



COVID-19 AND VULNERABLE, HARDWORKING KENYANS

Why it's time for a strong social protection plan



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Seven NGOs, the Kenyan government, the European Union and the Danish and German governments are working together to implement a 'Safety Nets' programme targeting Kenya's millions of informal workers. With rising food insecurity and sexual and gender-based-violence, mounting job losses, poor access to water and sanitation, and a lack of formal safety nets, the Kenyan informal sector has suffered the brunt of the COVID-19 pandemic. The Safety Nets programme has revealed that cash transfers which support the most vulnerable people, and are implemented safely, transparently and accountably, have the potential to help vulnerable households stave off starvation, infection and eviction. They can also help reduce the vulnerability of survivors and those at risk of sexual and gender-based violence. The results of this programme demonstrate that nascent Kenyan 'social protection' programmes should be 1) immediately extended and expanded to the many vulnerable Kenyans currently not enrolled in any social protection programme; and 2) strengthened long-term to make them more effective, sustainable and accountable.

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For further information on the issues raised in this paper please email advocacy@oxfaminternational.org

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Cover photo: 60-year-old mother Robina Kwamboka in a market in Kibera, Nairobi. Photo credit: Asha Jaffar/Oxfam in Kenya.

1 INTRODUCTION

Politicians and celebrities; religious leaders and corporate titans; the elderly and infants alike – all have numbered among Kenya’s tens of thousands of confirmed COVID-19 cases so far.

This pandemic’s frightening reach may appear as if it does not discriminate. However, the tragic reality is that while we all benefit from national efforts to curb COVID-19, the livelihoods of millions of Kenyans have been harmed – even gravely so – by the same measures that are in place to protect public health.

Kenyans residing in informal settlements were already living in poverty, and they were hit especially hard by the forced market closures, movement restrictions and the national curfew. Mandatory public social distancing rules in public transport vehicles also resulted in rising public transport costs, making it even more challenging to move around for work. These measures were implemented by the government to slow down the spread of COVID-19, but ultimately disrupted these Kenyans’ fragile livelihood strategies. Now they are struggling even more than before to afford basic necessities such as water, soap, rent and, increasingly, food.

‘The lockdown has affected me a lot because we have no money. There is no business. I used to get KSh100–200 per day. These days I get nothing’, said Robina Kwamboka, a 60-year-old woman taking care of four young children in Kibera, Nairobi. Robina previously worked as a cabbage seller.

In 2019, informal sector workers accounted for 83.6% of total employment in Kenya.¹ Many informal workers live in Nairobi’s informal settlements, which accommodate 56% of the capital’s population on just 5% of the total residential land area of the city.² They are overcrowded, with poor or non-existent sanitation facilities and prohibitively expensive access to clean water, creating the ideal transmission conditions for the virus.

Eight months since COVID-19 was first detected in Kenya, some of the most vulnerable and hardworking citizens – those living in informal settlements and working in the informal sector – are experiencing widespread hunger and increased rates of sexual and gender-based violence. They urgently require expanded, gender-sensitive, social protection interventions.

Box 1: What is social protection?

For Oxfam, social protection describes reliable public and private initiatives that:

- Enable people to deal with risk and vulnerability.
- Provide support to overcome acute and chronic poverty.
- Help people deal with both household-level as well as certain widespread shocks.
- Enhance the resilience, social status and rights of marginalized people.

Social protection covers a wide range of interventions – direct and indirect transfers in cash or kind – and provides access to social services.

(Oxfam social protection policy compendium, 2019)

2 THE HUNGER CRISIS

Since the COVID-19 pandemic hit Kenya, local measures have slowed down the spread of the infection and provided valuable time for national health agencies to make preparations. However, these measures, in tandem with global trade disruptions, have also inadvertently negatively impacted food systems and supply chains.

In Kenya, most food retail occurs in the informal sector, most prominently in open-air markets found in all towns and cities. Many of these open-air markets were temporarily closed for weeks during the implementation of these COVID-19 measures, disrupting livelihood strategies and food systems of informal settlement residents who rely on these markets for food and work. At the same time, national food shortages caused by the aflatoxin contamination of stocks and low agricultural productivity in recent seasons due to droughts, floods and the desert locust crisis³ have caused the food prices of certain staples, such as maize, to rise sharply. As a result, the Kenyan food inflation rate rose ⁴ between March and April 2020 – hitting a three-year high of 11.58%.⁵ For the Kenyans who work in the informal sector, whose businesses have shut down or whose casual or domestic jobs have all but disappeared due to the pandemic, this has led to dire consequences.



25-year-old mother Emmaculate Onyango in Kibera, Nairobi. Photo credit: Asha Jaffar/Oxfam in Kenya.

‘Before coronavirus, we used to eat three meals per day. These days we eat one or two meals each day. Food prices have risen a lot. Flour used to cost 100KSh, now it’s 130 KSh’, said Emmaculate Onyango, a 25-year-old mother of three children who also is the main breadwinner for a household of seven people in the Kibera informal settlement.

‘The coronavirus has really affected us people who do informal work. Before corona, I would make around between 500KSh and 1000KSh per day. These days I make nothing,’ said Evans Momanyi Mugambi, a 32-year-old father supporting his spouse and four young children in the Kibera informal settlement. Before the pandemic struck, Mugambi used to work as a driver, transporting commercial goods and personal parcels for clientele who have since stopped giving him work.



32-year-old father Evans Momanyi Mugambi outside his home in Kibera, Nairobi. Photo credit: Asha Jaffar/Oxfam in Kenya.

In May 2020, the Kenya Red Cross Society and Concern Worldwide conducted a food security assessment of the Mukuru and Korogocho informal settlements in Nairobi. The assessment revealed that on average, families in both informal settlements could only afford less than 25% of the food they needed. About a quarter of the informal settlement residents were likely to be experiencing severe hunger in their households, and less than 8% of households had a stable income earner. The assessment also showed that Nairobi faces an acute child malnutrition crisis, with over 40,000 children in informal settlements already acutely malnourished. This undernourishment could lead to long-term negative developmental and cognitive effects in the children and significantly impact their future abilities to cope with and mitigate the poverty they were born into.

In July, a similar food security assessment revealed that 54.8% of households interviewed in 10 informal settlements were severely food insecure. Worryingly, only 0.9% of households interviewed were food secure. If this trend holds for the 2.6 million Kenyans who live in Nairobi's informal settlements, an estimated 1,446,549 people could be currently food insecure in Kenya's capital city.

3 THE THREAT TO WOMEN AND GIRLS

The COVID-19 pandemic has not only affected the health and food security of millions of people, but it has also aggravated pre-existing gender inequalities. The pandemic is placing a disproportionate load on women and girls living in informal settlements, who confront job losses, increased care work at the household and community levels, and rising vulnerability to sexual and gender-based violence.

Women represent a majority of informal workers and under 'normal' circumstances face disproportionate challenges compared with their male counterparts, such as fewer

educational opportunities, pay disparities in employment and balancing their jobs with the burden of domestic unpaid care work, of which they take on the lion's share.

During the pandemic, the challenges faced by women in the informal sector have increased for a number of intertwined reasons. Firstly, many women are either informally engaged or employed in activities that have been disrupted. For example, traders in open-air markets in Nairobi, in addition to losing clientele due to the economic downturn, have experienced rising costs of goods due to supply chain disruptions that were caused by the movement restrictions mandated by the government as a public health measure. Many have lost jobs as domestic workers, because employers have chosen to physically distance themselves from non-family members, and many employers impacted by the economic downturn can no longer afford domestic staff. Without jobs or income, many women are going into debt in order to put food on the table.



38-year-old mother of four Beatrice Mbendo in her one-room home in Kibera with daughter Hannah (left) and son John (right). Photo credit: Blandina Bobson/Oxfam in Kenya.

Beatrice Mbendo, a 38-year-old single mother of four, used to be a domestic worker but lost all her clients soon after the first confirmed COVID-19 case in Kenya was announced. 'Now things are really bad, we even miss breakfast in the morning', she said. 'My children would eat something small during lunch and wait for me with the hope that I will come back with something in the evening. If I don't come back with anything, we sleep hungry....I am a single parent, with nothing and no one to turn to.'



Beatrice Mbendo outside her home in Kibera with her daughter Hannah (left) and son John (right). Photo credit: Blandina Bobson/Oxfam in Kenya.

Mbendo has been struggling to support her family on as little as 100KSh per day. She is pregnant with her fifth child, but has been too afraid of COVID-19 and too financially insecure to seek the antenatal care she needs.

Under normal circumstances, women and girls around the world undertake more than three-quarters of all unpaid care work, totalling almost 12.5bn hours of unpaid care work every single day. This disproportionate load is even more pronounced in informal settlements and rural areas, where traditional social norms and gender roles continue to shape women's day-to-day lives.⁶

Oxfam's COVID-19 Rapid Gender Assessment⁷ found that both men and women reported that unpaid care and domestic work has increased. While men reported a greater increase – 1.7 hours – in the number of hours they spend on unpaid care, compared with the 1.4-hour increase reported by women, women were doing more care work before COVID-19 and continue to do more than men.

Accessing water, which is especially critical during the pandemic, occupies a large amount of women's time. Water is a scarce resource in many informal settlements; only a minority of households have access to the cheaper public water supply. Instead, a large portion of the water supply has been privatized by 'cartels' and many residents rely on private water vendors, especially during the dry season.⁸ As a result, poor families like Emmaculate Onyango's end up paying as much as 172% more for water compared with affluent families in areas such as Lavington, Nairobi.⁹ These high-income families have the infrastructure for water to be piped into their homes at a much more affordable monthly rate from the government, or at the very least are able to buy water 'in bulk' from private providers.

Women and girls are particularly affected by this disparity as they need water for menstrual hygiene and are often expected to walk long distances to fetch water for their households. This exposes them to the risk of contracting COVID-19 around the crowded public water points, and of being assaulted as they travel to look for water.

A survey conducted by Oxfam in 2016 found that as many as 40% of households in Nairobi's informal settlements do not have access to clean water close to home, making water

collection for domestic use a time-consuming task. According to the 2020 Rapid Gender Assessment, women reported spending almost 20% of their time collecting water for daily household use.¹⁰ This means that they have little time left to rest. The heavy work may affect their health and well-being; it also limits their available time for other things, such as taking part in education, paid work and public life (political participation).



25-year-old mother Emmaculate Onyango washing her hands in Kibera. Photo credit: Asha Jaffar/Oxfam in Kenya.

UPSURGES IN SEXUAL AND GENDER-BASED VIOLENCE

The repercussions of the measures to deal with the pandemic, including rising financial and food insecurity, have also heightened the vulnerability of women and girls to sexual exploitation, rape, domestic violence, child abuse and other forms of sexual and gender-based violence. Some have also resorted to transactional sex for food in order to survive. In the period of March and May 2020, the Centre for Rights Education and Awareness (CREAW) recorded a 64% increase in the number of women and girls calling their gender-based violence helpline to request assistance.¹¹ Government statistics also indicated a rise of 42% in domestic and sexual violence cases between 13 March, when Kenya recorded its first COVID-19 case, and mid-April.¹²

In addition to increased cases of sexual and gender-based violence, women are also confronting constrained access to sexual and reproductive health services – such as family planning and pre- and post-natal care – due to reduced incomes and fear of contracting COVID-19 in health centres.

4 A 'PANDEMIC-PROOF' SOCIAL PROTECTION PLAN FOR VULNERABLE KENYANS

These secondary impacts of the pandemic – the cascading food crisis, the needs of women and girls who have been disproportionately affected, and the upsurge in SGBV cases – make it clear that inclusive, predictable and sustainable social protection programmes should be given the highest priority as the country works towards flattening the COVID-19 curve.

According to the government, 1,094,323 'vulnerable' Kenyans – including elderly people, food insecure households, and people living with disabilities – have been receiving between 2000KSh and 2700KSh per month under the national Inua Jamii programme since January (Inua Jamii is the government's cash transfer programme for vulnerable Kenyans).¹³ Additionally, the Kenyan Ministry of Interior announced that it would be providing between 108,000¹⁴ and 250,000¹⁵ vulnerable households with stipends of 4000KSh per month, to cope with the pandemic; however, there has been very little public documentation on the implementation and impact of this initiative. While every little bit helps, in a recent study by the Kenya National Bureau of Statistics, 61.9% of respondents reported being absent from their regular work due to the pandemic,¹⁶ indicating that a large proportion of Kenyans are likely without adequate means to provide for themselves and pay for basic needs and healthcare.

Box 2: What is the Inua Jamii programme?

'Inua Jamii is the Government of Kenya's (GoK's) flagship National Safety Net Program (NSNP) for the beneficiaries of:

- Cash Transfer for Orphans and Vulnerable Children (CT-OVC)
- Older Persons Cash Transfer (OPCT)
- Persons with Severe Disabilities Cash Transfer (PWSD-CT)
- Hunger Safety Net Programme (HSNP)

The objective of Inua Jamii is to uplift the lives of poor and vulnerable citizens of Kenya through regular and reliable bi-monthly cash transfers.'¹⁷

The challenge was to quickly extend support to socially and economically vulnerable households in densely populated urban settlements during COVID-19. This required topping up existing government transfers to vulnerable families to cover more of their needs; reaching those vulnerable households that were not yet covered by any safety nets; and doing so in a way to minimise physical contact and the chance of spreading COVID-19.

In order to achieve this, a consortium of seven NGOS including Oxfam in Kenya, The Kenya Red Cross Society, Concern Worldwide, ACTED, IMPACT Initiatives, CREAM and the Wangu Kanja Foundation launched a safety-net programme targeting Kenyan informal settlements. The programme is funded by the European Union (€5 million), and the Danish and German governments (€2.6 million and €0.5, million respectively). The German government is also funding a further €0.5 million for water, sanitation and hygiene (WASH) interventions, which is being implemented in close coordination with the Kenyan government. Between June and December 2020, a total of 590,292,000KSh (about €4.6 million) is being transferred to 29,400 families in Nairobi and Mombasa informal settlements, in three monthly

instalments. The programme will help an estimated 117,760 vulnerable Kenyans afford basic necessities during the pandemic.



42-year-old mother of two Priscilla Ngilla outside her home in Kibera. Photo credit: Asha Jaffar/Oxfam in Kenya.

'If you had not sent me that money, I wouldn't be here in this house. I would have been chased away. But thanks to what you gave us, I was able to buy food, pay for rent, and pay off a food debt at a nearby shop', said 42-year-old mother of two Priscilla Ngilla, who received a cash transfer from the social protection programme in April. Ngilla worked as a school cleaner before the pandemic struck, and washed clothes for rich clients on the side to earn up to 2,000KSh (€16.57) a day. Since the pandemic began, however, school closures and the disappearance of domestic labour jobs have left Ngilla's family with no income whatsoever.

Cash transfers provide much needed purchasing power, enabling households to respond to their basic needs while offering flexibility and autonomy. They also provide immediate relief to affected households during the COVID-19 pandemic, mitigating the impact of shocks, including the deterioration of food security, and addressing wider needs arising as a result of the pandemic's effects.

This programme will also provide the government with learning on how to deliver cash directly to vulnerable populations in a transparent, accountable and safe way. It will also provide the government with lists of currently and chronically vulnerable households who will likely need of support in future crises and who should be included in the Inua Jamii programme. This will help more vulnerable Kenyan households access their entitlement to social protection, as well as help Kenyan social protection agents be more prepared to respond to future shocks.



Evans Momanyi Mugambi outside his home in Kibera. Photo credit: Asha Jaffar/Oxfam in Kenya.

'The money really helped us', said Evans Mugambi, who also received a cash transfer in the pilot phase of the programme in April. 'We used it to buy food and household goods, and now that there is food and soap at home, it is easier to follow the government's guidelines to stay at home.'

The cash transfer programme helps residents of informal settlements avoid engaging in high-risk behaviour to meet their needs. It especially reduces the vulnerability of women and girls to sexual and gender-based violence, intimate partner violence and other physical risks, by enabling them to build financial resilience and independence and also providing them with a dignified way of fulfilling their basic needs.



Emmaculate Onyango in Kibera. Photo credit: Asha Jaffar/Oxfam in Kenya.

'The money we received helped us to pay rent, and buy flour, greens, soap, maize, and buy water in advance weekly. We could not afford soap before we received the money. We relied on soap donations from other organizations', said Emmaculate Onyango, who received a cash transfer in the April pilot phase.

The consortium is also providing cash assistance to approximately 3,835 survivors of sexual and gender-based violence in informal settlements, identified by consortium members CREAM and the Wangu Kanja Foundation, who also provide legal services and psychosocial support.

HOW THE PLAN WORKS

The Kenya Red Cross, in coordination with the Government of Kenya, identifies and registers vulnerable families living in informal settlements through house visits. The government's lists of those in informal settlements receiving Inua Jamii cash transfers are checked against fraud and duplication and also added to the programme for top-ups.

Oxfam and Concern Worldwide remotely verify the identities of the proposed recipients, who then receive cash transfers through their Safaricom M-PESA mobile money accounts.

Box 3: M-PESA

M-PESA is the most popular mobile phone-based money transfer service in Kenya, with 25.57 million users.¹⁸ It is owned and operated by Safaricom, Kenya's largest mobile network operator.

Those who are not already enrolled in any government social protection programme receive KSh7,142 per month, while those households that already receive monthly KSh2,000 transfers from the Kenyan government's Inua Jamii programme receive a complementary transfer of KSh5,142 per month. The cash transfer amounts have been calculated by the Kenya Cash Working group (where the government and non-government agencies delivering cash transfers meet) to cover half of the monthly basic needs of a family of four, and are reviewed periodically to account for inflation or changes in the price of basic goods.

In order to ensure that funds reach the most vulnerable, and no extortion or corruption is part of the process, the consortium employs a series of thorough verification methods, including interviews, mobile administered surveys and physical visits. The programme is designed to keep vulnerable populations and programme staff as safe as possible from COVID-19. Using mobile money for the transfers minimizes physical contact.

ACTED has developed a transparent complaints and feedback mechanism that helps remotely monitor the use and impact of the cash transfers on households, while IMPACT Initiatives conducts a monthly market monitoring exercise to assess the impact of the programme on local markets. The latter is crucial in ensuring that the programme does not disrupt local economies, thereby harming the communities it is designed to protect.

RESULTS THUS FAR

As of 29 October 2020, the Safety Nets programme had transferred 446,813,412.00 KSh (approximately € 3.5m) to 22,104 vulnerable families.

Following the pilot phase and first rounds of cash transfers, ACTED, through the monitoring and feedback mechanism, established that most of the households who received money

were generally satisfied with the payment process and the amount given. Food accounts for the most significant expenditure, with approximately 51% of the grant provided used to meet their daily food needs, and 98% reporting they have spent part of the cash received to purchase food.



Robina Kwamboka used the cash transfer she received to buy flour and vegetables for her family, and to pay off food debts. Photo credit: Asha Jaffar/Oxfam in Kenya.

The cash assistance received helped improve the overall well-being of recipient households, including their ability to meet basic needs and increase the number of meals they eat per day.

5 SMALL STEPS ON A LONG ROAD

The Kenyan Constitution, the Universal Declaration of Human Rights and many of our common cultural beliefs make no compromise on the value that all human beings should have adequate water, food, shelter and healthcare. These commitments have, in many countries, inspired the establishment of welfare systems or social protection floors – a package of interventions that protect the most vulnerable individuals from poverty and destitution when they lack income and are impacted by shocks mostly along the life cycle, but also in widespread crises, such as the COVID-19 pandemic.

Across the world, governments are increasing social protection interventions to support their populations. In Kenya, the government has already allocated 9.3bn KSh towards social protection for 1.1 million vulnerable Kenyans in 2020, and the World Food Programme an additional 8.34bn KSh. The government cash transfers, although the most wide-reaching, amount to an average of 2000KSh monthly, covering an estimated 14% of the monthly basic needs of a family of four in Nairobi's informal settlements, based on the consortium's calculations of Nairobi informal settlements' Minimum Expenditure Baskets (MEB). By comparison, the consortium's cash transfers cover 50% of the MEB, and other agencies cover 28%.

Box 4: What is a Minimum Expenditure Basket (MEB)?

'The Minimum Expenditure Basket (MEB) is the minimum amount of money required for a household to buy the appropriate quantity of goods and services which will help them meet (some of) their basic needs, on a regular or seasonal basis. In other words, it is the monetary value of the (monetizable portion) of the basic needs basket. It is based on the average cost of all items composing the basic basket and which can be bought (i.e. are monetizable).'¹⁹

It is encouraging that during this time of great need for Kenya, the government, private sector, civil sector, foreign donors, United Nations and NGOs have acted quickly and decisively to protect the most vulnerable people. Building upon the Kenyan government's admirable efforts to lay the groundwork for a nationwide social protection programme, it is clear that the Kenyan people will need the continued and improved coordination of these multi-stakeholder efforts to meet their immediate humanitarian needs, as well as build nationwide social protection capacities to deal with future shocks and pandemics.

Towards this goal, the national Kenyan and county governments, Ministry of Labour and Social Protection, private sector and foreign donors, civil society organizations, NGOs and the UN should consider the following immediate and long-term recommendations:

The immediate extension of social protection programmes

In order to meet the ongoing needs of the estimated millions of vulnerable and food insecure Kenyans facing a range of livelihood risks, this consortium recommends:

1. Continuing and increasing the amount of financing available for vulnerable Kenyans targeted under social protection and micro, small and medium enterprise (MSMEs) growth programmes²⁰ to account for unmet gaps in their MEBs, and help them grow out of poverty and vulnerability.
2. Ensuring that cash-transfer systems are more inclusive: increasing the number of vulnerable Kenyans targeted by social protection programmes to include the vast number of informal settlement residents that are food insecure; underserved categories of vulnerability such as pregnant or lactating women and young children (or, more specifically for nutritional gains, children under two); survivors and those at risk of sexual and gender-based violence. This also means ensuring that all minority groups are reached and that transfers are appropriate for individuals receiving them, particularly with consideration to accessibility challenges faced by older persons, people who are chronically sick and people living with disabilities. This may require that interventions deliver in-kind support to those households that cannot utilise cash, or may, for example, be in isolation.
3. Factoring the costs of rent, medicines and sanitation goods into the calculation of cash-transfer amounts, as these are costs that must be, and yet often cannot be, met by vulnerable families.
4. Scaling up and increasing investment in gender-based violence protection and intervention resources, such as safe shelters. The rapid rise of sexual and gender-based violence cases during the pandemic has shown that we need more investment in safe shelters, referral systems and other facilities and services so that survivors and those at risk can access safe spaces unconditionally.
5. Supporting existing Kenyan social assistance schemes, such as Inua Jamii, to be scalable when appropriate during future humanitarian crises.

The long-term strengthening of social protection programmes

Building upon the success of the Government of Kenya's globally-recognized Hunger Safety Net Programme,²¹ and learning from the ongoing pandemic response, this consortium recommends:

1. Building and maintaining strong national transparency, feedback and complaint mechanisms to make social protection programmes as accountable as possible to the public they serve.
2. Facilitating coordinated 'Urban Early Warning Early Action' mechanisms within county governments that routinely assess informal settlements for livelihood risks, and help mitigate and respond quickly to the impacts of slow-onset emergencies.
3. Strengthening and improving the coordination and sharing of information between existing government, civil society, UN and NGO initiatives to avoid duplication and maximize efficiency and speed in social protection programming.
4. Tailoring a greater proportion of relief funds and policies to cushion vulnerable informal workers, whose total reliance on continuous daily work and exposure to economic shocks and volatility have been clearly documented.
5. Increasing the promotion and financing of WASH initiatives, which are crucial to keeping vulnerable communities safe from outbreaks like COVID-19, especially where there is a chronic lack of water and hygiene facilities, such as in urban informal settlements.

Box 5: Urban Early Warning Early Action

Urban Early Warning Early Action (UEWEA) is an initiative by Oxfam, Concern Worldwide, the Kenya Red Cross and the Nairobi county government – funded by the Start Network – to develop early warning systems and early action responses to crises that affect poor people living in urban informal settlements.²² In 2019, the consortium won Special Mention at the Milan Pact awards for strengthening urban food security.

Everyone has been touched by the COVID-19 pandemic, but those who were already struggling with poverty have clearly been gravely affected.

The importance of expanding social protection programmes is highlighted by the urgent needs of many more vulnerable Kenyans such as Beatrice Mbendo, who is contending with pregnancy and caregiving, while trying to play a role in fighting the pandemic. Her family, like many others, had slipped through the existing social safety net programmes. Now Beatrice has been registered under the consortium's safety net programme and will receive monthly cash transfers to help her family stay healthy and survive.

These unprecedented times present an opportunity to reflect on and expand existing social protection programmes to ensure that all those in need have equitable access to safety nets. We must seize this opportunity to build stronger, people-centred social protection systems.

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