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The Role of Food Security and Nutrition-Sensitive Social Protection in Bridging the Humanitarian-Development Divide in the Southern African Region

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Executive summary

Food security in the Southern African region is shaped by myriad socio-economic challenges, compounded by sequenced crises along with COVID-19. The region has a complex socio-economic risk and vulnerability profile led by poverty and unemployment. Economic crises, protracted conflict and recurrent climate change and related threats intensify the impact of these risks and vulnerabilities.

Over the last few decades, countries in the region have endured one crisis after another and have been in a continuous vicious circle of response and recovery, with few opportunities to build resilience. Consequently, **the baseline levels of risk and vulnerability in the region are increasing with every shock, progressively stripping communities of the ability to protect and provide for themselves.**

Given the already fragile state of recovery, the COVID-19 pandemic has plunged the Southern African region into a deeper state of vulnerability, intensifying inequalities and heightening poverty and food insecurity. **The pandemic has provided a clear example of how a global shock can compound the structural challenges of previous crises, interacting with climate risks and the legacy of chronic malnutrition and complicated by co-infections and co-morbidities, leading to reinforced global, regional, and national inequalities.** Overall, the region faces a high and diverse shock burden, and the cumulative impacts of these shocks are poised to reverse decades of improvements towards a life of dignity for people living in Southern Africa.

The role of social protection in bridging both the humanitarian-development nexus and the dilemma of meeting long-term needs with short-term humanitarian funding cannot be understated. For decades, experts have advised rethinking humanitarian responses in the Southern African region, emphasizing that emergencies are no longer isolated events and that responses must adopt a longer-term outlook. Addressing the drivers of vulnerability best builds resilience, by linking humanitarian action to a broader development agenda. Yet, countries have stood at the crossroads of development and humanitarian needs repeatedly with little progress towards bridging the humanitarian-development nexus.

In the current Global Survival Agenda,¹ social protection will be a vital support mechanism to ensure long-term development progress while keeping sight of the SDGs. Social protection offers the potential to fundamentally change the development paradigm in the face of compounding risks and protracted crises. Social protection systems open entry points for tackling multidimensional risks and responding to cross-sectoral challenges by addressing the structural drivers of risk. Food Security and Nutrition (FSN) strengthens the inclusion lens of social protection programmes.

Food insecurity and malnutrition are triggers and serve to compound different types of shocks. FSN is therefore a strong entry point for social protection. In response to COVID-19 in the Southern African region, innovation has been at the heart of social protection responses, which have adopted an FSN-sensitive lens. Deliberately designing social protection programmes with adequate transfer values, adjusted to meet food security and nutrition needs, and rapid adaptations of the modality of delivery of school meals from on-site to home-based demonstrate the agility of governments and development partners in responding to crises, amid a significant number of challenges.

There are powerful synergies between social protection and food security and nutrition, and complementarities between the right to social security and the right to food. Effective social assistance programmes can tackle chronic food insecurity, while demand-driven or scalable safety net programmes can address transitory food insecurity and malnutrition

Food security and nutrition, the fundamental building blocks of a long-term prosperous society, must be at the heart of social protection system strengthening. Nutrition security is the foundation of the capabilities that sustain this prosperity over time. In turn, achieving success in optimizing nutritional outcomes builds the foundation for the prosperity required to sustain these systems, while

building the resilience that better enables societies to deflect future shocks.

Improving food security and nutritional outcomes requires a complex interaction of multisectoral interventions, with an integrated and comprehensive strategy that strengthens development synergies. Social protection builds bridges from sector to sector and makes markets work better for the most vulnerable, strengthening the linkages that contribute to food security and subsequently, to good nutrition.

Social protection can support this through a two-step react-then-pivot strategy. Unprecedented crises like COVID-19 shorten the planning horizon to an instant, requiring an immediate reactive response. This first step, the reactive step, aligns with humanitarian instruments and objectives. The second step builds on the first, pivoting to expand from emergency measures to longer-term development initiatives while bridging the initial response into the long-term, shock-responsive social protection system.

COVID-19 presents an immediate opportunity to expand coverage rapidly to traditionally overlooked population groups. COVID-19 has highlighted the vulnerabilities of traditionally under-prioritized or invisible groups and motivated governments, development partners and donors to address the challenges of informality and the plight of the urban poor urgently. The inclusion of urban populations and informal workers is a result of a fundamental shift in thinking.

During emergencies of COVID-19's magnitude, governments seek to meet the most essential needs first. That approach often leads governments to consider hunger and food insecurity as identifiers of at-risk populations, which include population groups that may otherwise be excluded. However, **during business-as-usual, with poverty reduction at the heart of social protection, broad-based**

¹ The recent decades have demonstrated how countries transition from one crisis to another—from climatic crisis to health shocks, conflict and war. In these situations, countries often lose sight of the longer-term vision of the Sustainable Development Goals (SDGs), as they are forced to manage and mitigate the impact of the crisis at hand. These recurring patterns of shock-response and mitigation yield a keener focus on the shorter-term objective of staying afloat, often at the cost of longer-term investments in sustainable development.

risks such as those represented by food insecurity or malnutrition are often overlooked.²

A systems approach to social protection looks beyond the delivery of individual programmes and interventions and focuses on investments in the building blocks that enhance inclusiveness and promote coherence and cost-effectiveness of social protection interventions. COVID-19 has highlighted the importance of investments in systems that offer the highest, long-term value-for-money returns, while delivering immediate results in the face of crisis. Social protection responses in the region have recognized food security and nutrition as an essential requirement for the achievement of human capital and socio-economic development objectives.

A comprehensive systems response requires action at three levels:

- 1. Government leadership**—both political and bureaucratic—must react immediately in the face of an emergency, to authorize the necessary actions to initiate appropriate and timely responses. A serious crisis shortens planning horizons, sometimes to only an instant.
- 2. At the programme level**, coordination of existing social protection initiatives enables effective interventions to deliver immediate humanitarian responses that leverage existing systems, while strengthening the foundation for future social protection. Crisis multiplies uncertainty and exacerbates the complex challenges that food security and nutrition represent.
- 3. The integrated system of institutions that deliver social protection** benefits plays a vital role. The pathbreaking work of the humanitarian response builds the foundation for the social protection interventions that follow. The COVID-19 pandemic has illustrated the dramatic benefits of linking every household to, for example, digital platforms—not only to ensure more effective and inclusive delivery systems, but also to strengthen development impacts in terms of e-market access, tele-health, high-quality emergency remote learning, knowledge-intensive agricultural innovation, and more productive cognitive-capital-driven livelihoods.

COVID-19 also presents an exceptional opportunity to invest in integrated beneficiary management systems or social registries to improve the timeliness and efficiency of future emergency responses.

The resulting mitigation measures have prioritized the digitization of social protection benefits, thereby presenting opportunities for enhancing financial inclusion and realizing efficiency gains. COVID-19 has presented unprecedented challenges and a host of opportunities for encouraging, enabling, and realizing intersectoral partnerships and solidarity. Humanitarian and development actors have demonstrated the power of joint advocacy and programming.

Nonetheless, **financing bottlenecks have affected the speed and adequacy of responses across the region to meet food, nutrition, and other associated essential needs.** The protracted nature of humanitarian crises over the past decade, compounded by inadequate development interventions, have vastly increased the volume, cost and length of the donor assistance required; COVID-19 has exacerbated these needs. Experiences from the region identify four pillars of investment towards building more comprehensive and resilient social protection systems:

- 1. Risk-informed strategies** that address broad-based risks
- 2. Evidence-informed advocacy**
- 3. Investments in integrated management information systems, technology, and development delivery mechanisms**
- 4. Innovative financing strategies**

Without simultaneous and necessary investments in protecting progress made in these areas and securing future progress, COVID-19 may yet again derail progress towards the SDGs and the achievement of zero hunger and malnutrition goals within our lifetimes.

The react-then-pivot strategy can support the development of comprehensive social protection systems, built on the foundation of food security and nutrition, that ensure the development and sustenance of prosperous societies, while keeping sight of the SDGs as a compass to ensure that long-term priorities are not overlooked. This paper has compiled evidence across the Southern Africa region and the collective responses to the socio-economic impacts of the COVID-19 pandemic, to highlight the decisive role played by food security and nutrition sensitive-social protection in bridging the divide between the humanitarian and development sectors.

² (Dafuleya, G., 2020)





Introduction

Over the last decade, countries in the Southern African region have battled numerous shocks spanning multiple dimensions – health, economic, social, and climatic. More recently, the region has suffered the impacts of the climate emergency in the form of intense cyclonic activity and ‘El-Niño’-induced droughts and frequent flooding, while simultaneously recovering from the human, economic and social capital erosion resulting from the HIV and AIDS epidemics. Extreme weather conditions and their impact on agri-based livelihoods have compounded structural vulnerabilities and chronically worsened food security and nutrition across countries, leading to an unprecedented rise in hunger levels.

COVID-19 and the mitigation measures (including lockdowns and border closures) have been devastating for the region and have further pushed millions into food insecurity of “crisis-level or higher”. The adverse impacts on livelihoods have exacerbated and will continue to exacerbate existing vulnerabilities, eroding community coping capacities, deepening inequalities, and intensifying food insecurity for the most deprived in the region. At present, the physical, economic, and social resilience of individuals, families and communities hangs in the balance.

The COVID-19 crisis has demonstrated the urgency of reinforcing investments in national social protection systems. Keeping the SDGs at the forefront of development planning and building forward through an integrated system of inter-sectoral investments in social protection—where food security and nutrition serve as the foundation—will provide the necessary framework to ensure that governments simultaneously tackle both the immediate and the longstanding challenges that exacerbate immediate needs.

Given the chronic food insecurity and malnutrition prevalent in the Southern African region, this paper analyses the role of food security and nutrition in social protection programming and in bridging the humanitarian-development divide, using the experience of responding to COVID-19 in several countries in the region. The paper answers a few key questions in the process:

1. How has COVID-19 compounded pre-existing vulnerabilities and affected the status of food security and nutrition in the Southern African region?
2. To what extent have social protection responses to COVID-19 in the southern African region been responsive to food security and nutrition needs?
3. Why should food security and nutrition be at the centre of effective social protection responses to crises?
4. How can social protection be an effective platform to respond to the set of compounding, covariant shocks affecting the region in a way that ensures that food security and nutrition are safeguarded and strengthened?

The **first section** of this paper begins by outlining the structural risks facing the Southern African region and how these interact with covariate shocks, undermining food security and nutrition. It also illustrates how the gap between acute and structural vulnerabilities is narrowing with each shock, likely generating severe reverberations for food security in the event of future shocks. The section provides a context analysis and offers a framework to better understand the various factors interacting to compound risks and vulnerabilities in the face of COVID-19. A multi-risk framework is utilized to illustrate and analyse how COVID-19 is aggravating existing challenges, raising structural risks and vulnerabilities, rendering a larger share of households more vulnerable to food insecurity in the region.

The **second section** explores social protection as a response to COVID-19 in the region, focusing on shock responsiveness, adaptive capacity and resilience. This section argues that responses in the region *must* adopt a longer-term outlook and address the drivers of vulnerability by linking humanitarian action to a broader development context.³

The **third section** underscores the criticality of placing food security and nutrition at the centre of social protection responses. It presents a two-step *react-then-pivot* strategy to enable countries to lengthen the planning horizon during crises, so as to progress towards achieving the SDGs while tackling the immediate impacts of crises such as COVID-19. This section presents pathways for implementing the strategy using diverse programmatic interventions in the region across school health and nutrition, economic inclusion, and integrated rural development, that can both deliver immediate humanitarian responses to crises while also enabling longer term support to recovery and development strategies.

The **fourth and final section** concludes with the recommendation that countries must adopt a systems approach to social protection. Using the COVID-19 pandemic as an opportunity to look beyond the delivery of individual programmes, countries are better served by investing in the building blocks that enhance the inclusiveness and cost-effectiveness of social protection interventions in the long-term.

3 (Holloway A., Chasi V., de Waal J., Drimie S., Fort, 2013)





1

**Status of Food Security and
Nutrition in the Southern African
region: the compounding
effect of COVID-19 and other
covariant risks**

OVERALL STATUS OF FOOD SECURITY AND NUTRITION (FSN)

Countries in the Southern African region are seeing unprecedented levels of hunger due to climatic shocks and impoverishment, with projections suggesting further worsening of the situation due to COVID-19 and future climatic risks.⁴ Even without considering the impact of COVID-19, countries in the region are far from achieving the Zero Hunger target. The UN warns that the region is likely to experience the worst forms of hunger emergencies. In 2019, 41.2 million people in the region were food insecure, the highest in a decade. As of February 2021, this had increased by an alarming 25 per cent to 51.3 million.⁵ Estimates also suggest a 25 per cent increase in acute malnutrition between 2020 and 2021.⁶ This means that 8.4 million children in the region will be acutely malnourished and 2.3 million will require lifesaving treatment.⁷

Undernourishment is projected to rise from 8.4 per cent in 2019 to 14.6 per cent in 2030, a grave picture for the region.⁸ These projections do not consider the impact of COVID-19. Given that the full effect of the pandemic is still unfolding, it is likely that these numbers will increase further. This is corroborated by research that indicates that even short lockdown measures, combined with disruptions to mobility and food systems, can lead to a 7 to 9 per cent decrease in Gross National Income (GNI) per capita in low- and middle-income countries.⁹ Reduction in GNI is associated with large increases in child wasting.¹⁰

In 2019, the Democratic Republic of the Congo (DRC) experienced the world's second-worst food crisis, and Zimbabwe experienced the country's worst hunger crisis in the past decade.¹¹ As of

February 2021, out of the 51.3 million people across the Southern African region who are estimated to be food insecure, a staggering 21.8 million are estimated to be from DRC.¹² In Zimbabwe, over half the population is acutely food insecure. In Zambia and Lesotho, over 20 per cent and in Namibia, about 10 per cent of the population is acutely food insecure.¹³

The region also faces **multiple burdens of malnutrition** characterized by prevalence of undernutrition alongside both overweight or obesity and micronutrient deficiencies among the same population.¹⁴

Multiple policy initiatives, such as the enactment of Food Security and Nutrition Policies and Zero Hunger Strategic Reviews, have been unable to structurally address and tackle food insecurity and malnutrition challenges to reverse worsening regional trends. A robust evidence base suggests that progress in the region is hampered by a "policy environment that is under-equipped to control the consumption of poor-quality diets, as well as inadequate resources and capacity for effective programmes".¹⁵

ACCESS TO BASIC SERVICES: WATER, SANITATION, AND HYGIENE (WASH), HEALTH CARE AND EDUCATION

Countries in the Southern African region lead an everyday battle with communicable and vector-borne diseases (malaria, cholera), poor and overcrowded living conditions without proper sanitation, clean water, weak health care systems, and low levels of education. These factors further contribute towards worsening malnutrition in the region.¹⁶ Access to Water, Sanitation, and

Undernourishment has been rising since 2014, affecting at least a quarter of the population in most countries. Undernutrition rates are near or above 50% in Madagascar, Zambia and Zimbabwe. Across the region, the prevalence of underweight in children under five is 13% - which is higher compared to other sub-regions in Africa; more children are stunted (29.3%), but acute malnutrition (wasting) is less prevalent (3.5%) than the global averages of 21.9% and 7.3% respectively. Simultaneously, the incidence of **overweight and obesity** has been rising - 14.3% of all adult men and 38% of all adult women suffer from obesity.

Using anaemia as a proxy for other micronutrients, the high prevalence of anaemia among children under the age of five and women of reproductive age, indicate a widespread prevalence of micronutrient deficiency in the region. Over 50% of children under five in Lesotho, Zambia, and Malawi and near 50% in Madagascar are anaemic. Similarly, between 21% and 51% of women of reproductive age are anaemic across countries in the region. Other indicators such as Vitamin A deficiencies have not been monitored as closely or frequently, with many countries reporting data as old as from 1997.

Source: (FAO, ECA and AUC, 2020); (Global Nutrition Report, 2020); (WHO Global Monitoring Framework, n.d.)

Across countries, access to basic drinking water and basic handwash services continues to be very low (for example: 43.2% in DRC and 2.1% in Lesotho respectively). These countries also have the highest mortality rate per 100,000 inhabitants due to precarious WASH conditions at, 44.4 in Lesotho and 48.8 in DRC, compared with 2.1 in East Asia and Pacific and 34.3 among least developed countries in 2016 (UN classification).

Source: (World Bank Development Indicator Database, n.d.)

Hygiene (WASH) facilities directly impacts two critical pillars of food security:¹⁷ food availability¹⁸ and food utilization.¹⁹ In most countries in the region, out of pocket health expenditure is high, indicating a burden on households.²⁰ Further, access to education²¹ has declined over the years in many countries and continues to remain low, which impacts food security. This is evidenced by a cross country study that includes countries in the southern African region, which found a high correlation between food insecurity and educational deprivation. The study found that correlation is strongest at the primary level and decreases in magnitude with higher levels of education.²² Another study in South Africa shows that level of education plays a vital role in enhancing household income sources and food security.²³

The Human Development Index (HDI), which measures life expectancy, access to education and a decent standard of living, in 2019, ranged from 0.446 in Mozambique to 0.645 in Namibia.

(UNDP Human Development Reports, 2019)

Inequalities are widespread in the region.²⁴ According to the 2019 Human Development Index report, the Southern African region has experienced an increase in inequalities and now has the highest levels on the continent.²⁵ Of the four countries with the highest levels of inequality in the world, three are in the Southern African region, which is also home to 50 of the most gender unequal societies in the world.²⁶

These demanding socio-economic risk profiles combined with high exposure to shocks heighten vulnerability and make communities far more susceptible to poor nutritional outcomes and disasters.

PREVALENCE OF HIV

The effectiveness of HIV treatments depends strongly on food security and nutritional intake; at the same time, the prevalence of HIV positions individuals and families at greater risk of food insecurity and malnutrition. HIV is a long-standing risk: over 17 million people are living with HIV in the region.²⁷ Eswatini and Lesotho report the highest prevalence of HIV.²⁸ The high prevalence of HIV and the higher nutritional needs of people living with HIV position individuals at great risk of food insecurity and nutritionally poor diets. Inadequate diets rapidly cause malnutrition, which is known to accelerate the progress of HIV infection to AIDS and increase the vertical transmission of HIV in pregnant women living with HIV.²⁹ Furthermore, malnutrition and associated low immunity also increase the risk of secondary infections and illnesses, with grave consequences for the health and survival of persons living with HIV.³⁰ Food insecurity has been found to be a critical barrier to adherence to antiretroviral therapy (ART) and retention in care among HIV and tuberculosis (TB) infected adults, HIV-infected pregnant women and their HIV-exposed infants. Simultaneously, HIV adversely affects individual labour productivity,³¹ likelihood of employment,³² and human capital investment.³³ During crises, and rising food insecurity, these factors limit the ability of households with persons living with HIV to cope with shocks, increasing their risk exponentially.

When a series of risks materialize in an environment where HIV and AIDS are prevalent, the impact is far worse. While poverty, inequality, climatic shocks, social instability, and conflict reduce both food availability and accessibility, households tend to adopt risky coping mechanisms. Some of these behaviours increase exposure to and risk of contracting HIV, while others directly affect food security and nutrition. The direct reduction in food security and nutrition then reinforces lower productivity. HIV and AIDS, on the other hand, increase nutritional demands, reinforce weak immunity, and increase the risk of malnutrition, and of opportunistic infections. In turn, living with HIV and AIDS reduces productivity. Loss of productivity further reinforces the very causes (poverty and inequality) that perpetuate HIV and AIDS and the resulting loss of life, livelihood, and productivity.

URBANIZATION AND NUTRITIONAL TRANSITION

In addition to long-standing risks like HIV, emerging trends such as rapid urbanization are altering the landscape of risk and vulnerability. Areas that were not considered high in risk may become disaster-prone due to the rise of unplanned settlements with inadequate infrastructure, poverty, and demanding development needs. Urban poverty is high in Africa, with 60 per cent of people in African cities living in slums as compared to the world average of 36 per cent.³⁴ Most urban poor households live in informal settlements and experience multiple deprivations, including inadequate access to WASH facilities and health care services. As a result, chronic vulnerability, high rates of child stunting, adolescent malnutrition and high HIV rates are increasingly becoming concentrated in urban areas.³⁵ At the same time, in rural areas, the loss of labour due to urban-rural migration is adversely affecting food production and as a result, national food security.³⁶ For countries with high HIV prevalence, these impacts are more pronounced: in addition to loss of labour due to migration, the HIV crisis has reduced the availability of an otherwise productive population.

Urbanization is also accompanied with nutrition transition,³⁷ which is an important driver of multiple burdens of malnutrition in the region. While still a predominantly urban phenomenon across sub-Saharan Africa,³⁸ as rural incomes increase, similar changes in dietary patterns are expected in rural areas.³⁹

SOCIAL COHESION, CONFLICT, AND DISPLACEMENT

Social instability is both a cause and consequence of food insecurity,⁴⁰ and persists in the region. Countries with lower levels of food security, and poor health and nutrition are more likely to experience social instability, despite economic growth. On the other hand, violent conflicts often lead to rises in food prices and food insecurity, perpetuating a vicious cycle. Conflict in DRC has undermined social cohesion, leading to many displaced persons and refugees in the region. Further, the interaction of economic and social instability with climatic shocks exacerbates food security and nutrition, worsens social cohesion, and increases violence, as seen in the DRC and Zimbabwe (Figure 1).

The recently released Social Risk Index (SRI)⁴¹ measures underlying strengths and weaknesses, ranking countries on a scale from 0 (highest social

risk) to 100 (lowest social risk), using 12 sub-indicators.⁴² Among the 17 sampled countries in the African region (excluding DRC), Angola ranks among the countries with the highest social risk at 100 out of the 102 countries in total, with an SRI value of 25.1. The country is prone to high vulnerability due to social unrest. Among other countries sampled in the region, South Africa ranks 79 out of 102 (SRI of 41.1) and Tanzania ranks 68 out of 102 (SRI of 44.9). Social instability limits opportunities, and costs lives, livelihoods, and income. As a result, it directly affects food accessibility. Conflict and instability also reduce food availability. Collectively, these factors lead to rises in food insecurity and malnutrition. Malnutrition-related productivity losses, in turn, generate losses in income and for development, further exacerbating the drivers of conflict and instability.

Currently, the Southern African region, excluding DRC, is home to 956,000 displaced persons —774,000 refugees and 182,000 internally displaced people. Of these, about 450,000 refugees live in camps or camp-like settings – i.e., in environments with high risk of overcrowding, lack of proper sanitation, water or health care. The risk of malnutrition is heightened in these circumstances. DRC alone has 5.5 million internally displaced people, the highest in Africa, and over half a million refugees.

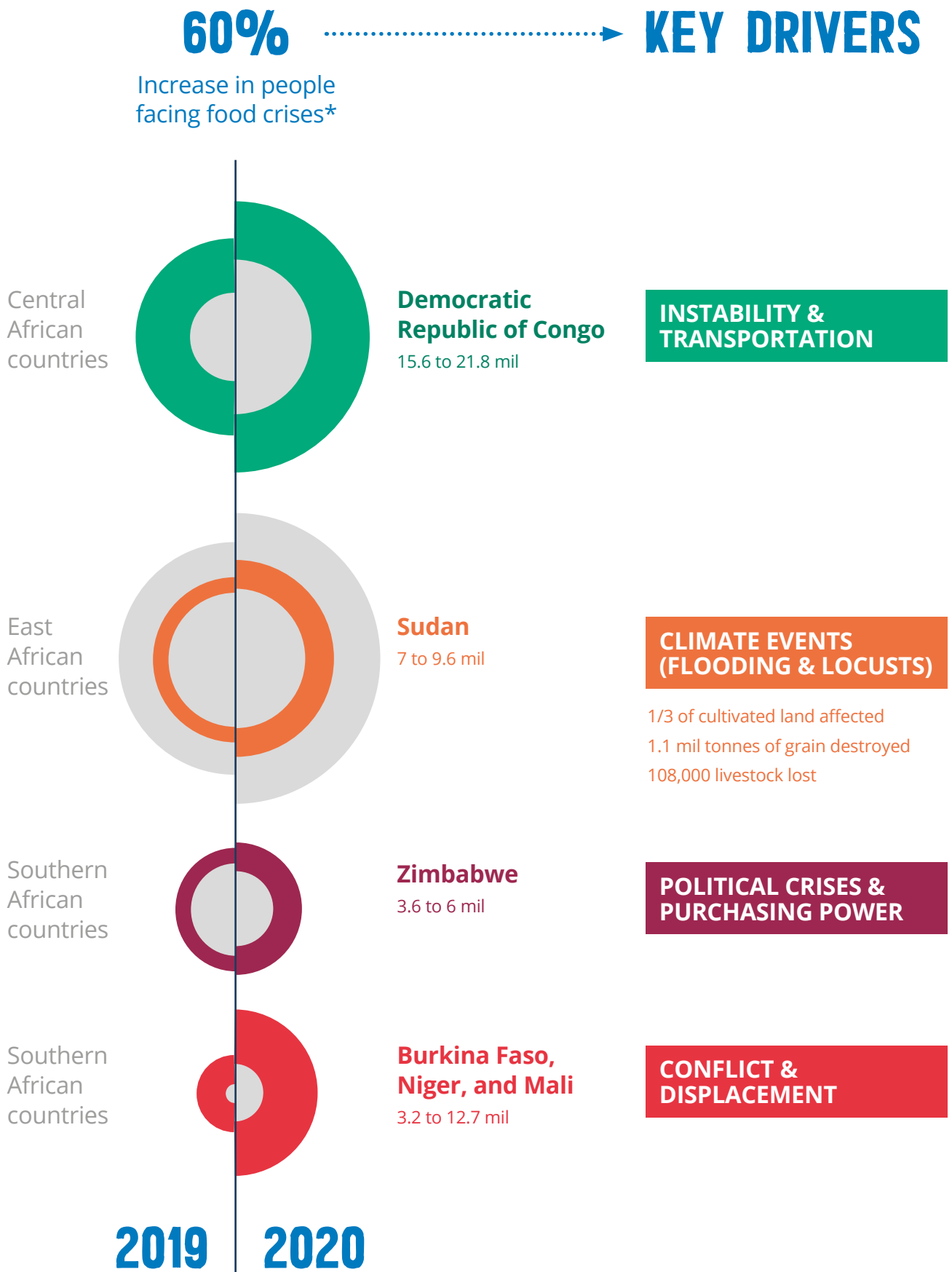
Source: (OCHA, 2020); (UNOCHA, 2020); (FEWS, 2020)

CLIMATE CHANGE AND EXTREME WEATHER EVENTS

The impacts of climate change are far more intense in the Southern African region than in most other regions. The region has been recording twice the rise in temperatures on average compared with global trends.⁴³ This is because in the tropics, particularly in Africa where there is relatively small natural climate variability, populations are susceptible to severe disruption from relatively small changes in climate.⁴⁴ As a result, unprecedented climate shocks are expected to occur one to two decades earlier in the African region than the global average (which is anticipated to be 2069).⁴⁵

UN projections estimate temperatures rising between 2°–5°C over the coming decades, accompanied by more intense and frequent extreme weather events.⁴⁶ Unlike in other parts of the world where climate change is intensifying, countries in the region face more demanding development

Figure 1: Food insecurity spikes in Africa



Source: (African Center for Strategic Studies; , 2021)

challenges, meaning that climate-related shocks generate more intense social and economic costs. Climate impacts are already costing most African economies between 3 per cent and 5 per cent of GDP annually, with some incurring losses of up to 10 per cent of GDP.⁴⁷

Widespread droughts, generated by the El Niño–Southern Oscillation (ENSO)⁴⁸ have affected several countries, including Madagascar, Zambia and Zimbabwe, with devastating effects on food security and nutrition. ENSO-related events led to the recognition of a climate emergency in the region, with catastrophic numbers of people experiencing “crisis” or “emergency” levels of food insecurity (Integrated Food Security Phase Classification [IPC] Phases 3 and 4). In 2019, 41.2 million people in the region were facing food insecurity, with 30.3 million in a state of crisis or worse, an increase of 23.3 per cent since 2018 and the highest in a decade.⁴⁹ Millions of families in Mozambique, Zimbabwe and Malawi are still recovering from the devastating consequences of Tropical Cyclones Idai and Kenneth in 2019, while Angola, Botswana, Eswatini, Lesotho, Namibia, Mozambique, and Zambia are also suffering a destructive drought. Namibia and Mozambique have both extended their national drought emergencies to March 2020, while Lesotho declared a new drought emergency in October 2019. At the same time, vulnerability is rapidly rising as the lean season deepens and severe food insecurity already affects nearly 15.6 million people in eleven countries across the region.⁵⁰ This year alone, WFP has estimated the need for lean season assistance for 8.3 million people struggling with “crisis” levels of hunger.⁵¹

THE NARROWING GAP BETWEEN ACUTE AND STRUCTURAL VULNERABILITIES

Overall, the region faces a high and diverse shock burden, and the cumulative impacts of these shocks are poised to reverse decades of improvement towards a life of dignity for the people living in Southern Africa. Under these circumstances, **countries are in a continuous vicious circle of response and recovery, with few opportunities for building resilience. Consequently, the baseline levels of risk and vulnerability in the region are increasing with every shock. Each shock that is followed by another, without an opportunity for full recovery and development improvements, progressively strips communities of the ability to protect and provide for themselves.**

For instance, according to the Emergency Events Database (EM-DAT), between 2000–2016 Zimbabwe experienced 34 disaster events, including 16 epidemic disasters, which affected 16.5 million people in the country. In 2017, the country experienced flash floods due to tropical cyclone Dineo. In 2019, Zimbabwe was among the hardest hit by extreme weather events.⁵² Further, the country experienced a severe economic and health crisis in 2020 due to COVID-19. These recurring crises have pushed the country into the high-risk category in 2021, according to the INFORM Risk index.⁵³

In Zimbabwe, there are two distinct categories of vulnerability. There are groups that are chronically vulnerable (e.g. older people, child-headed families, persons with disabilities) and groups that are acutely vulnerable (e.g. working households who are vulnerable due to shocks). Ideally, during the onset of a shock, acutely vulnerable groups who have working members are better positioned to absorb the shock. However, due to rapid onset shocks and lack of risk management, the acutely vulnerable groups are increasingly relying on government assistance to bounce back. This is putting additional pressure on a government that is already constrained in providing support to the chronically vulnerable. Thus, without an opportunity for recovery, a higher number of households are experiencing structural risk, i.e., deprivation and other challenges even in the absence of shocks. With each progressive shock, more households become vulnerable and with increasing severity. Over time, even small shocks put a higher number of households at risk; thus, the risk and frequency of humanitarian crises increase.

Shocks such as COVID-19 have the power to significantly alter the risk and vulnerability landscape and cause significant setbacks in development. According to the 2021 World Economic Situation and Prospects study in Africa,⁵⁴ many countries in the region that have made significant progress on poverty reduction will “witness years of development gains reversed or even erased”. This is corroborated by a recent study by UNDP in South Africa that shows that COVID-19 has set back gains that were made in the 26 years since the dawn of democracy in the country.⁵⁵ Poverty levels in South Africa are expected to increase between 0.45 per cent (approximately 264,510 households) to 0.66 per cent (approximately 387,948 households), and more households will be vulnerable to shocks.⁵⁶

In the Southern African region, where development demands are high and households and communities are already experiencing a rapid erosion of social risk management capacities, the impact of COVID-19 on poverty, vulnerability, inequality, and food insecurity has already been devastating. The levels of hunger and malnutrition have been exacerbated by the COVID-19 crisis and other concurring crises in the region, as evidenced by the unprecedented magnitude of needs. **COVID-19 has not necessarily created new challenges in the region, but it has worsened existing ones dramatically and without warning.** COVID-19-related movement restrictions have stripped many people of their livelihoods and disrupted supply chains, making food inaccessible to many more. As the crisis penetrates into the annual lean season—that makes nutritious diets and, in many cases, food, unaffordable for millions of people each year—the risk of hunger and malnutrition is high.

Even before the onset of the crisis, as shown in Table 1,⁵⁷ in 2017, in five countries in the region, over 92 per cent of the population were unable to afford healthy diets (diets which provide adequate calories and nutrients and a diverse intake of food from different groups). The lack of a healthy diet is strongly associated with food insecurity and malnutrition.⁵⁸ In four countries in the region, over 70 per cent of the population were unable to afford nutrient-adequate diets. In three countries in the region, over 22 per cent of the population—or one out of every five persons—were unable to afford even basic energy sufficient diet (diets which provide adequate calories for energy balance).

Why food insecurity overlaps with shocks in Lesotho?

Data based on the Lesotho Vulnerability Assessment Committee (LVAC), shows that whenever the country has experienced a shock, there has been a spike in the levels of food insecurity. For instance, in 2017, when there were droughts in Lesotho, many households in rural and urban areas reduced their food consumption as measured by the Reduced Coping Strategy Index (rCSI). Food insecurity often overlaps with shocks because households often adopt negative coping strategies such as reducing consumption and dietary diversity in response to shocks, to compensate for the fluctuation in income. This is corroborated by evidence from South Africa that indicates that a reduction in the frequency of meals and reliance on inexpensive and non-nutritious foods are among the top coping mechanisms for households in response to income shocks – alongside the sale of household assets for income.

Source: Mjonono. (2009). An Investigation of Household Food Insecurity Coping Strategies in Umbumbulu.

Pre-existing hunger and food and nutrition deficits, and the prevalence of HIV and AIDS, are multiplying the epidemiological burden amid COVID-19. In 2020, the UN estimated increased risk to nearly 14 million people, including 2.3 million children under the age of five, in Southern Africa.⁵⁹ In the absence of effective action, the UN has estimated that an

Table 1: Cost and affordability of three diets in Southern Africa (2017)

Country	Population in millions	Energy Sufficient Diet			Nutrient Adequate Diet			HealthyDiet		
		Cost in USD	%Food Expenditure	% Population cannot afford	Cost in USD	%Food Expenditure	% Population cannot afford	Cost in USD	%Food Expenditure	% Population cannot afford
Angola	29.8	0.97	21.9	35.4	3.22	72.3	82.5	4.87	109.4	92.2
DRC	81.4	0.41	26.7	14.7	1.57	100.7	78.3	3.26	209.6	95.1
Eswatini	1.1	0.93	15.3	14.6	2.15	35.3	50.3	3.68	60.3	69.7
Lesotho	2.1	0.61	23.6	6.2	2.13	82.5	47.6	4.11	159.6	76.2
Madagascar	25.6	0.48	26.4	22.8	2.37	129.1	91.4	3.46	188.3	96.3
Malawi	17.7	0.28	21.9	1.3	1.33	102.2	70.5	2.85	219.1	93.7
Mozambique	28.6	0.38	24.4	7.9	1.79	113.8	73.8	4.18	266.4	92.7
Namibia	2.4	1.01	30.3	9.8	1.72	51.8	22.9	3.47	104.4	49.2
Tanzania	54.7	0.58	21.7	5.6	1.73	64.9	65.5	2.77	104.1	85.0
Zambia	16.9	0.61	35.8	28.8	2.17	127.8	73.2	3.38	199.5	84.1
Zimbabwe	14.2	0.73	32.4	5.1	2.14	94.7	57.7	3.80	168.2	80.0

Source: (FAO, IFAD, UNICEF, WFP and WHO, 2020)

additional 300,000 people could die from hunger and disease over a six-month horizon.⁶⁰ The WHO Regional Director for Africa, Dr Ebrahim M. Samba, has stated: “undernutrition makes people more susceptible to disease and existing health services are often unable to take on the added burden”⁶¹.

COVID-19 is also likely to intensify systemic social risk, as evidenced in notable increases in social and political protests. In Southern Africa, “drivers of minibus taxis in Gauteng province, South Africa, went on strike—leaving thousands of commuters stranded—to demand additional financial support from the government due to the impact of COVID-19 on the public transport industry. In Zimbabwe, anti-government protesters staged night protests over severe food shortages in the country since the start of the lockdown in March. Tens of thousands of garment workers in Lesotho waged a successful one-day strike during the week of 17 June for unpaid wages, returning to work after the government agreed to pay workers during the coronavirus lockdown.”⁶² Evidence from previous crises, including the 2008 global financial crisis, demonstrates that crises perpetuate hunger and food insecurity, which then multiply the risks driven by low levels of economic development, demographic pressures, and both the weakness and absence of social protection systems.⁶³

It is estimated that COVID-19 will cost the world economy up to 5 per cent of global GDP.⁶⁴ This estimation is potentially very optimistic: the Judge Business School at the University of Cambridge has estimated \$82 trillion in global losses in a worst case scenario for the impact of the COVID-19 pandemic, in terms of loss of potential growth the global economy could lose from a prolonged depression.⁶⁵ In the Southern African region, GDP grew by 1.4 per cent in 2019.⁶⁶ In 2020, the region faced an economic contraction of 3.32 per cent and is expected to face a similar contraction of 3.11 per cent in 2021.⁶⁷ While the impact of COVID-19 alone on the Southern African regional economies may be smaller than in the largest economies globally, compounding and overlapping risks and a more demanding development context mean that these economies may experience deprivations more intensely and with far reaching consequences.

Figure 2 synthesizes the impacts of compounding risks and how they deepen existing vulnerabilities and exacerbate risks at structural levels. The figure illustrates the direct impact of structural risk factors—poverty, inequality, and rapid urbanization—on limited access to essential services such as health care and education, increased risk of food insecurity and consequently, the manifestation of malnutrition (both over and under nutrition).

Understanding the Humanitarian-Development nexus agenda

For decades, experts have advised rethinking humanitarian responses in the Southern African region, emphasizing that emergencies are no longer isolated events and that responses must adopt a longer-term outlook.

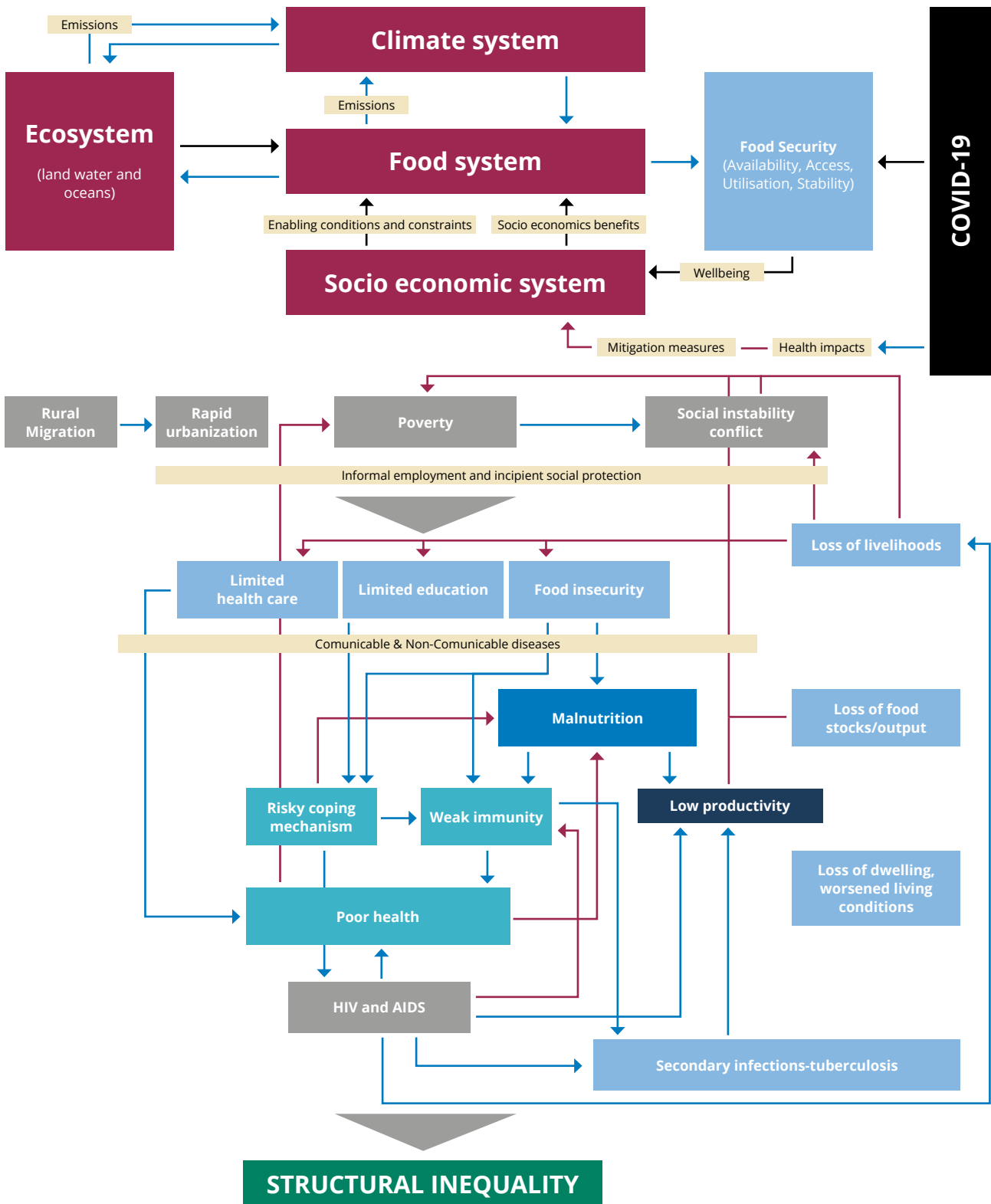
Linking humanitarian action to a broader development context to address the drivers of vulnerability best builds resilience, but countries have made little progress towards bridging this humanitarian-development nexus.

The Grand Bargain, which outlines 51 commitments to improve the efficiency and effectiveness of international humanitarian aid, highlights the importance of enhancing humanitarian-development cooperation. It emphasizes shrinking humanitarian needs over the longer-term, with a view to contributing to the Sustainable Development Goals (SDGs) by

strengthening national and local systems and coping mechanisms. The 2020 Annual Report states that while the Grand Bargain is facilitating deeper dialogue across the humanitarian sector, substantive shifts in practice are yet to be realized.

The role of social protection cannot be understated, in bridging both the humanitarian-development nexus and addressing the dilemma of meeting long-term needs with short-term humanitarian funding. In non-fragile contexts, there is extensive evidence that social protection helps reduce poverty and inequality. Establishing effective social protection in the context of protracted instability, though complex, is being increasingly promoted as an essential mechanism to bridge the humanitarian-development divide. By the provision of regular and predictable transfers that households can rely on and benefit from, social protection provides the needed foundation for long-term livelihood development.

Figure 2: interlinkages between covid-19, the climate system, food system, ecosystems and socio-economic systems



Source: adapted from The intergovernmental panel on climate change, n.d.

- Primary Impact
- Reinforcing impact
- Interaction
- Filters through which structural factors mediate impact
- System
- First order outcome
- Second order outcome
- Third order outcome
- Fourth order outcome
- Result

Among the poor, these factors lead to the adoption of negative social risk management mechanisms for survival, including reduction in quantity and quality of food. These practices, in turn, weaken immunity, and create poorer health and physical resilience. Both through impact on malnutrition and lower physical resilience, the structural drivers of risk reduce labour productivity, with immediate and long-term impacts reinforcing poverty and inequality.

In the Southern African region, **the recurrent crises are sharply affecting economic growth and resilience, with direct implications for the capacity of governments to respond or invest meaningfully towards redressing multidimensional deprivations.** High debt ratios and weakening economic growth continue to shrink the fiscal space for essential investments towards development outcomes, as countries scramble to protect macroeconomic stability in the short-term.⁶⁸ Climatic, health or social shocks invariably result in secondary economic shocks, which can be highly disruptive to both domestic and international development financing in the region, regardless of the source of revenue. Experts warn that the COVID-19 pandemic will have devastating consequences in this regard. The OECD estimates

that if African countries were to implement the same immediate fiscal policy measures as the largest EU economies have done so far, all other conditions remaining equal, “Africa’s government debt-to-GDP ratio would increase from 57.6 per cent (2019) to about 85 per cent.”⁶⁹ Irrespectively, governments in the region need to respond to maintain macro and microeconomic stability and ensure that their economies continue to operate at the necessary levels. As a result, the impact of COVID-19 on health and economies will put many countries on an unsustainable debt path, with consequences for future investments towards sustainable development.

Adequately designed and implemented social protection systems can help address some of the structural factors causing and exacerbating poverty and inequality. There is growing research to indicate that social protection provides indispensable support for the achievement of the Sustainable Development Goals (SDGs). Social protection contributes to human capacity development, social risk management, higher returns on social investments, and leads to broader macroeconomic impacts which contribute towards achieving the SDGs.⁷⁰



SECTION ENDNOTES

- 4 (Reuters, 2020)
- 5 (SADC, 2021)
- 6 (RVAA, 2020)
- 7 (RVAA, 2020)
- 8 (FAO, IFAD, UNICEF, WFP and WHO, 2020)
- 9 Laborde D, Martin W, Vos R., 2020)
- 10 (Headey D & Ruel M., 2020).
- 11 (FSIN, 2020)
- 12 (SADC, 2020)
- 13 (The Guardian, 2020)
- 14 (FAO, IFAD, UNICEF, WFP and WHO, 2020)
- 15 (WHO, 2019)
- 16 (UNICEF, 2014)
- 17 (USAID, 2013)
- 18 Access to water is required for drinking, cooking and food production.
- 19 Access to clean drinking water and sanitation minimize risks of avoidable diseases, which can foster and worsen malnutrition.
- 20 (World Bank Development Indicator Database, n.d.)
- 21 (World Bank Development Indicator Database, n.d.)
- 22 (De Muro & Burchi, 2007)
- 23 (Nwokolo, 2015)
- 24 Measured by the wealth quintile of the top 10 per cent compared to the bottom 40 per cent.
- 25 (UNDP, 2019)
- 26 (UNECA, 2020)
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- 29 (Duggal, S., Chugh, T. D., & Duggal, A. K., 2012)
- 30 (FAO, n.d.)
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- 33 (Fortson 2011)
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- 35 (Holloway A., Chasi V., de Waal J., Drimie S., Fort, 2013)
- 36 (Szabo, S., 2016)
- 37 "Nutrition transition" is a model used to describe the shifts in diets, physical activity and causes of disease that accompany changes in economic development, lifestyle, urbanization, and demography. It is most commonly used to refer to the change from traditional diets towards diets rich in fats, sugars, meat and highly processed foods and low in fibre, and accompanied by a rise in sedentary lifestyles (Foodsource, 2018).
- 38 (NCD Risk Factor Collaboration (NCD-RisC), 2019); (Ajayi, Adebamowo, Adami et al., 2016)
- 39 (Cockx, L., Colen, L., De Weerd, J., & Paloma, G., 2019)
- 40 (Brinkman, H. J., & Hendrix, C. S, 2011)
- 41 (Euler Hermes, 2020)
- 42 The 12 sub-indicators are: Real GDP per capita growth trend, labour force participation, income inequality, public social spending, political stability, government effectiveness, corruption perception, trust in government, vulnerable employment, imports of goods as percentage of GDP, currency depreciation, and fiscal revenue as percentage of GDP.
- 43 (Quartz Africa, 2018)
- 44 (Niang, 2014)
- 45 (Niang, 2014)
- 46 (UNECA, 2012)
- 47 (UNECA, 2020)
- 48 El Niño–Southern Oscillation (ENSO) is an irregularly periodic variation in winds and sea surface temperatures over the tropical eastern Pacific Ocean, affecting the climate of much of the tropics and subtropics.
- 49 (FSIN, 2020). While this measured increase was partly due to the addition of three countries (United Republic of Tanzania, Angola and Namibia) where data was unavailable last year, it was also due to a deterioration in the food security situation in DRC, Zimbabwe and Zambia.
- 50 (OCHA, 2020)
- 51 (WFP, 2020)
- 52 (Forbes, 2021)
- 53 The INFORM Risk index uses 50 different indicators to measure hazards and peoples' exposure to them; vulnerability; and the resources available to help people (European Commission, 2021).
- 54 (UN, 2021)
- 55 (UNDP, 2020)
- 56 (UNDP, 2020)
- 57 The cost of the three diets is based on retail food price data obtained from the World Bank's International Comparison Programme (ICP) for internationally standardized items, converted to international dollars using purchasing power parity (PPP). The cost of a healthy diet is 60 per cent higher than the cost of a nutrient adequate diet and almost five times the cost of an energy sufficient diet (2017).
- 58 (FAO, IFAD, UNICEF, WFP and WHO, 2020)
- 59
- 60 (WHO, 2020)
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- 62 (Accord, 2020)
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- 64 (UNECA, 2020)
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- 68 (UNCTAD, 2020)
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2

**Social protection
responses to COVID-19
in the region: Extent
of responsiveness
to Food Security
and Nutrition needs**

SHOCK RESPONSIVENESS OF SOCIAL PROTECTION INTERVENTIONS IN THE REGION

The overwhelming interest in social protection responses during COVID-19 has opened new avenues for enabling and sustaining long-term investments in social protection. By May 2021, virtually every country and territory in the world had either planned or implemented more than 3,000 social protection programmes globally, with social assistance being the predominant response.⁷¹

Shock Responsive Social Protection (SRSP)

A SRSP system is one that can anticipate and respond to covariate shocks effectively, enabling households to better prepare and cope with shocks. Five of the most commonly used methods to make systems shock-responsive include:

- Vertical expansion: Increasing the value of benefits temporarily
- Horizontal expansion: Increasing the number of beneficiaries from affected areas
- Piggybacking: Using an established programme to deliver a new benefit
- Shadow alignment: Humanitarian system running in parallel to existing social protection programme
- Refocusing: Reprioritizing existing resources to finance social protection

Source: O'Brien et al. (2018)

In the Southern African region, countries that have institutionalized social assistance and rely on domestic resources announced emergency social assistance within a week of the lockdown. These included Botswana, Mauritius, Namibia and South Africa.⁷² Countries with less-developed social protection systems and those that rely more heavily on donor assistance for social protection financing—such as Angola, DRC, Madagascar and Zimbabwe—took longer to announce emergency social assistance measures.⁷³ In some cases, the benefits have not been rolled out yet due to financial constraints, systemic challenges (related to digitization or technology), or implementation issues related to social distancing, logistical bottlenecks and capacity constraints. In other cases, governments have had to compromise benefit values to improve coverage of assistance due to financial limitations.

Unlike other crises, COVID-19 has eroded the capacity of affected countries and donors alike. With developed countries suffering acutely, donor financing has been stretched, having visible impacts on countries with demanding needs.⁷⁴

As shown in the table, **social assistance accounted for a majority of the regional responses to COVID-19, with cash transfers emerging as the most common response (adopted by 10 out of 11 countries).** While certain countries used horizontal expansion to reach a wider range of beneficiaries (Lesotho, Mozambique, Zambia, Malawi), many countries introduced new programmes (mainly cash transfers and in-kind assistance programmes) to respond to the crisis. Angola and Lesotho increased benefit values of the existing child grant programme, while Malawi and Tanzania increased the value of their social assistance and pension programmes respectively. DRC and Eswatini aligned responses to ongoing crises with COVID-19 responses. Namibia, which has one of the most well-established social protection systems in the region, responded using digitized solutions through the banking sector's ATM infrastructure and the tax database to administer payments and loans. Analysing in-kind food assistance measures (such as food vouchers and school feeding programmes), 5 countries out of 11 countries (Angola, Eswatini, Lesotho, Madagascar and Zambia) used specific programmes to ensure the provision of food.

PRIORITIZATION OF FOOD SECURITY AND NUTRITION NEEDS DURING COVID-19

Food insecurity and malnutrition are triggers and compound a variety of shocks: they are important entry points for social protection.

Deliberately designed social protection programmes that have adequate transfer values, adjusted to meet food security and nutrition needs, can be an effective mechanism to support families and can reduce food insecurity during times of adversity.

COVID-19 has also brought many countries to difficult crossroads. Mitigating the health impact of COVID-19 has required lockdown measures of an unprecedented scale, stalling economic growth, causing widespread unemployment and business closures, and directly affecting household resilience. These measures have adversely affected households' income, prompting them to adopt negative coping measures related to food consumption and dietary diversity, and ability to access much-needed foods to meet their nutritional needs.⁷⁶

Table 2: Social protection responses to covid-19⁷⁵

	Social protection responses to COVID-19	Type of SRPS intervention
Angola	Top-ups and extra payments were introduced to the existing Child Grant Programme and payment procedures were adapted to ensure adequate sanitation and worker protection.	Vertical expansion (increase of benefit value) as well as design tweaks (adapted payment mode)
	The first phase of the cash transfer programme “Kwenda” was initiated in May 2020 to provide temporary income support to poor and vulnerable families affected by the crisis.	New programme (Cash transfer)
	The government is also planning an emergency cash transfer programme for children under the age of five in Luanda province. Additionally, basic food basket distribution is planned to reach vulnerable households, with an emphasis on children.	New programme (Cash transfers and in-kind assistance)
	The government is also providing utility waivers for families who have difficulties in paying their bills.	Utility fee waivers
DRC	The immediate focus has been on delivering cash transfers to urban areas.	New programme (Cash transfer)
	The joint UNICEF, FAO and WFP programme with the government, is based on implementation of a resilience building programme in rural areas to improve farming, offer livelihoods-diversification opportunities, and other support.	Alignment of objectives: the joint programme was initiated to support communities weakened by conflict, agricultural and climate shocks but was also used as a response to COVID-19.
	The government provided free supply of electricity to households, as well as waivers of water fees.	Free utility supply
Eswatini	The government’s response plan includes protection of working individuals who are at risk of losing their income through a Relief Fund	New programme (Cash transfer)
	The government has set aside seed money for the establishment of the country’s first unemployment insurance fund.	Alignment of unemployment insurance fund with COVID-19 relief measures
	The government has also planned cash-based transfers to cover food needs, which it is estimated will reach between 190,000 and 300,000 people, and food assistance for another 190,000 suffering from chronic illnesses and either at risk of malnutrition or currently malnourished.	New programme (Cash transfers and in-kind assistance)
	Electricity price increases have been suspended for two months.	Subsidized utility supply
Lesotho	Increase in benefit value, and inclusion of newly vulnerable groups in the child grant support, with support from the World Bank.	Vertical and horizontal expansion of the child grant programme
	The school feeding programme has been converted to take home rations for learners.	Design tweaks of the school feeding programme
Madagascar	The provision of Tosika Fameno (“complementary support”), an unconditional cash transfers to poor and vulnerable households in urban and peri-urban districts in April and May.	New programme (Cash transfer)
	Provision of in-kind transfers of basic essentials for daily wage workers, students and old-age individuals	New programme (In-kind assistance)
	The government has organized subsidized markets for essential food and staples	Subsidized rations
	The deferral of payment of liabilities for all companies	Payment deferrals
Malawi	The government accelerated payments under the social cash transfer programme, provided top-ups, and expanded eligibility to increase coverage in urban as well as rural areas.	Design tweaks (accelerated payments) as well as horizontal and vertical expansion of the social cash transfer programme
Mozambique	Adding 1,000,000 urban beneficiaries to the Post Emergency Direct Cash Transfers Programme (PASD-PE Covid) for 6 months	Horizontal expansion of the PASD-PE Covid
Namibia	Establishment of a one-time emergency income grant to support workers who have lost their jobs due to the pandemic, transferred by the government using the banking sector’s ATM infrastructure.	New programme (cash transfer), using the banking’s ATM infrastructure to deliver benefits
	Tax-back loan scheme for tax-registered and tax-paying employees and self-employed individuals who have lost income	New scheme, employed through tax database
	Subsidization of water services	Subsidized utility supply
Tanzania	Social pension is being expanded by 20 per cent	Vertical expansion
Zambia	The government is extending the coverage of the Social Cash Transfer (SCT) programme to help vulnerable communities, including urban dwellers	Horizontal expansion of the SCT programme
	The UN agencies are providing a supplementary short-term Emergency Cash Transfer programme, as well as food hampers for vulnerable households affected by COVID-19, to cover 249,200 households who are already SCT beneficiaries or part of the expanded database	Piggy backing: using the SCT beneficiary database to deliver in-kind assistance
	The government has also waived charges for electronic transfers.	Fee waivers
Zimbabwe	In response to the pandemic, the government set ZWL\$200 million (approximately \$550,000) per month for emergency cash transfers to reach 1 million vulnerable households who are affected by the pandemic.	New programme (cash transfer)

In Mozambique, the emergency unconditional cash transfer (PASD-PE) was used as a response to droughts which plagued the country in 2017, as well as in response to cyclone Idai in 2019.⁷⁷ For both these responses, the cash transfer value was set at 75 per cent of the food basket (2,500 MZN).⁷⁸ In response to the pandemic, the government initiated the COVID-19 response plan with the objective “to guarantee social support and reinforce the resilience of poor households who are exposed to the COVID-19 pandemic’s effects”.⁷⁹ The government set the cash transfer value at 30 per cent of the average wage of an informal worker (1,500 MZN), translating to roughly 45 per cent of the food basket. This was driven by two underlying reasons: (i) the fact that COVID-19 affected a broader population of informal workers in the country; and (ii) considerations of fiscal space and financial sustainability in the long-term. The value of the transfer is lower than previous cash transfer values in the country, though it is relatively higher than cash transfer values in the Southern Africa region.

In Zambia urban districts were severely affected.⁸⁰ Since markets were supplying food (unlike the period of droughts in 2019 when food availability was severely under threat), cash transfers were provided in response to the pandemic with the primary aim of alleviating food insecurity. Cash transfer values were set based on the food basket, assuming an average of five members per household. Based on financial sustainability, benchmarking of previous cash transfer values, and including the cost of basic

sanitation supplies, the value was set at 400 kwacha (which was a significant increase compared to the previous cash transfer value of 90 kwacha).

In Lesotho the premise for emergency support during COVID-19 was ensuring food security and assessing vulnerability based on food insecurity.⁸¹ As a result, cash and food assistance were employed, as well as temporary public works measures. The Government of Lesotho, supported by WFP, planned to continue the school-feeding programme despite school closures.⁸² However, as many learners were too apprehensive to participate, the meals were provided as take-home rations (for the learner), so that learners did not miss their meals. The initiative was continued for a small share of vulnerable learners accounting for 154,000 school learners, or approximately 38 per cent of the beneficiaries of the school feeding programme.⁸³

In Eswatini the Government implemented cash-based transfers with the aim to meet the basic food needs of households. The value was set at 140 SZM per person per household for a maximum of five members per household.⁸⁴

In response to the COVID-19 pandemic, many countries in the region adopted a nuanced approach to food security and nutrition needs, recognizing these as essential requirements to ensure that the human capital and socio-economic development objectives of social protection are achieved.

SECTION ENDNOTES

71 (Gelb, A., & Mukherjee, A., 2020)

72 (Dafuleya, G., 2020)

73 (Dafuleya, G., 2020)

74 Annex A provides a more detailed overview of social protection systems and responses of countries in the region.

75 (Gentilini, U., Almenfi, M., Orton, I., & Dale, P., 2020)

76 (UNSDG, 2020)

77 (Mozambique, 2020)

78 (WFP, HelpAge International, DFID, 2019)

79 (ILO, 2020)

80 (Zambia, 2020)

81 (Lesotho, 2020)

82 (EWN, 2020)

83 (OCHA, 2020)

84 (Eswatini, 2020)





A man is seen from the side, carrying a baby in a green and patterned sling. He is wearing a grey shirt and a white face mask. The background is a brick wall with several educational posters pinned to it. One poster shows a sequence of images: a person, a bowl of food, a person eating, and a person sitting at a table. Another poster shows a person holding a baby. The number '3' is written in the top right corner.

3

**Food Security and
Nutrition at the centre
of social protection:
Strengthening responses
to COVID-19**

Comprehensive social protection, especially when government-led, represents an integrated system of inter-sectoral investments that tackle poverty and vulnerability and build resilience to shocks and stresses by strengthening inclusive social development and equitable economic growth.⁸⁵

Social protection has the capacity to support the region to achieve 14 of the 17 SDGs, through interventions can build the developmental synergies that enable recovery from the COVID-19 pandemic and build forward the comprehensive initiatives required to assure food security and nutrition and the prosperity that this foundation promises.

An appropriate social protection strategy for the Southern African countries recognises an essential and central role for food security and nutrition in building a prosperous society able to nourish all its people, leaving no one behind, and for which nutrition is the foundation of the capabilities that sustain this prosperity over time.

Social protection systems provide entry points for tackling multidimensional risks and responding to cross-sectoral challenges by addressing their structural drivers. During widespread crises such as COVID-19, social

protection investments broaden the policy framework, extending beyond singular goals towards a wide-ranging set of outcomes, and building development synergies.

There are powerful synergies between social protection and food security and nutrition, and complementarities between the right to social security and right to food. Effective social assistance programmes can tackle chronic food insecurity, while demand-driven or scalable safety net programmes can address transitory food insecurity. Ensuring food security and nutrition provides a strong base for social protection to achieve its objectives.⁸⁶

The transformation of food into nutrition offers a clear example of how investments in social protection lead to progress towards a wide range of outcomes. A society cannot develop based only food security, as this is a necessary but not sufficient driver of long-term prosperity. Nutrition, the foundation of cognitive capital and the essential capabilities upon which societies build and sustain their prosperity, requires an integrated and comprehensive strategy that strengthens development synergies. Responding to this complexity creates an opportunity for virtuous circles of development impact, but also poses risks of “malnutrition traps”. At least nine core systems

Figure 3: Core systems for realising nutritional outcomes



Source: author's own

(Figure 3)—food security, nutrition, health, education, livelihoods, social protection, care practices, water and sanitation—determine success in long-term nutritional outcomes. Social protection reinforces the other eight. In turn, achieving success in optimizing nutritional outcomes builds the foundation for the prosperity required to sustain these systems, while building the resilience that better enables societies to deflect future shocks.

Social protection promotes inclusiveness by several means, such as by boosting incomes and encouraging people to invest in food security, health and education; by creating jobs with decent working conditions; by supporting income-generating activities; and by protecting informal workers and migrants, who are often excluded from formal social protection schemes.⁸⁷ In this way, social protection offers the potential to fundamentally change the development paradigm, enable inclusive social development, and strengthen the dynamics of inclusive economic growth in the face of compounding risks and protracted crises. As an example, research in remote regions of South Africa, found that cash transfers not only stabilized the demand for food, but reduced market risk for producers and traders, and supported local agricultural production.⁸⁸ Further, there is a strong link between food security, social justice and inclusiveness. Food insecurity is often correlated with social exclusion and political marginalization. Thus, integrated, rights-based FSN interventions can address these underlying

determinants and strengthen the inclusion lens of social protection programmes.

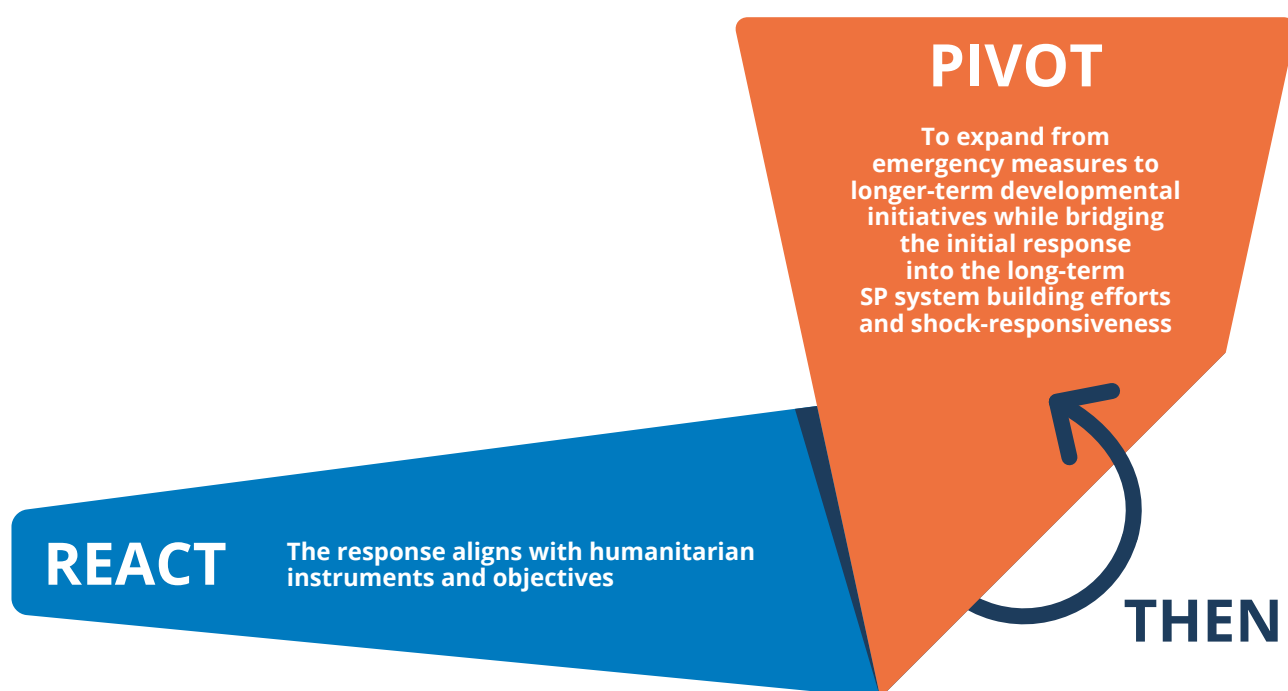
Social protection responses during COVID-19 have demonstrated their value for money and their potential to mitigate broad-based risks, to tackle underlying structural drivers of poverty, hunger and malnutrition, and to contribute to inclusive social development and equitable economic growth. As a result, governments are now positioning social protection as an integral component of the strategy for recovery and building forward.

REACT-THEN-PIVOT STRATEGY.

Reactive response

Social protection can support a two-step react-then-pivot strategy, strengthening food security and nutrition as the foundation of development and prosperity. Unprecedented crises like COVID-19 shorten the planning horizon to an instant, requiring an immediate reactive response. Like falling dominos, in March 2020 country after country—in the Southern African region as in the rest of the world—imposed varying forms of lockdowns and social distancing measures. The immediate impact on livelihoods and hunger demanded an emergency response. In most cases, the first responses were unconditional cash transfers or social assistance benefits aimed at those at risk of

Figure 4: React-Then-Pivot Strategy



Source: author's own

unemployment or those belonging to poor and vulnerable households.⁸⁹ This first step, the reactive step, aligns with humanitarian instruments and objectives.

Pivoting response

The second step builds on the first, pivoting to expand from emergency measures to longer-term development initiatives while bridging the initial response into the strengthening of the national social protection system and its responsiveness to future shocks. The primary aim of ensuring food security in the immediate term then expands to integrating complementary initiatives in the medium-to-long-term that better enable food to nourish the long-term capabilities of people and the societies in which they live and work.

Governments and their development partners cannot work in crisis mode indefinitely, even in the face of a protracted emergency. Inevitably, even as the immediate shock rages, key policy actors must look to the future, for multiple reasons: (i) the costs of a singular emergency response press against resource constraints; (ii) the uncertainty diminishes, providing a clearer picture of medium-to-long term challenges that require careful planning; and (iii) the economic costs of the crisis are compounded, requiring more development-focused approaches. The most supportive agency will prepare for the pivot to development even in anticipation of the initial shock. While the immediate priority always focuses on the reactive response, the critical determinant of success revolves around the development response, the actions that promote recovery and building forward.

The two-step react-then-pivot strategy addresses the necessary trade-offs between addressing the most pressing and emergent needs through humanitarian response, while addressing longer-term development goals, including the SDGs. Ultimately, the food and nutrition cornerstone enable comprehensive social protection to support delivering the SDGs and build the kind of resilience that is necessary to tackle the likely acceleration of global shocks.

The following sub-sections review how diverse programme interventions beyond cash-based transfers can deliver immediate humanitarian responses to crises while also enabling longer term support to recovery and development strategies.

Nutrition

One of social protection's most vital objectives is ensuring good nutrition. Improving nutritional outcomes requires a complex interaction of multisectoral interventions, where each of the sectors plays an essential role in achieving impact.

Any singular breakdown of any one of the nine core systems driving effectiveness leads to disproportionate impact, exacerbating malnutrition. The sectoral contributions are not additive, they are essentially complementary. Complexity creates a hazardous policy environment that leads to roadblocks when policy initiatives are not comprehensively coordinated and delivered. The complexity of the challenge often confounds governments, whose development strategies aim to achieve a prosperous and well-nourished society, which in turn is able to nurture the inclusive social development and equitable economic growth that sustains this prosperity.⁹⁰ Social protection builds bridges from sector to sector and makes markets work better for the most vulnerable, strengthening the linkages that contribute to food security and subsequently, to good nutrition.

There are barriers to implementing integrated and comprehensive systems approaches at the best of times. The challenges multiply during the kinds of crises that the Southern African region has experienced and which are expected to multiply in both frequency and severity in the future, including the COVID-19 pandemic. Crisis and uncertainty can paralyse the necessary actions required for effective response. Health systems can be overwhelmed, crowding out resources for necessary nutrition-related interventions. School closures prevent children from accessing school meals programmes (for many, the only nutritious meal of the day) and other protective services.

Supply chain disruptions and shocks to livelihoods undermine food security. A single breakdown will compromise the complex calculations of the synergies required to tackle malnutrition. Crises like COVID-19 threaten many of these simultaneously.⁹¹ Comprehensive social protection, with its inter-sectoral bridge-strengthening capacity, enables governments and their development partners to tackle these threats in an integrated manner, and thus protect the complex relationships driving nutritional outcomes.

The two-step **react-then-pivot** strategy provides an appropriate approach. Immediate shocks to livelihoods, particularly those that include market disruptions, require an immediate **reactive**

response to strengthen food security, including both cash transfers and in-kind delivery.⁹² As markets recover and respond, the response should pivot to the inter-sectoral strategy that tackles all the bottlenecks to nutrition security. The WFP's **Fill the Nutrient Gap** (FNG) tool recognizes the essential role of inter-sectoral cooperation, identifying collaboration roles in the health, agriculture, social protection, education, infrastructure, industry and trade sectors.⁹³ In COVID-19 responses, nutrition was at the forefront of all considerations, across development partners and emergency actors. Agencies such as UNICEF also responded with recommendations for Management of Moderate Acute Malnutrition (MAM) treatment and prevention, and inter-agency cooperation, as seen in most countries in the Southern African region, approached COVID-19 response with a keen focus on supporting malnutrition prevention, encompassing the entire immediate-to-long-term horizon required for the react-then-pivot strategy. The pandemic has strengthened the understanding that “nutrition is both an input to and an output of several SDGs,”⁹⁴ and how particularly relevant this is for the region. Now more than ever, nutrition represents one of the core objectives of any development strategy while in turn driving the long-term outcomes on which prosperity depends.

School feeding

Depending on their specific objectives, school-feeding programmes aim to increase enrolment rates, reduce dropout rates, and improve attendance in schools, while simultaneously promoting food security and providing nutritious meals for school-going children. Integrated with appropriate and effective complementary programmes reaching school-aged children, school feeding strengthens health, nutrition and education outcomes, building the cognitive capital that improves long-term labour productivity and human capacity. School-feeding programmes reinforce multisectoral action plans for nutrition that involve collaboration between ministries of education, health, agriculture, social development and welfare.

There is abundant evidence on the impact of school feeding programmes on nutrition and food security. The existing evidence base confirms the impact of nutrient- and energy-dense snacks on the growth and development of school learners.⁹⁵ Evidence also suggests that well-designed school feeding programmes can promote macronutrient and micronutrient adequacy in children's' diets,

leading to enhanced nutrition and health and decreased morbidity. A systematic review of 12 studies of school meal fortification in 11 countries showed that fortified school meals or snacks consistently reduce anaemia prevalence and improve micronutrient status.

Take-home rations have also demonstrated improvements in wasting among siblings in receiving households. Evidence also shows that well-balanced programmes can address daily protein deficiency and decrease calorie deficiency and daily iron deficiency significantly.⁹⁶ Home-grown school feeding programmes have also emerged as an essential social safety net, augmenting household income through the provision of meals for children, with vitally important impacts for the local communities that supply food grown within the vicinity for school meals. Home-grown school feeding links local production to local consumption and enables more sustainable and stable markets, boosting local agriculture and strengthening local food systems. The most significant advantage of feeding programmes and food transfers is that food retains its commodity value and hence is a guaranteed means of ensuring food security.⁹⁷

With the onset of COVID-19, 20.5 million children in the Southern African Development Community (SADC) region who rely on school-feeding programmes have been left to rely on other means of nourishment due to the closure of schools, highlighting a potential deficiency in the react / pivot strategy of the intervention.⁹⁸ In many countries, on-site school meals were converted to take-home rations, but often only to feed the child. A key challenge with this shift in approach is that the allocations were not proportionately increased to meet the needs of the household or family, rendering the overall value of the ration very limited, given the high likelihood of intra-household sharing.

Lesotho's example (see Box 1 below, “Examples of diverse programme interventions by WFP in the Southern African region”)—along with others across Africa (Niger, Rwanda) and around the world (Brazil)—show how the integration of complementary interventions including structured demand systems and school gardens into school feeding programmes can multiply impact and enhance value-for-money. Other potential linkages include deworming, micronutrient supplementation, and improved opportunities for smallholder farmer engagement.



Economic inclusion

Economic inclusion programmes are core instruments of social protection but are challenging to design and implement, given the complexity and risks of exclusion when they are employed as part of an emergency response or as instruments to tackle chronic poverty. Globally, productive safety net programmes rank among the most politically popular instruments reaching working-age people, but at the greatest cost in terms of delivering transfers to poor and vulnerable households. The World Bank's analysis identifies public works programmes as least likely to reach poor and vulnerable households compared to other social assistance instruments.⁹⁹ However, many governments focus on employment-based social assistance responses, and this political constraint highlights the importance of multiple tools for appropriate and effective responses to present and future crises. Ideally, public works build on a foundation of unconditional cash and food transfers that either effectively reach the poorest and most vulnerable or else are delivered universally.

When combined with an effective social assistance system to tackle poverty reduction, public-works programmes can address a more complex challenge. Appropriately designed and effectively implemented public employment programmes contribute (albeit marginally) to reducing poverty and short-term unemployment. More importantly, they can build bridges to more sustaining and sustainable decent work, while producing valuable assets and delivering vital services that serve the workers' communities, strengthen social cohesion, and contribute to local and national development. For example, while most cash-for-work programmes struggle to contribute to SDG 1 (to end poverty in all its forms everywhere) and SDG 8 (to promote sustained, inclusive and sustainable economic growth, full and productive employment and decent work for all), South Africa's Expanded Public Works Programme (EPWP) has the world's most expansive range of environmental (and other) assets and social services, and this enables the programme to contribute to all 17 of the SDGs.¹⁰⁰

The COVID-19 pandemic and lockdown measures complicate the provision of public works. For example, the Government of Zimbabwe with WFP support implemented two public works programmes in response to Cyclone Idai, the Zimbabwe Idai Recovery Project (ZIRP) and the Post Cyclone Idai Emergency Recovery and Resilience Project (PCIREP).¹⁰¹ In spite of the success of these programmes, the government did not adopt similar initiatives in response to COVID-19, as the lockdown presents an additional complication.¹⁰² Globally, many programmes have shed their work conditionality (and with it, their productive component) and now deliver unconditional cash transfers. In some countries, public works programmes support governments in contact tracing and other public health measures tackling the pandemic. However, given the constraints, they represent the least popular social protection instrument of pandemic response.¹⁰³

In the face of the pandemic, South Africa's EPWP offers an alternative approach to cash for work. By shifting the focus of public works towards flexible livelihoods development, supported by a comprehensive social protection system, cash for work programmes can support a transition to home-based employment that offers multiple dividends. For example, the COVID-19 pandemic has intensified the impact of social norms on economic and gender inequality. With schools and childcare centres shuttered and millions of caregivers working from home, the gender-biased social care burden has worsened gender inequality. With millions of other workers unemployed, pandemic-sensitive home-based employment options supporting childcare offer the unemployed a work-based supplement to social grants, deliver a vital service that multiplies the initial economic impact, create a public works employment path with more promising future opportunities (such as obtaining childcare certification and opening a childcare centre), and channel the power of the crisis to change harmful social norms.¹⁰⁴

Integrated rural development¹⁰⁵

Social protection provides an enabling instrument for improving the effectiveness of integrated rural development initiatives. Social protection both builds human capabilities and restructures underperforming rural economies in a complementary manner, fortifying the effectiveness of accompanying interventions. The highest return pathway maps the impact of social protection on cognitive capital and human capital, both increasing labour productivity and enabling workers in rural areas to participate more effectively in livelihoods and labour markets. This improvement in the rural productivity base facilitates the diversification of rural economies, allowing new industries to flourish and creating more gainful and rewarding jobs that require higher productivity workers. A recent econometric study finds that “social protection has a positive impact on employment outcomes through various channels such as building human resource[s], equity in the use of public resources, social inclusion, among others.”¹⁰⁶

Appropriately designed and effectively implemented economic inclusion programmes can work differently in this context—not providing short-term income support but rather serving a catalytic function in promoting livelihoods and labour market transformation.¹⁰⁷ A combination of unconditional cash transfers and productivity-based interventions can support otherwise risky investments that can increase the likelihood that poor households lift themselves out of poverty through improved livelihoods and employment. “By protecting workers against the worst consequences of risk taking while promoting higher return productive investments—such as agricultural innovation and employment search—social protection further improves the ability of workers to effectively supply themselves to the labour market.”¹⁰⁸ In addition, these interventions can improve rural assets and enable workers to move on to more remunerative activities, providing an enabling boost to local labour demand. Economic multipliers can further strengthen these effects and broaden the economic base for further diversification. The rise of integrated social protection programming either in the form of rural development models, graduation programmes or, social protection plus programmes that increasingly tackle both demand and supply-side challenges and more comprehensively respond to financial and non-financial barriers, now represent best practices in social protection programming.



Examples of diverse programmatic interventions by WFP in the Southern African region

Nutrition:

In Mozambique, WFP supports the Gender transformative nutrition-sensitive project. This unique programme is focused on the prevention of stunting by promoting women's empowerment to ensure that children eat a nutritious diet. This project provides a range of services such as training and tools for climate resilient agriculture; linkages with sexual and reproductive health services; training and technology to reduce post-harvest loss; food for assets; and social and behavioural change communication to prevent and treat malnutrition, and promote positive, gender equal relationships. Activities are integrated across many WFP Mozambique units such as Nutrition and HIV, Resilience and Climate, Cash Based Transfer and Supply Chain, Smallholder Farmer Support and Gender.

School Feeding:

In 2017 the Government of Lesotho with support from WFP piloted the implementation of a home-grown school feeding model, sourcing food from local producers and processors and directly distributing the commodities to schools. The government's National School Feeding Policy (NSFP) includes the home-grown school feeding model in accordance with the 2016 African Union Summit declaration that recognizes this as a multisectoral strategy to achieve objectives relating to education, food security and nutrition, as well as livelihoods strengthening. Similarly, the WFP's Purchase for Progress (P4P) programme supports home-grown school feeding in Malawi and other countries across Africa.

Economic inclusion:

In response to Cyclones Idai and Kenneth, the Government of Mozambique with WFP support activated both "a conditional cash-for-work programme under Mozambique's Productive Social Action Programme (PASP) and an unconditional social cash transfer for vulnerable households under Mozambique's post-emergency PASD".

Integrated Rural Development:

Many of WFP's most promising initiatives combine interventions across multiple sectors to strengthen integrated rural development, especially by promoting livelihoods and employment opportunities. With more than 60 per cent of people in sub-Saharan Africa depending on smallholder farming for their livelihoods, and this sector providing four-fifths of Africa's food, initiatives to develop smallholder agriculture offer the greatest opportunities to transform lives. WFP has developed an extensive portfolio of instruments to support smallholder farming, including long-standing stalwarts including the Food Assistance for Assets (FFA) programme, the Purchase for Progress (P4P) programme, and Home-Grown School Meals (HGSM). In addition, innovative programmes including the Rural Resilience Initiative (R4) enable "vulnerable rural households to increase their food and income security in the face of increasing climate risks through comprehensive risk management, featuring uptake of new technologies linked to access to crop insurance, savings, and credit". For instance, in Malawi, WFP supplemented the Food Assistance for Assets (FFA) programme with the Rural Resilience Initiative (R4), complemented by the Government of Malawi's Social Cash Transfer programme.

Source: WFP, Nutrition and HIV Unit, 2020 - WFP, Lesotho Zero Hunger Strategic Review, 2018 - EPRI, Mozambique Country Consultation dated September 11, 2020 - WFP, Pro-Smallholder Food Assistance: A Strategy for Boosting Smallholder Resilience and Market Access Worldwide, 2017

SECTION ENDNOTES

85 Examples of social protection interventions triggered in the region are unconditional cash assistance, loan repayment freezes, insurance, food relief for vulnerable groups (children, persons living with disabilities or HIV, inmates etc.), take-home rations for children, agricultural inputs, free health care services, etc.

86 (High Level Panel of Experts on Food Security and Nutrition, 2012)

87 (UNDP, 2013)

88 (Samson M. &, 2007)

89 (JLO World Social Protection Data Dashboards, n.d.)

90 (Samson, 2020)

91 (Samson, 2020)

92 Take-home rations for food, free health services, temporary halt on bank loan defaulters, farm inputs, income generation activities, support to small scale farmers etc.

93 (WFP Fill the Nutrient Gap, n.d.)

94 (WFP, 2016)

95 (Hassanally, S., Naicker, A., & Singh, E., 2020)

96 (WFP, 2019)

97 (Devereux, S., 2016)

98 (RVAA, 2020)

99 (World Bank, 2018)

100 (Samson M., 2019)

101 (UNOPS, 2019)

102 (Zimbabwe Country Consultation dated September 24, 2020)

103 (Gentilini, 2020)

104 (Sida, 2020)

105 Integrated rural development is an ongoing process involving rural communities in their own development to ensure sustainability, by reinforcing and utilizing rural resources most effectively, equitably and efficiently.

106 (Osabohien, R., Onanuga, O., Aderounmu, B., 2018)

107 Programmes that open up economic opportunities to rural communities with the aim of strengthening livelihoods, and that tackle both demand and supply-side challenges.

108 (Samson, M., Nyokangi, E., Yang, M., Estruch, E., 2015)



4

Systems approaches: Strengthening social protection responses and meeting Food Security and Nutrition needs



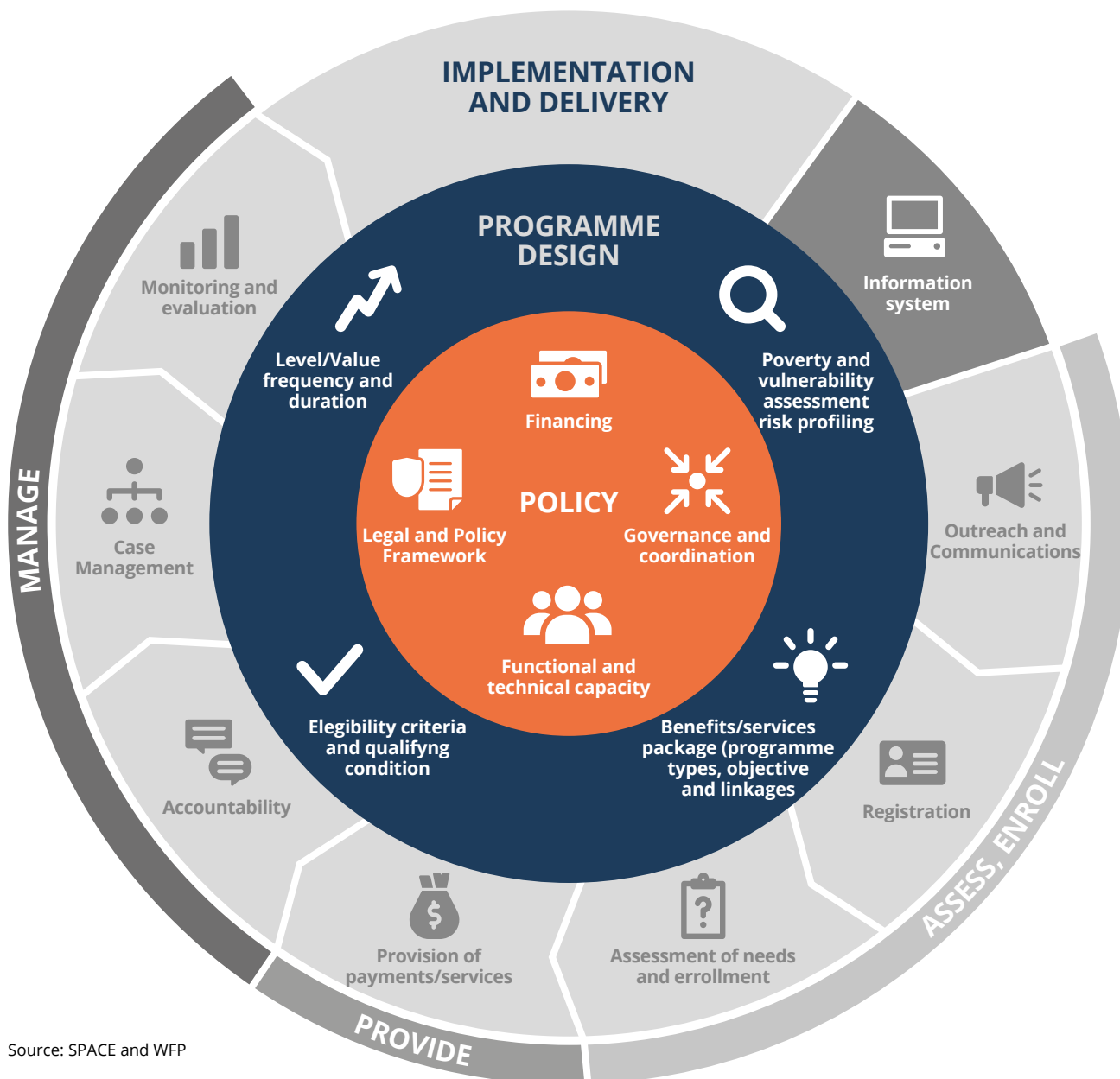
A systems approach to social protection looks beyond the delivery of individual programmes and interventions and focuses on investments in the building blocks that enhance inclusiveness and promote coherence and cost-effectiveness of social protection interventions. Institutional capacity and coordination, existence of management information systems, social registries, and development delivery mechanisms enable improvements to make social protection systems more resilient during times of crisis. Figure 5 below illustrates a systems framework consisting of three levels: policy, programme and implementation.¹⁰⁹

At the **policy level**, found at the centre of the systems framework, government leadership—both political and bureaucratic—must react immediately in the face

of an emergency to authorize the necessary actions to initiate appropriate and timely responses.

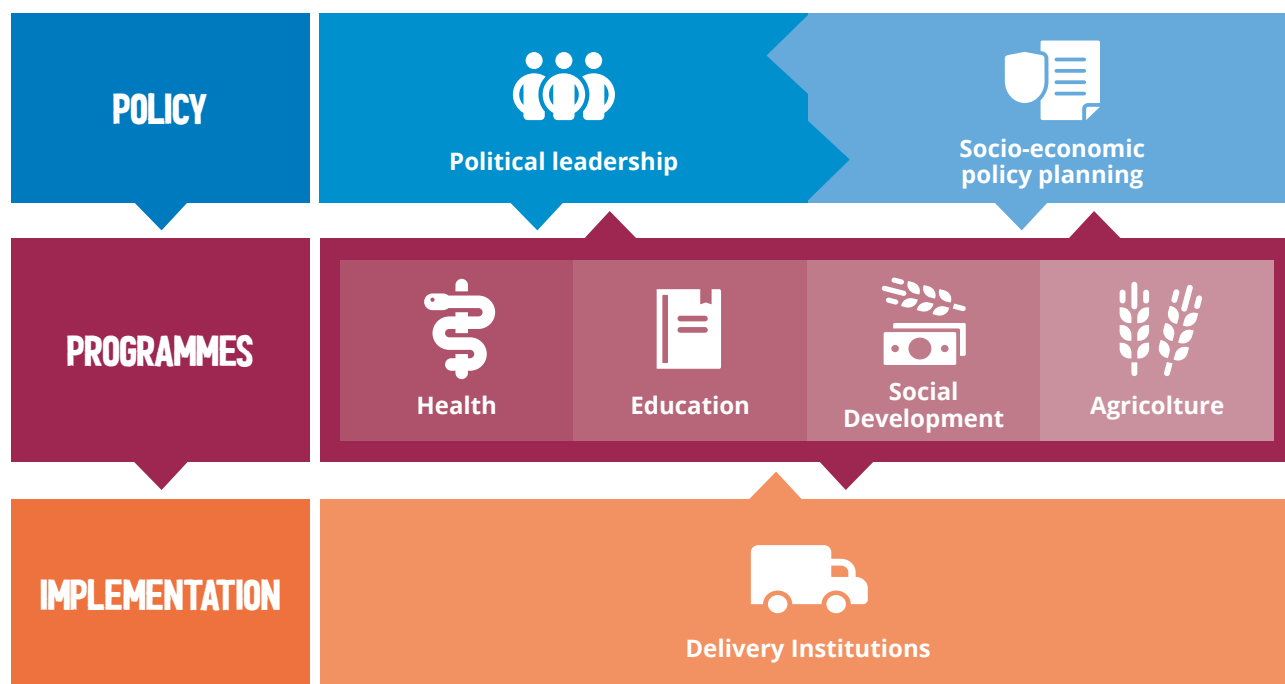
Recognizing the enormous cost of inaction, particularly in the face of massive food insecurity shocks, an effective response requires **financing** support that may break with conventional fiscal norms. **Legal and policy frameworks** should enable leadership to act responsibly and responsively. This requires **good governance and coordination** between political and policy planning leadership. The political leadership opens the necessary policy space for action, the planning leadership executes the required responses. Effective policy governance builds the necessary **functional and technical capacities** required to design, implement and finance integrated approaches that bridge

Figure 5: Social Protection (solar) system.



Source: SPACE and WFP

Figure 6. A multi-level systems approach to operationalising the “react-then-pivot” strategy



Source: EPRI

the humanitarian-development nexus and build the foundations of food security, nutrition and prosperity. In addition, effective policy governance cultivates functional capacities that promote human resource development, strengthen peer-learning and collaborative approaches, reinforce inter-sectoral partnerships, and facilitate dynamic change management that enables a shock-responsive and adaptive social protection system. Serious crisis shortens planning horizons, sometimes to only an instant, but also creates opportunities. Responsive leadership harnesses the turbulent winds of crisis to propel the sails of action.¹¹⁰

At the programme level—the middle ring of the diagram—coordination of existing social protection initiatives enables effective interventions to deliver immediate humanitarian responses that leverage existing systems, while strengthening the foundation for delivery of social protection in the future. This may involve reflexive redesign, such as suspending conditions on conditional cash transfer programmes, increasing benefit values for existing beneficiaries, delivering direct support benefits to participants in cash-for-work schemes suspended due to public health or other measures, and other steps that can be immediately implemented within ongoing programmes. Crisis multiplies uncertainty and exacerbates the complex challenges that food security and nutrition represent. Improved coordination across programmes becomes more important than ever.

Effective programming, as illustrated in the middle ring of the diagram, starts with an evidence-based situation analysis and risk **assessment**, incorporates nutrition objectives, and reaches poor, food-insecure and nutritionally vulnerable households. Appropriate design ensures packages of **benefits and services** with linkages to nutritionally relevant complementary programmes, either through integration or co-location. Nutrition-sensitive programming **targets** food-insecure and nutritionally vulnerable populations, and ensures **adequate benefit values**—either in terms of cash or high nutritional quality food—and a **frequency and duration** of benefits that provide adequate support. Comprehensive and integrated programming aligns with national nutrition action plans and strategies, and builds on appropriate delivery platforms while promoting knowledge of nutrition. It further applies a socio-normative and protection lens, recognizing and addressing various forms of socio-economic, geographical and often intersecting inequalities.¹¹¹

The outer circle of the diagram illustrates the essential role of the integrated system of institutions that **implement and deliver** social protection, including enrolling participants, providing benefits, and managing the programmes. A social registry provides the foundation for the **management information systems** that drive **outreach and communications, registration, needs assessments, and enrolment** mechanisms. These systems also provide the foundation for

the **provision of social protection benefits**, for example through digital delivery, including financially inclusive payment mechanisms and other development delivery modalities. Systems also support programme **accountability case management, monitoring and evaluation**.

These systems also enable communications tools to reach affected households with development information. Humanitarian responses benefit from sentinel monitoring, advance warning alerts, vulnerability assessments and market information systems, and provide a foundation for future delivery of social protection. The COVID-19 pandemic has illustrated the dramatic benefits of linking every household to digital platforms, not only to ensure more effective and inclusive delivery systems but also to strengthen development impacts in terms of e-market access, tele-health, high-quality emergency remote learning, knowledge-intensive agricultural innovation, and more productive cognitive-capital-driven livelihoods.¹¹²

In many countries, the inability to deploy an integrated social registry or flexible social protection delivery system has hampered a timely and effective response to the COVID-19 pandemic. As a result, many governments and their development partners are investing in the development of national registration mechanisms, digital payment systems, and grievance and case-management processes that are responsive to social-distancing measures, flexibly integrated with existing systems, and forward-looking to enable long-term use. **Governments recognize, now more than ever, how investments in social protection systems offer the highest long-term value-for-money returns, while delivering immediate results in the face of crisis.**

COVID-19 presents an immediate opportunity to expand coverage rapidly to traditionally overlooked population groups. COVID-19 has highlighted the vulnerabilities of traditionally under-prioritized or invisible groups and motivated governments, development partners and donors to address the challenges of informality and the plight of the urban poor urgently. The inclusion of urban populations and informal workers is a result of a fundamental shift in thinking.

During emergencies of this magnitude, governments seek to meet the most essential needs first. That approach often leads governments to consider hunger and food insecurity as identifiers of at-risk populations, which include population groups that may otherwise be excluded. However, when

the approach is “business-as-usual”, with poverty reduction at the heart of social protection, broad-based risks such as those represented by food insecurity or malnutrition are often overlooked.¹¹³ For instance, in Zambia, in response to the COVID-19 crisis, reaching the urban population to ensure food security and nutrition was a key priority.

Countries have adopted different approaches, depending on the robustness and maturity of their existing social protection infrastructure. Where well-developed systems exist, governments have chosen to utilize and adapt them to meet essential needs, including for food. When systems are weak or absent, governments have identified ways to rapidly expand with the help of partners.

COVID-19 also presents an exceptional opportunity to invest in integrated beneficiary management systems or social registries to improve the timeliness and efficiency of future emergency responses. For instance, in certain countries across the region, the lack of a comprehensive beneficiary database and weak coordination between the disaster-risk management and social protection sectors prevented timely identification of beneficiaries for emergency response and increased the cost of targeting and identification. At the same time, the social protection system covers roughly 20-22 per cent of the poor population, most of whom live in rural areas. In urban areas, the coverage of social protection programmes is about 10-12 per cent.

COVID-19 has accelerated efforts to increase the **coverage** of urban and peri-urban areas, which represents a vitally important opportunity to build a more comprehensive social registry that recognizes and facilitates the use of social protection responses to tackle broad-based risks. In Zimbabwe, hyperinflation has led to multiple, vertical expansions for the social protection programmes, which improves adequacy, but coverage remains low. Since most of the programmes are donor-funded and fragmented across multiple actors, the lack of a social registry has led to substantial duplication in the provision of social protection.¹¹⁵ In Malawi, WFP is currently supporting the rapid development of a social registry, along with other partners. Social registries provide powerful tools for improving comprehensive social protection, building inter-sectoral synergies and improving the quality of delivery.

COVID-19 and the resulting mitigation measures have prioritized the digitization of social protection benefits, thereby presenting

Table 3: COVID-19 response measures to include urban population and informal workers¹¹⁴

Country	COVID-19 response measures to include urban population and informal workers
Angola	The Angola - Strengthening the National Social Protection System (Cash Transfer) Project is delivering temporary income support to poor and vulnerable families including those affected by the economic crisis (1.6 million families) through the “Kwenda” programme
DRC	The government is planning cash transfers in Kinshasa and other affected provinces to reach 2 million beneficiaries
Eswatini	The government’s response plan includes measures for the protection of working individuals who are at risk of losing their income through a Relief Fund, and setting aside seed money for the establishment of the country’s first Unemployment Insurance fund
Madagascar	The government has planned a range of interventions including the provision of unconditional cash transfers to poor and vulnerable households in urban and peri-urban districts and in-kind transfers of basic essentials for daily wage workers
Malawi	The government is proposing top-ups to Social Cash Transfer Programme (SCTP) beneficiaries and increasing its coverage in both rural areas and urban areas
Mozambique	The Post Emergency Direct Cash Transfers Program (PASD-PE) is being expanded horizontally to cover urban areas
Namibia	The government is rolling out cash support for those who have lost their jobs due to the pandemic and its fallout in the informal or formal sector
Zambia	The government is extending the coverage of the social cash transfer scheme to cover vulnerable communities in urban areas
Zimbabwe	WFP and partners are supporting the government with the implementation of an urban safety net programme targeting the most food insecure households affected by the COVID-19 pandemic.

opportunities for enhancing financial inclusion and realizing efficiency gains. “Digital financial inclusion was a development priority before the COVID-19 emergency; now, it is indispensable for both short-term relief and as a central element of broad-based, sustainable recovery efforts.”¹¹⁶

Even so, ensuring that the current efforts aimed at expanding the provision of social protection reach those that need it requires a solid understanding of the context and necessary adjustments to delivery mechanisms. For instance, in Mozambique, 46 per cent of adults do not have access to formal financial services; women and rural populations are also less likely to have access to these services.¹¹⁷ Similarly, in Zambia, only 40 per cent, in Madagascar, only 59 per cent,¹¹⁸ and in Namibia, 78 per cent of the adult population are categorized as financially included.¹¹⁹

Digital payments are now at the forefront of flexible delivery systems. For instance, in Zambia, digital payments in the form of mobile money were utilized to provide quick and secure financial support to households in need. The response to COVID-19 has also encouraged the government to digitize financial services.¹²⁰ Similarly, in Namibia, flexible digital implementation was used in response to COVID-19

to reduce the risk of exclusion, especially of those active in the informal economy.¹²¹ In Namibia, sim registration is not compulsory to receive social protection pay-outs, and up to ten emergency relief applications have been permitted through a single phone, recognizing that many members within a family or community may not have access to a mobile phone and may need to share one.¹²²

The necessary digitization of cash payments in the face of COVID-19 provides an excellent opportunity to drive investments that make financial inclusion feasible. Investments in coverage of banking facilities and related infrastructure and investments in financial literacy and roll-out of development delivery systems are both feasible and necessary. Capitalizing on this opportunity now can enable long-term improvements in financial inclusion of traditionally excluded groups.

COVID-19 has presented unprecedented levels of challenges and a host of opportunities for encouraging, enabling, and realizing intersectoral partnerships and solidarity. In response to COVID-19, humanitarian and development actors have demonstrated the power of joint advocacy and programming. In DRC, a resilience-building, four-

year joint programme by UNICEF, FAO, and WFP has secured considerable funding from a wide range of donors, and aims to bring relief to over 180,000 people living in rural areas (mainly smallholder farmers). The beneficiaries will receive assistance to strengthen their agricultural production and post-harvest management, diversify their income-generating activities, and improve nutrition and basic social services.¹²³ The urban safety net programme is also being implemented in the country by WFP, UNICEF and the Government.

In Zambia, WFP, in partnership with other UN agencies and the government, successfully implemented a comprehensive social protection response in the form of an emergency cash transfer (ECT) for food security led by WFP, and an ECT for social protection led by UNICEF. Before the WFP-supported ECT was rolled out, WFP, the Ministry of Community Development and Social Services (MCDSS), ILO, UNICEF, and the Zambia Red Cross harmonized the targeting criteria, coverage and transfer value to enhance synergy and complementarity between the two forms of ECT for COVID-19.¹²⁴

Similarly, in Mozambique in 2019, the UN system came together to streamline responses to cyclone Idai, with joint responses and advocacy to government and donors alike.¹²⁵ This positive collaboration paved the way for initiation of rapid dialogue at the onset of COVID-19, and for investments in broad-based social protection. UNICEF and WFP are piloting an urban safety net programme that will inform government responses in the country.

Innovation has been at the heart of social protection responses to COVID-19. Despite a lack of institutionalized mechanisms, governments and their partners have used design innovation, technology, and rapid optimization of existing delivery systems to make existing programmes work.

In Lesotho, the government converted school meals to take-home rations to ensure that children have continued access to their meals. In Mozambique, the public works programmes were adapted to restrictions on movement and to social distancing measures. In South Africa, the Expanded Public Works Programme (EPWP) plays a vital role in the government's comprehensive COVID-19 response and mitigation strategy. The government recognized the potential of EPWP's social sector as the best response mechanism to support the Department of Health's service delivery, thereby creating and sustaining jobs and livelihoods for many.

Nonetheless, financing bottlenecks have affected the speed and adequacy of responses across the region. The protracted nature of humanitarian crises over the past decade, compounded by inadequate development interventions, have vastly increased the volume, cost and length of the donor assistance required, and COVID-19 has exacerbated these needs. Amid an economic slowdown in the region, the consequences for Southern African countries have been far more challenging. A rapid rise in inter-agency humanitarian appeals—by nearly 400 per cent over the past ten years and extending for seven years on average—has intensified the urgency of integrating humanitarian and development efforts.¹²⁶ The “New Way of Working”¹²⁷ involves cooperating more closely and consistently to collectively reduce need, risk and vulnerability through comprehensive efforts that progressively work towards achievement of SDG targets.¹²⁸ In countries such as DRC, Zimbabwe and Malawi, where social protection systems are largely donor funded, the government's ability to respond immediately has been somewhat limited. Similarly, where donor funding is not easily accessible, and government finances are stretched, governments are not always able to fulfil their commitments towards delivering emergency responses, as seen in the variation in timely delivery of urban response interventions across countries in the region.

Recommendations

COVID-19 responses are accompanied by challenges across the policy cycle, but governments, donors and development partners have collectively demonstrated the power of solidarity and coordination for effective and timely responses where possible. During this time, development partners and donors have made lasting impact by supporting systems investments that enhance national capacity to deliver development responses in ways that bridge the gap between humanitarian and development needs. **While investing in systems is generally expensive, these investments offer higher value and returns over time, making them worthwhile during these periods.** Experiences from the region identify four pillars of investment towards building more comprehensive and resilient social protection systems:

1. Risk-informed strategies that complement existing government interventions and strengthen them to address broad-based risks that cause and amplify structural vulnerabilities. The inclusion of traditionally excluded but vulnerable groups, such as the urban poor, will enhance the resilience of individuals and families to cope with shocks, safeguard food security and meet nutrition needs, and build social protection systems that function optimally and as catalysts for long-term development, with and without crisis.
2. Evidence-informed advocacy that builds upon the vast evidence base generated during COVID-19 and in the recent years to inform systems investments in social protection, prioritizing food security and nutrition, and using unavoidable humanitarian crises as opportunities for accelerating these essential investments.
3. Investments in integrated management information systems, technology and development delivery mechanisms¹²⁹ are key areas for immediate investments towards bridging the gap between humanitarian and development responses in the region. This should include investment in stronger national systems and capacity to deliver risk-resilience through social protection that not only reaches the conventional poor, but also recognizes and responds to the multiple food-security and nutrition risks that make individuals and families susceptible to shocks.
4. Innovative financing strategies for social protection need to be guided by the principles of resilience building and food security and nutrition sensitivity. The corresponding financing framework must adopt a multisectoral and longer-term approach as well. Some

well-documented innovations in financing to bridge the humanitarian-development nexus include:

- A. **Adopting a longer-term, coordinated planning mechanism as a useful way to secure funding for crises in the mid-term.** For example, in Mali, the government adopted a joint, medium-term, strategic planning process with donors for food security programming.¹³⁰ The process aligned donor and government priorities, ensuring the sustainability of funds in the medium term.
- B. **Adopting co-financing approaches in development planning to address the structural drivers of risk** that make individuals and families vulnerable in the first place. A study in Ethiopia measuring inter-sectoral synergies and assessing their role in achieving the SDGs shows that comprehensive and integrated investments across key social sectors have a greater likelihood of successfully achieving the SDGs.¹³¹ It was found that districts in Ethiopia that invest substantially in both education and agriculture (“high co-financers”) are more efficient and better able to reduce wasting in children with health expenditures, compared to those districts that do not co-invest in these complementary policy sectors (“low co-financers”). Lowering malnutrition, for instance, automatically makes individuals and families more resilient to adverse outcomes from additional shocks.
- C. **Coordination among humanitarian and development actors** that enables rapid reallocation of resources builds synergies to achieve social protection across the humanitarian-development nexus, and can facilitate investments in development initiatives alongside emergency interventions. “The Zimbabwe Resilience Building Fund Crisis Modifier”, led by DFID and UNDP, was one such innovative financing mechanism. It formed part of the Zimbabwe Resilience Building Fund (ZRBF), a five-year, multi-donor fund providing humanitarian assistance. The crisis modifier could be deployed in the event of an emerging crisis to protect development gains and prevent communities from experiencing adverse outcomes.

Finally, COVID-19 has exposed the many limitations of social protection systems in the region and their prioritization of FSN needs. Once again, shock-responsive and emergency responses have rapidly filled those gaps in the provision of comprehensive social protection. At the same time, the crisis has highlighted social protection as a vitally important instrument for building resilience, safeguarding food security and nutrition needs, and soliciting the interest of policymakers across sectors in integrating social protection as part of the national recovery strategy to build forward. Sustaining this momentum is essential, to institutionalize the inclusion of traditionally excluded but vulnerable groups in mainstream social protection systems.

Enabling more inclusive social protection systems by channelling the successes from COVID-19 responses—intersectoral and inter-agency collaboration, systems approach to programming, and investments in development delivery systems, including the use of technology and digitization—will reduce the need for ad-hoc emergency

programming. Institutionalizing support to address broad-based risks, in turn, delivers better value for money by empowering individuals and families to overcome the risks that make them vulnerable in the first place. In emergency responses, food security and nutrition can emerge as a unifying concept that cuts across sectoral and organizational agendas and priorities to achieve consensus on complex issues, such as the value of transfers.

The **react-then-pivot strategy** can support the development of comprehensive social protection systems, built on the foundation of food security and nutrition, that ensure the development and sustenance of prosperous societies, while keeping sight of the SDGs to ensure that long-term priorities are not overlooked. This paper has compiled evidence from across the Southern Africa region and the collective responses to the socio-economic impacts of the COVID-19 pandemic, to highlight the decisive role played by food security and nutrition-sensitive social protection in bridging the divide between the humanitarian and development sectors.

SECTION ENDNOTES

109 (Samson, 2016)

110 (Samson, 2021a)

111 This paragraph draws from WFP's "Seven key opportunities for nutrition-sensitive programming" (WFP 2018), which provides comprehensive guidance on designing effective interventions to promote positive nutrition outcomes.

112 (Samson, 2021b)

113 (Dafuleya, G., 2020)

114 (Gentilini, U., Almenfi, M., Orton, I., & Dale, P., 2020)

115 (Zimbabwe Country Consultation dated July 27, 2020)

116 (Miller, M., Klapper, L., Teima, G., & Gamseri, M., 2020)

117 (Saute, R., Murrungarra, E. et al., 2020)

118 (Finscope, 2016)

119 (Namibia Statistics Agency, 2017). Financially included are those who have / use financial products and / or services, whether these are formal or informal.

120 (Zambia Country Consultation dated September 28, 2020)

121 (Seekings, J., & Gronbach, L., 2020)

122 (Gelb, A., & Mukherjee, A., 2020)

123 (WFP, 2020); (DRC Country Consultation dated 17th September, 2020)

124 (WFP, 2020)

125 (Mozambique Country Consultation dated September 11, 2020)

126 (OCHA, n.d.)

127 (UN, n.d.). Outlined in the Secretary-General's Report for the World Humanitarian Summit (WHS) and the Agenda for Humanity.

128 (UN, n.d.); "This notion of 'collective outcomes' has been placed at the center of the commitment to the New Way of Working, summarized in the Commitment to Action signed by the Secretary-General and nine UN Principals at the WHS, and endorsed by the World Bank and IOM".

129 Mechanisms to deliver coordinated social protection programmes and services that seek to improve other development outcomes simultaneously, such as financial inclusion, integration into formal markets, etc.

130 (O'Brien, 2018)

131 (UNICEF, 2004)



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Annexes

AN OVERVIEW OF COUNTRY RESPONSES IN THE REGION

Most countries in the region proactively responded with relief measures at the onset of the crisis, to curb the effects of the pandemic and the associated lockdown.

Angola

Angola's current social protection system is based on three pillars: basic social protection, compulsory social protection, and complementary social protection.¹³² Though the country has 28 social safety net programmes, they receive a low share of expenditure and are fragmented.¹³³ In response to the pandemic, a planned top-up and extra payment were introduced in the existing Child Grant Programme.¹³⁴ The first phase of the cash transfer program "Kwenda" was initiated in May 2020 to provide temporary income support to poor and vulnerable families affected by the crisis.¹³⁵ The government is also planning an emergency cash transfer programme for children under the age of five in Luanda province. Additionally, basic food basket distribution is planned to reach vulnerable households, with an emphasis on children.¹³⁶ The government is also providing utility waivers for families who have difficulties in paying their bills.

Democratic Republic of the Congo

DRC currently does not have a government-led social assistance programme at scale, although a strategy has been developed.¹³⁷ The country spends 2.3 per cent of GDP on social protection, including healthcare. The COVID-19 pandemic has generated a lot of momentum around investment in a shock-responsive, social protection strategy in the country, and the immediate focus has been on delivering cash transfers to urban areas.¹³⁸ The joint government, UNICEF, FAO and WFP programme is based on implementation of a resilience-building programme in rural areas to improve farming, and to offer livelihoods diversification opportunities and other support. The government provided free supply of electricity and water waivers for households.

Eswatini

Eswatini has a range of regular social assistance programmes including the old age grant (the most extensive programme), disability grant, school-feeding, smallholder farmer subsidies, and unemployment benefit.¹³⁹ The government's response plan includes measures for the protection of working individuals who are at risk of losing their income through a Relief Fund,¹⁴⁰ and set aside seed money for the establishment of the country's first Unemployment Insurance fund.¹⁴¹ The government has also planned cash-based transfers to meet food needs, which is estimated to reach between 190,000 and 300,000 people, and food assistance for another 190,000 suffering from chronic illnesses and either at risk of malnutrition or currently malnourished. The government also continued the school feeding programme once schools reopened.¹⁴² The government has paid special attention to social care services during the crisis, establishing residential care homes for older persons. Electricity price increases have been suspended for two months.

Lesotho

In Lesotho, the government spends 7.2 per cent of GDP on social protection excluding healthcare; this is among the highest in the region.¹⁴³ Due to the droughts in 2018, a number of emergency responses were already underway, as was the identification of vulnerable groups who are underrepresented in the system, such as older persons, people living with disabilities, and informal sector employees. In response to the pandemic, the government extended some of these responses. One such measure is the vertical and horizontal expansion of the child grant support, with support from the World Bank.¹⁴⁴ Additionally, the school feeding programme has been converted to take-home rations for learners.¹⁴⁵ The government also covered the expenses of factory workers.

Madagascar

In Madagascar, the shock-responsive National Social Protection Policy was adopted in 2015. The Policy revolves around four pillars: (i) increasing income of the poorest; (ii) improving access to basic social services; (iii) protection and promotion of specific groups at risk; and (iv) progressive consolidation of the contributory scheme.¹⁴⁶ Social protection and healthcare account for 3.9 per cent of GDP.¹⁴⁷ In response to COVID-19 the government planned a range of interventions, including the provision of Tosika Fameno (“complementary support”), an unconditional cash transfers to poor and vulnerable households in urban and peri-urban districts; in-kind transfers of basic essentials for daily wage workers, students and old-age individuals; the organization of subsidized markets for essential food and staples; and deferral of payment of liabilities for all companies.¹⁴⁸

Malawi

In Malawi, the social protection system is very comprehensive, with resilience-building programmes planned and piloted.¹⁴⁹ In 2018, the government adopted the Malawi National Social Support Programme (MNSSP) II based on three core pillars: (i) the consumption needs of poor households through cash or in-kind transfers; (ii) resilience building through inter-programme linkages; and (iii) shock-responsive social protection systems.¹⁵⁰ In response to COVID-19, the government of Malawi accelerated payments for the social cash transfer programme, provided top-ups, and expanded beneficiaries to increase coverage in urban as well as rural areas.¹⁵¹

Mozambique

In Mozambique, the activation of two social protection programmes—a conditional cash-for-work programme (PASP) and an unconditional social cash transfer for vulnerable households (PASD-PE)—have previously been utilized to deal with prior shocks.¹⁵² In response to cyclone Idai, the value of the cash transfer for PASD-PE was set at 75 per cent of the food basket.¹⁵³ In response to COVID-19, as many individuals affected were poor and vulnerable workers in the informal sector, the cash transfer value was set at approximately one-third the wage of an informal sector employee.¹⁵⁴ Consultations revealed that the benefit value provided now is lower than the amounts provided in response to previous shocks in Mozambique, considering the need to reach a broader population base.¹⁵⁵ While the benefit values are lower, one of the biggest wins during COVID-19 has been the interest in social protection from high levels of government, proving to be a catalyst for progress towards multiple systems-building components for the social protection sector. For instance, the Ministry of Finance has been actively engaged with the development of each social protection response for COVID-19.¹⁵⁶

Namibia

Namibia has one of the most comprehensive social protection programmes in the region and has continued to increase investment in social protection over the years.¹⁵⁷ Currently, 6.8 per cent of GDP is dedicated to social protection expenditure, including healthcare.¹⁵⁸ In Namibia, innovative digital solutions have been implemented in response to the pandemic. An example is the establishment of a one-time, emergency income grant to support workers who have lost their jobs due to the pandemic, transferred by the government using the banking sector’s ATM infrastructure.¹⁵⁹ The government is also providing a tax-back loan scheme for tax-registered and tax-paying employees and self-employed individuals who have lost income due to the pandemic. Finally, the government is subsidizing water services.

Zambia

The Zambian government adopted the National Social Protection Policy in 2014 to consolidate existing programmes and enhance the focus on pro-poor development.¹⁶⁰ Since 2019, the government has been financing social protection in the country, although progress has been limited due to financing challenges. In response to the pandemic, with support from the UN system, including ILO, UNDP, UNICEF and WFP through the UN Joint Programme on Social Protection, the government is extending coverage of the Social Cash Transfer (SCT) programme to help vulnerable communities,¹⁶¹ including urban dwellers.¹⁶² The UN system agencies are also providing a supplementary, short-term Emergency Cash Transfer programme, as well as food hampers for vulnerable households affected by COVID-19 to cover 249,200 households who are already SCT beneficiaries or part of the expanded database.¹⁶³ The government has also waived charges for electronic transfers. The pandemic has regenerated previous momentum for social protection in the country and for developing a rapid, shock-responsive mechanism with emphasis on building long-term resilience.¹⁶⁴

Zimbabwe

Zimbabwe's Social Protection Framework is based on five pillars: (i) social assistance; (ii) social insurance; (iii) labour market interventions; (iv) livelihoods support; and (v) social support and care.¹⁶⁵ However, given protracted economic and social instability, the rapid onslaught of disasters and recurrent shocks, investments in the planned resilience-building measures have not materialized.¹⁶⁶ In response to the pandemic, the government set ZWL\$200 million (approximately \$550,000) per month for emergency cash transfers to reach 1 million vulnerable households affected by the pandemic.¹⁶⁷ However, the government's ability to deliver emergency response in the country remains weak.¹⁶⁸ When social protection delivery systems and infrastructure are weak, emergency responses tend to be more ad-hoc, have higher exclusion rates, and face teething issues related to any new social transfer programme. For instance, the benefit value of the emergency response is relatively small, approximately covering the cost of a 10 kg bag of a mealie meal in the country.¹⁶⁹ Similarly, the eligibility criteria for the transfer uses an algorithm developed by the Treasury, but the algorithm is not sensitive to the needs of all vulnerable individuals,¹⁷⁰ another challenge that most targeting approaches experience even during the best of times.

SECTION ENDNOTES

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Abbreviations

AIDS	Acquired Immunodeficiency Syndrome	NSFP	National School Feeding Policy
AUC	African Union Commission	OCHA	Office for the Coordination of Humanitarian Affairs
CfA	Cash-for-Assets	OECD	Organisation for Economic Co-operation and Development
DRC	Democratic Republic of Congo	P4P	Purchase for Progress
ECA	European Commission on Agriculture	PASD-PE	Post Emergency Direct Cash Transfers Program
ECT	Emergency Cash Transfer	PASP	Productive Social Action Programme
ENSO	El Niño–Southern Oscillation	PCIREP	Post Cyclone Idai Emergency Recovery and Resilience Project
EPWP	Expanded Public Works Programme	R4	Rural Resilience Initiative
FAO	Food and Agricultural Organisation	RVAA	Regional Vulnerability Assessment Analysis
FEWS	Famine Early Warning System	SADC	Southern African Development Community
FFA	Food Assistance for Assets	SCT	Social Cash Transfer
FNG	Fill the Nutrient Gap	SCTP	Social Cash Transfer Programme
FSIN	Food Security Information Network	SDGs	Sustainable Development Goals
FSN	Food Security and Nutrition	SP	Social Protection
GDP	Gross Domestic Product	SRI	Social Risk Index
HDI	Human Development Index	SRSP	Shock Responsive Social Protection
HGSM	Home-Grown School Meals	UN	United Nations
HIV	Human Immunodeficiency Virus	UNCTAD	United Nations Conference on Trade and Development
IFAD	International Fund for Agricultural Development	UNECA	United Nations Economic Commission for Africa
ILO	International Labour Organisation	UNICEF	United Nations Children’s Fund
INAS	National Institute of Social Action	USAID	United States Agency for International Development
IOM	International Organization for Migration	WASH	Water, Sanitation, and Hygiene
IPC	Integrated Food Security Phase Classification	WHO	World Health Organisation
MAM	Management of Moderate Acute Malnutrition	ZIRP	Zimbabwe Idai Recovery Project
MCDSS	Ministry of Community Development and Social Services	ZRBF	Zimbabwe Resilience Building Fund
MNSSP II	Malawi National Social Support Programme	ZWL	Zimbabwean dollar
NCD-RisC	Non-Communicable Disease Risk Factor Collaboration		
NISSA	National Information System for Social Assistance		

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