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Safety nets, health crises and natural disasters: Lessons from Sierra Leone

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ABSTRACT: Since the early 2000s, there has been growing interest in using cash transfers as a key modality for response to and recovery from shocks. As more and more countries put in place national safety nets, the value of scaling up existing government-led programs and systems in response to disasters has gained prominence. This paper examines the case of Sierra Leone, a low-income country with an emerging social protection system that has been used to respond to natural disasters and health crisis. In May 2015, just as the government was rolling out its national safety net program (*Ep Fet Po*), Sierra Leone was hit by the twin shocks of an Ebola Virus Disease outbreak and a sharp drop in the international price of iron ore. As a response, the government scaled up the provision of cash transfers to about 60,000 extremely poor households. In August 2017, Freetown experienced severe flooding and a massive landslide, affecting nearly 6,000 people. A multi-purpose, cash transfer-based intervention was launched in response. These responses used the institutional arrangements and delivery systems of the *Et Fet Po* to differing degrees, highlighting how nascent social protection systems can support the delivery of emergency cash transfers. This case study suggests how shock-responsive social protection systems can be the basis of a government-led response to a health crisis and a rapid-onset disaster. It also points to how linking pre-arranged finance to safety nets can help with quick delivery of cash to vulnerable populations post-disasters. This experience complements existing evidence and experience in other parts of Africa, where social protection systems have been used for responding to drought, a slow-onset natural disaster. It also informed the ongoing response to the COVID-19 pandemic in Sierra Leone, which will provide further lessons for shock-responsive social protection globally.

Key words: Emergency cash transfers, natural disasters, health crisis, Ebola virus Disease, extremely poor households, shock-responsive social protection, adaptive social protection

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The study was prepared based on a literature review and interviews, focus group discussions and meetings conducted in Sierra Leone between April 22 and May 3, 2019, and was recently updated to reflect on the ongoing response to COVID-19 in Sierra Leone. Interviews and discussions were conducted with Government of Sierra Leone officials, local authorities, victims of previous disasters and development partner agencies, including non-governmental organizations (NGO) at the national, provincial and district level. Discussions were also held with frontline implementers, beneficiaries and community representatives in three districts: Bombali, Kailahun and Western Urban (Freetown). In November 2019, the report was presented and validated at a workshop in Freetown with the participation of major stakeholders, including NGOs and government officials. The report reflects these discussions, synthesizes lessons learned and provides conclusions and next steps.

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Acronyms

ACC	Anti-Corruption Commission
ACDI/VOCA	Agricultural Cooperative Development International and Volunteers in Overseas Cooperative Assistance.
APC	All People's Congress
CRS	Catholic Relief Services
CT	Cash Transfer
DFID	Department for International Development (United Kingdom)
DDMC	District Disaster Management Committee
ETU	Ebola Treatment Unit
EU	European Union
EVD	Ebola Virus Disease
FAO	Food and Agriculture Organization
FFA	Food Assistance for Assets
GRM	Grievance Redress Mechanism
IDSR	Integrated Disease Surveillance and Response
KfW/GIZ	German Development Bank/Corporation for International Cooperation GmbH
Kg	Kilogram
LCBI	Light Community-Based Identification
MAFFS	Ministry of Agriculture, Forestry and Food Security
MDA	Ministry, Department and/or Agency
MIRA	Multi-cluster/sector Initial Rapid Assessment
MIS	Management Information System
MSWGCA	Ministry of Social Welfare, Gender and Children's Affairs
NaCSA	National Commission for Social Action
NaDMA	National Disaster Management Agency
NGO	Non-Governmental Organization
NSPS	National Social Protection Secretariat
NSSG	National Strategic Situation Group
ONS	Office of National Security
PMT	Proxy Means Test
PSP	Payment Service Provider
RE-SSN	Rapid EVD Social Safety Net
SCI	Save the Children International
SLPP	Sierra Leone People's Party
SNN	Social Safety Net
SP	Social Protection
SPRINT	Social Protection Registry for Integrated National Targeting
UNICEF	United Nations International Children's Fund
USAID	United States Agency for International Development
WFP	World Food Programme
WHO	World Health Organization
WVI	World Vision International

1 Introduction

Since the early 2000s, interest has been increasing in the use of cash transfers as a key program modality for response to and recovery from shocks. As more and more countries put in place long-term safety net programs, the value of scaling up existing programs and systems in response to disasters has gained prominence.

Sierra Leone is among these countries. Following a decade long civil war and with high rates of poverty, the country established the National Commission for Social Action (NaCSA) in 2011 and launched a social safety net (*Ep Fet Po*¹) in 2014 as part of its efforts to reduce poverty. NaCSA implements the *Ep Fet Po* program.² Initially, it aimed to cover 12,000 households in four of Sierra Leone's 14 districts.³ One district from each of the country's four provinces was selected for inclusion in the program on the basis of its poverty rates.

In May 2015, just as the *Ep Fet Po* program was rolling out, Sierra Leone was hit by the twin shocks of an Ebola Virus Disease (EVD) outbreak and a sharp drop in the international price of iron ore (one of Sierra Leone's largest exports at the time). Sierra Leone experienced the highest EVD caseload of any of the affected countries. But the EVD outbreak was more than just a health shock. It disrupted productive activities, restricted trade and prevented children from attending schools; and the strain it put on health services reduced access to treatment for other, more common, conditions. The dual crisis resulted in a contraction of the economy by 21 percent, with resulting increases in the extent and depth of poverty.⁴ As a response, the government and its development partners scaled up the provision of cash transfers through the Rapid EVD Social Safety Net (RE-SSN) project, supporting about 60,000 households.⁵

In August 2017, Freetown experienced severe flooding and a massive landslide, affecting nearly 6,000 people with more than 1,100 dead or missing. A multi-purpose, cash transfer-based intervention was identified by key humanitarian actors as a cost-efficient approach which could rapidly increase the capacity of affected individuals to meet basic needs, access basic services and invest in livelihoods. Multiple actors were involved in delivering loosely coordinated cash transfers, with the United Nations International Children's Fund (UNICEF) and NaCSA leading this effort and implementing the largest intervention. The UNICEF/NaCSA intervention was supplemented by cash transfers managed by the Red Cross and the Office of National Security.⁶

These experiences highlight the value of making use of social protections systems to respond to shocks and some of the challenges to this approach for Sierra Leone and globally. They also provide examples of how social protection systems were used to respond to a health crisis and a rapid-onset disaster, which

1 *Ep Fet Po* is the Krio (English-based Creole language of Sierra Leone) for "Help to Fight Poverty".

2 In 2011, more than half (53 percent) of the population lived below the poverty line and 14 percent lived in extreme poverty (Statistics Sierra Leone, 2014).

3 In 2014, when the Social Safety Net project was launched, Sierra Leone was divided into four administrative regions and 14 districts. In 2017/18, the administrative divisions were reconfigured as five administrative regions and 16 districts. Most maps and data still refer to the previous administrative regions.

4 Over half of the households surveyed by a Comprehensive Food Security and Vulnerability Assessment conducted in 2015 reported they had experienced a decrease in income levels as a result of the EVD outbreak (Government of Sierra Leone, FAO and WFP, 2016).

5 Approximately 47,000 households received three quarterly payments and a further 10,700 received a one-off payment.

6 Actual transfers under the Office of National Security amanged scheme were administed by an accounting firm.

extends and complements the growing experience with the use of social protection systems to respond to drought elsewhere in Africa.

Building on this experience, in 2019, the Government decided to reform the *Ep Fet Po* program into a shock-responsive safety net, with financing from International Development Association (IDA) and the Global Risk Financing Facility to the existing Social Safety Net Project. This reform introduced a contingency budget of US\$ 4 million, which would be released when a shock hit to finance the expansion of the *Ep Fet Po* program, and resources to develop key delivery systems to facilitate this scaling up of the program. The analysis and recommendations in this report informed this decision.

The more recent emergence of the COVID-19 pandemic has brought the need for shock responsive social protection systems to the fore. In Sierra Leone, this created an urgent need to fast-track the design and implementation of a social protection response to support a targeted set of beneficiaries. To this end, the lessons presented in this report and the associated recommendations provided an input into the design of the safety net response to COVID-19. This included mobilizing the contingency budget in the Social Safety Net project for emergency cash transfers to 29,000 vulnerable informal sector workers in urban areas. Additionally, around US\$26 million of funding from the Social Safety Net project was frontloaded to support the government to reach an anticipated 70,000 poor and vulnerable households in rural areas, double the number that was originally planned before the crisis materialized.

Considerable new operational learning is likely to be generated by these initiatives, which will be especially valuable in informing the continued, long-term investment in a shock responsive social protection system in Sierra Leone.

1.1 What Is Shock Responsive Social Protection?

A growing body of evidence shows that safety nets (including cash transfers) can be part of an effective shock response when shocks have an economic impact on households or individuals and/or when cash can be used as an effective means of providing people with access to services or goods to meet multiple needs.⁷ In their Shock-Responsive Social Protection Framework, O'Brien et al. outline the range of ways social protection and safety nets can be scalable and shock responsive (Box 1).⁸ Programs can expand to new beneficiaries or increase transfers to existing beneficiaries; they can adjust implementation modalities to ensure that they can continue to function during a crisis. New programs can be developed using existing safety net infrastructure or ensuring consistency with ongoing program targeting criteria or benefit levels.

7 Bown et al. (2020).

8 O'Brien et al. (2018).

BOX 1: OPTIONS FOR ADAPTING SOCIAL PROTECTION INTERVENTIONS FOR SHOCK RESPONSE⁹

- **DESIGN TWEAKS** are small adjustments to a routine social protection programme. They can introduce flexibility to maintain the regular service for existing beneficiaries in a shock (e.g. by waiving conditionalities). Alternatively they can address vulnerabilities that are likely to increase in a crisis, through adjustments to programme coverage, timeliness or predictability (e.g. by altering payment schedule), without requiring a flex at the moment of the shock.
- **PIGGYBACKING** occurs when an emergency response uses part of an established system or programme while delivering something new. Exactly which and how many elements of the system or programme are borrowed will vary; it could be e.g. a specific programme's beneficiary list, its staff, a national database or a particular payment mechanism.
- **VERTICAL EXPANSION** is the temporary increase of the value or duration of a social protection intervention to meet the additional needs of existing beneficiaries (i.e. a top-up). For such top-ups to be relevant the programme, or programmes, must have good coverage of the disaster-affected area, and also of the neediest households.
- **HORIZONTAL EXPANSION** is the temporary inclusion of new beneficiaries from disaster-affected communities into a social protection programme, by extending geographical coverage, enrolling more eligible households in existing areas, or altering the enrolment criteria.
- **ALIGNMENT** describes designing an intervention with elements resembling others that already exist or are planned, but without integrating the two. For example, this could be an alignment of objectives, targeting method, transfer value or delivery mechanism. Governments may align their systems with those of humanitarian agencies or vice versa, either because an existing intervention is not operational as needed in a crisis, or because it may not yet exist.

Source: O'Brien et al. (2018)

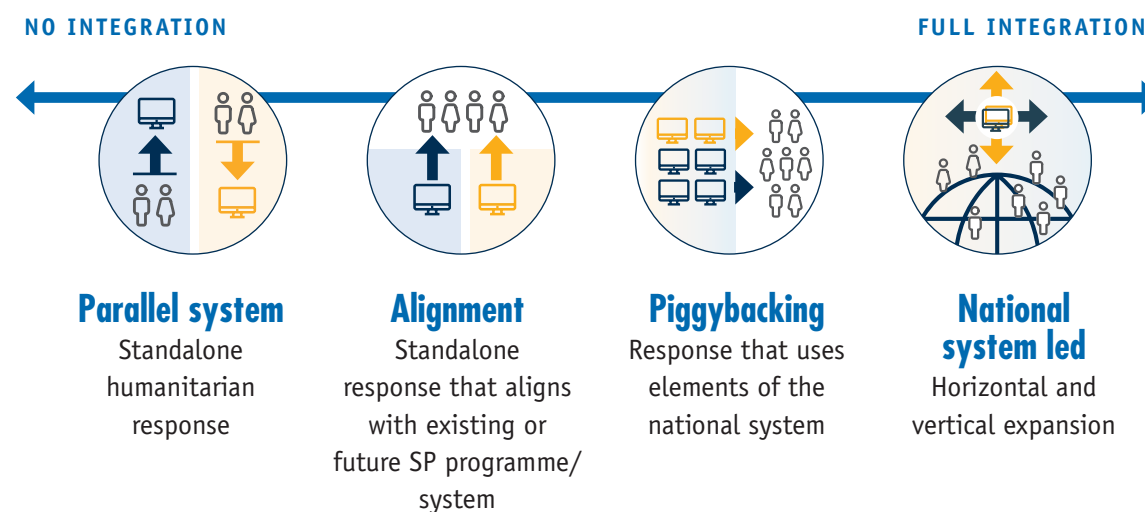
Applying this framework to refugee settings, Seyfert et al. suggest that these options are often placed on a continuum from humanitarian assistance (parallel systems) to national-led systems (Figure 1).¹⁰ Safety net programs tend to be classified along this continuum according to the source of financing, management structure (by government or a non-government organization) and delivery systems (through national systems or external to them).¹¹ However, this continuum is equally applicable to all aspect of program design and delivery, from targeting and enrolment to payment systems and grievance and redress mechanisms. Shifting the focus to these detailed aspects of safety net programs allows for movement along this continuum at different rates and for different shocks. The sections that follow seek to apply this framework to Sierra Leone and extend it beyond refugee shocks.

9 O'Brien et al. (2018).

10 Seyfert et al. (2019).

11 See Seyfert et al. (2019) for a fuller discussion of this framework and the features it considers in classifying programs.

FIGURE 1: A CONTINUUM OF DELIVERY APPROACHES FOR SOCIAL ASSISTANCE IN RESPONSE TO EMERGENCIES¹²



1.2 Study Approach

This report was commissioned to review recent responses to emergencies through social protection systems and to document key challenges and lessons learned. As such, it aims to provide recommendations on how to build a more systematic shock-responsive social protection system which is able to respond timely and adequately to future crises in Sierra Leone.

This report is based on a literature review and a number of interviews and focus group discussions conducted in Sierra Leone between April 22 and May 3, 2019. Interviews were conducted with civil servants and development partners at the national, provincial and district level. Discussions were held with frontline implementers, beneficiaries and community representatives in three districts: Bombali, Kailahun and Western Urban (Freetown).

Field visit sites were selected to:

- Allow for a review of a range of social protection interventions for different types of shocks: the core *Ep Fet Po*, RE-SSN, and Landslide and Flood Response Cash Transfer programs.
- Visit areas significantly affected by the EVD or landslide/flooding crisis.
- Cover multiple provinces: Northern and Eastern Provinces as well as Western Area
- Enable an understanding of how differences in context (such as, livelihoods and remoteness) might influence operations to scale up safety net transfers.
- The analysis and recommendations in this report informed a continuum of decisions in the government's approach to deliver effective shock-responsive services to the poorest.

¹² Ibid.

2 Context

To understand how social protection might function in response to shocks in given context, it is critical to understand the underlying socio-economics, the endemic risks and the status of the social protection and disaster response systems. This is because a suitable response depends on, among others: whether the shock has had an economic impact on households; whether the shock-affected households are already social protection beneficiaries or reside where social protection programs are ongoing; and whether the frequency or severity shocks justifies scaled-up services for the poorest.

2.1 Country Context

Sierra Leone is located on the south-western coast of West Africa. It has a population of approximately 7.9 million, with a relatively high proportion of its population (41 percent) living in urban areas. The vast majority of its rural population engages in agriculture, whereas non-agricultural self-employment is most common in urban areas (Table 1).¹³

TABLE 1: LABOR MARKET BY TYPE OF EMPLOYMENT AND LOCATION (2015)¹⁴

	Agricultural Self-Employment (%)	Non-Agricultural Self-Employment (%)	Wage Employment¹⁵ (%)	Unpaid Labor (%)
RURAL	72.9	23.5	3.6	7.1
URBAN - FREETOWN	0.5	59.0	40.5	2.6
URBAN - OTHER	21.3	56.8	21.8	5.1

Sierra Leone has a tropical climate, marked by distinct wet and dry seasons. The wet season extends from May to October (with July and August receiving the heaviest rainfall) and the dry season from November to April. Both seasons can vary in their commencement and duration. Annual average rainfall varies from 3,000–5,000mm in the coastal and southern areas to 2,000–2,500mm in the parts of the north.

Rice is the most important crop in Sierra Leone, cultivated by farmers in all districts and nearly 50 percent of smallholder farmers.¹⁶ Rice is followed by cassava and palm oil.¹⁷ Despite this, Sierra Leone only produces 70–80 percent of the rice it consumes and relies heavily on imported (and subsidized) rice. Rice also provides the highest contribution to the population’s overall calorie intake.

¹³ Togoh, Turay and Komba (2017) and Turay et al. (2015).

¹⁴ Turay et al. (2015).

¹⁵ Thirty-five percent of wage employment is also informal.

¹⁶ WFP (2013) and FAO and USDA data quoted in Himelein, Isser and Ndione (2018).

¹⁷ FAO (2013).

Sierra Leone is divided into five administrative regions: Western Area, North West Province, Northern Province, Eastern Province and Southern Province. These five regions are further divided into 16 districts as illustrated in Table 2 below.

Sierra Leone has been a parliamentary democracy since the end of its civil war (1991–2002). The parliament is headed by a president who is directly elected by popular vote.¹⁸ There are two dominant parties: All People’s Congress and Sierra Leone People’s Party. In 2004, the government introduced decentralization and by 2007, the country had a fully functional tier of 19 elected District Councils.¹⁹

But devolution in Sierra Leone remains work in progress. District ministry, department and agency staff remain employees of and have their salaries paid by the national ministries, and there is limited fiscal devolution. While 46.3 percent of all public expenditure supported the delivery of local services in 2010, only 6.7 percent actually was devolved to local government control.²⁰

TABLE 2: ADMINISTRATIVE REGIONS AND DISTRICTS (POST-2017)

	Administrative Region	District	District Capital
1	Western Area	Western Area Urban	Freetown
2		Western Area Rural	Waterloo
3	North Western Province	Port Loko	Port Loko
4		Kambia	Kambia
5		Karene	Kamakwie
6	Northern Province	Bombali	Makeni
7		Tonkolili	Magburaka
8		Falaba	Bendugu
9		Koinadugu	Koinadugu
10	Eastern Province	Kenema	Kenema
11		Kailahun	Kailahun
12		Kono	Koidu
13	Southern Province	Bo	Bo
14		Bonthe	Matru Jong
15		Moyamba	Moyamba
16		Pujehun	Pujehun

18 FAO (2013).

19 The current constitution dates from the start of the civil war in 1991.

20 Boex (2013).

Corruption in Sierra Leone is perceived to be widespread. In 2015, more than half the population believed that most, if not all, public officials were corrupt. Sierra Leone ranks 132nd and 116th out of 138 countries for irregular payments and bribes and for diversion of public funds, respectively.²¹

Infrastructure in Sierra Leone is limited, with impacts on the country's socio-economic growth. Only 1,325 kilometers of roads are paved and only 10 percent of the population has access to electricity.²² Sierra Leone ranks 46th out of 54 countries in the African Infrastructure Development Index.²³

2.2 Risks, Shocks and Vulnerability

The World Risk Index ranks Sierra Leone 8th and 45th out of 180 countries for disaster vulnerability and overall risk, respectively.²⁴ Recently, the United Nations Development Program supported an update to Sierra Leone's hazard profile.²⁵ Some of the most significant risks are highlighted and explored in the paragraphs below. The risks discussed have had significant impacts in recent years. However, the recent history in Sierra Leone has shown that some of the severest crises were unforeseeable. The wider context of severe poverty, weak service provision and poor governance increases the probability of shocks occurring and imparting major consequences.

2.2.1 Health

Epidemics have been one of the deadliest hazards in Sierra Leone, responsible for 83 percent of the total number of deaths due to disasters (the definition of disasters excludes conflict).²⁶ Epidemics have killed an estimated 5,100 Sierra Leoneans and affected around 28,500 between 1980 and 2017.²⁷

VIRAL HAEMORRHAGIC FEVERS: While Sierra Leone is home to a number of viral haemorrhagic fevers, the 2014/15 Ebola Virus Disease (EVD) outbreak has been responsible for the majority of infections and deaths as a result of epidemics. According to the Centers for Disease Control and Prevention, 14,124 Sierra Leoneans were infected by EVD, of whom 3,955 died.²⁸ The EVD outbreak, however, was more than just a health emergency; the severity of the disease, size of the outbreak and control measures to contain the outbreak meant that it had devastating impacts across all spheres of life in Sierra Leone: health, education, economic and social. The overall impact of the EVD crisis on Guinea, Liberia and Sierra Leone has been estimated at US\$2.8 billion, with US\$1.9 billion for Sierra Leone alone. The EVD epidemic and lower commodity prices had adverse fiscal effects on the country, leading to falling revenues, increased EVD-related spending and widening deficits. In 2015, the estimated deficit was 4.8 percent of gross domestic product, as government revenues declined across the board (direct taxes on companies, value added tax receipts and indirect taxes). This reflects generally lower economic activity and reduced compliance.²⁹

21 Himelein, Isser and Ndione (2018).

22 Ibid.

23 AfDB (2016).

24 Day et al. (2019).

25 INTEGEMS (2017).

26 Ibid.

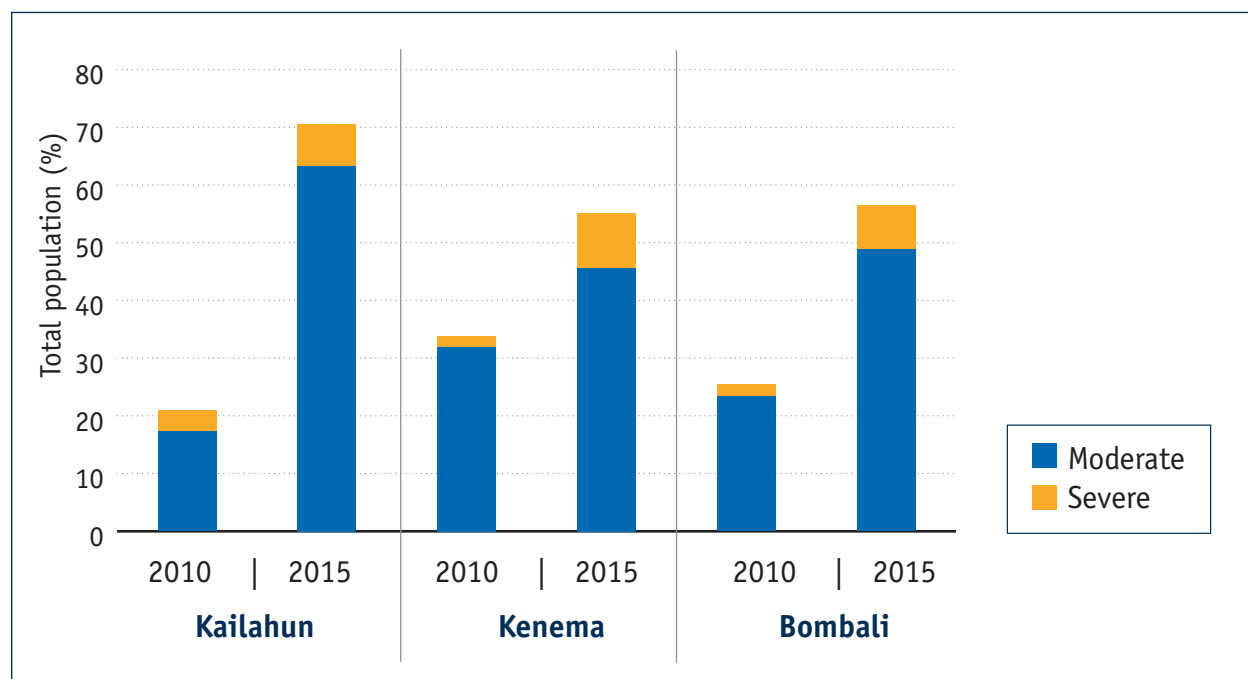
27 Ibid.

28 CDC (2020). Available at: <https://www.cdc.gov/vhf/ebola/history/2014-2016-outbreak/case-counts.html>

29 World Bank (2016).

For individuals and households, a diagnosis of EVD was devastating from the perspective of health and survival but it also brought other costs. Households were quarantined and not able to work or farm, and the stigma associated with the diagnosis continued to affect households long after the disease had past. A comparison of data collected in 2010 and 2015 found large increases in food insecurity in districts that were severely affected by the EVD outbreak. As Figure 2 illustrates, Kailahun, Kenema and Bombali all showed significant increases in food insecurity.

FIGURE 2: LARGE INCREASES IN FOOD INSECURITY IN DISTRICTS SEVERELY AFFECTED BY EVD (2010, 2015)



Source: Government of Sierra Leone, FAO and WFP (2016)

Although 2014/15 was the first registered outbreak of EVD in Sierra Leone, retrospective testing of older blood samples after the recent outbreak indicated that Ebola had likely been present in Sierra Leone at least as early as 2006³⁰ and is likely endemic in the bat population. The severity of the outbreak in Sierra Leone (and in Guinea and Liberia) was in part due to the delays resulting from the unfamiliarity of the disease; but the slow response and the need for huge international support to manage the crisis was the consequence of inadequacies in the health sector.

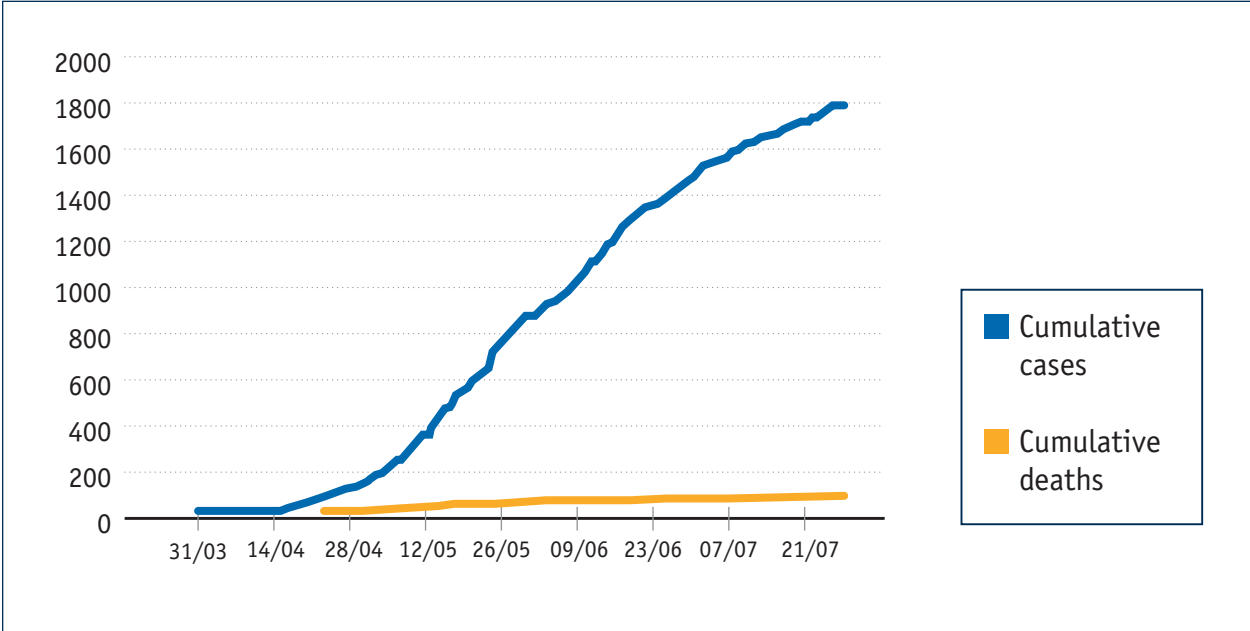
In addition to EVD, there are annual outbreaks of Lassa fever (typically between December and March) and the risk of a Marburg virus outbreak. Lassa fever is endemic to Sierra Leone, particularly in the east of the country. Some estimations indicate 100,000-300,000 infections in West Africa, but 80 percent of infected individuals are asymptomatic or have mild symptoms. Although access to treatment for Lassa is free, socio-economic barriers such as the costs of travel and the opportunity costs of the time spent accessing health care persist. These barriers delay or deny people rightful and adequate health care.³¹

30 Schoepp et al. (2014).

31 Wilkinson (2017).

CORONA VIRUS DISEASE (COVID-19): COVID-19 was first identified in Wuhan, China at the end of 2019 and it has since been found in at least 188 countries and territories across the globe, including Sierra Leone. Health officials in Sierra Leone detected the first case on March 31, 2020 and by late July 2020, had identified nearly 1,800 cumulative cases with 66 deaths. According to the World Health Organization (WHO) Situation Report of June 2020,³² cases were reported in 15 districts with almost 60 percent concentrated in Western Area Urban, which also accounted for the majority of deaths (Figure 3).

FIGURE 3: COVID-19 CASES AND DEATHS IN SIERRA LEONE (2020)



At the time of finalizing this report, the severity of the pandemic’s impact on the population and on the country’s macroeconomic outlook continues to evolve. According to World Bank projections, the country’s economic growth, which had rebounded to 5.4 percent in 2019, is projected to decelerate to 2.0 percent in 2020. Additionally, expenditure arrears, deterioration of terms of trade, lower than anticipated Foreign Direct Investment inflows, and financial sector weaknesses represent expected downside risks to the outlook.³³

OTHER DISEASE RISKS: Sierra Leone has seen a number of cholera outbreaks, the most serious of which was in 2012 (Figure 4); Western Area was the most severely affected region and urban areas were more severely affected than rural.³⁴ Other outbreak risks include measles, yellow fever and influenza. However, malaria has been the primary cause of death in Sierra Leone, representing 20 percent of all under-5 deaths and affecting 2–2.8 million people a year between 2000 and 2015.³⁵

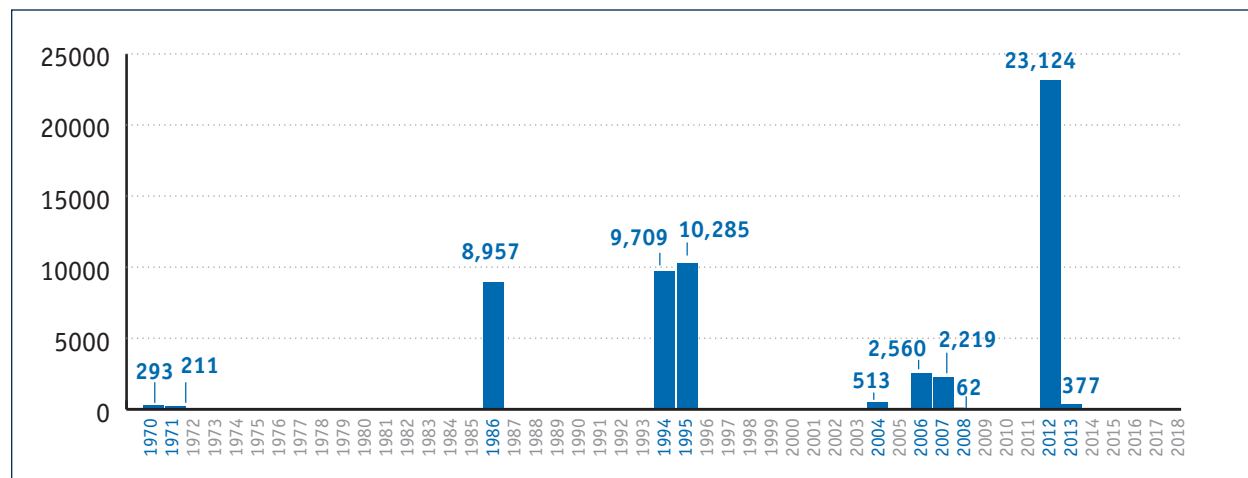
32 WHO Situation Report as of June 13, 2020. Available at : https://www.afro.who.int/sites/default/files/2020-06/Sierra%20Leone%20COVID19%20SitRep%20No.75_13.06.20.pdf

33 World Bank (2018).

34 Of the cholera cases identified in Sierra Leone, 10,025 of the 19,552 cases were found in Western Area (WHO and UNICEF, 2012).

35 WHO (2016).

FIGURE 4: CHOLERA CASES BY YEAR (1970–2018)³⁶



2.2.2 Flooding and Landslides

Floods are the most common natural hazard in Sierra Leone. Flooding typically happens every year between July and September when rainfall is at its heaviest. The consequences of flooding have been exacerbated by the combination of population increases and land scarcity, which has caused people to settle more and more in flood-prone areas. Parts of Freetown, Bo and Pujehun see annual flooding during the rainy season.³⁷

Although flooding does occur annually, its impacts vary from year to year. Both 2015 and 2017 were notable for the large number of people affected: around 14,000 people were affected by flooding in 2015 and 6,000 in the combined landslide and flooding of 2017. Wind damage is a common hazard experienced during the rainy season. In most instances, the damage is isolated such as buildings their roofs and crop damage (particularly to tree crops).

Landslides happen less frequently but can be devastating. Eighty-nine percent of the recorded landslide events have taken place in Western Area, with the remaining occurring in Bombali and Port Loko Districts. The worst disaster on record is the 2017 landslide that affected the Regent Area of Freetown and that also coincided with severe flooding in other parts of the city.³⁸ The total economic value of the effects of the landslide and floods estimated by the damage and loss assessment was about US\$31.65 million (Le 237 billion), while the preliminary cost of resilient recovery needs was estimated at about US\$82.41 million (Le 618 billion).³⁹

2.2.3 Sea Level Rise and Storm Surges

Sierra Leone's coastal areas are increasingly vulnerable to climate change due to the threat of sea level rise. The risks associated with sea level rise are exacerbated by human actions such as the construction

³⁶ Data sourced from WHO Weekly Epidemiological Records (<https://www.who.int/wer/en/>).

³⁷ INTEGEMS (2017).

³⁸ In the August 2017 landslide and floods, 808 of the 1,141 people killed or missing occurred in the Regent Area (World Bank, 2017c).

³⁹ World Bank (2017c).

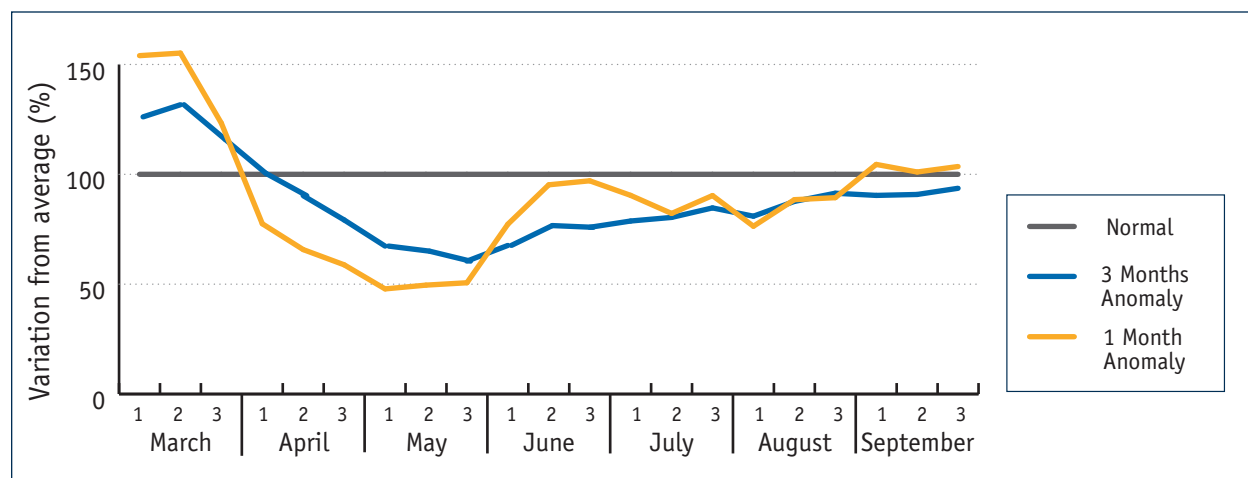
of housing in low-lying areas very close to the shoreline, including on reclaimed land, and sand-mining in a number of locations in coastal areas of Sierra Leone which is contributing to coastal erosion.

The initial manifestation of sea level rise is likely to be seen in the form of flooding during storms (which are also likely to increase in intensity as a consequence of climate change). The combination of a base sea level rise and occasional storm surges will see more frequent inundations in vulnerable areas. Districts of Kambia, Port Loko, Moyamba, Bonthe and Pujehun are most at risk, along with some parts of Freetown.⁴⁰

2.2.4 Drought/Variations in Rainfall Quality

Although Sierra Leone is not considered drought-prone and does not see the inter-annual variations in rainfall that can be seen across much of Sub-Saharan Africa, the quality of rainfall is still a key determinant of production. Delayed onset, reduction in quantity and dry periods extending into the rainy season can all have significant consequences for production levels. With the vast majority of the rural population dependent on subsistence agriculture, these variations in production can have important implications for food security. For example, the onset of the rains was delayed by at least a month in parts of Sierra Leone in 2018 (Figure 5). This led to poor crop germination and seedling development of key crops such as rice, cassava and groundnuts in affected areas.⁴¹

FIGURE 5: RAINFALL ANOMALIES BY DEKAD (2018)



Source: Adapted from http://dataviz.vam.wfp.org/seasonal_explorer/rainfall_vegetation/visualizations accessed 23 September 2020

2.2.5 Inflation

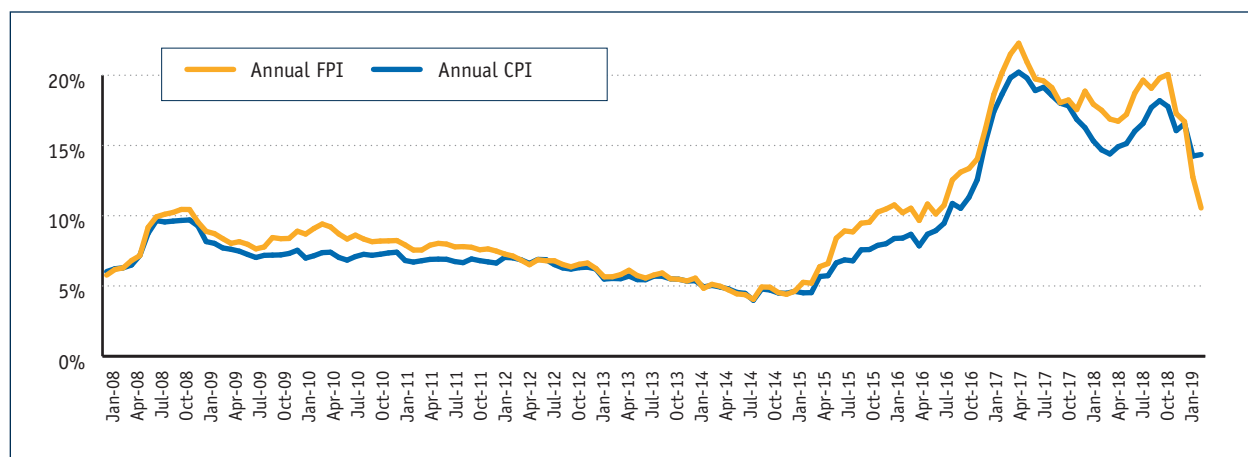
Sierra Leone experienced double digit inflation between July 2016 and April 2019. This period of high inflation can be traced back to the twin shocks of 2015: the EVD outbreak and a sharp drop in the price of iron ore. The EVD outbreak severely impacted productivity, increasing dependence on the market and

⁴⁰ INTEGEMS (2017)

⁴¹ With the majority of households in Sierra Leone dependent on agriculture, crop pests and diseases are also a risk factor. Many such pests and diseases can be considered a routine feature of agricultural production, affecting yields but not producing a shock per se. New pathogens and pests have the potential to disturb this equilibrium. The recent appearance (November 2017) of fall army worm which attacks maize and several other crops including rice highlights this potential risk. However, neither communities nor national-level stakeholders highlighted crop pests or diseases as a significant risk during the course of this study, which is why this report does not focus on this risk in other sections.

imports to meet basic needs. The fall in iron ore prices had significant implications for the ability of the government to raise revenues and on the trade deficit, with knock-on impacts on the exchange rate and the price of imported commodities. Inflation rates at present exceed by far those at the time of the Food, Fuel and Financial Crisis of 2008.

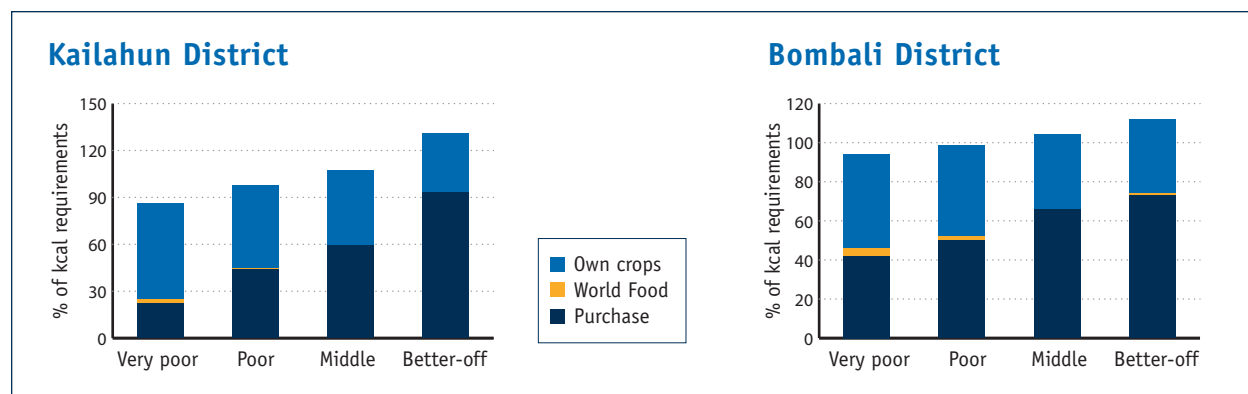
FIGURE 6: CONSUMER PRICE INDEX AND FOOD PRICE INDEX (2008–2018)⁴²



Source: Adapted from data available from Statistics Sierra Leone, available at <https://www.statistics.sl/index.php/cpi.html>

Inflation has significant impacts in both urban and rural areas. As Figure 6 above shows, food price inflation largely mirrors overall inflation. The majority of households in rural Sierra Leone are net purchasers of food, including rice; the poor tend to depend on the market to meet food needs more than the less poor (Figure 7). In order to earn the income to purchase food and other items, households often sell some of their production (at a price affected by inflation). The poorest households are usually more dependent on casual labor (often agricultural) and petty trading which tend not to keep pace with inflation.

FIGURE 7: FOOD ACCESS IN TWO OF THE POOREST DISTRICTS (%)⁴³



Source: Food Economy Group, Save the Children International and Government of Sierra Leone. (2017).

⁴² Statistics Sierra Leone (2008-2018). Available at: <https://www.statistics.sl/index.php/cpi.html>

⁴³ Food access is expressed as a percentage of minimum food requirements, taken as an average food energy intake of 2,100 kcals per person per day.

2.2.6 Fire

Fires that damage property are a regular occurrence, but few reach a level described as a disaster. It is only these larger scale disasters that are of interest to this report. Fire disasters in Sierra Leone can be divided into urban “group fires”/conflagrations and large-scale rural wildfires. The former most frequently have an ignition source related to faulty electrical connections or a cooking fire accident, while the latter are often a result of an agricultural fire which burns out of control.

BOX 1: DEFINITIONS OF FIRE⁴⁴

A GROUP FIRE can be defined as a major building-to-building fire involving many structures, spreading flame over a large area, but still confined to a block of buildings or some other boundary.

AN URBAN CONFLAGRATION spreads over a larger area, crossing roads, waterways or other potential firebreaks.

URBAN GROUP FIRES AND CONFLAGRATIONS: Group fires and conflagrations have increased in frequency in Sierra Leone in recent years. Data logged in DesInventar⁴⁵ between 2006 and 2015 suggest that 11,000 people were affected by fires as a result of 242 fire events.⁴⁶ It is not possible to identify how many of these fires could be classified as group fires or conflagrations. Of the fire events logged in DesInventar, more than half occurred in Freetown. Anecdotal evidence also suggests that group fires and conflagrations occur most frequently in Freetown where densely packed buildings are constructed of flammable materials. Table 4 below illustrates some of the recent group fires events in Freetown.

TABLE 3: GROUP FIRE AND URBAN CONFLAGRATION IN FREETOWN (2012–2019)⁴⁷

Date	Location	Description
FEBRUARY 2012	Falcon Bridge, Freetown	31 buildings destroyed, 257 people affected
DECEMBER 2016	Angola Town, Freetown	40 houses destroyed, approx. 1,500 people affected
APRIL 2017	Susan’s Bay, Freetown	200 buildings destroyed, 2,048 people affected
APRIL 2018	Cockle Bay, Freetown	8 compounds and 97 people affected
MARCH 2019	Kroo Bay, Freetown and Susan’s Bay, Freetown	150 homes and 1,500 people affected across both locations

44 CMRPC (2012).

45 DesInventar is a global disaster information management system, established with the support of United Nations Office for Disaster Risk Reduction (UNDRR) that allows the recording and analysis of disaster incidents.

46 INTEGEMS (2017).

47 Di Marino et al. (2018); Leong et al. (2018); Iyer (2019).

WILDFIRES: Wildfires occur many times a year in different parts of the country. Although such fires may occur at any time of the year, they are most frequent between February and April. This period marks the end of the dry season and when the drying effects of the Harmattan winds⁴⁸ are felt. Moreover, this is the time when people light fires as part of the slash and burn agricultural practice, creating the potential risk of fires burning out of control. Many such fires have only limited impacts but some can be more devastating in their effects. For example, in 2013, fires in four districts had the cumulative effect of destroying 279 houses and rendering 2,257 people homeless.⁴⁹

2.2.7 Conflict/Civil Unrest

Sierra Leone suffered from a devastating civil war. The war's origins can, in part, be attributed to a combination of centralization of power in Freetown coupled with corruption, arbitrary and predatory behavior of some paramount chiefs and severe economic contractions. Although the Revolutionary United Front was launched with a political platform aimed at addressing these issues, its conduct rapidly degenerated into corruption. The war lasted eleven years, resulted in the death of more than 50,000 people and the displacement of a further 2 million (nearly a third of the population).⁵⁰

Since 2002, Sierra Leone has experienced peace. However, the factors contributing to the origins of the violent conflict remain, including: corruption, poverty and disaffection among the youth. Recent years have seen violent clashes between supporters of the two main political parties (APC and SLPP) around election periods and significant protests/civil unrest linked with the leasing of land to agricultural investors.⁵¹ Insecurity in neighboring countries (particularly Liberia) also influenced the conflict in Sierra Leone and remains a potential risk factor in the future.

2.2.8 Vulnerability and Exposure

Different communities and individuals in Sierra Leone have differing levels of exposure and vulnerability to different hazards. For example, people living in low-lying coastal areas or close to rivers are more exposed to the risk of flooding than those living on higher ground; while poorer households may be less able to cope with an increase in food prices or reduction in production and are therefore more vulnerable to inflation or poor rainfall. Levels of vulnerability affect the impact of shocks; more severe shocks and higher levels of vulnerability result in larger scale disasters. The paragraphs below explore how different factors affect communities' and individuals' exposure and vulnerability to shocks and hazards.

GEOGRAPHY: Vulnerability to most shocks tends to have some geographic element to it, and this is true to the majority of the shocks which affect Sierra Leone. Shocks such as flooding and sea-level rise have obvious geographic links related to proximity to water and elevation which increase the chance of recurrent events. In Freetown approximately 38 percent of the city's expansion has either taken place on steep slopes or in areas exposed to sea level rises with 100,000 people (10 percent of the population) exposed to one or other of these hazards.⁵² Other shocks have potentially less geographic specificity. Table 5 below summarizes some of the key geographic characteristics of vulnerability to different

48 Seasonal winds in Western Africa, which occur between the end of November and mid-March

49 INTEGEMS (2017).

50 Bertelsmann Stiftung (2018).

51 Most land outside of the Western Area is managed using customary rules with chiefs and family heads making decisions on annual allocations of land for agriculture. It is they, not those cultivating the land, who have the authority to lease out land.

52 Campbell et al. (2018).

shocks. It highlights how some shocks are clearly defined in geographic extent, whereas others are more national in nature. As this table shows, geographic vulnerability also has links to poverty. Areas of Freetown most at risk of flooding tend to be informal settlements that have developed on land close to rivers or reclaimed from the sea that is otherwise not desirable for construction. It is often these same areas of Freetown that are also most prone to fire hazards and cholera outbreaks. Housing density and the building materials used in informal settlements increase the risk of fires spreading, while proximity to (unclean) rivers and poor sanitary conditions increase the chance of cholera spreading.

TABLE 4: GEOGRAPHIC VULNERABILITY TO SHOCKS⁵³

Hazard	Geographic Vulnerability	Areas Recurrently Affected
HEALTH	While outbreaks may be geographically specific, they may occur anywhere in the country, with the exception of Lassa fever and cholera (outbreaks may spread nationwide but are often concentrated in informal settlements in urban areas).	<ul style="list-style-type: none"> • Lassa: Bo, Kailahun and Kenema⁵⁴ • Cholera: Freetown, Western Area Rural, Port Loko and Kambia
FLOODING	Low-lying areas close to rivers.	<ul style="list-style-type: none"> • Freetown: Kroo Bay, Susan’s Bay, Newton catchment areas and Lumley • Bo: New London • Pujehun: Toma Bum and Gbondapi⁵⁵
SEA LEVEL RISE/ STORM SURGES	Low-lying areas close to the coast, particularly in parts of Kambia, Port Loko, Bonthe and Pujehun. The risk is exacerbated by sand-mining in some areas.	Not yet a recurrent issue
DROUGHT	Specific areas and specific crops may be more or less affected in different years.	Not predictable
INFLATION	Both the urban and rural poor are significantly affected because of dependence on purchased food.	Nationwide
FIRE	Informal settlements, particularly in Freetown.	Susan’s Bay, Kroo Bay
CONFLICT/ CIVIL UNREST	May vary from year to year, currently some incidents of civil unrest in Pujehun.	Not predictable

⁵³ World Bank (2020).

⁵⁴ In the period 2008-2016, these three districts accounted for 94 percent of the suspected Lassa fever cases: 1,410 of the suspected cases originated from Kenema District with Bo and Kailahun accounting for 204 and 120 cases, respectively (Viral Hemorrhagic Fever Consortium, 2019).

⁵⁵ INTEGEMS (2017).

GENDER AND LIFE-CYCLE: Within affected communities, individuals may be more vulnerable to shocks as a result of their gender, age group or disability status. When it comes to differentiated impacts of gender, evidence from around the globe suggests women are usually more adversely affected than men. This is because women typically face particular constraints due to their gender in accessing food and income such as access to land and remunerative employment. With regard to gender, evidence from the 2014/15 EVD outbreak found that while men were more likely to die after having caught Ebola, women were at greatest risk of contracting the disease.⁵⁶ This was due to the role they play in looking after sick family members. Women may also have been more severely affected by the economic impacts of EVD, particularly if they are left as the sole income earner in the household as the result of deaths of family members.⁵⁷

Age can affect peoples' vulnerability in different ways. Children and the elderly may be at greater risk of contracting diseases such as cholera and suffer more acute forms of the disease. Children may also experience different affects from shocks such as being withdrawn from school as a consequence of reduced household income. Living with a disability poses challenges for individuals in the way they access services, earn income and engage in the social sphere of their communities. These challenges can be exacerbated during shocks and resulting in an increased vulnerability to shocks.

POVERTY: For almost all shocks, vulnerability is linked to or exacerbated by poverty. Poorer households often live in more risk-prone areas, whether this is in the informal settlements of Freetown or rural Sierra Leone. Poorer households may be more vulnerable to certain risks such as drought risks or inflation because of their livelihoods and the ways in which they access food and income. Poorer households are more likely to engage in agriculture and are therefore more at risk of drought or other natural hazard related production deficits (such as, flooding and crop disease). Inflation tends to affect households who spend a higher proportion of their income on food and/or are net purchasers of food. Poor households, including the rural poor, tend to have these characteristics. Poverty also reduces people's ability to cope with shocks. Poor households lack savings or insurance to cope with the economic consequences of a shock; are less willing or able to access health services early; and often have fewer options (whether in terms of employment or place of residence) open to them as they seek to recover from a shock. The recent COVID-19 pandemic has drawn attention to the vulnerability that results from working in the informal sector. 68 percent of those in self-employed business – mainly petty trading or processing of agricultural products – reported a drop in income between March and May 2020, with average incomes almost halving.⁵⁸

2.3 Institutional Environment

There is an emerging policy and institutional environment for both Social Protection and Disaster Management in Sierra Leone. Policies are in place, and both social protection and disaster management are specifically referenced in the government's medium-term plan, 2019–2023.

⁵⁶ Nkangu, Olatunde and Yaya (2017).

⁵⁷ Harman (2016).

⁵⁸ Meriggi et al. (2020).

TABLE 5: STRATEGIC OBJECTIVES AND POLICY ACTIONS FOR SOCIAL PROTECTION AND DISASTER MANAGEMENT⁵⁹

	Social Protection	Disaster Management
STRATEGIC OBJECTIVE	Provide a stronger relationship between the state and citizens with enhanced human capital development by effectively managing risks and vulnerability and empowering livelihood development for sustained social cohesion and nation-building	Build and institutionalize a robust early warning and response system to effectively respond to disaster-related issues
SELECTED POLICY ACTIONS	<ul style="list-style-type: none"> • Strengthen the National Commission for Social Action to coordinate all national social protection programs through the requisite legislative and policy frameworks • Develop resilience to natural disasters by establishing a social safety net fund for emergency response • Create targeted employment schemes and support informal schemes such as <i>osusu</i> 	<ul style="list-style-type: none"> • Develop policies and a legal framework on vulnerability and disasters • Improve on disaster response within the country at all levels • Enhance coordination and collaboration among key actors

A national social protection policy recently has been finalized and is awaiting enactment. The policy has identified short- to medium-term measures to put in place a minimum package of protection (summarized in Box 2). The policy articulates oversight and coordination structures for social protection, including the establishment of a National Social Protection Secretariat. The policy does not specify which ministries, departments and agencies (MDA) will implement the pillar.

Currently, two separate MDAs are implementing social assistance programs. The National Commission for Social Action (NaCSA) is implementing the Social Safety Net project. The Ministry of Labour and Social Security is implementing a Social Pension Program. Historically, NaCSA and the Ministry of Agriculture, Forestry and Food Security (MAFFS) have been involved in implementing cash- and food-for-work interventions.

According to the national social protection policy, the National Social Protection Board will coordinate the social protection sector. The Minister of Labour and Social Security will chair the Board, and members will comprise the public sector, the private sector, and international and national NGOs. The Parliamentary Sub-Committee on Labor and Social Security is responsible for oversight. The National Social Protection Secretariat, now housed in NaCSA, will coordinate day-to-day operations.

⁵⁹ Government of Sierra Leone (2019).

BOX 2: SHORT- TO MEDIUM-TERM MEASURES TO PUT IN PLACE A MINIMUM PACKAGE OF PROTECTION⁶⁰

- Essential healthcare benefits, including maternity benefits, for which the state accepts responsibility for financing and ensuring adequacy of the delivery system
- Social assistance to poor and vulnerable families (with children) for income security to facilitate access to nutrition, education and healthcare
- Targeted income support, especially through cash-for-work and other labor-intensive programs for the poor and unemployed
- Social pensions to older persons and people with disabilities

Since the end of the civil war in 2002, the government has taken steps to define roles and responsibilities and to develop the necessary institutions to respond to disasters. In 2002, the National Security and Central Intelligence Act mandated the Office of National Security (ONS) to be its chief coordination agency for both man-made and natural disasters. In 2004, a Disaster Management Department was established within ONS to operationalize this coordination role. The Disaster Management Department has been responsible for the identification and assessment of disaster risks, the integration of disaster management into the programs and policies of other government ministries and the coordination of responses to disasters that require national-level engagement. The EVD and flood and landslide crises highlighted some of the limitations of the use of a department within ONS as the main disaster response body. In response, the government recently passed a bill⁶¹ to create a new National Disaster Management Agency (NaDMA) which will transform the Disaster Management Department into a separate government agency responsible for the management of disasters in Sierra Leone. The bill allows for the establishment of offices at the regional, district and chiefdom level if decided by the Managing Board of the agency. At the time of finalizing this report, the entity was in the process of being established.

NaDMA is likely to take on much of the disaster management coordination roles usually played by ONS. These include lead or secretariat roles in the National Platform for Disaster Risk Reduction, the National Strategic Situation Group, groups of stakeholders organized around key pillars of response and District Disaster Management Committees. The National Platform for Disaster Risk Reduction is chaired by the Vice President (or in the Vice President's absence, the National Security Coordinator) and has overall responsibility for the strategic direction for disaster risk management in Sierra Leone. During emergencies it has a role in bringing together the national executive to activate and oversee the national response. Under the new National Disaster Management Act, the National Platform will continue in its role. The Chair will remain the Vice President; the head of the Office of National Security will be the vice chair and the Director General of the new Agency will fulfil the role of secretary.

In the event of an emergency of a significant scale, the National Strategic Situation Group (NSSG) and the pillar system will be activated. NSSG has a core of ONS staff but will also bring together representatives from MDAs and partners relevant to the emergency. NSSG is expected to meet as often as is required; for example, in the initial days following the landslide and flood event, it met three times a day. At present, ten pillars have been identified to support the implementation of an emergency

⁶⁰ Government of Sierra Leone (2018).

⁶¹ The bill is the National Disaster Management Agency Act, 2020.

response. Each pillar has a lead MDA as well as participating members. In many instances, the lead MDA is supported by the relevant UN Agency. Table 6 below summarizes these pillars and their respective leads.

TABLE 6: EMERGENCY RESPONSE PILLARS

Pillar	Government-Led	UN Support⁶²
COORDINATION	Office of National Security	
CO-LED BY MINISTRY OF FOREIGN AFFAIRS AND INTERNATIONAL COOPERATION		
LOGISTICS	Republic of Sierra Leone Armed Forces Co-led by Ministry of Finance	
PROTECTION AND PSYCHOSOCIAL	Ministry of Social Welfare, Gender and Children’s Affairs	UNICEF
HEALTH AND BURIALS	Ministry of Health and Sanitation	WHO
SECURITY AND SAFETY	Sierra Leone Police Co-led by Republic of Sierra Leone Armed Forces	
SOCIAL MOBILIZATION AND COMMUNICATION	Office of National Security Co-led by Ministry of Information and Communication	
FOOD AND NUTRITION	Ministry of Agriculture, Forestry and Food Security	WFP
WATER, SANITATION AND HYGIENE (WASH)	Ministry of Water Resources	
REGISTRATION	Ministry of Social Welfare, Gender and Children’s Affairs ⁶³ Co-led by Statistics Sierra Leone	UNFPA
SHELTER	National Commission for Social Action Ministry of Lands, Country Planning and Environment	

There is not, at present, a social protection pillar. For the response to the landslide and flood event, cash transfers were housed within the shelter pillar. During both the EVD response and the response to the flood and landslide disaster, NaCSA was the lead MDA responsible for coordinating cash transfer interventions. In both responses, NaCSA’s coordination role allowed for harmonizing the key aspects of the transfers, including: setting benefits; targeting and registration procedures; and, in the case of the EVD response, the use of a common payment mechanism (see section 3 for further detail).

62 Information was not systematically collected on UN engagement.

63 This may recently have shifted to NaCSA.

While social protection is a national function in Sierra Leone, disaster management is not only the responsibility of the national government. Sierra Leone has embarked on a process of devolution, and regional and district governments have responsibilities for disaster preparedness and response.⁶⁴ In each district, a District Disaster Management Committee (DDMC) has been established to bring together District Council leaders, representatives of district-level ministries, departments and agencies and any partner agencies active in the area. DDMCs are responsible for district-level preparedness activities, such as the development of a district disaster management and response plan, and support the coordination of any disaster response activities. DDMCs were initially established in 2013, were suspended during the EVD outbreak and have now been reactivated.⁶⁵ In both districts visited by the assessment team (Bombali and Kailahun), DDMCs were active and in the process of revising the District Disaster Management and Response Plans. The pillar system is also expected to be activated at district level when required. Both districts visited were aware of the system, but neither had felt the need to activate it since its introduction.⁶⁶

BOX 3: LEVELS OF DISASTER IN SIERRA LEONE⁶⁷

LEVEL ONE refers to minor disasters. That is, any disaster that is likely to be within the response capabilities of the local government, the community and stakeholders working within the affected community and to result in only minimal need for national assistance.

LEVEL TWO refers to major disaster. That is, any disaster that would likely exceed local capabilities and require a broad range of national assistance.

LEVEL THREE refers to an extreme disaster. That is, any disaster that would require massive national assistance, including military involvement and support through outside intervention (or international).

According to the National Disaster Preparedness Plan, districts are responsible for responding to level one disasters; while the national government is responsible for level two and level three disasters (Box 3). Except for the criteria outlined, there is no further guidance on how and when a level two or three disaster might be declared. As mentioned in footnote 53 and further discussed in section 3.1, there is currently limited devolved funding available at district level and this, therefore, limits their response capabilities.

Coordination mechanisms were significantly strengthened following the EVD outbreak to reflect the lessons learned during this crisis; and the above pillar system reflects this. Pillars were activated during the flooding and landslide event and this did help to both mobilize a response and reduce risks of duplication. Some of the challenges experienced regarding the registration pillar are discussed in detail in the targeting section of this report (section 3.4).

64 As already discussed in section 2, devolution remains only partially implemented with limited fiscal transfers to devolved district governments.

65 The EVD outbreak occurred shortly after the establishment of DDMCs, before DDMCs had the chance to develop capacity and experience. Therefore, a specific structure ("President's Delivery Team") to focus largely on a health response was put in place for the period of the EVD outbreak and was disbanded eventually (when EVD was managed in the country).

66 either district had experienced a shock of a significant scale, but both could mention events such as flooding and windstorm damage. The pillar system did not appear to have been activated for these.

67 Government of Sierra Leone (2006).

However, coordination does come at a cost. The main coordination mechanism for disaster management has been to hold meetings, bringing together large numbers of stakeholders. In the aftermath of the landslide and flooding, heads of agencies and development partners were required to attend daily meetings as well as more technical pillar meetings. The meetings are perceived to have value but they also consume significant time.

At present, the government does not have the financial resources to fund a response without support from the international community. Support provided through development partner financing is project based, with a significant number of implementing agencies (such as, local and international NGOs, UN agencies and private contractors) involved in delivering support. This increases the need for meetings and coordination; both to advocate for additional resources and to coordinate efforts once resources are forthcoming. And despite coordination efforts, fragmentation remains.

One example of this fragmentation is that different agencies make varying choices in who they partner with in the government because of historical partnerships, with the result that similar activities may be implemented by different ministries. This has happened in labor-intensive public works programs. The World Bank has, in the past, partnered with NaCSA on such programs; KfW/GIZ also works with NaCSA; but WFP and FAO work with the Ministry of Agriculture, Forestry and Food Security).

Another example of fragmentation is the stop-start nature of programs supported by development partners. This can be attributed to a reliance on external funding and that this financing results in a project-based approach. There may be the assumption (or hope) that a department will continue activities once financing has stopped and the external agency has withdrawn technical support, but too often “handing over to government” really means the end of an activity.⁶⁸

2.4 Existing and Recent Social Protection Interventions

This section highlights key social assistance/cash transfer interventions in Sierra Leone. It focuses on interventions that have been implemented by, or in conjunction with, the Government of Sierra Leone. It is not an exhaustive inventory of all activities undertaken.

EP FET PO: *Ep Fet Po* was initially launched in 2014 in four districts, one from each of Sierra Leone’s four administrative regions. Implemented by NaCSA, with World Bank support, the program was initially designed to support approximately 12,000 households. There was a commitment to provide targeted households with cash transfers for a minimum of two years. The program expanded in 2016 to include beneficiaries who had been supported by NaCSA under the RE-SSN project described in the paragraph below. Before enrolling these households in the core *Ep Fet Po* payroll, their poverty status was rechecked and only those who met the program’s threshold were enrolled. During the most recent payment cycle, December 2018, the program included 28,537 beneficiary households in 11 districts.⁶⁹ The program is unconditional with households receiving payments every quarter.

⁶⁸ One example of this is FAO’s support to a National Early Warning System on Food and Nutrition Security. The FAO project was “handed over to government” mid-2018; since then activities have stopped.

⁶⁹ The incorporation of RE-SSN beneficiaries into *Ep Fet Po* resulted in expansion into six new districts. One of the original districts (Bombali) subsequently split into two districts (Bombali and Karene).

RAPID EBOLA (VIRUS DISEASE) SOCIAL SAFETY NET (RE-SSN): Financing from the United States Agency for International Development (USAID), United Kingdom Department for International Development (DFID) and the World Bank supported the expansion of cash transfers to help households affected by the EVD outbreak. The program was implemented by NaCSA and five international NGOs: ACDI/VOCA, Save the Children International, Catholic Relief Services, Care International and World Vision International. For the majority of beneficiaries, the program planned to provide three quarterly transfers. In reality, the initially planned benefits were made in two tranches (a double payment in the first tranche and a subsequent single payment), and many implementing agencies extended support for further rounds. DFID financing was used to make a single one-off payment (equivalent to three quarterly transfers). The first tranche of payment was made to beneficiaries in May 2015. Table 7 below summarizes this support.

TABLE 7: RE-SSN BENEFICIARY HOUSEHOLDS BY IMPLEMENTING AGENCY AND DISTRICT (2015)⁷⁰

District	NaCSA	NaCSA (DFID)	ACDI/VOCA	SCI	CRS	CARE	WVI	TOTAL
PORT LOKO	1,798						5,324	7,122
BOMBALI		4,924	6,836			1,345		13,105
TONKOLILI	1,223		3,399			3,155		7,777
KONO		2,030						2,030
KENEMA	3,879				4,437			8,316
KAILAHUN	1,603		3,377	7,937				12,917
WESTERN AREA RURAL		1,850						1,850
WESTERN AREA URBAN	1,057							1,057
MOYAMBA		1,955						1,955
BO	3,668							3,668
TOTAL	13,228	10,759	13,612	7,937	4,437	4,500	5,324	59,797

WORLD FOOD PROGRAMME'S EVD RESPONSE: WFP played a critical role in supporting the EVD response. WFP provided logistical support and food assistance alongside the health response to address the food security impacts of the health emergency.⁷¹ WFP's food assistance support was categorized into three pillars:

- Care pillar supported patients at Ebola Treatment Units (ETU) in the form of meals at the units and provided food assistance to contact cases (family and community members who had been in contact with EVD patients).
- Contain pillar included food assistance support to hotspot communities, areas of widespread EVD transmission and where households and communities were being kept under isolation or in quarantine.

⁷⁰ Data for this table come from multiple sources: NaCSA payrolls (NaCSA, 2015a) and (Guluma and Frisetti, 2018).

⁷¹ This section draws heavily on Shepherd et al. (2017).

- Protect pillar included support to survivors discharged from ETUs, food-insecure households in former hotspot communities, orphans and those caring for them, and other activities to support the post-EVD outbreak transition.

Most WFP support was provided in the form of in-kind food items. In-kind assistance was considered the most appropriate for quarantined communities given the lack of access to markets. There was some use of cash and vouchers to allow access to fresh items (for example, vegetables) for patients and survivors even at the height of the crisis and during the post-EVD outbreak transition phase.

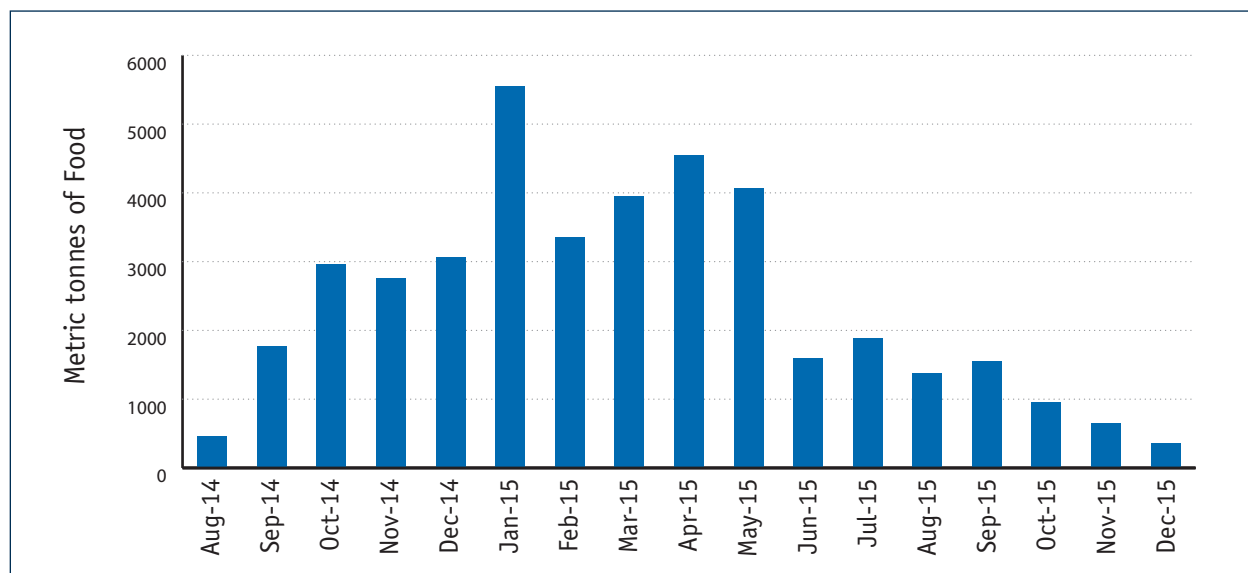
Table 8 below summarizes the number of beneficiaries supported by WFP through these different pillars, while Figure 8 provides an indication of the timing of WFP's support.

TABLE 8: NUMBER OF WORLD FOOD PROGRAMME BENEFICIARIES BY PILLAR AND ACTIVITY (2014–2015)⁷²

Pillar	Category of Activity/Beneficiary	Beneficiaries		
		Male	Female	Total
CARE	Treatment	11,244	12,181	23,425
	Contact-traced households	34,624	37,509	72,133
CONTAIN	Hot-spot communities	520,531	563,909	1,084,440
PROTECT	Discharge (survivors and households)	9,346	10,124	19,470
	Food-insecure in former hotspots	244,889	265,296	510,185
	Support to orphans and foster households	8,832	9,568	18,400
	Short-term targeted supplementary feeding	22,621	24,506	47,127
	Short-term support to clean up schools	109,512	118,638	228,150
TOTAL (adjusted for duplication and overlap)		707,364	766,311	1,473,675

72 Shepherd et al. (2017).

FIGURE 8: QUANTITY OF MONTHLY FOOD COMMODITIES DISTRIBUTED BY WORLD FOOD PROGRAMME (2014–2015)⁷³



LANDSLIDE AND FLOOD RESPONSE CASH TRANSFER PROGRAM: A multi-purpose cash transfer was provided to households severely affected in the August 2017 landslide and flood disaster. There were three main interventions: (i) a UNICEF/NaCSA-led intervention supported about 1,900 households; (ii) a Red Cross-managed intervention supported a further 1,000 households;⁷⁴ and (iii) a final ONS-led round of support for about 200 households.⁷⁵ UNICEF/NaCSA provided its support in three tranches, whereas the Red Cross and ONS provided one-off payments. Although the exact amounts provided by each differed slightly, they were comparable.

SOCIAL PENSION: In 2007, the Ministry of Labour and Social Security (MLSS) launched a social pension, the National Social Safety Net Program. It initially supported 16,800 people in a six-month pilot.⁷⁶ The program has continued but receives inadequate and intermittent financing.⁷⁷ MLSS launched a social pension in 2004 called the Social Safety Net Program for the Vulnerable Aged.⁷⁸ It initially supported 16,918 people in a six-month pilot. The program has continued since then and is 100 percent financed by the government, but funding is inadequate and intermittent affecting the payments to beneficiaries. The MLSS has recently launched a new National Aging Policy which seeks to strength the provision under the Social Safety Net Program for the Vulnerable Aged.

LABOR-INTENSIVE PUBLIC WORKS: A number of labor-intensive public works interventions supported by development partners are being (and have been) undertaken in Sierra Leone. Most either partner with the Ministry of Agriculture, Forestry and Food Security (WFP and FAO interventions) or with NaCSA (World Bank- and KfW/GIZ-supported interventions).

⁷³ Ibid.

⁷⁴ Initially, the Red Cross planned to support 750 households but revised this upward to 1,000 (IFRC, 2018).

⁷⁵ Data not confirmed.

⁷⁶ During this pilot, beneficiaries received Le 200,000 (approx. US\$50) in one or two tranches over the six-month period.

⁷⁷ Silvério Marques et al. (2013).

⁷⁸ The program was launched through Cabinet Conclusion C.P.9 (2004).

The geographic extent of WFP's ongoing Food Assistance for Assets (FFA)⁷⁹ program and the number of beneficiaries it supports varies over time depending on the most recent food security information and the financing available. In 2019, the program worked in eight districts (Bombali, Falaba, Kambia, Karene, Kenema, Koinadugu, Pujehun and Tonkolili) with 15,640 beneficiaries receiving in-kind FFA and 9,525 (all in Pujehun District) receiving cash transfers. The maximum benefit for any participant is the equivalent of 60 days of food. The works focus on rehabilitating and developing community-owned, small-scale irrigation systems to enable year-round cultivation of rice and vegetables.

The KfW/GIZ-supported intervention is a component of its broader Pro-Poor Growth for Peace Consolidation program which also comprises support to livelihood diversification through an Enterprise Development Fund and District Council support. Public works are identified through a District Council-led process, with proposals submitted by the Council for particular public works projects. This intervention emphasizes the asset provided, but a minimum of 30 percent of local labor is expected to be employed; and this is usually significantly exceeded.⁸⁰

In addition to the above, a number of smaller-scale cash transfer programs have been implemented. For example, Jericho Road Ministries is supporting vulnerable children who were affected by Ebola to stay in school. The project is supporting 150 beneficiaries (orphans, single-parent children and survivors) in selected chiefdoms of Kono with a cash grant to support their attendance at school (primary, junior and secondary). Le 15,000,000 is disbursed quarterly to beneficiaries who were selected in collaboration with community stakeholders. More recently, Concern - with financing from the Start Fund⁸¹ - supported the reconstruction of homes destroyed by the March 2019 Kroo Bay and Susan's Bay "group fires" (see Box 1 above for definition). Concern worked with landlords and residents to reconstruct homes with cash grants provided to the landlords to undertake the reconstruction, to residents to provide labor inputs and to put in place agreements that ensure the residents some security of tenancy.

79 Food assistance can comprise transfers to be beneficiaries made in-kind or in the form of cash.

80 Aggregate data from 2015 to 2017 show that 78 percent of the labor can be considered local (NaCSA, 2018).

81 The Start Fund is a multi-donor pooled fund that provides rapid funding to NGOs to support responses to underfunded small crises and early/rapid responses to other small to medium crises. The fund aims to disburse within 72 hours of a (successful) application being received, with work on the ground expected to start within seven days.

3 Scalable Safety Nets in Sierra Leone: Analysis of Recent Experience

As highlighted in the introduction, there are a number of ways in which safety nets can be scalable to respond to shocks: vertical or horizontal expansion; tweaks in design; and piggybacking or alignment. There are a number of examples of how these different options have been utilized in Sierra Leone. For example, during the EVD outbreak, NaCSA expanded coverage of its safety net program to new beneficiaries and increased its benefit levels for existing clients. The *Ep Fet Po* program adjusted its targeting approach and payment mechanism (design tweaks) during the EVD outbreak in ways which reduced the level of contact (and therefore disease transmission) during the targeting period and enabled payments to continue despite travel restrictions. While NaCSA horizontally expanded its safety net support under the RE-SSN project, other implementers the RE-SSN project delivered identically aligned programs to ensure greater coverage of affected populations. And although there was no pre-existing registry of households in affected areas for the landslide and flooding response, multiple agencies piggybacked on a process for registering disaster-affected households. These experiences and the lessons learned are explored further in the sections below.

3.1 Source of Financing and Funds Flow

Experience from across the globe has demonstrated that the source of the funding that supports the response to shocks has important implications for the extent to which the funds may be channelled through existing programs and, importantly, government systems.⁸² This section analyzes the financing for the social protection responses to shocks in Sierra Leone, considering first the source of financing and then the implications on the flow of finances.

According to the National Disaster Preparedness Plan, only level three disasters are expected to require international assistance (see Box 3 above). Level one disasters are expected to be addressed through a district-managed and -financed response, and level two disasters escalated to the national level. In practice, financing is not available or budgeted for and/or is not forthcoming even for minor disaster events such as the recent group fires. District Councils visited in the course of this assessment point to the severe lack of resources available at the district level. These findings are substantiated by the available literature: while a significant proportion (46.3 percent) of expenditure supports local services delivery less than 6.7 percent is actually controlled by District Councils.⁸³ In April/May 2019, districts had yet to receive allocations from the national government since the start of the financial year (January).

As a result, most financing for social protection responses to emergencies has been triggered through traditional humanitarian funding mechanisms with financing sought from international donors, specifically from their emergency funds. Use of these traditional mechanisms means that funds are appealed for after a disaster event and after some form of needs assessment has taken place. Approval

⁸² See for example: Bowen et al. (2020) and Seyfert et al. (2019).

⁸³ Boex (2013).

for such funds frequently has to go through processes within the donor governments or multilateral institutions, which can be lengthy, delaying the urgently needed assistance. A notable exception is allocation of financing from the World Bank to respond to the Ebola Virus Disease (EVD) through the Rapid Ebola (Virus Disease) Social Safety Net (RE-SSN) project.

Key government agencies such as the Ministry of Finance and the ONS Disaster Management Department have expressed interest in pre-arranging financing, including a disaster fund to pre-position development partner funds for emergency response.⁸⁴ A number of governments have established similar funds to finance preparedness, response and rehabilitation activities. The advantage of these funds, if designed well with clear rules, appropriate governance measures, well-defined triggers and pre-identified disbursement channels, is rapid disbursement. Key disadvantages include the opportunity cost of allocating budget if there is no disaster.

BOX 4: COST-EFFECTIVENESS OF EARLY RESPONSE

There is significant international evidence regarding the cost-effectiveness of an early response. With sudden-onset disasters, such as the landslide, the importance of supporting households in the immediate aftermath of the shock is obvious. But even in slower-onset disasters, evidence shows that an early response can be cheaper and more effective.

A five-country study looking at Bangladesh, Ethiopia, Kenya, Mozambique and Niger found that early response could save billions of dollars. For example, Kenya could save US\$21 billion over a 20-year period.⁸⁵

Such an approach often makes use of triggers to identify early signs of a crisis and to automatically launch a response with the risk that a response might be 'falsely triggered' for a crisis which does not unfold. Although this is a risk inherent to an early response approach, evidence shows that an early response could be taken 2-6 times in response to false positives before the costs would outweigh a late response.⁸⁶

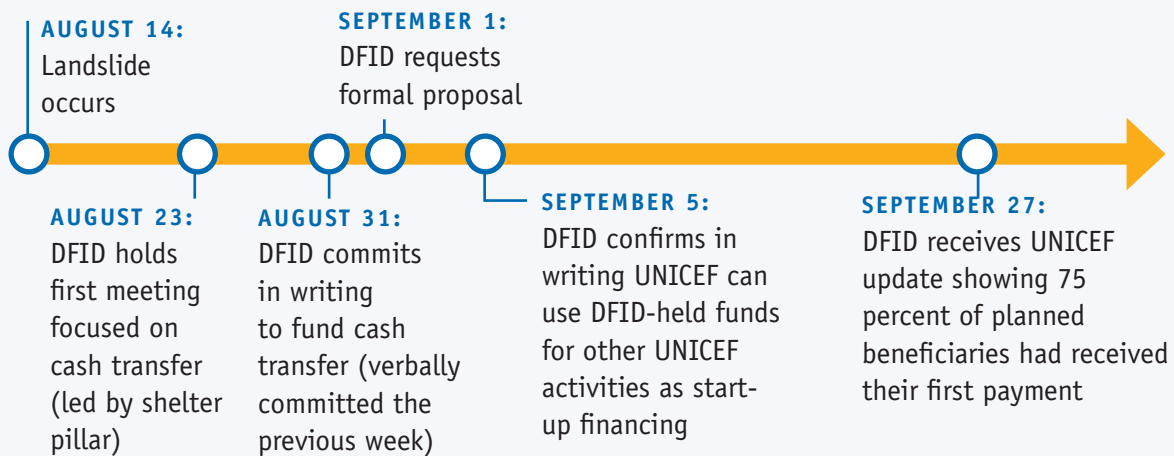
Source: Authors

⁸⁴ The establishment of a National Disaster Management Fund is included in the recent National Disaster Management Agency Act.

⁸⁵ DFID (2013a).

⁸⁶ DFID (2013a).

BOX 5: TIMELINE OF DFID FINANCING FOR CASH RESPONSE TO LANDSLIDE AND FLOOD DISASTER (2017)⁸⁷

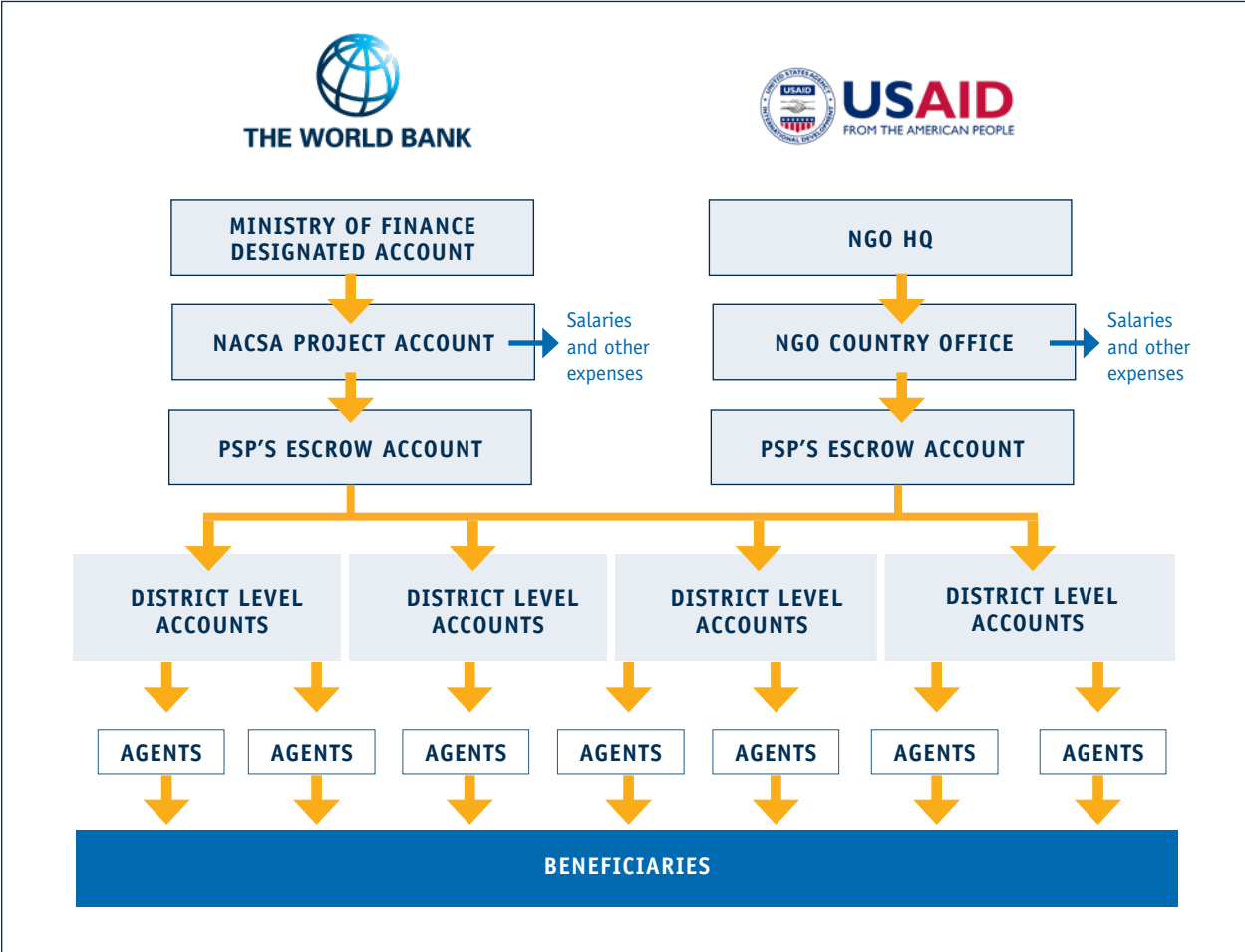


While traditional emergency financing mechanisms are prone to delays, there are examples of donors successfully expediting financing and/or the use of rapid response funds. For example, DFID committed funding for a cash response within two weeks of the August 2017 landslide and flood disaster and ensured initial funding was available within three weeks of the disaster (and less than a week from the request for a proposal, see Box 5 for more details).⁸⁸ Although funding was not immediate, much of the delay can be attributed to the time taken to decide on a cash transfer response and the details of this response. As Box 5 shows, the first meeting on a possible cash transfer intervention did not take place until two weeks after the crisis, then taking another week to discuss and agree on the response details. (This was largely worked out prior to DFID requesting that UNICEF submit a formal proposal.)

This reliance on emergency financing has important implications for how support was designed and delivered in Sierra Leone. Typically, funding for emergency interventions is channelled through humanitarian organizations: the UN and NGOs. Project-specific systems and procedures are established to manage funds and, in the case of cash transfers, to put in place mechanisms for disbursing transfers to beneficiaries. The landslide and fire disaster interventions discussed above followed such an approach, but RE-SSN followed an alternative path. It built on an already existing set of systems of the *Ep Fet Po* programme to enable the management of financing and the disbursement of payments to beneficiaries through government systems. World Bank financing for the RE-SSN project used the same systems as those for the *Ep Fet Po* program with funds disbursed into a designated account managed by NaCSA. Funding for the cash transfer component then flowed into a national-level escrow account for the payment service provider (PSP) for onward disbursement to district-level accounts. PSP roaming agents would receive cash from these district-level accounts once a payment had been scheduled and authorized and would disburse payments to beneficiaries at pre-specified payment collection points.

USAID funding for the RE-SSN project, while disbursed to NGOs, used the same payment service provider, which contributed toward a coherent response to EVD. Figure 9 below highlights the similarities and differences in the funds flow between the NaCSA-managed portion of the RE-SSN project and NGO-managed sub-projects. The National Social Protection Secretariat played a key role in advocating for this approach, in defining a common set of procedures and in coordinating the implementing agencies.

FIGURE 9: SIMPLIFIED FLOW OF FUNDS COMPARING RE-SSN MANAGED BY NACSA AND NGOS



Source: Authors

Evidence from interviews with donors in-country as well as public reports suggests that a key factor hindering greater use of government systems for managing emergency (and development) interventions has been concerns regarding corruption and the risk of the misuse of funds.⁸⁹ Sierra Leone ranks 129 out of 180 on Transparency International’s Corruption Perception Index⁹⁰ with reports identifying significant issues with how resources are allocated in budgets, procurement and requests for bribes.⁹¹ These concerns drive donors to limit their use of budget support and/or to channel funds through management agencies for additional oversight.

89 DFID (2013b) and e-PACT (2016).
 90 Transparency International (2018).
 91 Centre for Accountability and the Rule of Law (2020) and World Bank (2017b).

3.2 Early Warning and Response Planning

Data are critical for identifying when a shock requiring a response has occurred and for informing the design and planning of any such response. There have been investments in Sierra Leone to try and improve the availability of data but there is fragmentation in how investments occur and room to improve preparedness by further enhancing pre-shock planning.

3.2.1 Early Warning and Hazard Data

There have been a number of attempts to improve the collection of early warning information in Sierra Leone. It is impossible to detail here all the different early warning systems recently used or in place, but five examples are briefly described.

BOX 6: OTHER FOOD SECURITY INFORMATION

A number of actors have been involved in gathering and analyzing food security information in Sierra Leone. Prior to 2017, FEWSNET operated in Sierra Leone and prepared regular food security reports. In 2017, a joint FEWSNET/Save the Children project undertook a household economy approach assessment, resulting in livelihood profiles for the ten identified livelihood zones. But the resulting reports and data set have no obvious institutional home in Sierra Leone and, outside of Save the Children, as none of the people interviewed for this assessment were aware of the report and the available data. This suggests the need for a more harmonized, institutionalized approach to early warning data collection and analysis.

Source: Authors

NATIONAL EARLY WARNING SYSTEM ON FOOD AND NUTRITION SECURITY: The National Early Warning System on Food and Nutrition Security was the result of an FAO-run project financed by Irish Aid. The Ministry of Agriculture, Forestry and Food Security (MAFFS) led the system to monitor food security and nutrition. The project developed a set of data collection tools and trained national and district staff with the relevant skills to operationalize these tools. Data were reported monthly from the districts to MAFFS which produced periodic reports. The FAO project ended in June 2017 and district staff report that since then, district-level data gathering and reporting has ceased.

FOOD SECURITY MONITORING SYSTEM: This activity is supported by the World Food Programme (WFP) and financed by the Government of Japan. It started in 2018 and aims to provide “up-to-date and reliable food and nutrition security data to guide responsive government policies and programs to build food and nutritional resilience and enable the government and development partners to track changes in food and nutrition security over time.”⁹² FSMS is implemented in conjunction with MAFFS and aims to collect data quarterly from sentinel sites in the then 14 districts (there are now 16 districts). To date three reports have been produced: September 2018, February 2019 and September 2019. FSMS is complemented by regular market monitoring (a joint WFP/MAFFS activity) and periodic Comprehensive Food Security and Vulnerability Analysis assessments and reports (with the last one conducted in 2015).

92 WFP (2018).

HYDROMET DATA: Sierra Leone’s Meteorological Agency (SL Met) initially was established to provide critical weather data for air traffic and shipping. As a result, SL Met reports to the Ministry of Transport and Aviation. However, in recent years, development partners have invested to improve weather reporting, including for agriculture and flood risk.

ONS CRISIS MONITORING: ONS staff at the district level provide daily updates on security. These updates include major incidents such as flooding or fire which have affected the district. There is a plan to start automating this reporting system using ‘KoBo Collect’, but this is not yet operational. Additionally, ONS has attempted to introduce basic standardized data collection post-disaster. ONS maintains a spreadsheet which includes information as the nature of the disaster and the number of people affected. The process lacks clear criteria on how events are recorded. There are also efforts to use the Multi-Cluster/Sector Initial Rapid Assessment (MIRA) tool⁹³ for assessing needs following an emergency.

BOX 7: OTHER DISEASE SURVEILLANCE SUPPORT

Following the EVD outbreak in 2014, there was significant interest in ensuring early detection of disease outbreaks in Sierra Leone. As a result, a number of agencies, including NGOs, have started programs seeking to improve the quality of surveillance data. For example, the Red Cross through its CP3⁹⁴ program is supporting community surveillance of key diseases. They are piloting the approach in three chiefdoms of two districts (Kailahun and Kambia).

Source: Authors

INTEGRATED DISEASE SURVEILLANCE AND RESPONSE: The Ministry of Health and Sanitation partially launched its Integrated Disease Surveillance and Response (IDSR) system in 2003. Following the EVD outbreak, WHO and CDC provided technical support while DFID, African Development Bank and a Multi-Party Trust Fund provided financial support to capacitate IDSR to promptly detect and respond to epidemic-prone diseases. By September 2015, all districts submitted paper-based reports and by February 2017, all districts reported electronically.⁹⁵ The risk of technical support withdrawing may impact data completeness and quality.⁹⁶

In addition, there have been considerable recent investments in hazard profiling. UNDP supported the ONS Disaster Management Department to develop national hazard profiles for Sierra Leone. The first National Hazard Assessment was undertaken in 2004 and, as mentioned, was updated in 2017. Additionally, the World Bank undertook an urban hazard assessment in 2018. It includes detailed assessments of the three largest cities in Sierra Leone, Freetown, Makeni and Bo, and resulted in a Sierra Leone Multi-City Hazard Review and Risk Assessment report.⁹⁷

93 The MIRA tool was developed by the Inter-Agency Standing Committee (an inter-agency forum of UN and non-UN humanitarian partners based in Geneva) as a joint needs assessment tool that can be used in sudden onset emergencies.

94 The Epidemic and Pandemic Preparedness Program, which is expected to work in multiple countries, is supported by USAID through the International Federation of Red Cross and Red Crescent Societies.

95 The Epidemic and Pandemic Preparedness Program, which is expected to work in multiple countries, is supported by USAID through the International Federation of Red Cross and Red Crescent Societies.

96 Njugun et al. (2019).

97 Campbell et al. (2018).

Districts are expected to develop District Disaster Management and Response Plans. These plans are expected to identify key hazards affecting districts (such as disease outbreaks, windstorms, fires, pollution, road accidents or conflict); and the potential role different sectors and organizations should play in mitigating crises and/or supporting a response. The plans are being developed by the District Disaster Management Committees which are comprised of both MDAs and non-state actors (such as, the Red Cross, United Nations and NGOs). The two districts visited in the course of this study reported that they were in the process of developing these plans.

Internationally, interest is growing in the identification of pre-defined, verifiable triggers which allow resources to be deployed rapidly in the event of a crisis. However, this review was not able to identify the existence or use of any such triggers in Sierra Leone. The ease with which appropriate triggers can be identified varies depending on the nature of risks and the types of data available in-country. The nature of the common risks in Sierra Leone may make identifying simple triggers challenging.

As the above paragraphs indicate, although there is no overall early warning system for Sierra Leone, there is (or has been) significant data collection related to some of the country's key risks. However, many of the activities related to this data collection have been implemented as time-bound projects. This project approach has a number of drawbacks, which are evident in Sierra Leone:

- Data collection, analysis and report production depends on project funding. Generally, when financing for the project ends, data collection ends.
- Although staff of relevant MDAs may benefit from technical training and participate in data collection exercises, there can be a lack of government ownership of activities, systems and products. This risk can be compounded by the eagerness of technical support agencies to use their institutions' preferred methodology, software and approach.
- Multiple agencies can support similar interventions but with minor differences of approach (that is, duplication) which can make consolidating data collection difficult.

Having an effective early warning system does not require having one overall comprehensive system. It does, however, require greater clarity regarding institutional responsibility for collecting different types of data and the use of systems to analyze data and share results with key decision-makers. Data gaps and fragmentation do likely contribute to a reduced ability to respond effectively to different disasters.

3.2.2 Response Planning

Planning for a possible cash response to the EVD outbreak began in late 2014. As the economic impacts of the crisis became more apparent, it became clear that it was important to treat the EVD outbreak as more than just a medical emergency.⁹⁸ Travel restrictions limited the ability to undertake additional data collection while the EVD crisis was ongoing. Instead, the RE-SSN planners used a combination of existing poverty data and data generated by the health system on the geographic variation in affectedness. The overall time taken between the first idea of undertaking a cash response (the first Cash Working Group meeting was held in November 2014) and the first payment reaching beneficiaries (May/June 2015) was approximately seven months.

⁹⁸ As Figure 8 above shows, an in-kind response was made available to affected communities long before stakeholders began planning a cash transfer response.

An important feature of Sierra Leone's EVD social protection response was the development of a common response plan, Standard RE-SSN Operating Procedures. The National Social Protection Secretariat played a key role in convening stakeholders, discussing the key parameters of an EVD response and documenting the resulting agreements in the form of Standard Operating Procedures. The development of this document and the associated consultation and advocacy enabled a consistent approach to delivering a cash transfer response to the EVD crisis. It also enabled multiple delivery agencies to make use of (piggyback on) core infrastructure such as the MIS and payment systems established by the *Ep Fet Po* program. Further, the fact that a government agency led this process has helped to increase wider government buy-in regarding the role of social protection in shock response which has contributed to subsequent efforts such as the landslide response, the inclusion of a shock responsive approach in the Additional Financing for the Social Safety Nets project and the current COVID-19 response.

The potential of a cash transfer response to the landslide and flooding in August 2017 was recognized quickly. The first cash transfer-focused meeting took place one week after the event, with a formal commitment to finance a response submitted in writing one week later (see Box 5 above). Within a week, most design parameters for the response had been discussed and agreed. Key data used to formulate the response include: the number of affected households; prior experience or knowledge of potential payment architecture and grievance mechanisms; and a rapid analysis of the appropriate benefit levels. The first payment reached most beneficiaries within five weeks of the initial cash transfer discussions.

Sierra Leone has consolidated this learning into guidance. The Social Transfer Emergency Preparedness and Response Plans help implementers think through the roles of social transfers in emergency response and the key considerations in setting up an emergency social transfer intervention. The document provides a useful checklist of design issues, including: benefit levels, targeting, payment mechanisms and grievance redress mechanisms. However, it falls short of the level of prescription needed to act as a manual for response.

Further, Sierra Leone had started applying learning from the EVD outbreak well before its first COVID-19 case or WHO's classification of COVID-19 as a pandemic. As early as mid-February 2020, urban areas had activated precautionary hygiene measures, including facilities for handwashing and sanitizing outside of commercial and public spaces. Following WHO's reclassification of COVID-19 as a pandemic, the government activated an emergency response center, established an inter-ministerial committee to coordinate preparedness for and response to the virus, and began putting in place measures to reduce the risk of the virus reaching Sierra Leone and to limit its spread should it arrive. These measures include closing the airport and land borders to passengers, introducing internal travel restrictions, imposing curfews on bars and restaurants, forbidding worship in churches and mosques, and temporarily closing schools as well as steps to assess and increase the capacity of public health laboratory and treatment facilities.

At the end of March 2020, the government developed a Quick Action Economic Response Plan to address the financial and economic impacts of the COVID-19 pandemic and established a High Level Coordinating Group (comprised of MDAs and development partners) to oversee its implementation. A Social Protection Technical Working Group was established to identify and coordinate social protection interventions within this plan. In coordination with the Working Group, NaCSA moved quickly to activate the US\$4 million contingent funds under the SSN Additional Financing to finance emergency cash transfers for informal sector workers in five cities: Bo, Freetown, Kenema, Makeni and Port Loko. An

Emergency Response Manual, which drew from the experience captured in this report, was rapidly drafted to guide implementation of the cash transfer. The Manual was finalized and agreed upon between NaCSA and the World Bank on April 28, 2020. Targeting and beneficiary enrollment began at the end of May in the four cities, with payments reaching the first 10,000 beneficiaries in early June. Incorporating lessons learned from this first round of implementation, the remaining 19,000 beneficiaries in Freetown are currently being targeted, enrolled and paid at the time of writing (end of June 2020).

3.3 Targeting and Registration

Neither the cash response to the EVD crisis or the mudslide and flood disaster cash intervention could be implemented as a simple scale-up of an existing cash transfer; but there were still opportunities to make use of pre-existing tools and learning. The design needs of the responses differed from one another and from the geographic coverage and target group of the existing safety net. Despite this, the RE-SSN project was able to piggy-back on existing systems and procedures developed by the *Ep Fet Po* program by just adding criteria related to the EVD crisis to already-existing geographic and household targeting criteria and by adapting pre-existing tools. The National Social Protection Secretariat's coordinating role was critical in adjusting the targeting mechanism, facilitating its use among government agencies (NaCSA) and development partners (USAID-financed non-governmental organizations). The landslide/flood response required a new approach to registration and suffered from confused responsibilities and a lack of capacity to implement it. The sections that follow discuss these issues in detail.

3.3.1 *Ep Fet Po*

Targeting for the *Ep Fet Po* program was designed to follow a three stage targeting process:

- **GEOGRAPHIC TARGETING:** The program aimed to target the poorest district in each of Sierra Leone's then four regions. Poverty data informed the distribution of caseloads within districts, with poorer chiefdoms benefiting from a higher allocation than better-off chiefdoms.
- **COMMUNITY-BASED TARGETING:** Each chiefdom was divided into sub-clusters and within each cluster, community representatives were expected to identify a short-list of households that met program criteria (that is, being the poorest).
- **PROXY MEANS TESTING:** Statistics Sierra Leone staff collected socio-economic data through household visits. Using the Sierra Leone Integrated Household Survey and census data, a proxy means test (PMT) was devised to analyze the collected data and to enroll households in the program.

The Social Protection Registry for Integrated National Targeting (SPRINT), which is an NSPS management information system, facilitated the proxy means test. SPRINT also manages the resulting beneficiary registry.⁹⁹

The *Ep Fet Po* program was rolling out when the EVD outbreak occurred in 2014. The core *Ep Fet Po* implementation arrangement, therefore, had to be adjusted to ensure that project activities did not become a means of disease transmission. Key changes were made to the targeting procedures to simplify the approach and to reduce the contact between those carrying out the targeting and the communities.

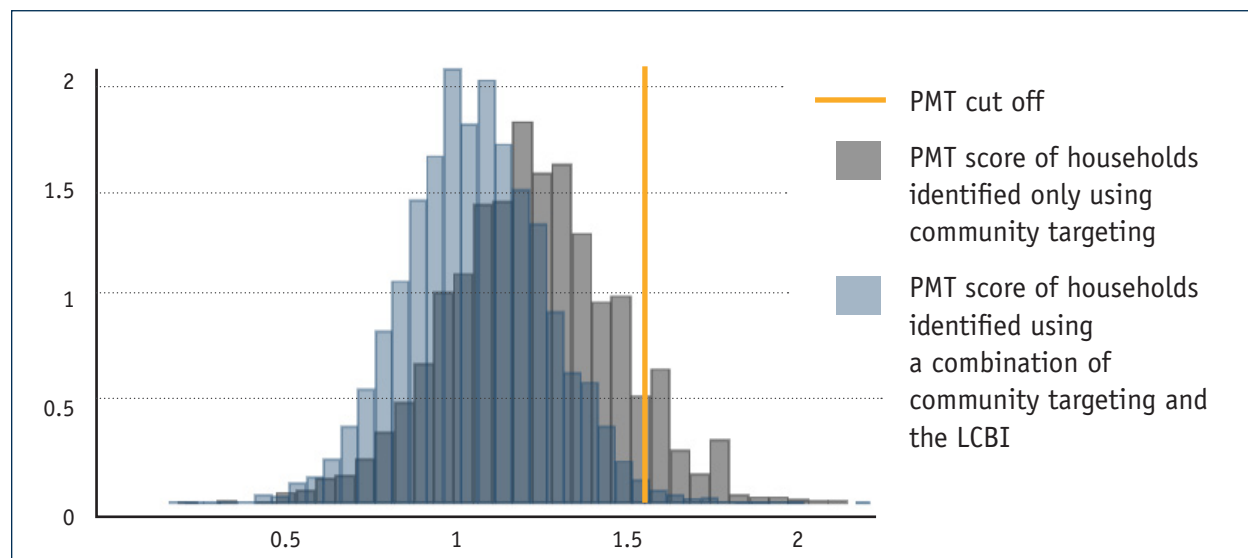
⁹⁹ SPRINT has been set up with a view to it being of use to other programs, including those managed by MDAs other than NaCSA.

This did not change the geographic targeting approach, but affected the community and PMT targeting stages.

As a result, a light community-based identification (LCBI) method was introduced for most of 2015; it reduced contact and eliminated large community gatherings in the targeting process. The light PMT developed by RE-SSN (see below) was used by communities as part of the targeting process. Additionally, a full PMT was applied but using limited interactions through collecting and analyzing data and enrolling (qualified beneficiaries) in a single field visit.

A 2017 assessment found that *Ep Fet Po* (and RE-SSEN) targeting processes were robust. Further, the LCBI had a significantly positive impact on the effectiveness of the community-level targeting. As Figure 10 below shows, most households identified by community representatives fall below the PMT cut-off for the program. When community targeting is complemented by the LCBI approach, those identified for the program are poorer.

FIGURE 10: PROXY MEANS TEST SCORES COMPARING THE STATUS QUO, COMMUNITY-BASED AND COMMUNITY-BASED PLUS A LIGHT PMT¹⁰⁰



While *Ep Fet Po* targets households (not individuals), international evidence shows that who receives benefits in the household can matter. Providing benefits to women household members increases their decision-making power over how transfers are used. This both increases the chance that benefits are used for intended purposes (increased food consumption and investments in maternal and child health) and can improve women’s standing in their households and the community. For these reasons, the *Ep Fet Po* program specified that female household members receive the transfer on behalf of the household.

100 Lersuridej and Spivack (2017).

3.3.2 RE-SSN

As discussed, the RE-SSN project comprised financing from three donors and was implemented by NaCSA and five international NGOs working to a common set of operational guidance. This common set of operational guidance included a common targeting mechanism adapted from that used by *Ep Fet Po*. NaCSA developed, in collaboration with stakeholders, a three-tier common targeting mechanism:

- **GEOGRAPHIC TARGETING:** The *Ep Fet Po* program focused on the poorest district in each region, but this poverty focus did not correlate with areas most affected by the EVD outbreak. The geographic target for RE-SSN was based on a combination of data on EVD caseloads and poverty to select districts and chiefdoms for RE-SSN operations and to allocate beneficiary numbers to district and sub-district levels. Initially, RE-SSN planned to expand to areas where *Ep Fet Po* was not operational; but when additional funding became available, RE-SSN increased beneficiary numbers in established *Ep Fet Po* districts (see Table 8 in section 2.4).
- **LIGHT COMMUNITY-BASED IDENTIFICATION:** A light community-based identification method used for *Ep Fet Po* was further adjusted for use by RE-SSN to accommodate criteria specifically related to vulnerability caused by the EVD outbreak. The light community-based identification criteria are listed in Box 8 below.
- **LIGHT PROXY MEANS TESTING:** A shortened version of the proxy means testing was developed which could be administered by NaCSA at the same time as the community-based identification and did not require household visits. SPRINT was used to facilitate analysis using the light PMT and to manage the resulting registry of beneficiaries.

BOX 8: CRITERIA FOR SELECTING EXTREMELY POOR HOUSEHOLDS AFFECTED BY EBOLA VIRUS DISEASE¹⁰¹

- Building material of household roof/floor/walls is low quality (e.g., thatch roof, wattle, mud brick walls)
- Household lives in a single room
- Household size is five persons or more
- Household has children under five
- Household has children between five and nine years old
- Household head is illiterate or has little or no education
- Household does not have access to safe drinking water (e.g., public tap, tube well, borehole)
- Household does not have access to improved sanitation (e.g., bush, unprotected latrines)
- Household does not have any animals (e.g., chicken, ducks, cows, sheep)
- Household lost main livelihood due to Ebola (e.g., illness or death of a primary income earner, fear of contagion, ostracized for having or knowing someone with Ebola)
- Household depleted or lost assets due to Ebola (e.g., distress sale, destruction of property)
- Households has Ebola survivors or children orphaned by Ebola
- Child-headed and other households with insufficient financial support to meet basic consumption needs

101 NaCSA (2015b).

The role of the NSPS in defining a common targeting mechanism across RE-SSN was widely appreciated. Their role in geographic targeting and thereby coordinating the efforts of NGOs and themselves meant that the risks of any duplications of effort and wasted resources were avoided. Instead, a clear national plan helped to ensure that resources reached the most affected areas and took into consideration poverty levels. An assessment of the USAID-financed portion of RE-SSN found that capacity constraints within NaCSA did challenge the rapid processing of targeting data for the combination of NaCSA- and NGO-implemented RE-SSN interventions and this resulted in delays in the start-up of programs.¹⁰²

In late 2016, it was agreed that those households that had been supported by NaCSA through World Bank financing should be enrolled into the longer-term *Ep Fet Po* program if their poverty status was confirmed after the fuller PMT designed as part of the *Ep Fet Po* program was applied. As a consequence, about 81 percent of the 8,972 beneficiaries financed by the World Bank under the RE-SSN project were enrolled into the longer-term *Ep Fet Po*. This reflects favorably on the performance of light community-based identification method used by RE-SSN. In late 2017, the same process was followed to enroll households financed by DFID into the longer-term *Ep Fet Po*.

As with the *Ep Fet Po* program, female household members were preferred as the designated recipient of RE-SSN benefits. An analysis of the NGO-implemented interventions¹⁰³ found that as a result, 70 percent of recipients were women (irrespective of whether a woman was head of household). While focus groups expressed concerns that such decisions “emasculated men,” most community leaders and discussion participants reported that the cash transfers reduced intra-household arguments over the need for money to purchase food or pay school fees. A gender impact assessment undertaken by one of the implementing NGOs¹⁰⁴ found that even prior to the crisis and the cash transfer, there was significant discussion within the household on key decisions, including the use of income, and that this experience continued with regard to decisions over the use of the RE-SSN cash transfer.

3.3.3 Landslide and Flood Disaster Emergency Cash Transfer Project

The target group for the landslide and flood disaster emergency cash transfer were all households directly affected by the disaster (regardless of other socio-economic data). The targeting process, therefore, was based on a registration of households that had been affected.

As described in section 2.3 and Table 7, a pillar system supports the ONS Disaster Management Department in the implementation of emergency responses. At the time of the landslide and flood disaster, the Ministry of Social Welfare, Gender and Children’s Affairs (MSWGCA) was responsible for the registration pillar.

Most stakeholders report significant challenges with the registration process. Some of these challenges can be attributed to the demanding context in the affected areas:

- The nature of the disaster meant that those affected were significantly traumatized. In some cases, people had fled area as a consequence of fear, which made it difficult to track those affected. The traumatic nature of the disaster also likely affected implementing-agency staff.

102 Radice (2017).

103 Guluma and Frisetti (2018).

104 ACDI/VOCA (2016).

- Urban communities often lack the social cohesion of their rural counterparts and recent rapid urbanization in Sierra Leone further compounds this by reducing the extent to which people know their neighbors well.
- The affected population largely lived in informal settlements, with high turnover of individuals and households. Residents suffer from insecure tenancies and frequently move from house to house and location to location.¹⁰⁵ This made it challenging to use either formal or informal means to determine who had been residents.

The initial registration process had significant issues. ONS envisioned that one registry (and one registering entity) would serve a multi-sectoral response. In the midst of the crisis however, this was not communicated to agencies, which began conducting registration, creating parallel processes. Data requirements of a multi-sectoral response were also not thought through adequately, including degrees of affectedness. To limit confusion and mitigate redundancy, ONS re-confirmed that under the registration pillar, MSWGCA was the lead, and sole, agency for registration.

MSWGCA began registration on the day of the disaster (August 14, 2017). The first iteration of the system was paper based and lacked protocols for verifying individuals. This first iteration resulted in 1,908 unverified households, raising concerns over potential inclusion and exclusion errors. As a result, WFP offered support, including: a protocol for verifying individuals/households and for digitizing the registration data. Verification was conducted by asking community representatives to confirm (or refute) that the listed households were personally known by them and that they were residents in the affected community. For households registered during the initial registration process, verification was conducted at a later date to the original registration. However, a second registration of affected households was undertaken in October 2017 and during this registration verification happened at the same time.¹⁰⁶ Digitization occurred by entering registration data into a WFP beneficiary registry platform called SCOPE (separate from NaCSA-managed system).

These challenges resulted in delays in the completion of the registration process which had knock-on effects on the timing of payments. Further, concerns remained with the overall quality of the process and the risk that unaffected households remained in the registry, while some of those who had been affected were never registered.

3.4 Setting the Benefit Level: Values, Frequency and Duration

The various cash transfer and safety net-type interventions in Sierra Leone have adopted varying benefit levels, frequency of payments and durations of assistance. These differences are largely the result of the specific circumstances the program is responding to and the objective of the intervention. However, prior experience and the typical modus operandi of different operators also play a key role as highlighted in the sections below.

¹⁰⁵ It has been difficult to access specific data on Sierra Leone, but high turnover and insecure tenancy features significantly in international literature, for example: Gunter (2014) and Concern Worldwide (2014).

¹⁰⁶ The majority of beneficiaries of the UNICEF/NaCSA-supported cash transfer were identified during the initial registration. Households registered later tended to benefit from support from the Red Cross or ONS.

3.4.1 *Ep Fet Po* and RE-SSN

The *Ep Fet Po* program and the RE-SSN project set the benefit amount at the household level and do not vary it based on household size. When the *Ep Fet Po* program started, beneficiary households were expected to receive a quarterly transfer equivalent to around US\$45 (Le 195,000). The benefit level was calculated on the basis of simulations on the expected outcomes on poverty of different benefit amounts. The duration of transfers under the first phase of *Ep Fet Po* was expected to be two years (eight quarterly transfers). This was extended to three years following the EVD outbreak. These design features aimed to establish a simple design that could be easily understood among the target communities and the general population, while also providing a meaningful benefit to households.

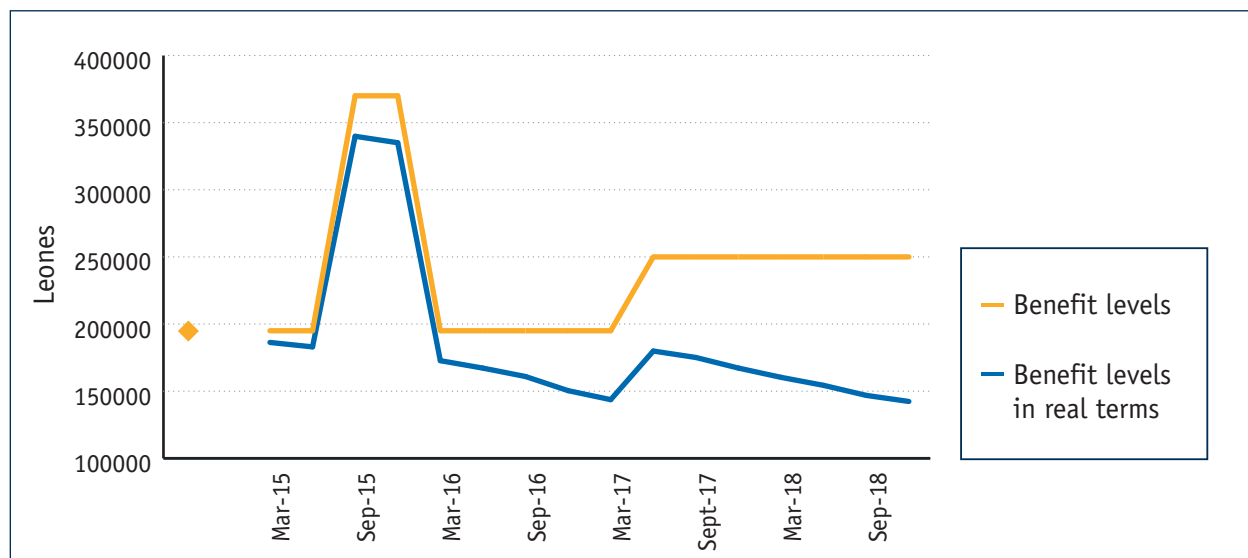
With the outbreak of EVD the decision was made to expand cash transfers through RE-SSN and this triggered a review of the transfer value provided under the *Ep Fet Po* program. Calculations suggested that if pre-EVD outbreak consumption rates were to be maintained and to help poor households cope with the economic shock of EVD then a doubling of the value of the transfer would be required. Therefore, for the duration of RE-SSN, the benefit level of both the RE-SSN project and the *Ep Fet Po* program was set at an equivalent of US\$90 per quarter (Le 370,000). The RE-SSN project initially was proposed to last for nine months, with three quarterly payments.¹⁰⁷

The NGOs, in discussion with the program financier (USAID), agreed to an extension in support beyond the nine months of assistance. In some cases, this extension included additional activities such as livelihood support or support to traders, but it also included a continuation of cash transfers to targeted households. This extension only affected beneficiaries supported by NGOs. With regard to beneficiaries supported by NaCSA, it was agreed that they would be enrolled as core *Ep Fet Po* beneficiaries subject to confirmation of their eligibility through the application of the full PMT. This validation process took time and as a result, there was a gap between the end of the RE-SSN project and the inclusion of households in the core *Ep Fet Po*. In 2017, the decision was made to go through the same process for beneficiaries supported by NaCSA through DFID financing. These households saw a gap in benefits of two years.

Following the end of the RE-SSN project, the benefit levels reverted to pre-crisis levels (Le 195,000). In 2017, an adjustment was made to the benefit level to take into consideration inflation. The benefit was increased to Le 250,000 (approximately US\$30). Despite the increases, as Figure 11 shows, benefit levels are not keeping pace with inflation.

107 It is interesting to note that a similar cash transfer program implemented by NGOs in Liberia provided transfers on a monthly basis. An evaluation of the NGO response in both countries highlighted the fact that in each country beneficiaries expressed a preference for the frequency of payments they had received (beneficiaries in Liberia expressed a preference for monthly transfers, while those in Sierra Leone expressed a preference for quarterly transfers). The evaluation was not able to independently assess whether one approach had a greater impact on beneficiary households (Guluma and Frisetti, 2018).

FIGURE 11: REAL VALUE OF EP FET PO BENEFITS (2015–2018)



Source: Author produced based on information collected through interviews and CPI data available from Statistics Sierra Leone, available at <https://www.statistics.sl/index.php/cpi.html>

Although the two programs have aimed to make quarterly transfers, on a number of occasions two transfers have been made at one time. For example, the first RE-SSN payment was delayed and went out as a double payment with the second RE-SSN payment; and similar lump-sum payments have taken place under the *Ep Fet Po* program.

3.4.1.1 Landslide and Flood Disaster Emergency Cash Transfer Project

Transfers for households affected by the landslide and flood disaster were also set at the household level. Four instalments of transfers were planned, each instalment was aimed at supporting households in different ways. Table 9 below summarizes the purpose of each benefit and the justification for the benefit level:

TABLE 9: LANDSLIDE AND FLOOD DISASTER: BENEFIT LEVELS, PURPOSE AND JUSTIFICATIONS¹⁰⁸

Installment	Benefit Amount	Purpose	Justification for Benefit Amount
FIRST (SEPTEMBER)	US\$120	Cover non-food needs, including but not limited to payment of school fees and other immediate social needs. WFP provided dry rations as a supplement.	Based on an estimate of school expenses, kitchen utensils and a dignity kit (soap, underwear, menstrual materials, towels).

108 UNICEF (2017c).

Installment	Benefit Amount	Purpose	Justification for Benefit Amount
SECOND (OCTOBER) AND THIRD (NOVEMBER)	US\$60	Help households to recover and stabilize by providing income support for essential items. WFP planned to provide a cash payment as a supplement but only in-kind assistance was available.	Equivalent to two installments of the benefits provided under <i>Ep Fet Po</i> (and thus a benefit level already known to people).
FOURTH (ANYTIME) FROM SEPTEMBER)	US\$300	A one-off recovery transfer for households who chose to voluntarily settle in temporary tented camps set up by the government and humanitarian actors. ¹⁰⁹	Based on an estimate of the cost of annual rent for a low-to middle-income household.

An evaluation of the intervention found that program beneficiaries highly valued the cash transfer and reported a significant difference in their ability to meet urgent needs in the immediate aftermath of the disaster.¹¹⁰ However, there is some evidence (both from the evaluation and from meetings conducted during this assessment) that the cost of meeting needs, particularly with respect to the cost of rent, was underestimated.

Households supported by ONS and the Red Cross received slightly varying amounts in single lump-sum payments (communities reported that the Red Cross benefit was Le 2,280,000 and that provided by ONS was Le 2,175,000).

A number of the stakeholders consulted, both from the community and development partners, questioned the instalment approach adopted by UNICEF and NaCSA and suggested that the lump-sum payment might be a preferable approach in the future. This may, in part, reflect some challenges in the payment mechanisms discussed below; but other reasons suggested were that beneficiaries were forced to spend considerable time accessing the different provisions provided as part of the landslide and flood response and that a lump-sum payment provided beneficiaries with a greater ability to manage and make decisions regarding how their households would use the money provided.

3.4.1.2 World Food Programme In-Kind Transfers

As described in section 2.4, WFP has provided support to poor and/or shock affected households over the past decades in Sierra Leone. The majority of support is in-kind, although cash-based interventions have been trialed. WFP in Sierra Leone (and internationally) is guided by internationally agreed SPHERE standards to establish ration sizes. SPHERE standards¹¹¹ advise using a benchmark of 2,100 kilocalories with 10-12 percent of energy to be provided by protein and 17 percent provided by fat as a basis for establishing a general ration which can then be adjusted to take in to account the context.

109 Initially, there was an attempt to make this a "hard condition" with households expected to sign a consent form to being resettled away from the temporary camps. However, the donor made it clear that this was not (and should not) be a requirement and the condition was dropped.

110 UNICEF (2018b).

111 Sphere Association (2018).

As part of the EVD response, WFP provided in-kind support in the form of a general food distribution to households who had been in contact with EVD-infected patients and to households living in areas of widespread and intense EVD transmission. The monthly benefit provided was a per household member benefit (changed with household size) was as follows:

- 12 kilograms (kg) of rice
- 1.8 kg of pulses
- 0.75 liters of oil
- 1.8 kg of corn soya blend, which is a fortified supplementary food
- 150g iodized salt

Comparing the value of the above (per person) benefit with those provided in cash is difficult because of the varying cost of food in different parts of Sierra Leone. It is likely that the WFP benefit was of higher value (possibly 150 percent of the value) than the equivalent safety net transfer, even during the period of RE-SSN when the benefit level was higher.¹¹²

The nature of funding for WFP means that there is no pre-agreed commitment regarding the duration for which transfers. WFP does not tend to track the duration of assistance received by beneficiaries either through its emergency programming (such as, for the EVD response) or its more routine food assistance for asset interventions. As a result, it is impossible to assess how many transfers, and thus how much support, a single household received over time.

3.5 Payment Systems

The potential for different payment service providers to offer services to potential emergency beneficiaries varies significantly throughout Sierra Leone, affecting the choices made by programs to date. Coverage by standard service providers is relatively high in urban areas but very patchy in rural areas, with the result that project-specific, tailored services needed to be developed. The payment service infrastructure is evolving in Sierra Leone and improved options are likely to continue to emerge in the future.¹¹³

3.5.1 *Ep Fet Po* and RE-SSN

The *Ep Fet Po* program planned to use electronic payments system in which transfers are made to beneficiaries via an agent-based model. A mobile-money service provider (Splash) was contracted to provide payments but the lack of mobile phone coverage and the limited ability to recruit and retain agents, who are resident in the project areas, meant it was necessary to adjust the payment delivery mechanism. Soon after the program's launch, the delivery system was adjusted to have agents visit payment points on set dates to effectively make manual payments, supported by a range of electronic "checks" to verify the identity of the beneficiary and that the payment was made.

This system also was adopted for the RE-SSN project whether implemented through NaCSA or NGOs, with Splash contracted to undertake all payments. By combining payments made to core *Ep Fet*

112 Receipt of a WFP benefit did not exclude a household from receiving an RE-SSN or *Ep Fet Po* benefit, or vice versa.

113 Martin (2018).

Po beneficiaries with those made to RE-SSN beneficiaries, Splash was able to reduce the travel by agents and therefore limit potential risks of the payment process unwittingly exacerbating any EVD transmission. Beneficiaries were “registered” with Splash and provided with their mobile SIM cards at the same time as receiving their first payment. This reduced the need for multiple visits by Splash agents and ensured that the distribution of SIM cards was not a cause for any delay in cash payments.

In 2017, the *Ep Fet Po* program phased out the use of SIM cards. In reality, SIM cards were not being used to facilitate electronic payments and were not being used to confirm the identity of beneficiaries. Instead, beneficiaries were issued with beneficiary ID cards which included a photo of the beneficiary, a QR code and a unique beneficiary number. The QR code allowed NaCSA staff present at payment sites to call up the beneficiary details and mark their presence. The unique beneficiary number allowed the PSP to look up the beneficiary’s photograph on a mobile phone app and to confirm the person’s identity. The PSP then took a photograph of the recipient to confirm that the correct person received the payment. While such an approach does not meet the international standard of two-factor authentication, it was a pragmatic approach to ensure that there is a functioning system in place to confirm the identity of beneficiaries.

A rapid assessment of the *Ep Fet Po* program conducted in 2019 found that only a very small percentage (4.1 percent) of beneficiaries had any complaints about the program. Most of these limited complaints tended to be about payments, including non-receipt of payment (40.7 percent of those complaining) and delays in payment (37.0 percent).¹¹⁴

The *Ep Fet Po* program and the RE-SSN project have struggled to adhere consistently to transfer schedules, incurring payment delays. For example, the first payment to RE-SSN beneficiaries was significantly later than planned. The first payment was expected to be made toward the end of the first quarter of the year, but instead a double payment was made at the end of quarter two. These challenges appear to relate more to administrative constraints within NaCSA than to challenges with the payment mechanism.

3.5.2 Landslide and Flood Disaster Emergency Cash Transfer Project

The urban setting of the landslide and flood disaster meant that the payment service provider coverage issues that need to be considered in other emergency cash transfer interventions were not a significant issue, and a decision was rapidly made to make use of a mobile money transfer process. An expedited contracting process was put in place which allowed the rapid contracting of a mobile-money service provider (Orange).

Despite the rapid contracting of Orange, the process of registering confirmed beneficiary households with Orange and issuing them with the appropriate program ID cards and Orange SIM cards did result in delays. An informal program update on September 27, 2017¹¹⁵ indicated that 1,650 out of a planned 1,905 households had been successfully registered with Orange and 1,423 had been paid. According to a November update,¹¹⁶ the number of households to have received a first payment increased to 1,748. (This number reflected households who had received both the initial US\$120 planned instalment and the first of the US\$30 instalments.)¹¹⁷

114 Zaldivar Chimal and Capstick (2019).

115 UNICEF (2017b).

116 UNICEF (2017a).

117 The final number of enrolled households stood at 1,885 – a small decrease from the 1,905 which can be attributed to the fact that not all 1,905 households initially registered could be traced.

An evaluation of the intervention assessed the frequency with which respondents mentioned issues related to the cash transfer process. As Table 10 shows, around 27 percent of households reported experiencing problems and that such problems included delays in the receipt of transfers and reduced transfer amounts.

It is worth noting that, compared to other cash transfer interventions designed ex-post, the landslide response did make its first payments to most beneficiaries relatively quickly (within six weeks of the event). However, this progress did not meet expectations and there were some unnecessary delays in decision-making, targeting and the registration of households with payment service providers. The extremely rapid-onset nature of the landslide disaster did mean that these delays undermined the ability of the program to meet affected people’s needs. This points to a need for expectations to be realistic regarding how quickly cash transfers can become operational and also for the necessity of pre-agreeing and pre-designing key elements of a response in order to facilitate timely reactions to rapid-onset crises.

TABLE 10: PROBLEMS WITH CASH TRANSFER PROCESS¹¹⁸

Issue	Frequency	Percent Affected¹¹⁹
NO PROBLEM	470	73.0
NON-RECEIPT OF TRANSFER	19	3.0
DELAY IN RECEIPT OF TRANSFER	120	18.6
RECEIPT OF REDUCED TRANSFER AMOUNT	97	15.1
INADEQUATE INFORMATION	6	0.9
OTHER	8	1.2

3.6 Grievance Redress Mechanisms and Communication

Through the *Ep Fet Po* program, the Government’s Anti-Corruption Commission (ACC) has taken on the role of monitoring key project processes (targeting and payments) by staffing a help-desk at the targeting/payment site; and acts as the primary channel through which complaints about the projects are lodged. The RE-SSN and landslide and flood emergency cash transfer projects also made use of ACC services to monitor process and support the management of any complaints regarding interventions.

In all projects, complaints could/can be submitted in-person to ACC staff, through the implementation agency staff (NaCSA or NGO), through councillors and other local leaders, or through a national hotline. While complaints might be received through multiple channels, they are consolidated in a single grievance redress mechanism (GRM) database related to cash transfers. Complaints related to administrative procedures are then forwarded to the relevant implementing agency, while those related to fraud or corruption are referred to relevant teams within the ACC.

Stakeholders expressed appreciation for the role ACC plays in supervising key program processes

¹¹⁸ UNICEF (2018a).

¹¹⁹ Note: This column does not add up to 100 percent as some respondents experience more than one problem.

and acting as the clearing house for complaints. An independent evaluation of the NGO-supported RE-SSN sub-projects highlighted the value of having a permanent means for feedback in Sierra Leone which could also foster the use of a rights lens for humanitarian and development work.¹²⁰ The rapid assessment¹²¹ of the *Ep Fet Po* program highlighted the limited use of GRM systems by beneficiaries, who tend to access them by reporting complaints through local committees established during targeting. The limited use of GRM systems likely reflects beneficiary satisfaction with the program, but may also be attributed to their ability to access GRM systems and a sense of gratitude and a lack of desire to criticize an intervention from which they derive such an important benefit.

It is interesting to note that the number of complaints were higher under the landslide and flood disaster emergency cash transfer. This likely does highlight some of the significant operational challenges experience in key stages of implementation, but may also indicate a stronger sense of entitlement of those affected by the landslide and flood disaster. In addition, respondents to a qualitative assessment of the cash transfer response highlighted concerns regarding how grievances were handled. Respondents observed that field officers lacked sympathy and were, at times, disrespectful; and that the process of investigating and providing feedback on complaints took too long.¹²² The quantitative evaluation found that 60.4 percent of community members were aware of the availability of ACC GRM mechanisms but that 68 percent of respondents felt that the mechanism was ineffective or somewhat ineffective.¹²³

With regard to communication with community members and program beneficiaries, *Ep Fet Po* and RE-SSN heavily relied on community meetings and messages passed through the community representative committees established during targeting. Under the landslide and flood disaster response, town hall meetings and small group discussions were complemented by information communicated by radio and the use of a simple mobile application (U-Report) which could provide two-way communication between the project and its beneficiaries. U-report allowed the project to send out messages such as the date of the next cash transfer, but also facilitated feedback from beneficiaries who could be asked to answer simple questions transmitted through their phones. As Table 11 below indicates, U-report was the most frequently mentioned source of information regarding cash transfers.

TABLE 11: INFORMATION SOURCES FOR LANDSLIDE AND FLOOD DISASTER EMERGENCY CASH TRANSFERS¹²⁴

	Frequency	Informed (%)
RADIO	137	21.3
TOWN HALL MEETING	244	37.9
FOCUS GROUP DISCUSSION	120	18.6
U-REPORT	413	64.1
OTHER	52	8.1

120 Radice (2017).

121 Zaldivar Chimal and Capstick (2019).

122 UNICEF (2018b).

123 UNICEF (2018a).

124 Ibid.

4 Conclusions and Recommendations

In learning-by-doing, Sierra Leone has created a cash transfer mechanism that addresses health, climatic and economic shocks and combines public, private and nongovernmental organizations. Further, the country's nascent systems approach has been capturing and thus building the evidence base on the effectiveness and return-on-investment of social protection in responding to shocks. As this report details, the experience of Sierra Leone offers lessons for countries considering the design and delivery of shock-responsive cash transfer programs and systems, in general, and for the government and its partners, in particular.

4.1 Overarching Lessons Learned

EVEN IN COUNTRIES WHERE SOCIAL PROTECTION SYSTEMS ARE NEW AND EMERGING, THERE ARE BENEFITS IN CONSIDERING HOW THESE NASCENT SOCIAL PROTECTION SYSTEMS CAN BE ADAPTED IN THE EVENT OF SHOCKS. Sierra Leone's cash transfer program, *Ep Fet Po*, was rolling out in 2014 when the EVD outbreak was first identified. Yet, the commitment of the National Social Protection Secretariat (NSPS) to early investment in building the systems and procedures for the Social Safety Net Project provided a model for the Rapid Ebola (Virus Disease) Social Safety Net (RE-SSN) project to timely and adequately respond. The model served not only to guide the scale up of implementation by the National Commission for Social Action (NaCSA) but also to coordinate the response financed by multiple development partners and implemented by both state and non-state actors. This systems approach helped to ensure consistency across cash transfer interventions, reduced the risks of duplication or gaps and created efficiencies through the use of a common management information system (MIS), a single targeting approach and a shared payment service provider.

WITH STRONG COORDINATION AND COMMON STANDARDS, GOVERNMENT-LED APPROACHES ARE POSSIBLE IN COUNTRIES THAT HAVE WEAK NATIONAL SYSTEMS AND/OR RELY ON HUMANITARIAN FINANCING. The RE-SSN and landslide/flooding responses both benefited from the leadership shown by the National Social Protection Secretariat. RE-SSN provided a framework for financing to government systems and non-state actors based on a common set of Standard Operating Procedures. This enabled a consistent approach to delivering a cash transfer response and reduced the risks of duplication or gaps. Further, the success of an agency-led process has helped to increase wider government buy-in regarding the role of social protection in shock response and ensured that capacity developed in earlier shocks is available for subsequent crises.

THE EXPERIENCE IN SIERRA LEONE SHOWS HOW COUNTRIES CAN USE A MIX OF DELIVERY APPROACHES TO RESPOND TO A NATURAL DISASTERS AND HEALTH SHOCKS. Drawing on the continuum presented in Figure 1, the response to EVD and the landslides/flooding in Sierra Leone showed how these models can co-exist within a single response, applying differently to each function within the delivery system. For the EVD response, while the flow of funds was parallel to government or NGOs, the payment system was piggybacking, with NGOs contracting the same service provide as the one used by Et Fet Po. In contrast, the government and NGOs adopted the same targeting tool and process, pointing to the broader use of national systems. Finally, the data collected on beneficiaries through the EVD response were channelled

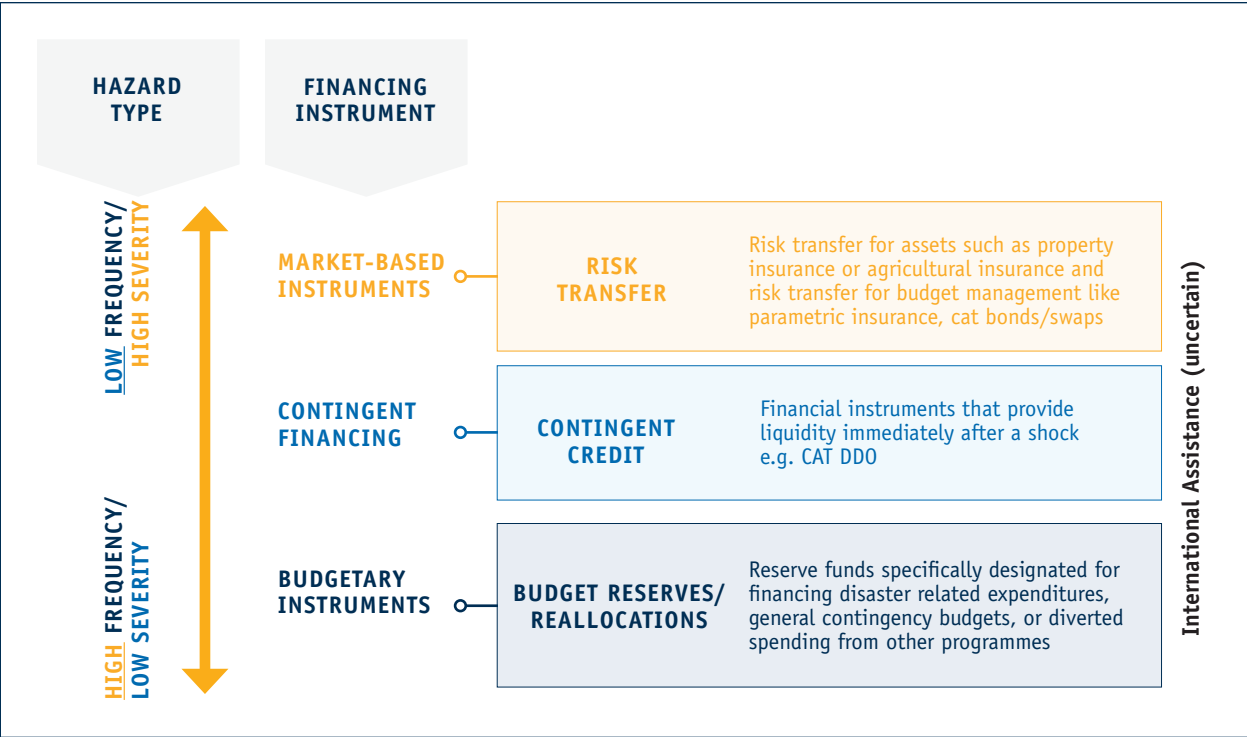
back to the National Social Protection Secretariat, to be housed within the SPRIT (management information system) and the basis for future expansion of the Et Fet Po program. Throughout the response, the NSSP provided oversight and coordination, with the Anti-Corruption Commission (ACC) operating the grievance redress mechanism (GRM).

4.2 Technical Area Conclusions and Lessons Learned

4.2.1 Source of Financing

NO ONE INSTRUMENT SUFFICES FOR PROVIDING COUNTRIES COVERAGE FOR EMERGENCIES OF DIFFERENT MAGNITUDES AND FREQUENCIES. As a first layer of defense, countries typically use risk-retention instruments (that is, budget reallocations, contingency funds) to respond to emergencies. Reallocations can often be less efficient because they divert funds from other development programs and priorities. Typically, these instruments are best suited for more frequent and less severe events. For more severe events, countries often put in place risk-transfer instruments (such as, insurance and reinsurance), where the risk of the costs associated with disasters is transferred to a third party that is responsible for paying out after an event. Such solutions are not cost-effective for frequent events because insurers and reinsurers would find it very costly to bear the risk of events that requires them to pay out every year or two. In a risk-layering approach, countries use a framework to design their risk financing strategies that is, a combination of instruments that would offer comprehensive protection to their budgets, assets and services, as well as people, after a disaster (Figure 12).

FIGURE 13: THREE-TIERED, RISK-LAYERING APPROACH



Source: Adapted from Disaster Risk Financing and Insurance program (DRFIP), World Bank (2018)

SIERRA LEONE NEEDS TO DESIGN AND IMPLEMENT A RISK-FINANCING STRATEGY SO THAT FUNDING IS AVAILABLE FROM DIFFERENT INSTRUMENTS FOR DIFFERENT TYPES OF SHOCKS. Currently, Sierra Leone overdepends on international humanitarian financing, which is appealed for after a shock event, to finance interventions related to any scale of shock. While government documents describe three levels of shocks (with only the third level requiring international humanitarian assistance), in reality, even small localized shocks result in requests to the international community for financial support. Pre-arranging financial solutions can lower reliance on humanitarian assistance by enabling quick liquidity after disasters. At a minimum, this should include holding some finance as contingent in the budget or through other instruments to rapidly respond through *Ep Fet Po*, given its national coverage.

ADDITIONAL TECHNICAL WORK AND PRE-PLANNING CAN CREATE THE ENABLING ENVIRONMENT NECESSARY TO IMPLEMENT THE COUNTRY'S RISK-FINANCING STRATEGY. This includes developing an understanding of the contingent liabilities, such as an understanding on the potential economic and fiscal impacts of disasters and the possible costs of an effective response. This analysis would help develop the country's risk-layering approach. For instruments designed as part of the country's risk-financing strategy, in-depth technical work is necessary to determine what part of the country's overall risk the instrument would cover, who would it protect, when would it be triggered and how funds will flow. This could be pre-agreed as part of a contingency plan for post-disaster action to ensure a common understanding of when funds would be triggered, how much would be paid out and who would they reach and how.

STRONG LEADERSHIP IS NEEDED TO COORDINATE MULTIPLE SOURCES OF FINANCE SO THAT A COHERENT, COST-EFFECTIVE, TIMELY AND TRANSPARENT RESPONSE CAN BE DELIVERED AFTER DISASTERS. The arrangements put in place for the RE-SSN project allowed financing from multiple donors, channelled through different implementing agencies, to support a consistent approach to alleviating some of the economic impacts of EVD and avoid duplication. Such an approach could continue to play an important role in Sierra Leone and other countries that continue to be reliant on humanitarian financing. It would help ensure a common approach in terms of the amounts and frequency of benefits, while recognizing the requirements of some funding sources to continue to be channelled outside of government systems. Strong leadership is critical in making this approach work.

4.2.2 Early Warning and Response Planning

ALTHOUGH SIERRA LEONE HAS MULTIPLE RISKS AND HAZARDS, IT IS POSSIBLE (AND NECESSARY) TO IDENTIFY PRIORITY RISKS AND SHOCKS FOR A SHOCK RESPONSIVE SOCIAL PROTECTION RESPONSE. Sierra Leone faces a wide range of risks and hazards. For this reason, unlike other countries that face one (or a few) dominant risks, it is important to identify priority risks and shocks for which a social protection response will be appropriate and for which pre-agreed plans should be developed. This is because the needs of the affected population and the key steps required to deliver support will vary depending on the nature, location and scale of a shock. Table 12 below outlines the key risks and shocks which should be prioritized for a social protection type response in Sierra Leone. This list takes into consideration the following key factors: the likelihood and frequency of a shock occurring, the scale of impact and the appropriateness of a cash transfer response to the crisis.

TABLE 12: PRIORITY RISKS AND SHOCKS¹²⁵

Shock	Likelihood/ Frequency	Scale of Impact	Appropriateness of A Cash Transfer Response
FLOODING	High likelihood/ High frequency	Geographically specific	Highly appropriate as a means of supporting households to meet short term needs.
LANDSLIDE	High likelihood/ Medium frequency	Very localized	Highly appropriate as a means of supporting households to meet short term needs.
FIRE	High likelihood/ High frequency	Very localized	Highly appropriate as a means of supporting households to meet short term needs.
HAEMORRHAGIC FEVER OUTBREAK	Medium likelihood/ Low frequency	Typically, geographically specific but can be widespread	Appropriate unless households or communities are quarantined.
OTHER EPIDEMICS WITH AN ECONOMIC IMPACT	Low likelihood/ Low frequency	Urban areas	Appropriate to address economic impacts unless households or communities are quarantined.
INFLATION	High likelihood/ Medium frequency#	Widespread	Appropriate in exceptional circumstances ¹²⁶

Note: # The exceptional circumstances in which a cash transfer would be appropriate are low frequency.

FOR SIERRA LEONE TO USE EARLY WARNING INFORMATION EFFECTIVELY FOR RESPONSE, THE SYSTEM NEEDS TO BE COUNTRY-OWNED, SIMPLE BUT ROBUST IN DESIGN AND FINANCED SUSTAINABLY. Early warning data are critical to an evidence-based, decision-making process, informing the timing of a response, the numbers of people needing what kind of response and the required resourcing. The current gaps and fragmentation in early warning need to be addressed to support timely shock-response in Sierra Leone. While a detailed assessment of the early warning system was beyond the scope of this report, and the need for a functioning early warning system spans well beyond social protection to broader disaster risk management and response, initial analysis of the early warning system shows that there is scarcity of data necessary for well-functioning early warning systems. There is also a fragmentation between the different interventions supporting early warning systems and a risk that short-term investments by the international community have limited sustainability due to a lack of government ownership. Within a broader assessment of the early warning system in Sierra Leone, MDAs and development partners need to consider how future investments can be made in ways that avoid

¹²⁵ World Bank (2020).

¹²⁶ Routine inflation would not be treated as a shock. But if inflation is triggered by a specific event such as the Triple F Crisis or as part of a government policy to remove a subsidy, it may be appropriate to support poor households through the transition.

fragmentation and duplication and which considers how data collection will be made institutional and systematic, going beyond the life of the project that is providing the finance. This may require projects being less ambitious and adopting simpler, “lower quality” systems which can be sustained even with low levels of government financing and or recognizing the need for and committing to longer-term development partner support. Data collection related to key parameters should remain the responsibility of the relevant technical line agencies, but an enhanced disaster management agency should play a stronger role in consolidating, interpreting and disseminating data collected by sector MDAs.

4.2.3 Targeting and Registration

SIERRA LEONE SHOWS HOW POVERTY TARGETING CAN BE ADAPTED TO IDENTIFY HOUSEHOLDS FOR SUPPORT TO MITIGATE THE ECONOMIC IMPACTS OF SHOCKS. This suggests lessons for how countries can adopt “design tweaks” to existing targeting mechanisms for rapid deployment in response to crisis and how, if used across a range of agencies, they can be the basis for a common, aligned response.

ANALYSIS OF THE RESPONSES TO EVD AND THE LANDSLIDE/FLOODING SUGGESTS CORE ASPECTS OF A PLAN FOR ENHANCING TARGETING OF SHOCK RESPONSIVE SOCIAL PROTECTION IN SIERRA LEONE:

- For emergency interventions where some poverty targeting is desirable and time permits some level of data collection, NaCSA’s light community-based identification method offers a model for rapid targeting in response to crisis. As this tool is expected to form part of the ongoing targeting approach by *Ep Fet Po* it will continue to be refined and updated under this program, which should continue consideration of its use to respond to crisis, including in urban contexts.
- The NSPS-managed SPRINT should be used, to the full extent possible, to guide the targeting and registration of beneficiaries of a cash transfer in response to shocks. Conversely, the results of targeting and registration exercises for emergency social protection interventions should be stored within the SPRINT (with adjustments made to SPRINT as required to accommodate this).
- Targeting and registration is one of the areas covered by the ONS’s disaster management pillar system and ONS needs to ensure that there is the right capacity in an appropriate institution to manage targeting and registration (both in terms of core staffing and how institutions may be able to call on surge capacity). In addition to human resource capacity, it is important to ensure that there are instruments and systems in place which can be used in the event of a shock.
- The use of information and communications technology (ICT) to collect (and analyze in real time) information can dramatically reduce time lags and increase accuracy. Specifically, the use of handheld devices can improve the accuracy and speed of data collection, analysis and transmission. As much as possible, these should be preferred to manual data collection. As a result, investments in such systems should be made during “normal times” with an eye to the deployment of such resources in response to a crisis.

4.2.4 Setting the Benefit Level: Values, Frequency and Duration

SETTING BENEFIT LEVELS FOR LONGER-TERM INTERVENTIONS AND EMERGENCY ASSISTANCE CAN DIFFER REMARKABLY, WITH SHOCK-RESPONSIVE SOCIAL PROTECTION BRINGING THIS ISSUE TO THE FORE. This has typically been the case in Sierra Leone. The long-term *Ep Fet Po* program set its benefit level on the basis of modelling of the impact of different benefit levels on national poverty reduction. Humanitarian interventions are more likely to set benefit levels based on meeting a specific identified need; for example, WFP food rations are set at meeting 100 percent of kilocalorie requirements while the

landslide and flooding response benchmarked transfers against a bundle of goods and services. While each of these approaches are informed by a clear objective and methodology, the resulting differences in the value of transfers can create confusion and discord among communities, when these programs are delivered in parallel. Therefore, it is important for government and development partners to coordinate on benefit levels and to ensure clear communication on who is receiving what benefit and why.

AGENCIES PLANNING ON UNDERTAKING SHOCK RESPONSIVE CASH-TRANSFERS, INCLUDING NACSA, NEED TO ESTABLISH KEY PARAMETERS FOR CALCULATING THE APPROPRIATE BENEFIT LEVEL FOR DIFFERENT TYPES OF SHOCKS. This process should be facilitated by the NSPS, with all agencies adopting these parameters to ensure a harmonized response. These parameters should make pragmatic use of available information and facilitate rapid updating to account for inflation. This will facilitate both the rapid mobilization of resources by making it easy to calculate budgets and the rapid operationalization of a response in the event of a shock (by reducing the amount of analysis and negotiation required). Experience to date has also highlighted questions regarding what might be the most appropriate frequency of payments. Opportunities to test alternative frequencies should be explored in future crisis responses.

4.2.5 Payment Systems

THERE IS A NEED TO BETTER UNDERSTAND WHAT PAYMENT SYSTEMS MIGHT BE APPROPRIATE IN WHICH SETTING AND HOW THESE CAN BE MOBILIZED QUICKER IN RESPONSE TO SHOCKS IN SIERRA LEONE.

Key options to consider include:

- Incorporate flexibility into contracts with service providers delivering core safety net transfers which would allow them to scale up payments to new clients in response to shocks (particularly appropriate in the geographic areas where core transfers are being provided). This option applies most directly to the *Ep Fet Po*.
- Undertake pre-registration of potential payment service providers to allow rapid contracting in the event to shocks. In the light of varying coverage by different service providers in different areas of Sierra Leone, it may be appropriate to undertake geographically specific pre-registration to ensure the highest quality of service delivery to potentially affected populations in the event of shocks.
- If/where pre-registration of beneficiaries has taken place, it will also be possible to explore the option of encouraging vulnerable households to pre-register and/or open accounts with approved payment service provider(s) so that payments can be made rapidly into these accounts when triggered.
- Support existing and potential service providers to understand what is required to effectively and rapidly operationalize a scale-up of an existing cash transfer or the role out of a new intervention to allow proper planning and an adequate deployment of resources.

4.2.6 Grievance Redress Mechanisms and Communication

ENSURING A FUNCTIONAL GRM AS PART OF A RESPONSE TO SHOCKS CAN CONTRIBUTE TOWARD IMPROVED PERFORMANCE, TRANSPARENCY AND OVERALL TRUST IN THE RESPONSE. In Sierra Leone, the role of the Anti-Corruption Commission in supervising key program processes and supporting the management of complaints has proved valuable. The use of an established institution to identify and channel complaints regarding the scaling-up of cash transfers to response to shocks can build trust in these systems, when this is carried-out as part of the core design of the response. The use of an

established institution helped ensure that the grievance redress mechanism was able to expand in pace with the targeting and payments were carried out rapidly. It also helped ensure that communities were aware of the institution and its mandate. Going forward in Sierra Leone, the role ACC has played in supervising key program processes and functioning as a clearing house for complaints should be further built on and enhanced so that it extends to future shock-responsive cash transfers. This needs to be complemented by adequate communication to potential beneficiaries and the broader communities in which they live regarding: the purpose of the cash transfer, who is eligible to benefit from the intervention, how eligible people can register or will be targeted, the benefit levels, the payment process and the mechanisms in place to register complaints. ACC's role, together with adequate communication, will continue to address the perceived high levels of corruption in Sierra Leone.

4.2.7 Institutional Arrangements

AN ENABLING INSTITUTIONAL ENVIRONMENT ENHANCES THE EFFECTIVENESS OF SHOCK RESPONSIVE SOCIAL PROTECTION INTERVENTIONS AND REDUCES THEIR ASSOCIATED TRANSACTION COSTS. Sierra Leone has made progress on building on past lessons to advance institutional arrangements for both social protection and disaster management with steps taken to introduce a pillar system for supporting disaster response, the formulation of a Social Protection Policy and the establishment of a Social Protection Secretariat. The result has been an increase in capacity to coordinate and manage social protection related disaster response. However, further steps are required to strengthen the institutional arrangements for shock-responsive social protection in Sierra Leone, some of which are underway with the establishment of the NaDMA.

- Although the NSPS has effectively played a role in coordinating social protection-related responses to both the EVD outbreak and the landslide response, under the pillar system NSPS played this role under a shelter pillar. In the future, it would make sense to establish a social protection or safety net pillar.
- The establishment of the NaDMA will help to address some of the limitations inherent in the current institutional set-up, in which the Department responsible for DRM is small and under-resourced. In establishing this new agency, the government needs to ensure adequate recurrent financing to maintain appropriate levels of capacity and carefully consider how the mandates of this agency relate to the mandates of sectoral ministries that have technical relevance to key elements of a crisis response.

4.3 Toward Pre-Agreed Plans for Post-Disaster Action

AN EFFECTIVE DISASTER RESPONSE CAN BE FACILITATED BY HAVING PRE-AGREED PLANS FOR POST-DISASTER ACTION. FURTHER WORK IS NEEDED TO DEVELOP SUCH PLANS FOR SOCIAL PROTECTION, SPECIFICALLY CASH TRANSFERS, IN SIERRA LEONE. The Social Transfer Emergency Preparedness and Response Plan provides useful guidance to those wishing to design an emergency cash transfer, but it does not function as a pre-agreed plan. A key challenge to developing any such pre-agreed plans is the variation in hazards experienced by vulnerable households, which in turn results in huge variability in need (for example, consumption smoothing support versus rent versus reconstruction of housing). As such, pre-agreed plans need to define:

- Which shocks it aims to address (based on the predicted frequency/severity of a potential shock).
- Key design parameters for an intervention in relation to each shock (what financing is available for response, what kind of assistance [benefit level/duration], how the target group would be identified, what

systems will be in place to deliver the assistance, what early warning or other data will be used to trigger a response).

- Clear role and responsibilities for who does what and when (who is responsible for overall coordination, for identification and targeting, payment services, etc.)

TABLE 13 BELOW SETS OUT EARLY THINKING ON KEY DESIGN PARAMETERS FOR POTENTIAL RESPONSES TO PRIORITY RISKS AND SHOCKS EXPERIENCE IN SIERRA LEONE. It lays out initial thoughts for those interested in developing shock responsive social protection systems in Sierra Leone, regarding the options for program scale and location, the level at which the response should be launched, the appropriate targeting/registration approach, benefit levels and duration and the payment system. There is a need for further analysis, discussion and agreement by concerned stakeholders before this early thinking can be adapted into the kind of pre-agreed response plans that would facilitate a rapid response. Potential financing would be an important factor to consider when setting the ambition of any further work.

THERE IS AN OPPORTUNITY TO CONTINUE TO BUILD ON LESSONS LEARNED FROM SHOCK-RESPONSIVE SOCIAL PROTECTION IN THE COUNTRY AND TO INFORM FUTURE SYSTEMS AS WELL AS RESPONSES. The ongoing scale-up of the safety net to respond to COVID-19 (section 3.2.1.2) was informed by previous experiences, even if it too has had to be designed post-shock. However, the COVID-19 response has been able to take advantage of a small amount of pre-arranged financing and to leverage larger resources of the regular safety net program to expand rapidly. Once the response is complete, it will provide a further opportunity to identify and document lessons learned, including the impact on effectiveness and timeliness, if any, of pre-arranged financing in advance of needs.

TABLE 13: KEY DESIGN PARAMETERS FOR PRIORITIZED RISKS AND SHOCKS

FREQUENCY ¹²⁷	AREA AFFECTED	NUMBERS AFFECTED	LEVEL OF RESPONSE	TARGETING/ REGISTRATION	BENEFITS/ DURATION	PAYMENT SYSTEM
SHOCK¹²⁸: Flooding						
High frequency	Geographic specific, often urban	300-500 per event, 300-14,000 per year ¹²⁹	District – sometimes escalated	Registration of all affected households	More analysis needed for benchmarking 3-4 tranches 4-6 months	Additional PSPs may be an option
Landslide						
Medium frequency in affected areas	Very geographic specific	100-5,000 per event	District – sometimes escalated	Registration of all affected households	More analysis needed for benchmarking 3-4 tranches 4-6 months	Additional PSPs may be an option
Fire						
High frequency	Very geographic specific, often urban	100-500 per event	District	Registration of all affected households	More analysis needed for benchmarking 2-3 tranches 3-4 months	Additional PSPs may be an option
Haemorrhagic Fever Epidemic						
Low frequency	Often relatively geographic specific	All households in an area affected by an epidemic	National	Poverty-targeted	Same as <i>Ep Fet Po</i> 2-3 tranches 4-6 months	Same as <i>Ep Fet Po</i>
Other Epidemics with an Economic Impact						
Low frequency	Urban areas	Poorer households and/or occupations most vulnerable to government measures to stem the spread of epidemic	National	Combination of geographic and categorical based on occupation	Same as <i>Ep Fet Po</i> 2-3 tranches 4-6 months	Same as <i>Ep Fet Po</i>
Inflation						
Low frequency for exceptional events	Widespread	The poorest 10-20% of the population	National	Poverty targeting	Same as <i>Ep Fet Po</i> – adjusted for inflation (and increased benefits for <i>Ep Fet Po</i> clients)	Same as <i>Ep Fet Po</i>

127 This column draws heavily from INTEGEMS (2017) in which frequency is classified as: *very rarely, rarely, sometimes, often or frequently.*

128 Conflict can have an economic impact. In circumstances where conflict is severe enough to displace people and to lead to the need for social assistance, other critical services will likely be impeded: bank branches may be forced to close; transport infrastructure may be damaged or blocked; and security concerns may prevent government staff from going into the field. As a result, it is often necessary to establish temporary, parallel delivery mechanisms which are able to support affected populations in their new locations (such as, IDP camps), to meet their multi-sectoral needs (such as, education, health, housing and social assistance). In some cases, these new locations may be outside areas under government control. For this reason, conflict is not considered in this framework.

129 2015 (14,000) and 2017 (6,000) were both exceptional years.

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ABSTRACT

Since the early 2000s, there has been growing interest in using cash transfers as a key modality for response to and recovery from shocks. As more and more countries put in place national safety nets, the value of scaling up existing government-led programs and systems in response to disasters has gained prominence. This paper examines the case of Sierra Leone, a low-income country with an emerging social protection system that has been used to respond to natural disasters and health crisis. In May 2015, just as the government was rolling out its national safety net program (Ep Fet Po), Sierra Leone was hit by the twin shocks of an Ebola Virus Disease outbreak and a sharp drop in the international price of iron ore. As a response, the government scaled up the provision of cash transfers to about 60,000 extremely poor households. In August 2017, Freetown experienced severe flooding and a massive landslide, affecting nearly 6,000 people. A multi-purpose, cash transfer-based intervention was launched in response. These responses used the institutional arrangements and delivery systems of the Et Fet Po to differing degrees, highlighting how nascent social protection systems can support the delivery of emergency cash transfers. This case study suggests how shock-responsive social protection systems can be the basis of a government-led response to a health crisis and a rapid-onset disaster. It also points to how linking pre-arranged finance to safety nets can help with quick delivery of cash to vulnerable populations post-disasters. This experience complements existing evidence and experience in other parts of Africa, where social protection systems have been used for responding to drought, a slow-onset natural disaster. It also informed the ongoing response to the COVID-19 pandemic in Sierra Leone, which will provide further lessons for shock-responsive social protection globally.

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