple language in forms or questionnaires,<br>or translation. |
| Mode of application/registration.  | Forms or questionnaires (paper-based or digital)<br>should be user-friendly, i.e. easy to comprehend<br>and navigate, to the applicant and programme<br>administers. Moreover, it should not take too<br>long to fill or administer application forms/<br>questionnaires (or conduct interviews).<br>Collection of minimal information principle:<br>If any information is already available to the<br>agency, it should not be required in registration<br>forms again.                               |
| Supporting documents and application costs.  | Obtaining supporting documents can<br>incur financial or time-related costs for<br>applicants who may need to physically<br>reach administration offices, and collect<br>documents and/or copies of documents.<br>They may cause hardship for persons of small<br>means, or comprise a barrier to registration.<br>SP programmes can reduce such costs by<br>requiring minimal information upon registration<br>and using existing government MISs to access<br>applicant data previously recorded.    |
| Ensuring accuracy of information collected<br>during registration.   | [Ex] Interoperable systems can be used to validate and cross-check data based on the applicant's unique ID.  |
| <ul> <li>Shock responsiveness:</li> <li>Registration process during or after shocks.</li> </ul>  | For horizontal expansions, complete post-shock<br>intake and registration may be needed to collect<br>data on affected households when they were<br>not yet included in the programme.   |

102

For vertical expansions, update of information of current beneficiaries may be needed in case of displacement shocks, for example.

Adoption of an on-demand registration approach and the flexibilization of registration processes can help simplify registration during or after shocks.

Temporary registration offices simplified or translated application forms, collection of essential information only, and relaxation of eligibility criteria, for example, can speed-up delivery processes (Smith and Bowen, 2020).

#### 3.3.2.3 Eligibility verification

| Provide a brief overview of eligibility verification processes in the context of the programme. Relevant issues may include: | Eligibility verification consists in determining<br>if an applicant fits the eligibility criteria of<br>a programme or service. After this phase,<br>beneficiary databases are updated with all<br>applicants deemed eligible for the benefit<br>or service.<br>Note the eligibility criteria of the programme<br>identified in section 3.2.1. |
|--|--|
| Way(s) eligibility is verified.  | [Ex] Verification steps may involve the need<br>to produce medical certificates and proof<br>of employment status, or social workers<br>making home visits to verify eligibility of<br>potential beneficiaries.  |
| Potential role of an integrated MIS in<br>determining eligibility.   | [Ex] Programme eligibility can be predetermined<br>from information recorded in an integrated MIS<br>and later consolidated in further verification<br>processes before enrolment.   |

#### 3.3.2.4 Enrolment

Provide a brief overview of enrolment processes in the context of the programme. Relevant issues may include: Enrolment refers to onboarding of eligible applicants in the SP programme or service. Not all eligible applicants will necessarily be enrolled; waiting lists are often used by programmes as tools to manage demand for programmes that cannot afford to enrol all eligible applicants at once.

For non-contributory programmes, enrolment typically follows eligibility verification; for contributory programmes, enrolment often follows payment of contributions, and eligibility verification happens at the moment when a benefit is claimed.

#### The enrolment process:

- > How often is enrolment conducted?
- > Information collected upon enrolment.
- Notification of enrolment, ineligibility, or inclusion in waitlist.
- > Information provided upon enrolment.

Waitlist management.

Shock responsiveness of eligibility verification and enrolment.

Describe how eligibility verification is altered or waived in shock situations. Neglect of notification to enrolled, waitlisted, or ineligible applicants may leave them speculating about their application status, undermining the credibility and transparency of the system.

Onboarding should encourage new beneficiaries to participate in the programme, and enable them to do so. It can be facilitated using printed communications, i.e. onboarding kits and materials, in-person meetings, or group orientation sessions.

During enrolment, additional information is often collected, including for instance a photo of a bank account number, or an e-wallet information.

Requirements for additional information upon enrolment need to be carefully considered by programme administrators so as not to potentially exclude persons who do not have an ID or face other documentation barriers, like international migrants.

For transparent implementation, programmes should have clear rules for the selection of applicants from the waitlist, especially in resource-constrained contexts. One of the most transparent ways to select beneficiaries from the list is to draw a random sample of applicants from it.

Existence of data-sharing protocols that allow use of data under different government entities during shocks to improve eligibility determination processes.

Prevision in programme rules of relaxation of documentation requirements for enrolment during shocks.

|  | Possibility of pre-enrolment of vulnerable<br>household in areas where shocks are predictable<br>and recurrent (Smith and Bowen, 2020).   |
|--|---|
| <ul> <li><b>3.3.2.5</b> Benefit payment/service delivery</li> <li>Examine processes related to payment or delivery mechanisms of SP benefits or services, and provide a brief overview of those. Relevant issues may include:</li> <li>Prescription in law or description in programme manuals.</li> </ul> | Prescription in law of the delivery mechanisms<br>can define rights concerning delivery/payment<br>of the benefit or service, and set standards for<br>quality of service delivery (ISPA, 2016b).   |
| Appropriateness of delivery mechanisms.  | <ul> <li>Delivery/payment mechanisms/modalities/<br/>instruments for cash transfers:</li> <li>Manual: cash.</li> <li>Manual: voucher.</li> <li>Electronic: bank transfer.</li> <li>Electronic: e-Voucher.</li> <li>Electronic: payment (prepaid) card.</li> <li>Electronic: mobile money.</li> <li>Other, specify.</li> <li>Source: ISPA, 2016b.</li> <li>Programmes must ensure appropriateness of delivery mechanisms in the context of the programme. Beneficiaries should receive the necessary information or training, including on new technologies, that will allow them to easily and safely access payments (ISPA, 2016b).</li> </ul> |
| Contextualize the programme payment<br>mechanism within trends in the country for<br>digitization of G2P payments.   | <ul> <li>G2P payments is a common abbreviation for government-to-person payments. These payments include public sector salaries, pension, cash transfers, and other SP benefits.</li> <li>Efficiency aspects of digital cash payments made to bank or mobile money accounts: <ul> <li>Often cost less.</li> <li>Reduce leakages.</li> <li>Improve transparency.</li> <li>Prevent errors, fraud, and corruption.</li> <li>Potential for increasing financial inclusion among the poorest and most vulnerable.</li> </ul> </li> </ul>   |

105

| Whether payment or delivery is outsourced<br>to a payment service provider (PSP) or<br>done in-house.                                    | <ul> <li>PSPs:</li> <li>Commercial bank.</li> <li>State bank.</li> <li>Post office.</li> <li>Mobile network operator.</li> <li>Microfinance institution.</li> <li>Savings and credit cooperative/credit union.</li> <li>NGO.</li> <li>Source: ISPA, 2016b.</li> </ul>  |
|--|--|
| Quality of delivery  | [Ex] There may be challenges related to quality, availability, or accessibility of health services.  |
| <ul> <li>Payment costs</li> <li>Cost of payment transactions and monitoring of costs.</li> <li>Leakage of programme payments.</li> </ul> | <ul> <li>The cost of the delivery process, including estimation of leakages, should be measured and monitored by programme administrators to ensure cost-effectiveness and support adoption of potential alternatives, such as outsourcing of payments or digitization of back-end and/or front-end processes, like e-payment mechanisms.</li> <li>"A programme with very high administration costs (annex VII, section 3.1.3) relative to the value of transfer disbursed is unlikely to continue to attract funding" (ISPA, 2016b, p. 8).</li> </ul> |
| Shock responsiveness of payment/delivery.  | <ul> <li>Formulation of plans to ensure liquidity of funds during shocks in case of potential increases in demand for manual cash payments.</li> <li>Consideration to use digital payments during shocks to accelerate delivery in contexts where they are deemed appropriate.</li> <li>Adjustment of frequency of benefits during shocks (Smith and Bowen, 2020).</li> </ul>  |

# 3.3.2.6 Monitoring and evaluation (M&E), and data and information management

| Examine processes related to M&E<br>at programme level. Relevant issues<br>may include: | M&E generates the necessary evidence for continuous improvement of programme implementation. |
|---|--|
|---|--|

Cross-refer to section 2.3.

# Potential data sources:

Information is likely to be found in programme manuals or reports, including M&E reports.

| •<br>• | Participation and consultation with relevant stakeholders in M&E activities.<br>Decisions the M&E is expected to inform.  | Cross-refer to subsection 3.3.2 in which institutional actors involved in M&E were identified.  |  |
|--------|---|---|--|
|        | <ul> <li>Decisions the M&amp;E is expected to inform.</li> <li>Timeliness of publication of M&amp;E information.</li> <li>Actors with willingness, authority and ability to put learning from the M&amp;E system to use.</li> <li>Appropriateness of statistics being compiled for M&amp;E activities taking into consideration programme objectives, including:</li> <li>Range of data collection items.</li> <li>Frequency of updating.</li> <li>Disaggregation categories and levels.</li> </ul> | <ul> <li>M&amp;E usually assesses performance in areas that are key for programme stakeholders. In this sense, it is critical to identify multiple stakeholders and their specific information needs (TRANSFORM, 2017e).</li> <li>Common M&amp;E statistics include to those listed in figure 3.14 (see also annex II):</li> <li>Number of applicants.</li> <li>Number of scheme members/beneficiaries.</li> <li>Geographic characteristics/location of beneficiaries.</li> <li>Geographic characteristics of beneficiaries.</li> <li>Demographic characteristics of beneficiaries.</li> <li>Demographic characteristics of beneficiaries.</li> <li>Date of registration.</li> <li>Date of reenrolment.</li> <li>Benefit delivery information.</li> <li>Breakdown of expenditure categories and revenue sources.</li> <li>Administrative costs.</li> <li>Quantity and types of services.</li> <li>Inclusion and exclusion errors.</li> <li>Information on eligibility.</li> </ul> |  |
|        |   | Disaggregation categories may include sex, age, geographic areas, and income status.  |  |
| •      | Describe the extent to which the<br>programme maintains a programme-<br>specific MIS.<br>Describe the functions and usage of the<br>MIS of the scheme with regard to M&E and<br>data updating?  | <ul> <li>To what extent does the programme maintain a programme-specific MIS, with information from the social registry or integrated beneficiary registry, or provided by applicants themselves, as well as other information collected over the programme implementation cycle? What information is stored in the programme MIS and used for programme management?</li> <li>Potential types of data to be collected and managed by a programme-level MIS are:</li> <li>Application and registration.</li> <li>Enrolment of beneficiaries.</li> </ul>  |  |
|        |   | Monitoring of compliance with conditionalities  |  |

• Monitoring of compliance with conditionalities (e.g. in context of conditional cash transfer programmes).

|  | <ul> <li>Benefit level determination.</li> <li>Identification of those beneficiaries who have<br/>been paid and those who have not been paid, for<br/>payment reconciliation.</li> <li>Management and monitoring of grievances<br/>reconciliation system.</li> <li>Identification of those who should be removed<br/>from a programme, e.g. when no longer eligible<br/>or deceased.</li> <li>Notification of when different process have<br/>happened or should have happened (e.g. when<br/>payments are due or when a member should exit<br/>the programme).</li> <li>Provision of reports to be used for management<br/>and monitoring.</li> </ul> |
|--|--|
| <ul> <li>Occurrence of evaluations of programme<br/>impact on outcomes of interest.</li> </ul> | <ul> <li>[Ex] Plans to conduct these evaluations can be included in operation manuals or be part of the law that regulates operations of the programme.</li> <li><b>Types of evaluation:</b> <ul> <li>Formative evaluation.</li> <li>Process evaluation.</li> <li>Economic evaluation.</li> <li>Impact evaluation.</li> <li>Systematic reviews.</li> <li>Source: TRANSFORM, 2017e.</li> </ul> </li> </ul>  |
| Whether evaluations are conducted by<br>independent third parties or internally.               | Evaluations carried by independent third<br>parties usually have a higher rigour in terms<br>of the evaluation methodology. Conversely,<br>the participation of in-house staff in formative<br>evaluations, i.e. taken during development of a<br>new programme, or when modifying an existing<br>programme, is critical to support capacity-<br>building processes among programme staff<br>(TRANSFORM, 2017e).   |

# Figure 3.14 Common M&E statistics

| M&E statistics   |  |  |  |
|--|--|--|--|
| Number of applicants.     Benefit delivery.  |  |  |  |
| Number of scheme members.     Breakdown of expenditure categories and revenue sources. |  |  |  |
| Number of beneficiaries.     Administrative costs.                                     |  |  |  |
| Geographic characteristics of beneficiaries.     Amount of transfers.                  |  |  |  |
| Socioeconomic characteristics of beneficiaries.     Quantity and types of services.    |  |  |  |
|  |  |  |  |

- Demographic characteristics of beneficiaries.
- Dates of registry.
- Enrolment.

- Inclusion and exclusion errors.
- Information on eligibility.

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| 3.3.2.7 Recurrin | ng beneficiary | operations |
|------------------|----------------|------------|
|------------------|----------------|------------|

| J.J.Z. I Necuring beneficiary operations   |  |
|--|--|
| Examine processes related to continuous beneficiary operations which may include:                |  |
| Beneficiary data updating, including recertification and exit decisions.                         |  |
| <ul> <li>Complementary graduation<br/>measure delivery.</li> </ul>                               |  |
| Monitoring compliance with<br>conditionalities.  |  |
| Grievance redress mechanisms (GRM).  |  |
| Case management.   |  |
| Error, fraud, and corruption (EFC) monitoring.   |  |
| Follow further instructions below to investigate implementation issues in these processes.       |  |
| Provide a brief overview of potential issues concerning the beneficiary data updating processes. | Beneficiary data management consists of updating<br>and correcting information on programme<br>beneficiaries to inform decisions about their status.<br>It is important to consistently update records to<br>reflect changes in age, income, family size, and<br>address that may impact, for example, programme<br>eligibility, benefit level determination, and<br>exit decisions.   |
|  | <ul> <li>Programmes may allow more or less frequent updates, depending on the level of complexity of updating or correcting beneficiary information.</li> <li>Updates may occur as part of a recurring implementation cycle, on-demand, or at varying frequencies.</li> <li>Updating databases of universal non-contributory old-age schemes often involves fewer complex changes compared with those of means-tested schemes, for example.</li> <li>[Ex] In Mongolia, the system automatically discontinues participation of children in the Child</li> </ul> |
|  | Money Programme once they turn 18 years old.   |
|  |  |

|  | changes in status of beneficiaries due to<br>eligibility updates, because people may be<br>facing additional vulnerabilities and urgent<br>needs not captured in programme criteria<br>(Smith and Bowen, 2020).   |
|--|---|
| Beneficiary data updating procedures.  | <ul> <li>[Ex] Reporting may be by:</li> <li>Beneficiaries.</li> <li>Case workers.</li> <li>Scheduled programme 'update' rounds during which updates are collected in the field.</li> <li>Automatic updates via integrated MISs.</li> </ul>  |
| Mechanisms of recertification, i.e.<br>reassessment of socioeconomic status,<br>if applicable.   | <ul> <li>Programmes may request supporting documents to change or update information, and there may be specific processes to ascertain validity of supporting documents.</li> <li>[Ex] An authority needs to validate a document and approve the update.</li> <li>Provide information regarding whether mechanisms of recertification differ from data intake procedure – cross reference to subsection 3.2.7.</li> </ul> |
| <ul> <li>Transparency of the update/correction process.</li> </ul>   | • [Ex] Applicant or beneficiary may be able to follow up on the process.  |
| Exit criteria and notification of exit decisions.  | Cross-refer to subsection 3.2.7.<br>Exit criteria are generally documented in<br>programme manuals, along with description<br>of verification mechanisms for attesting that<br>beneficiaries meet exit criteria.  |
| If complementary graduation measures are<br>in place (see subsection 3.2.7), describe<br>how these measures are applied.                     | [Ex] The BRAC model in Bangladesh is an<br>example of creating self-employment and<br>productive inclusion via asset transfers and<br>coaching; provision of technical vocational<br>education and training can be provided to<br>promote access to formal employment etc.  |
| Provide a brief overview of compliance<br>monitoring processes of scheme<br>conditionalities, if applicable. Relevant<br>issues may include: | Monitoring conditionalities refers to the processes<br>in place to verify observance of programme-<br>specific conditionalities by beneficiaries.<br>Some programmes adopt, as conditions for<br>participation in a programme or service, certain<br>rules for disbursing benefits or delivering services<br>that must be followed by beneficiaries.  |

| <ul> <li>Clear communication of conditionalities and penalties for noncompliance.</li> <li>Extent to which compliance is monitored in practice and noncompliance penalties are actually imposed.</li> <li>Whether referrals to other benefits or services are available to noncompliant beneficiaries.</li> </ul> | <ul> <li>[Ex] Consequences of noncompliance and processes it triggers may be described in operation manuals or communication materials developed by the programme.</li> <li>Compliance monitoring may be suspended temporarily during and after a covariate shock when the service providers involved may be closed.</li> <li>In horizontal expansions, new beneficiaries need to be covered by monitoring mechanisms for conditionalities, such as via integration of databases, or by adoption of new data collection processes (Smith and Bowen, 2020).</li> </ul> |
|---|---|
| Coordination with service providers involved<br>in operationalization of conditionalities.  | Communication channels need to be established with<br>school or health systems, where applicable, to clarify<br>their roles in implementing programme conditionalities<br>and procedures for reporting compliance.  |
| Provide a GRM overview in programme context. Relevant issues may include:   | GRM constitute a system for addressing<br>complaints, questions, suggestions, or feedback<br>from beneficiaries or non-beneficiaries by<br>programme administrators.  |
| Legal provisions granting the right to complain and to appeal decisions.  |   |
| <ul> <li>Clarity of and accessibility to rules and formalities for submitting grievances.</li> <li>Availability of multiple channels for submitting grievances.</li> </ul>  | Two of the main barriers to access to<br>grievance mechanisms is limited awareness by<br>beneficiaries of their entitlements, as well as of<br>the mechanisms available for voicing complaints<br>and lodging appeals (TRANSFORM, 2017a).   |
| Process and formal structure for<br>collecting, recording, monitoring, and<br>resolving grievances.   | • [Ex] There can be a formal structure in the programme administration, like a unit or a committee, to address grievances, and specific internal processes to record and monitor them and the actions taken in response, e.g. a record management system.   |
|   | During or after covariate shocks, GRM should<br>be adapted to enable them to receive a higher<br>number of complaints and horizontally expand<br>to cover new groups (Smith and Bowen, 2020).   |
| <ul> <li>Decisions resulting from grievances:</li> <li>Timeframe.</li> <li>Level of complexity.</li> <li>Effectiveness.</li> </ul>  | <ul> <li>Decisions should be (TRANSFORM, 2017a):</li> <li>Rendered within a reasonable timeframe so that persons and their families are not left without access to the benefit or service.</li> </ul>   |

R

Consider whether the programme has provisions for case management. Relevant issues may include:

- Regular interactions between beneficiary households and social workers who monitor their situation and evaluate their need for additional services or their readiness to graduate.
- Number of beneficiary families per social worker.

Examine EFC monitoring mechanisms. Relevant issues may include:

EFC mitigation strategies.

 EFC prevention, detection, and deterrence strategies in place.  Simple, and specify facts and arguments. They should also be easy to understand by people at various levels of literacy and education.

Consistent with the rules and standards set for the programme, protect privacy and dignity of the people involved, and offer appropriate and effective remedies.

[Ex] Ingreso Ético Familiar

Families enrolled in the Chilean CCT programme, Ingreso Ético Familiar (previously known as Chile Solidario), are monitored by a social worker for two years. Together, the family and the social worker elaborate a poverty-graduation strategy focusing on seven dimensions: documentation, health, education, housing, work, income, and intra-family dynamics.

Cross-refer, if relevant, to subsection 2.6.4.

EFC monitoring refers to mechanisms aimed at identifying and correcting the benefits or services affected.

Error is an unintentional deviation from programme or benefit rules, resulting from programme staff or applicants inadvertently providing incorrect information.

Fraud occurs, for example, when an applicant or beneficiary deliberately makes a false statement, distorts or conceals information crucial to programme eligibility verification and determination of benefit levels.

Corruption could involve manipulation of beneficiary rosters or waiting lists, staff accepting illegal payments, or diversion of funds (Lindert and others, 2020).

Preventive measures could be implemented during eligibility verification and enrolment phases, and may include:

- Streamlining administrative steps involved in administering the benefit.
- Simplifying eligibility criteria.
- Reducing complexity of the benefit system, e.g. through a social registry.

112 Comprehensive national reviews of the systems and reforms of ESCWA member countries

|  | <ul> <li>Having good administrative systems, reducing staff caseloads, and increasing administrative capacity.</li> <li>Detection strategies include data-matching using various government administrative systems, risk-profiling, and use of telephone or virtual channels for public tip-offs.</li> <li>Deterrence strategies refer to sanctions against applicants, beneficiaries, and staff who commit EFC that may act as disincentives. Examples include loss of benefit entitlement, loss of jobs, in case of staff, recovery of diverted funds, financial penalties, or criminal prosecution (Lindert and others, 2020).</li> </ul> |  |  |
|--|--|--|--|
| N  |  |  |  |
| Measurement of EFC.  | The level of EFC can be expressed, for example, as   |  |  |
| Estimates of EFC happening in the<br>context of the programme.   | a percentage of programme funds affected, or by the number of cases.   |  |  |
|  |  |  |  |
| Plans to estimate the level of EFC within<br>the programme.  | When aggregated, EFC levels may amount to a  |  |  |
|  | substantive part of programme budget.  |  |  |
|  |  |  |  |
| 3.4 Financ   | cing sources   |  |  |
| OUTPUT: Overview of financing sources<br>of selected SP programmes, and appraisal<br>of adequacy, sustainability, and equitability<br>of funding.  |  |  |  |
| Examine financing sources of the scheme.   | Note: This section pertains only to funding of the specific programme in focus. If needed, refer to section 2.5.   |  |  |
| Financing sources may include<br>contributions paid by employers or<br>employees, general government revenues,<br>earmarked tax revenues, transfers<br>from other schemes, donor funds,<br>and co-payments, in the case health<br>insurance schemes. | Contributory schemes are naturally more likely than<br>non-contributory schemes to be financed through<br>contributions paid by employers and employees,<br>while non-contributory schemes are typically paid<br>through general tax revenues, earmarked tax<br>revenues, or donor funds.<br>However, many schemes are financed through  |  |  |

However, many schemes are financed through some combination of contributions and other sources. For instance, the new Universal Health Insurance scheme in Egypt will be funded by contributions, general tax revenue, earmarked taxes, and co-payments.

|   | Note: Earmarked tax revenues in this context<br>refer to tax revenues earmarked for a specific<br>programme; those earmarked for the SP<br>sector as a whole would be considered under<br>section 2.5.   |
|---|--|
| In the case of contributory schemes, pay<br>attention to whether contributions of some<br>groups are partially or fully subsidized by<br>the Government.  | [Ex] In Oman, a social insurance scheme for self-<br>employed workers was established in 2013. The<br>scheme sets a contribution rate of 20 per cent<br>for all self-employed workers, but with varying<br>degrees of government subsidization, depending<br>on income level. For the lowest of eight income<br>groups (earning 225-250 Omani Rials per month),<br>the Government pays 13.5 per cent and the insured<br>6.5 per cent, whereas for the highest income group<br>(earning 1,500-3,000 Omani Rials per month) the<br>Government and the insured pay 4 per cent and 16<br>per cent, respectively. |
| + For contributory schemes (and, as far as possible, for non-contributory schemes), discuss sustainability of financing. Consider, in particular, past, present, and future dependency ratios (Number of beneficiaries per contributor).  |  |
| If possible, discuss equitability of financing sources.   | In so far as the programme is financed by general government revenue, the issue of equitability could be considered under section 2.5.   |
| <ul> <li>Shock responsiveness of funding</li> <li>Could the regular financing sources of the programme be imperilled in the event of a covariate shock? If yes, is there a strategy for temporarily replacing the revenue concerned?</li> <li>Is it foreseen how a temporary scaling up of the programme (whether horizontal or wartige) actual to a fundad?</li> </ul> |  |
| vertical) could be funded?  | ational setun  |

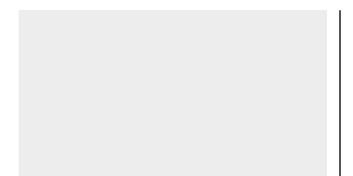
#### 3.5 Organizational setup

OUTPUT: Overview of the organizational setup of selected SP programmes, including schematization of administrative structures/bodies, and identification of underlying administrative systems.

Examine organizational setup of the scheme and describe current administrative challenges.

Adequate administration is what ensures that an SP programme is provided in a timely, efficient, and

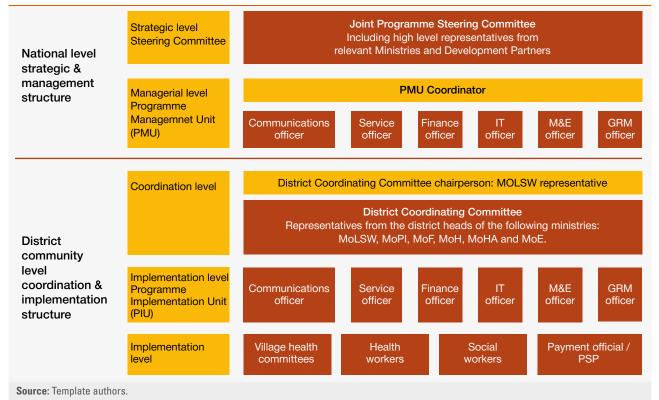
|   | <ul> <li>effective way. Hence, it is necessary to assess the core<br/>and support functions involved in programme delivery<br/>and the underlying administrative support systems.</li> <li>The assessment can be by:</li> <li>Reviewing the available programme<br/>documentation and evaluation.</li> <li>Performing qualitative interviews with officials.</li> <li>Administrating surveys and questionnaires to<br/>staff (Kardan and others, 2017).</li> </ul> |
|---|--|
| How is the programme administration<br>structured and organized across core and<br>support delivery functions?  | Describe how the administration of the programme<br>is structured, i.e. who is responsible for which core<br>or supportive administrative function. Authors can<br>also prepare a figure similar to figure 3.15.   |
| <ul> <li>Human and physical resources available:</li> <li>Investment in recruitment, realignment, training, induction, etc.</li> </ul>  | Weak capacity of human resources or understaffing can contribute to EFC.   |
| <ul> <li>Sufficient workforce, including number of<br/>case workers.</li> </ul>   | It is important to assess whether programme staff<br>are capable of administering SP programmes<br>and have the necessary management tools and<br>infrastructure to ensure good performance.   |
| > Tools and physical resources required.  | [Ex] Offices, computer, vehicles, etc.   |
| <ul> <li>Role of supporting management information<br/>systems in programme administration:</li> <li>Assess whether the MIS of the<br/>programme operates various functions.</li> </ul> | To what extent does the programme maintain a programme-specific MIS, with information from the social registry or integrated beneficiary registry, or provided by applicants themselves, as well as other information collected over the programme implementation cycle? What information is stored in the programme MIS and used for programme management?  |
|   | can be collected in paper format, and kept in<br>that format or digitized, or fed directly into the<br>programme MIS.  |
| <ul> <li>Financial management systems:</li> <li>Is there a financial management<br/>information system?</li> </ul>  | Financial management information systems are computer tools that support financial control, management, and planning (TRANSFORM, 2017a).   |
| Does the financial management system<br>enable monitoring of expenditures and<br>revenues at the scheme level?  | Do standardized income and expenditure<br>statements track the costs of social protection<br>schemes and administration costs?   |



Such statements should be made available by scheme or by group of schemes administered by one administration, and provide the following information (TRANSFORM, 2017c):

- Expenditures (transfers paid, administrative costs, and other expenditure).
- Revenues (general government contributions, earmarked taxes, donor budget support or grants, other receipts).

#### Figure 3.15 A model of organizational setup of an SP programme



#### Figure 3.16 Some typical functions of programme MIS

| Some typ | pical functions of | programme MIS |
|----------|--------------------|---------------|

- Application and registration.
- Enrolment of beneficiaries.
- Monitoring of compliance with conditions, if applicable.
- Benefit level determination.
- Identification of recipients who have been paid and those who have not, for payment reconciliation.
- Management and monitoring of the grievance system.
- Identification of those who should be removed from a programme when no longer eligible or deceased.
- Notification of when various processes have happened or should happen (e.g. when a payment is due or when recipients should exit a scheme).
- Provision of reports used for management and monitoring.



# **04** Current and future reform trajectories and policy recommendations

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118 Comprehensive national reviews of the 
systems and reforms of ESCWA 
member countries
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Maximum length of this section is 6,000 (including tables, boxes, associated annexes, and references).



Highlight key messages and policy recommendations in a box (box 4.1).

Insert this after drafting the CPR.

#### Box 4.1

| Key messages and policy recommendat | tions |  |
|-------------------------------------|-------|--|
| 1.                                  |       |  |
| 2.                                  |       |  |
| 3.                                  |       |  |
| 4.                                  |       |  |
|                                     |       |  |

#### 4.1 Current reform trajectories

**OUTPUT:** Summary of ongoing SP reforms in the country, both system-wide and relating to specific programmes.

| -// |
|-----|
|     |

 Draft a brief narrative of current SP reform trajectories, including a description of related support by development partners, e.g. ESCWA and the World Bank. [Ex] In Oman, the SP system has been undergoing restructuring since 2020, as part of reforms aimed at responding to oil-price shocks, as well as shocks to the overall economy resulting from the COVID-19 pandemic. The Medium-Term Fiscal Plan 2020-2024 aims to achieve fiscal balance in the medium term, and create a social safety net to shield the most vulnerable families from the impacts of the fiscal measures. A new value-added tax (VAT) regime was introduced in 2020 (Royal Decree No. 121/2020) that aims to increase fiscal revenues and benefit the most vulnerable families. A social safety net will be introduced to protect those affected by the planned cuts in public expenditure on universal subsidies to utilities (Ministry of Finance, 2020).

#### 4.2 Summary of appraisals and policy recommendations

| Figure  | <b>4.1</b> Structure of appraisal tab   | le   |   |   |  |
|---------|---|--|---|---|--|
| Prog    | ramme-specific/system-oriented  | Summary  | y appraisal   | Policy recomme  | ndations   |
| 1. Syst | f appraisal:<br>em-oriented<br>rramme-level   | Identify issues, gaps,<br>1. SP system<br>2. SP programmes:<br>Policy design<br>Policy implementa<br>Organizational setu | tion  | Options to address identif<br>and challenges  | ₩  |
| Source  | e: Template authors.  |  |   |   |  |
|         | OUTPUT: Summary of findir<br>recommendations at system<br>as on specific programmes.  | I-level, as well   | Cross-refer to s  | ection 2 and section 3  | 3.   |
|         | appraisals, highlighting issu<br>and challenges identified in<br>sections, as set out below a<br>in Template <b>figure 4.1.</b>   | previous   |   | ides examples of com<br>gn and implementation   |  |
| •       | Use the first column of figure<br>indicate whether each appra<br>is programme-specific or sy<br>oriented/general.   | isal entry   | of programme k  | -specific appraisals, in<br>being appraised.<br>ented appraisals, use t<br>stem-oriented'.  |  |
|         | <ul> <li>In the second column of Ten<br/>4.1, provide summaries of fit<br/>obtained in section 2 and set</li> <li>Programme-specific ap<br/>be placed under one of<br/>appraisal areas indicate<br/>appraisal' sub-columns</li> <li>Policy design.</li> <li>Policy implementation</li> <li>Organizational setup.</li> <li>If appraisal is system-on<br/>is no need to fit entries<br/>columns of 'Summary of</li> </ul> | ndings<br>action 3:<br>opraisals should<br>the three<br>ed in 'Summary<br>s:<br>n.<br>riented, there<br>under sub-       | sections. Issues<br>concerning the<br>implementation<br>SP programmes<br>This section sho | results obtained in pre<br>s, challenges, and gap<br>SP system in general<br>and organizational se<br>s should be summariz<br>ould not contain addit<br>n but refer to findings in<br>ns. | os<br>or in design,<br>etup of specific<br>ed.<br>ional/ |

| 120 | Comprehensive national reviews of the |
|-----|---------------------------------------|
|     | systems and reforms of ESCWA          |
|     | member countries                      |

Draft policy recommendations using Authors may choose to add or delete rows in table 4.1 Template table 4.1, as set out below. to reflect the number of SP programmes appraised. Recommendations should not overlap with the policy development described in the previous section. Use the third column of table 4.1 to [Ex] input recommendations. These are likely to emerge from appraisals conducted System-oriented recommendations: in section 2 and section 3 to pinpoint • Formulate a national SP strategy and ensure gaps, issues, and challenges across the coordination of programmes and institutions SP system. involved in delivery of SP. Programme-specific recommendations: • Expand coverage of child benefits. • Improve adequacy of family allowances. • Introduce a non-contributory scheme targeted at low-income families. • Introduce universal non-contributory child benefit. • Expand coverage of working age population in contributory schemes. Guidance on how to fill the last column in table 4.1 is provided in section 4.3.1 below (Costing analysis applies (Y/N)).

#### Figure 4.2 Common policy gap, design, implementation, and administration issues

| Common policy gap<br>and design issues   | Common programme implementation<br>and administration issues   |  |  |
|--|--|--|--|
| A share of the population is not covered in legislation, e.g. informal sector workers and their dependants, international migrant workers, PwD, and domestic workers           | Poor enforcement of social security laws pertaining to<br>mandatory schemes  |  |  |
| Ad hoc, often donor-driven, policies implemented in absence of a proper SP legal and policy framework  | Limited outreach and discomination offerts leading to low  |  |  |
| Lack of executive regulation specifying how a law should be implemented  | Limited outreach and dissemination efforts leading to low take-up rates in on-demand registration programmes                                     |  |  |
| Absence of programmes covering a particular SP function, such as old age   | lan efficiencies in educiative tion and educiative tradems   |  |  |
| Benefit levels of existing scheme insufficient to guarantee income<br>security of beneficiaries, e.g. lack of an indexation mechanism to<br>adjust level of benefits over time | Inneficiencies in administration and administrative burdens<br>caused by adoption of numerous programmes and limited<br>coordination in delivery |  |  |
| Existing schemes not adapted to specific needs of target group, or to changing environments  | Inadequate resources or capacities for reaching eligible persons   |  |  |
| Consideration not given in existing social protection policies to future demographic challenges/needs  |  |  |  |
| Lack of or limited consideration to aspects of shock responsiveness in SP systems  | Poor M&E systems not properly tracking effective<br>programme implementation   |  |  |
| Lack of portability of SI benefits across schemes  |  |  |  |

#### Table 4.1 Appraisal summary template

| Programme-<br>specific or<br>system-oriented/ | Summary appraisal |                          |                         | Policy<br>recommendations |                                   |  |
|---|-------------------|--------------------------|-------------------------|---------------------------|-----------------------------------|--|
| general                                       | Policy design     | Policy<br>implementation | Organizational<br>setup |                           | Costing analysis<br>applies (Y/N) |  |
| General                                       |                   |                          |                         |                           |                                   |  |
| Programme 1                                   |                   |                          |                         |                           |                                   |  |
| Programme 2                                   |                   |                          |                         |                           |                                   |  |
| Programme 3                                   |                   |                          |                         |                           |                                   |  |
| Source: Template authors.                     |                   |                          |                         |                           |                                   |  |

4.3 Costing policy recommendations/options

#### **OUTPUT:** Cost projection of selected policy The Social Protection Basic Costing Tool is a projection model to estimate costs of introducing scenarios, expressed as a share of GDP or expanding non-contributory SP schemes. and of total government expenditure. Guidance on its applications is provided here, and in section 4.3.2. Estimating costs of recommendations will indicate the financial resources needed to operationalize the proposed reforms, which will later be compared with available government fiscal resources to assess affordability. For recommendations where the Social Protection Basic Costing Tool cannot be applied, further guidance on ways to estimate costs is provided in section 4.4 (affordability of implementing policy options and possible resource mobilization strategies).

4.3.1 Translation of policy recommendations into policy options or scenarios

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nmendations inserted in table 4.1 be divided into two groups in terms licability of Social Protection Basic Costing Tool, as defined below and further detailed in table 4.2:

- Group 1: Tool applicable: recommendations referring to introduction, expansion, or design adjustment(s) of non-contributory schemes.
- Group 2: Tool inapplicable: Other recommendations.

| 1 |          |
|---|----------|
|   | <u> </u> |
|   | _//      |
|   |          |

 Fill out last column of table 4.1, signalling whether Social Protection Basic Costing Tool can potentially be applied to each recommendation, using examples in table 4.2 as general guidance. **Table 4.2** is meant as reference, and need not bereproduced by CPR authors.

#### Table 4.2 Application of SP basic costing tool in costing policy recommendations

| 1. SP basic costing  | 2. SP basic costing   |
|--|---|
| Tool applicable  | Tool inapplicable   |
| Recommendations related to expansion of SP schemes:  | Other recommendations:  |
| i. Covering more people.   | i. New or expanded mandatory/voluntary social insurance.                                  |
| <ul> <li>ii. Increasing levels of benefits of existing non-<br/>contributory schemes.</li> </ul>                           | <ul> <li>Recommendations related to operation and coordination of<br/>schemes.</li> </ul> |
| <li>iii. Introducing new non-contributory benefits, including in the<br/>context of reforms or removals of subsidies.</li> | iii. Qualitative recommendations, e.g. 'improve the health system'.                       |
| Source: Template authors, based on ILO, 2013c.   |   |

From all recommendations for which costs can be estimated using the Social Protection Basic Costing Tool, select those to undergo a costing exercise.

Convert selected policy recommendations into specific policy options or scenarios with defined parameters, e.g. targeted or universal, according to specific poverty line(s) and eligible groups; see examples in **table 4.3**.

Use this table format to convert policy recommendations into scenarios.

- Bundle policy scenarios into at least two policy packages, according to scenario level of benefits or estimated costs, as shown in table 4.4 and explained below:
- Lowest-cost scenarios across different recommendations are to be grouped into a 'low scenario' package, and highest-cost scenarios into a 'high scenario' package.

Subsequent to identification, in the previous step, of recommendations for which costs can be estimated, whether a particular recommendation would be selected for costing will depend on whether it is in line with government priorities, or strongly advocated by stakeholders, such as the Expert Group on Social Protection Reform (EGSPF) in Arab countries, and whether data sufficient for the exercise are available.

One recommendation could end up having more than one scenario, since several different policy parameters can be tested using the Social Protection Basic Costing Tool. For instance, in the first example provided in table 4.3, one policy recommendation is converted into four policy scenarios.

Low and high scenarios should be defined to provide a range of estimated costs associated with implementing the recommended policy package (see **table 4.4**).

[Ex] A policy recommendation could be to increase coverage of child benefits. The policy option to provide child benefits for extremely poor children aged 0-6 years old is a lowest-cost scenario, as compared with the policy option of

providing child benefits to all children aged 0-11 years, which is a highest-cost scenario (as listed in table 4.3 below).

At the discretion of the authors, additional scenarios may also be created to reflect intermediate estimates of potential costs of the recommended policy package.

#### Table 4.3 Translation of policy recommendation into policy options or scenarios

| Policy recommendations  | Policy options/scenarios  |
|---|---|
|   | 1. Coverage of extremely poor children aged 0-6   |
|   | 2. Coverage of poor children aged 0-6   |
| a. Increase coverage of child benefits                            | 3. Universal coverage of children aged 0-6  |
|   | 4. Universal coverage of children aged 0-11   |
|   | 1. Cash transfer to families with children living in extreme poverty  |
| b. Subsidy removal and introduction of a                          | 2. Cash transfer to all families in extreme poverty   |
| cash-transfer programme   | 3. Cash transfer to all poor families with children   |
|   | 4. Cash transfer to all poor families   |
|   | 1. Government funds 30 per cent of health insurance premiums for vulnerable informal-sector workers                       |
| c. Extend health insurance coverage to<br>informal-sector workers | <ol> <li>Government funds 50 per cent of health insurance premiums for vulnerable<br/>informal-sector workers</li> </ol>  |
|   | <ol> <li>Government funds 100 per cent of health insurance premiums for vulnerable<br/>informal-sector workers</li> </ol> |
| d. Adjust indexation mechanism of old-                            | 1. Allowance is indexed to poverty line   |
| age allowances  | 2. Allowance increases annually indexed to inflation  |
| Source: Template authors, based on ILO, 2013                      | 3c.   |

#### Table 4.4 Bundling low and high policy scenario packages

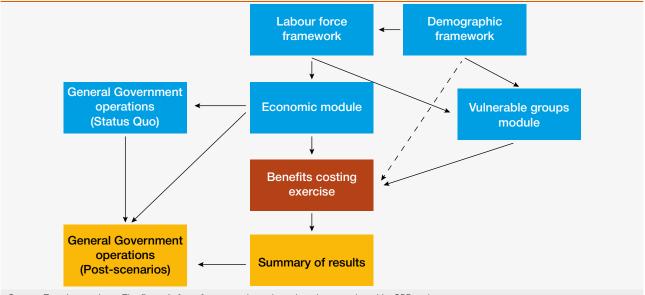
| Policy scenario packages | Policy options/scenarios   |  |
|--------------------------|--|--|
|                          | b1. Cash transfer to families with children, living in extreme poverty                               |  |
| Low scenario             | c1. Government funds 30 per cent of health insurance premiums for vulnerable informal-sector workers |  |
| ď                        | d1. Old-age allowance is indexed to poverty line   |  |
| High scenario            | b4. Cash transfer to all poor families   |  |

123

| Policy scenario packages  | Policy options/scenarios  |  |
|---------------------------|---|--|
| High scenario             | c3. Government funds 100 per cent of health insurance premiums for vulnerable informal-sector workers |  |
| Ŭ                         | d2. Old-age allowance increases annually, indexed to inflation  |  |
| Source: Template authors. |   |  |

#### 4.3.2 Using Social Protection Basic Costing Tool





Source: Template authors. The figure is for reference only, and need not be reproduced by CPR authors.

#### Review Social Protection Basic Costing Tool and understand:

- Structure of Tool worksheets.
- General steps in using the Tool are as follows:
  - 1. Complete blue sheets:
    - Demographic model.
    - Labour force and vulnerable groups' models.
    - Macroeconomic models.
    - General government operations model.
  - 2. Complete red sheets:
    - Costing of policy scenarios.
  - 3. Complete green sheets:
    - Presentation of results.

## The Social Protection Basic Costing Tool file will be provided to authors by ESCWA.

The model is in MS Excel worksheet format, and has colour-coded worksheets: blue, red, and green. See schematic representation of model in **figure 4.3.** 

Detailed instructions for, and further information on using the Social Protection Basic Costing Tool are also included in the 'User Guide' therein.

| <i>li</i> |
|-----------|
|           |
|           |

#### Step 1: Complete blue sheets

- Input historical data and projections for:
  - > Demographic framework.
  - > Labour-force framework.
  - > Vulnerable groups module.
  - > Economic module.
  - General government operations (status-quo) module.

Authors should seek national or international sources of historical data and projections required for completing the blue sheets.

Partnering with national government or research institutions can often provide suitable data and/or validate data previously gathered, or projections prepared by the team.

In general, potential national sources include:

- Census and national surveys can provide historical population and labour-market data; official reports can be obtained from national statistical offices (NSOs).
- NSOs or related government entities that prepare population projections based on census data.
- Line ministries responsible for setting specific parameters, such as official price index, or responsible for tracking government revenues and expenditures (often the Ministry of Finance).
- National SP institutions usually have shortterm and long-term projections for their respective scheme.
- Central banks often publish economic and financial indicators.
- Research institutes may have short or long-term economic, healthcare, or other projections.
- Universities.

International sources include:

- United Nations World Population Prospects.
- United Nations Statistics Division.
- ILOSTAT.
- IMF WEO.

#### Figure 4.4 Template of 'benefits' sheet in Social Protection Basic Costing Tool

|                          |       |       |       | Projections |       |       |
|--------------------------|-------|-------|-------|-------------|-------|-------|
| Parameters               | 2022  | 2023  | 2024  | 2025        | 2026  | 2027  |
| Scenario 1:              |       |       |       |             |       |       |
| Target population (000s) | 1,500 | 1,470 | 1,441 | 1,412       | 1,384 | 1,356 |

126

|   |       |        |        | Projections |        |        |
|---|-------|--------|--------|-------------|--------|--------|
| Parameters                                      | 2022  | 2023   | 2024   | 2025        | 2026   | 2027   |
| Coverage rate (%)                               | 0.0%  | 20.0%  | 40.0%  | 60.0%       | 80.0%  | 100.0% |
| Target group (000s)                             | 0     | 294    | 576    | 847         | 1.107  | 1.356  |
| Benefit cost per capita (LCU)                   | 0     | 4,000  | 4,096  | 4,194       | 4,295  | 4,398  |
| Increase in benefit per capita (%)              |       | 2.40%  | 2.40%  | 2.40%       | 2.40%  | 2.40%  |
| Total benefit expenditure (LCU million)         | 0     | 1,176  | 2,360  | 3,553       | 4,754  | 5,963  |
| Admin. Exp. as share of Benefit Expenditure (%) |       | 20.00% | 20.00% | 20.00%      | 20.00% | 20.00% |
| Administrative expenses (LCU million)           | 0     | 235    | 472    | 711         | 951    | 1.193  |
| Cost of scenario 1 (LCU million)                | 0     | 1,411  | 2,832  | 4,263       | 5,705  | 7,156  |
| Cost as % of GDP                                | 0.00% | 0.01%  | 0.02%  | 0.03%       | 0.04%  | 0.04%  |
| Cost as % of Government expenditure             | 0.00% | 0.06%  | 0.12%  | 0.17%       | 0.21%  | 0.24%  |

Source: ESCWA, 2022.

| Step 2: Complete red sheets   |  |
|---|--|
| <ul> <li>Calculate implementation costs of policy<br/>scenarios, using the formula below:</li> <li>Cost = Target group (individuals or households)<br/>x (benefit cost per capita + administrative<br/>expenses per capita).</li> </ul> |  |
| In applying the formula, for each scenario, authors should define:  | See the SP Basic Costing Tool Template of cost calculation in <b>figure 4.4</b> .  |
| > Target population of the scheme   | Data on current and forecast size of target<br>population should be available in the Social<br>Protection Basic Costing Tool once authors have<br>completed Step 1.  |
|   | <ul> <li>All poor households.</li> <li>All poor households with children.</li> <li>School-age children.</li> <li>Pregnant female informal workers.</li> <li>All informal workers.</li> <li>Persons with disabilities.</li> <li>Elderly persons.</li> </ul> |
| Coverage or take-up rate  | Share of target population that the scheme aims to   |

> Coverage or take-up rate

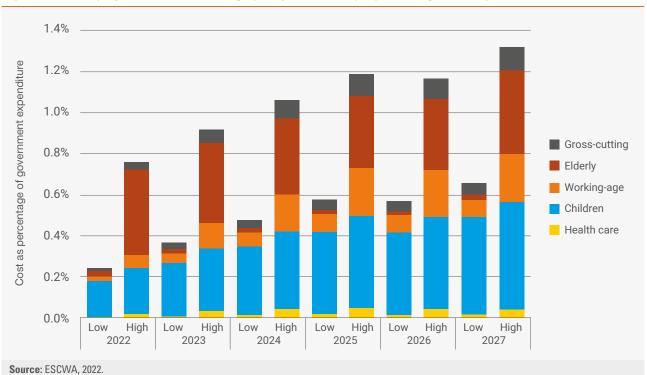
Share of target population that the scheme aims to cover in each year of implementation.

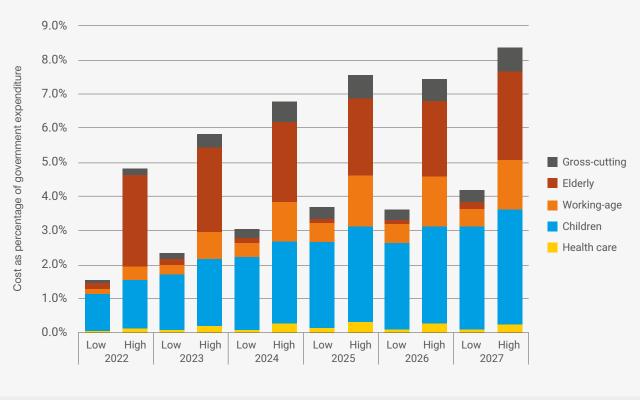
|   | <ul> <li>Take-up rates should progressively increase over time during projected implementation period.</li> <li>They should be defined taking into consideration complexity of eligibility criteria of the scheme, as well as administrative and delivery capacities of the SP system. Authors may also seek evidence from past experience in delivery of similar SP benefits or services.</li> <li>In addition, in countries that have not yet established civil or social registries, take-up rates can be assumed to be relatively much lower for both universal and targeted programmes, compared with countries that can rely on such registries (ILO, 2016, p. 4).</li> </ul> |
|---|---|
| Benefit cost per capita   | The benefit cost/level can be defined as a percentage<br>of the national poverty or extreme poverty line,<br>international poverty line, minimum wage, pensions,<br>or other current transfers (ILO, 2016).<br>[Ex]<br>• Two times the value of the monthly national<br>poverty line<br>• Monthly statutory minimum wage  |
| Increase in benefit cost per capita   | Benefit levels should always be projected to<br>increase annually in proportion to inflation, wage<br>increases, changes in minimum wage, or other<br>factors, as relevant (ILO, 2016).   |
| Administrative expenses   | <ul> <li>These costs should also be estimated based on assumptions.</li> <li>Administrative expenses may vary depending on type of SP scheme to be implemented, level of complexity involved in its administration, and its administrative capacity.</li> <li>These costs can be estimated based on costs to run similar programmes in the country, or in other countries with similar contexts. They are usually expressed either as a percentage of benefit expenditure, or as a percentage of total programme costs, or per capita.</li> </ul>   |
| <ul> <li>Cost of each scenario should be expressed as (figure 4.4):</li> <li>Cost in LCUs (millions).</li> <li>Cost as share of GDP.</li> <li>Cost as share of Government expenditure.</li> </ul> | Once cost calculations are finalized by authors in terms of LCU, the Social Protection Basic Costing Tool is set to calculate costs in terms of GDP and government expenditure, based on data and forecasts compiled in the blue sheets in Step 1.  |



|   | Step 3: Complete green sheets   |  |
|---|---|--|
| • | Identify the low and high policy scenarios<br>among those costed under each<br>recommendation, and input their costs<br>in the Low Scenario and High Scenario<br>summary tables, respectively, in each of<br>the green sheets of the Tool.  | Refer to subsection 4.3.1 for guidance on creating low and high scenarios.   |
| • | <ul> <li>Results should be presented in three main charts, namely:</li> <li>Cost forecast of low and high policy scenarios in percentage of GDP (figure 4.5).</li> <li>Cost forecast of low and high policy scenarios in percentage of government expenditure (figure 4.6).</li> <li>Fiscal balance at status quo, and after introducing scenarios (figure 4.7).</li> </ul> | Once costs of low and high scenarios are correctly<br>inputted in the green sheets, these 3 charts will be<br>completed automatically and can be found at the<br>bottom of each of the green sheets.<br>Authors should copy-paste the charts into the<br>CPR, and discuss the results obtained, following<br>guidance provided in section 4.4. |

#### Figure 4.5 Cost projection of low and high policy scenarios (as percentage of GDP)

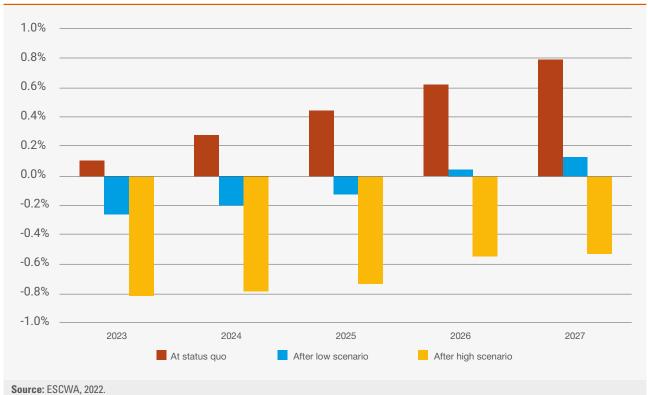




#### Figure 4.6 Cost projection of low and high policy scenarios (as percentage of government expenditure)

Source: ESCWA, 2022.





130 Comprehensive national reviews of the systems and reforms of ESCWA member countries

| 4.4 Affordability o | of implementi | ng policy options ar | nd possible resource | mobilization strategies |
|---------------------|---------------|----------------------|----------------------|-------------------------|
|                     |               |                      |                      |                         |

| $\oslash$ | <b>OUTPUT:</b> Affordability analysis of policy recommendations, including suggested resource mobilization strategies that could be adopted to increase funding for SP in the country in the short, medium, and long terms. |  |
|-----------|---|--|
|           | Discuss possibilities for implementation<br>and funding of policy recommendations<br>listed in <b>table 4.1</b> that did not undergo a<br>costing exercise, along with prioritization of<br>policy options.                 | <ul> <li>Where the Social Protection Basic Costing Tool cannot be applied (see table 4.2), cost estimations or rough cost approximations can be produced by authors based on implementation of similar policies or reforms in the country, region, or worldwide.</li> <li>In some cases, such as for introduction or improvement of an integrated MIS, or capacity building of social/case workers, authors may be able to estimate only direct costs of implementation of the recommendation. Whenever possible, such estimates should be made and presented in the CPR, along with a reference to the limitations of the cost estimation undertaken.</li> <li>Implementation and possibilities for funding of these recommendations should be discussed in this section, taking into consideration fiscal space projections available in the Social Protection Basic Costing Tool, and estimated costs of other policies or reforms recommended by authors.</li> </ul> |
|           | Draft a brief affordability analysis for<br>each costed scenario.   | In this context, affordability can be evaluated by calculating the cost of proposed programmes and comparing that cost with the GDP or total expenditure of the country, for example. Further indicators useful in assessing affordability of SP policies in a country are listed in <b>figure 4.5</b> .<br>For costed recommendations, affordability analysis will be based on results reported in the Social Protection Basic Costing Tool sheet 'Summary'.<br>Scenarios that cost around 1 per cent of the GDP or less are often regarded as affordable, depending on programme type, i.e. contributory or non-contributory, on whether expenditure will be entirely or partially funded by fiscal resources, and on available fiscal space.  |

Fiscal space is a term that denotes the budgetary capacity of a government to provide resources for a desired purpose without jeopardizing the sustainability of its financial position or stability of the economy (ILO, 2013b).

Affordability analyses should include recommendations for alternatives, or alternative combinations of resource mobilization strategies that could be adopted by the country to finance the proposed SP reforms in the short, medium, and long terms, taking into consideration the following options (Ortiz and others, 2017):

## 1. Expanding SI coverage and contributory revenues

Expanding coverage of contributory schemes, including programmes to formalize the informal sector and procedures to monitor compliance (Ortiz and others, 2017), is among the relatively slower options for increasing fiscal resources.

Adjusting contribution rates of SI schemes can be more time-efficient, provided that agreement has been reached with key stakeholders, e.g. workers and employers (Ortiz and others, 2017).

Make use of the discussion on approaches to funding SP in subsection 2.5.2.

There are three main ways to create fiscal space for SP (Ortiz and others, 2017):

- a. Extend legal coverage of SI schemes: Gaps in legal coverage should be identified, reforms of the legal framework should take place, and policies should be implemented to ensure compliance with the new legislation (crossreference with subsection 3.1.2).
- b. Extend effective coverage of SI schemes: Gaps in effective coverage should be identified, along with causes of informality. A range of public policies should be designed and implemented to address these gaps, including social security policies, but also other employment and taxation policies.

[Ex] Monotax in Brazil is a social security scheme for self-employed workers and small businesses, entitling those who join to benefits from the social security system. The scheme has had a substantial positive effect on formalization of the self-employed, as well as on micro and small enterprises (ILO, 2019).

c. Adjust contribution rates: Rates should be analysed against those in similar countries in terms of economic development to see whether further increases are reasonable; those who are to pay for the increase, government or employers, should be assessed, as should the potential range of impacts on collection of contributions, tax collection, labour costs, etc.

#### 2. Increasing tax revenues

Can take less than a year, but political feasibility is usually low (Ortiz and others, 2017).

Increasing tax compliance, raising tax rates, introducing new taxes, such as property taxes, and eliminating exemptions are potential strategies here (ILO, 2019).

#### [Ex]

Taxing natural resources in Bolivia: A referendum led to a new regulation of redistribution of hydrocarbon resources in the country. Renegotiation of contracts with private companies led to an increase in fiscal revenues from oil and gas, and allowed the government to sustainably finance SP policies, such as the Renta Dignidad and Bono Juacinto Pinto programmes (Ortiz and others, 2017).

A financial transaction tax (CPMF) had been implemented in Brazil for several years (1997 to 2008). Its revenues were earmarked for financing SP expenditure, including healthcare programmes and social assistance (Ortiz and others, 2017).

To increase fiscal revenues, Oman recently introduced a new VAT regime. The new tax has a zero rate on over 90 basic goods, including food and other household items. Healthcare, education and residential rents are also exempt from VAT, thus increasing the consumption tax progressivity (Ministry of Finance, 2020).

#### 3. Eliminating illicit financial flows

Is among relatively slower options, but usually has high political feasibility (Ortiz and others, 2017). Illicit financial flows (IFFs) are illegal financial transfers that violate national or international laws. They include (Ortiz and others, 2017, p. 102):

- Funds of criminal origin, such as the proceeds of crime.
- Funds with a criminal destination, such as bribery, terrorist financing, or conflict financing.
- Funds associated with tax evasion.
- Funds related to trade mis-invoicing and mis-pricing.
- Transfers to, by, or for entities subject to financial sanctions.
- Transfers that seek to evade anti-money laundering/counter-terrorist financing measures or other legal requirements (such as transparency or capital controls).

## 4. Improving efficiency and reallocating public expenditure

Improving efficiency of public expenditure is among relatively slower options. Decisions to reallocate public expenditure can take less than a year (Ortiz and others, 2017). There are four main strategies to increase fiscal space here (Ortiz and others, 2017):

- a. Combating money laundering.
- b. Combating tax evasion.
- c. Combating international bribery.
- d. Freezing, recovering, and repatriating stolen assets.

Developing countries can work to identify and raise awareness of the types, dimensions, and potential risks of IFFs (Ortiz and others, 2017).

Cross-refer to subsection 3.2.10.

Strategies here will not create new fiscal space, but will increase share of government spending in SP by reducing high-cost, low-impact, and less-socially-desirable investments (Ortiz and others, 2017).

Public expenditure reviews are an important means for analysing allocation of public resources, and they provide an objective assessment of public spending efficiency, effectiveness, and sustainability (Ortiz and others, 2017, p. 121).

Initial steps in reprioritizing expenditure may include:

- a. Identifying gaps in public expenditure in relation to national plans and strategies, e.g. National SP Strategy.
- b. Assessing over-funded and underfunded areas across various sectors and programmes.
- c. Identifying in the budgetary process areas for cost control to minimize leakages due to inefficiency, over-staffing, and corruption.

Cross-refer to section 2.5.

[Ex] In Thailand, implementation of the Universal (healthcare) Coverage Scheme in 2001 was mostly financed by a reduction in military expenditure.

| 5. Tapping into fiscal and foreign exchange reserves Implementing decisions to use fiscal and foreign exchange reserves can take less than a year (Ortiz and others, 2017). | <ul> <li>Fiscal reserves are collected through government<br/>budget surpluses, profits of state-owned<br/>enterprises, privatization receipts, or other<br/>government net income (the classic example is<br/>export revenues from natural resources, such as oil)<br/>(Ortiz and others, 2017, p. 130).</li> <li>In countries with important gaps in SP, but that may<br/>also face institutional and administrative capacity<br/>challenges, risks and opportunity costs of investing<br/>fiscal reserves in sovereign wealth funds, for<br/>example, should be weighed against the need for<br/>social investments (Ortiz and others, 2017).</li> <li>Foreign exchange reserves are accumulated<br/>through foreign exchange market interventions by<br/>central banks within the context of current account<br/>surpluses, and/or capital inflows (Ortiz and others,<br/>2017, p. 130).</li> <li>Public investments are the simplest way to use<br/>foreign currency reserves. Another way they could<br/>be used is as liquidity guarantees to lower costs<br/>of external borrowing for financing domestic<br/>development projects (Ortiz and others, 2017, p. 141).</li> </ul> |
|---|---|
| 6. Managing debt: borrowing or<br>restructuring sovereign debt<br>Is among relatively slower options (Ortiz<br>and others, 2017).   | Countries may carefully consider borrowing from<br>national or international bodies as a strategy for<br>increasing fiscal space.<br>The IMF has defined a ceiling for optimal long-<br>term debt levels in developing countries at 40<br>per cent of GDP; keeping debt below this level<br>would reportedly ensure fiscal sustainability and<br>macroeconomic stability (Ortiz and others, 2017).<br>The IMF debt sustainability assessment (DSA)<br>framework can be used as a tool and starting point<br>for determining feasibility of borrowing/increasing<br>debt in a country.   |

ble option, various types of loans may be considered, since conditions offered may vary in terms of grace or repayment periods, for example (UNICEF, 2011).

As an alternative strategy, countries with already high levels of sovereign external debt should seek to restructure existing debt, either by debt re-negotiation, debt relief/forgiveness, debt swaps/

|  | conversion, debt repudiation, or default, especially<br>when legitimacy of the debt is questionable, and/<br>or the opportunity cost in terms of worsening social<br>outcomes is high (Ortiz and others, 2017).<br>[Ex] In Ecuador, a public debt audit and a<br>two-year long investigation concluded that some<br>of the foreign debts of the country had infringed<br>principles of international and domestic law and<br>were deemed illegitimate. The country proceeded<br>to pay the legitimate portion of its debt, and<br>defaulted on the illegitimate part (UNICEF, 2011).  |
|--|---|
| 7. Adopting a more accommodative macroeconomic framework Can take less than a year (Ortiz and others, 2017). | <ul> <li>A more accommodative macroeconomic framework would allow for some tolerance of fiscal deficit and moderate inflation, if the goal is to expand government expenditure to promote development. This would require revising the more orthodox emphasis in short-term stabilization measures, such as balancing fiscal budget, low inflation as part of wider deregulation efforts, and privatization and liberalization (Ortiz and others, 2017).</li> <li>Hence, the following policies can be considered for increasing fiscal space for SP: <ul> <li>a. Fiscal policy.</li> <li>b. Monetary policy.</li> <li>c. Capital account, exchange rate, and financial sector policies.</li> </ul> </li> </ul> |
| 8. Increasing aid and transfers<br>Is among relatively slower options (Ortiz<br>and others, 2017).           | For the least developed countries (LDCs), such<br>as Mauritania, Sudan, Somalia, and Yemen, or<br>low-income countries (LICs) like the Syrian Arab<br>Republic, North-South transfers or ODA can be<br>important sources of financing, if not the most<br>important. If adopted as part of a strategy for<br>funding SP in a country, it is important that ODA be<br>predictable and long-term (Ortiz and others, 2017).<br>South-South cooperation and triangular<br>cooperation that involves south-south cooperation<br>and a northern donor, e.g. an international<br>organization, are other opportunities for enhancing<br>fiscal space for SP for developing countries (Ortiz<br>and others, 2017).      |

#### Figure 4.8 Indicators of SP financing

- Aggregate measure of government fiscal space
- Government revenue/GDP (percentage)

#### Aggregate measure of government size

- Government expenditure/GDP (percentage)
- Aggregate measure of government social expenditure
- Government social expenditure/GDP (percentage)

#### Broad source of government revenue

- · Government tax effort is a potential measure of room for expansion of fiscal space
- Tax/Total revenue (percentage)
- Significance of non-tax sources of revenue
- Non-tax/Total revenue (percentage)

#### Specific source of government revenue; earmarked revenue for SP

• Social contributions/Total revenue (percentage)

#### Potential measures of room for expansion of fiscal space

- Budget deficit/GDP (percentage)
- Debt/GDP (percentage)
- Debt service/GDP (percentage)
- External debt service/Export earnings (percentage)
- Foreign aid/GDP (percentage)

Government expenditure priorities; relative priority of SP vis-à-vis other functions of government; potential measure for room for expansion of fiscal space for SP

· Government expenditure on various accounts/Total expenditure (percentage)

#### Priority of government expenditure on SP

• Expenditure on SP/Total expenditure (percentage)

#### Government expenditure priorities within SP function (e.g. maternity vis-à-vis unemployment benefits)

• Expenditure on various areas of social protection/Social protection expenditure (percentage)

#### Main sources of social protection financing

- Social protection expenditure/Tax revenue (percentage)
- Social protection expenditure/Social contributions (percentage)

#### Possible sources of SP financing

- SP expenditure/debt service (percentage GDP)
- SP expenditure/illicit financial flows (percentage GDP)
- SP expenditure/aid grants (percentage)

Source: Ortiz and others, 2017.

#### 4.5 Overview of future reform needs and main takeaways

**OUTPUT:** Summary of section 4, conclusion, and key messages guiding future SP reform needs in the country. Discussion of main gaps, challenges, and issues identified in the CPR, as well as policy recommendations and affordability analyses.



Provide a summary of the most pressing challenges facing the national SP system, the main recommendations, and the affordability of recommendations analysed in the previous subsection.

This last section will provide final remarks and main takeaways that should be considered by stakeholders in guiding future SP reform trajectories in the country.

## References

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139

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## Annexes

### Annex I. Model country profile outline

Preface [based on standard text provided by ESCWA, reflecting country specificities] Acknowledgements [based on standard text provided by ESCWA, reflecting country specificities] Executive summary Table of contents List of tables, figures, and boxes Acronyms and abbreviations Glossary

Introduction

#### 1. Country context

- 1.1 Geographical and political overview
- 1.2 Macroeconomic overview
- 1.3 Demographic overview
- 1.4 Labour market overview
- 1.5 Poverty, inequality, and vulnerability
- 2. Social protection system overview and policy context
- 2.1 Historic social protection pathways
- 2.2 Social protection policy, legal and regulatory frameworks
  - 2.2.1 Legal commitments based on international instruments
  - 2.2.2 SP legal and regulatory frameworks
  - 2.2.3 Social protection vision and strategy

- 2.2.4 Alignment of the social protection vision and strategy in relation to the lifecycle needs and vulnerabilities
- 2.3 Monitoring and evaluation (M&E) system framework
- 2.4 Coverage by social protection function
- 2.5 Public financing and expenditure
  - 2.5.1 Budget planning and responding to shocks
  - 2.5.2 Sources of revenue
  - 2.5.3 Public expenditure on social protection
- 2.6 Institutional structure
  - 2.6.1 Key actors' roles and responsibilities
  - 2.6.2 Coordination structures and practices
  - 2.6.3 Control and accountability mechanisms
  - 2.6.4 Human resources and Institutional capacity
- 3. Social protection programme mapping, design, implementation features, and organizational setup
- 3.1 Social protection programmes: inventory, coverage, expenditure, and integration across programmes
  - 3.1.1 Programme inventory
  - 3.1.2 Coverage
  - 3.1.3 Expenditure
  - 3.1.4 Integration across programmes
    - 3.1.4.1 Delivery system integration
    - 3.1.4.2 Data and information management integration
- 3.2 Design of main social protection programmes
  - 3.2.1 Social assistance
    - <sup>°</sup> Programme A
      - ° Design
        - ° Eligibility criteria and targeting
        - Coverage and expenditure
        - <sup>°</sup> Benefit level and adequacy
        - <sup>°</sup> Benefit indexation
        - <sup>°</sup> Frequency of benefit transfers

- <sup>°</sup> Duration of benefits
- ° Benefit exit rules and conditionalities
- ° Incentives provided by benefits
- ° Equity of benefits
- ° Efficiency of benefits
- ° Delivery mechanisms
  - ° Process mapping of delivery system
  - ° Delivery phases
    - ° Outreach, information dissemination, and awareness raising
    - ° Intake and registration
    - ° Eligibility verification
    - ° Enrolment
    - ° Benefit payment/service delivery
    - Monitoring and evaluation (M&E) and data and information management
    - ° Recurring beneficiary operations
- ° Financing sources
- ° Organizational setup
- ° Programme B
- 3.2.2 Social insurance
  - ° Programme A
  - ° Programme B
- 3.2.3 Labour Market programmes
  - ° Programme A
  - ° Programme B
- 3.2.4 Universal subsidies
  - ° Programme A
  - ° Programme B
- 4. Current and future reform trajectories and policy recommendations
- 4.1 Current reform trajectories
- 4.2 Summary of appraisals and policy recommendations

- 4.3 Costing the policy recommendations/options
  - 4.3.1 Translation of policy recommendations into policy options or scenarios
  - 4.3.2 Results of the Social Protection Basic Costing Tool
- 4.4 Affordability of implementing the policy options and possible resource mobilization strategies
- 4.5 Overview of future reform needs and main takeaways
- 5. References
- 6. Annexes

### **Annex II. Programme inventory**

[See associated figures and annexes Excel file]

## Annex III. Social assistance target population and benefit payment

[See associated figures and annexes Excel file]

# Annex IV. Social insurance target population and benefit payment

[See associated figures and annexes Excel file]

### **Annex V. Social assistance programme coverage**

[See associated figures and annexes Excel file]

## Annex VI. Social insurance and labour market programme coverage

[See associated figures and annexes Excel file]

### **Annex VII. Expenditure**

[See associated figures and annexes Excel file]



Strengthening Social Protection for Pandemic Responses **Building Social Protection Capacities** 



Strengthening Social Protection for Pandemic Responses **Guiding Poverty Reduction** 



Strengthening Social Protection for Pandemic Responses **Advancing Care Economy** 



